

**BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY
BUCKINGHAMSHIRE FIRE AND RESCUE SERVICE**

Director of Legal & Governance, Graham Britten
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Chief Fire Officer and Chief Executive
Louise Harrison

To: The Members of the Executive Committee

3 November 2025

**MEMBERS OF THE PRESS AND
PUBLIC**

Please note the content of Page 2
of this Agenda Pack.

To contact our Communication
Team, please email
cteam@bucksfire.gov.uk

Dear Councillor

Your attendance is requested at a meeting of the **EXECUTIVE COMMITTEE** of the **BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY** to be held in the **PARALYMPIC ROOM, BUCKINGHAMSHIRE COUNCIL, GATEWAY OFFICES, GATEHOUSE ROAD, AYLESBURY, BUCKS. HP19 8FF** on **WEDNESDAY 12 NOVEMBER 2025 at 10.00 AM** when the business set out overleaf will be transacted.

Yours faithfully

Graham Britten
Director of Legal and Governance

Health and Safety:

There will be limited facilities for members of the public to observe the meeting in person. A recording of the meeting will be available after the meeting, at the web address provided overleaf.

Chairman: Councillor Monger

Councillors: Bailey, Hall, Hussain N, McLean, Priestley, Rouse and Stuchbury



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Recording of the meeting

The Authority supports the principles of openness and transparency. To enable members of the press and public to see or hear the meeting, this meeting will be recorded. Please visit:

<https://www.youtube.com/channel/UCWmIXPWAscxpL3vIiv7bh1Q>

The Authority also allows the use of social networking websites and blogging to communicate with people about what is happening, as it happens.

Adjournment and Rights to Speak – Public

The Authority may adjourn a Meeting to hear a member of the public on a particular agenda item. The proposal to adjourn must be moved by a Member, seconded and agreed by a majority of the Members present and voting.

A request to speak on a specified agenda item should be submitted by email to gbritten@bucksfire.gov.uk by 4pm on the Monday prior to the meeting. Please state if you would like the Director of Legal and Governance to read out the statement on your behalf, or if you would like to be sent a 'teams' meeting invitation to join the meeting at the specified agenda item.

If the meeting is then adjourned, prior to inviting a member of the public to speak, the Chairman should advise that they:

- (a) speak for no more than four minutes,
- (b) should only speak once unless the Chairman agrees otherwise.

The Chairman should resume the Meeting as soon as possible, with the agreement of the other Members present. Adjournments do not form part of the Meeting.

Rights to Speak - Members

A Member of the constituent Councils who is not a Member of the Authority may attend Meetings of the Authority or its Committees to make a statement on behalf of the Member's constituents in the case of any item under discussion which directly affects the Member's division, with the prior consent of the Chairman of the Meeting which will not be unreasonably withheld. The Member's statement will not last longer than four minutes. Such attendance will be facilitated if requests are made to enquiries@bucksfire.gov.uk at least two clear working days before the meeting.

Statements can be read out on behalf of the Member by the Director of Legal and Governance, or the Member may request a 'teams' meeting invitation to join the meeting at the specified agenda item.

Where the Chairman of a Committee has agreed to extend an invitation to all Members of the Authority to attend when major matters of policy are being considered, a Member who is not a member of the Committee may attend and speak at such Meetings at the invitation of the Chairman of that Committee.

Questions

Members of the Authority, or its constituent councils, District, or Parish Councils may submit written questions prior to the Meeting to allow their full and proper consideration. Such questions shall be received by the Monitoring Officer to the Authority, *in writing*, at least two clear working days before the day of the Meeting of the Authority or the Committee.

EXECUTIVE COMMITTEE

TERMS OF REFERENCE

1. To make all decisions on behalf of the Authority, except in so far as reserved to the full Authority by law or by these Terms of Reference.
2. To assess performance of the Authority against agreed organisational targets.
3. To determine matters relating to pay and remuneration where required by collective agreements or legislation.
4. To select on behalf of the Authority-the Chief Fire Officer and Chief Executive, and deputy to the Chief Fire Officer and Chief Executive, or equivalent, taking advice from suitable advisers and to make recommendations to the Authority as to the terms of appointment or dismissal.
5. To consider and make decisions on behalf of the Authority in respect of the appointment of a statutory finance officer; a statutory monitoring officer; and any post to be contracted to “Gold Book” terms and conditions in whole or in part taking advice from the Chief Fire Officer and suitable advisers.
6. To act as the Employers’ Side of a negotiating and consultation forum for all matters relating to the employment contracts of the Chief Fire Officer and Chief Executive, deputy to the Chief Fire Officer and Chief Executive, or equivalent; and where relevant, employees contracted to “Gold Book” terms and conditions in whole or in part.
7. To hear appeals if required to do so in accordance with the Authority’s Policies.
8. To determine any human resources issues arising from the Authority’s budget process and improvement programme.
9. To determine policies, codes or guidance:
 - (a) after considering recommendations from the Overview and Audit Committee in respect of:
 - (i) regulating working relationships between members and co-opted members of the Authority and the employees of the Authority; and
 - (ii) governing the conduct of employees of the Authority
 - (b) relating to grievance, disciplinary, conduct, capability, dismissals and appeals relating to employees contracted to “Gold Book” terms and conditions in whole or in part.
10. To form a Human Resources Sub-Committee as it deems appropriate.

AGENDA

Item No:

1. **Apologies**

2. **Minutes**

To approve, and sign as a correct record the Minutes of the meeting of the Executive Committee held on 10 September 2025. **(Pages 7 - 14)**

3. **Matters Arising from the Previous Meeting**

The Chairman to invite officers to provide verbal updates on any actions noted in the Minutes from the previous meeting.

4. **Disclosure of Interests**

Members to declare any disclosable pecuniary interests they may have in any matter being considered which are not entered onto the Authority's Register, and officers to disclose any interests they may have in any contract to be considered.

5. **Questions**

To receive questions in accordance with Standing Order SOA7.

6. **Recommendations from Committees:**

Overview and Audit Committee – 5 November 2025

The Recommendation below is a recommendation from officers to the Overview and Audit Committee. Revisions by the Overview and Audit Committee, if any, will follow.

Corporate Risk Management Policy and Framework

“That the Corporate Risk Management Framework and Policy Statement set out in appendix A and B, be recommended to the Executive Committee for approval”

The report considered by the Overview and Audit Committee is attached at item 6. **(Pages 15 - 38)**

7. **Performance Management - Q2 2025/26**

To consider item 7 **(Pages 39 - 86)**

8. **Budget Monitoring Report April 2025 - September 2025**

To consider item 8 **(Pages 87 - 98)**

9. **Date of Next Meeting**

To note that the next meeting of the Executive Committee will be held on Wednesday 4 February 2026 at 10am.

If you have any enquiries about this agenda please contact: Katie Nellist (Democratic Services Officer) – Tel: (01296) 744633 email: knellist@bucksfire.gov.uk

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Buckinghamshire & Milton Keynes Fire Authority

Minutes of the Meeting of the EXECUTIVE COMMITTEE of the BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY held on WEDNESDAY 10 SEPTEMBER 2025 at 10.00 AM.

Present: Councillors Bailey (Vice-Chair), Hall, N Hussain (Part), McLean, Monger (Chair), Priestley, Rouse and Stuchbury

Officers: S Tuffley (Deputy Chief Fire Officer), G Britten (Director of Legal and Governance), M Hemming (Director of Finance and Assets), R Davidson (Director of People), A Hussain (Head of Finance and Assets), C Newman (Data Intelligence Team Manager) and K Nellist (Democratic Services Officer)

Apologies: Councillor McLean (joined online)

The Chairman advised the Committee that the meeting was being recorded and would be uploaded on to the Authority's YouTube channel after the meeting.

<https://www.youtube.com/channel/UCWmIXPWAscxpL3vliv7bh1Q>

EX09 MINUTES

RESOLVED -

That the Minutes of the Executive Committee meeting held on Wednesday 9 July 2025 be approved and signed by the Chairman as a correct record.

EX10 MATTERS ARISING FROM THE PREVIOUS MINUTES

The Chairman advised Members of the following matters arising from the previous minutes: -

EX07 SAFETY CENTRE (HAZARD ALLEY) IMPACT REPORT APRIL 2025 - The Chairman advised he would like to organise a visit for Members to the Safety Centre and also hold a meeting at the Blue Light Hub – The Democratic Services Officer advised that due to a new CEO starting at the Safety Centre this month (September), a meeting at the Blue Light Hub and a visit to the Safety Centre, would be arranged for early 2026, to allow for the new CEO to settle in.

The Chairman advised that there would be a full report coming to the Fire Authority meeting in October – the Head of Prevention

and Protection confirmed he would be bringing a report on the Safety Centre Funding Agreement to the Authority meeting on 8 October 2025.

EX11 DISCLOSURE OF INTERESTS

None.

EX12 BUDGET MONITORING REPORT APRIL - JULY 2025

The Head of Finance and Assets advised Members that he was pleased to present the budget report covering the first months of the financial year, with a projected outturn position as at the end of July. Members would note a significant change in the format of this report compared to previous versions. It had been redesigned to focus on the key components of the budget, employee costs and non-employee costs, which included supplies and services, premises, and transport. This new format aimed to provide greater clarity on where the most significant variances were occurring.

The Head of Finance and Assets advised Members that the budget for 2025/26 was £42.989m, and the forecast outturn was £42.760m, resulting in a projected underspend of £0.229m. This underspend was largely driven by higher-than-expected investment returns. However, it was important to note that following the budget setting process, funding forecasts had been revised down by £0.202m. This reduction was mainly due to the removal of the Airwave grant (approximately £50k), and a significant cut to the Pension Grant (approximately £150k). These changes, which were communicated after the budget was set, partially offset the expenditure underspend, bringing the overall projected underspend to £0.027m.

Regarding Direct Employee Costs, wholetime costs were showing an overspend of £357k, primarily due to the actual establishment exceeding 300, reaching 310 by the end of July. This was offset by underspends in support staff and on-call, resulting in a net underspend of £6k. Bank costs were currently on track with the budget, but fluctuations were anticipated throughout the year which would impact the final outturn position. Regarding Non-Employee Costs, the key variance here was additional treasury income, which was contributing positively to the overall financial position. There were no significant variances with the Capital Programme and key capital projects were currently underway.

The August internal monitoring report showed a small overspend of £8k, highlighting the volatility in the outturn position. However,

officers continued to expect the final position to hover around break-even.

A Member asked about non-employee costs, was there anything that could be checked on a month-by-month basis over a financial year period.

The Head of Finance and Assets advised that the figures depended on what was being projected, there would be some costs officers were aware of, and some costs that happen throughout the year. Officers could possibly do a graph to show what the budget looked like, but how accurate it would be month by month would be difficult. The focus should be more on the outturn. It was the end position that officers were interested in, how it fluctuated throughout the year, as long as it was in the budget. The Head of Finance and Assets would look into this further.

Head of Finance
and Assets

A Member asked what staff came under 'Sessional' on Table 2.

The Head of Finance and Assets advised this was 'biker down' and other fire safety courses.

A Member asked about the funding shortfall, was it where officers believed it would be or modelling where it would be.

The Head of Finance and Assets advised that current projections were showing there was going to be a shortfall of £200k, which was because the Pension funding had been confirmed and the removal of the Airwave grant, but was confident there would be enough treasury income to offset it. Obviously, for future years this does not reflect what the Authority's funding would be and it would need to wait until the outcome of the Fair Funding Review.

The Director of Finance and Assets advised Members that the parts the Head of Finance and Assets had highlighted, were the things officers were certain about, the only other thing officers had not been sighted on yet was the reconciliation later in the year between estimated business rates and actual business rates. The funding decisions were made after the budget had been set.

RESOLVED –

That the provisional outturn forecast for the Authority as of 31 July 2025 be noted.

EX13 RESPONSE TO THE FAIR FUNDING REVIEW 2.0: CONSULTATION

The Director of Finance and Assets advised Members that this report detailed the Authority's response to the Fair Funding Review 2.0 consultation paper. Unhelpfully, there were no detailed figures published within the consultation, and officers had

therefore tried to model the potential impact, but significant uncertainty remained.

Appendix 1 showed the impact on reserves of the two models that had been independently produced for the Service. Whilst there was a significant difference between the two, both scenarios showed a worse position than the Medium-Term Financial Plan (MTFP) that was approved in February. There were two main reasons for this, the overall share of fire funding relative to other services was decreasing. Whilst it was understandable that there were significant pressures in adult and children's social care, fire and rescue services were based more on risk rather than demand, and the risk within the community had not changed, in fact it was probably increasing and to be faced with a decreasing funding situation was counter intuitive. The funding need was reduced based on a notional council tax amount. This Service was effectively penalised for taking prudent spending decisions in the past.

While the response to the consultation was very technical, the overall thrust of the Authority's response, which was based heavily on the National Fire Chief's Council's (NFCC) response, was to ensure that fire and rescue funding was protected over the spending review period. Given that the budget date announced recently had been set for late November, it was unlikely that the Authority would be given provisional figures until late December.

A Member asked about taking prudent decisions and asked when those prudent decisions were taken.

The Director of Finance and Assets advised that regarding Council Tax it was the impact of every decision in every single year. The Authority had been penalised by having strict percentage term limits in previous years, so when an authority was below the average, and it was a percentage increase, it got further and further away from the others. In more recent years, the Authority had the £5 flexibility which had been taken, but the assumed national average in their calculations was £92, and as at 2025/26 this Authority was at £84.46, that difference multiplied by the number of council tax payers and the band equivalents, reduced the Authority's funding allocations, so it was really significant. One item officer's put in the consultation, was if the government was going to take that approach, the Authority needed to have the ability to get to the national average quickly. It was not an impact of one decision in one year, but every single year where decisions were taken around expenditure and Council Tax.

RESOLVED –

That the response to the consultation be noted.

EX14 PERFORMANCE MANAGEMENT – Q1 2025/26

The Data Intelligence Team Manager advised that this pack was slightly different to what Members would have seen before, as it was now in line with the new Community Risk Management Plan (CRMP) launched in April and this pack now reflected that. There were now six sections which were based on the Service's new objectives. Most of the measures were the same as before and there was more emphasis on supporting the narrative. Whilst this pack contained 40 pages, officers do look more in depth, on a monthly basis, across all the delivery groups. The performance measures provided today officers feel were more prudent to come to this level.

A Member asked about the Fire Safety Audit performance and given the context of the Authority's previous cause for concern for Protection, and the work that went on addressing it, were officers confident that the Service was not taking a step back.

The Deputy Chief Fire Officer advised Members that with the monthly performance monitoring Protection was in a better position. It was an aspirational target that was set but with issues around recruitment and acquisition of skills it was not getting the traction that was needed as quickly as would be liked. Regarding HMI, the good news was they were confident the Service knew the issues now and were aware of the recruitment challenges and skills gap. Now it was being focussed on and in one of the months in Q2 the target had been hit.

(Councillor Hussain joined the meeting)

The Deputy Chief Fire Officer suggested that a report be brought back to Members to show the breadth of the Protection work.

A Member asked about deliberate fires, what could the Service actually do about this if they were due to criminal activity and not something the Service could influence.

The Data Intelligence Team Manager advised Members that it depended on the incident. The Service always sees a rise in incidents when the weather gets hotter and drier, some of them tend to be small fires in woods for example but can get bigger. It was the deliberate primary fires that were of more concern than secondary ones. The Service worked with the police on a regular basis; they receive a report from the Service, and they also feedback to officers. There was also a Fire Setters Group where if the Service was aware of anyone who showed tendencies to light

Head of Prevention
and Protection

fires, there was a prevention team that would go and work with them.

The Deputy Chief Fire Officer reassured Members that on a monthly basis the CRMP Performance Board, chaired by the Chief Fire Officer, would look at all the live data. With any reports coming to the Authority there was a slight lag but perhaps a review of the timescales to align them up better for future years, so Members would receive the quarterly information closer to the quarter.

Deputy Chief Fire Officer

The Deputy Chief Fire Officer advised that a workshop for Members on Performance could be held if required.

Data Intelligence Team Manager

A Member asked about how low the Service could go with three fire deaths in a year.

The Data Intelligence Team Manager advised Members that during the first quarter of 2025/26 there were three recorded fire-related fatalities. This was compared to an average of two fire-related fatalities per year in Buckinghamshire and Milton Keynes, this was why it was brought to Member's attention. Compared nationally, the Service sits very well when it comes to fatalities and serious injuries at fires.

A Member asked about Prevention visits to local Mosques, there was a good take up on home fire safety visits (HFSV), was there still funding for these visits.

The Data Intelligence Team Manager advised that with regard to prevention, one of the measures in the pack was about prevention and the work that was being done, and the number of visits, and how the Service aimed at those at high risk. It was all part of the overall funding the Authority received. It was still one of the top priorities both in the home and in the commercial sense. A lot of work was done to target those vulnerable to fire.

A Member asked for a typo correction relating to 'Princes Risborough'.

Data Intelligence Team Manager

A Member was disappointed to see no change in the five-year average of over the border mobilisations. There were 153 and Aylesbury stood out.

The Data Intelligence Team Manager advised that this showed it was about geography and not availability. A lot of incidents rely on pre-determined attendance, for example a house fire, with no one reported, two pumps would be sent. If there was another incident straight after, then for Aylesbury, the nearest appliance would be Thame, Oxfordshire, who would come into support the incident, or as a standby. It was purely the quickest appliance. To reassure

Members, while it may look the same, the costs had gone down dramatically. In the first quarter alone, the cost of over the border mobilisations reduced by £50k. Whilst they might be coming in, the time they are spending was a lot less.

A Member asked about prison fires being excluded from deliberate primary fire measures, was there a trend of more or less fires in prisons, last year it was reported as less fires.

The Data Intelligence Team Manager advised that Q1 looked ok, but unfortunately Q2 had seen a rise. A lot of the prison fires were dependent on the prisoners and the reasons they were in there. If there was an arsonist in the prison, regardless of what the Service did, prison fires would go up. More work than ever was being done with prisons, including providing monthly reports and incident reports, for the prison Chair these can then be used as evidence to support extra sentencing for prisoners etc. Officers were even looking at the level of detail of the lighters and vapes prisoners were provided with.

A Member asked about the appliance codes under resources on over the border mobilisations out of BFRS grounds, it would be more helpful to know where those appliances were located.

The Data Intelligence Team Manager explained the error and that the report would be corrected before it went to the Fire Authority.

A Member asked about the 'Actual vs Establishment – Support' as it showed the current vacancies and one was for a Business Continuity Officer, had the Authority not recently appointed to this role.

The Data Intelligence Team Manager advised that this was a supporting role to the person already in post.

RESOLVED –

That the report subject to the requested corrections being made and the recommendation below be approved for submission to the Fire Authority:

That the Performance Management – Q1 2024/25 be noted.

EX15 DATE OF NEXT MEETING

To note that the next meeting of the Executive Committee will be held on Wednesday 12 November 2025 at 10 am.

THE CHAIRMAN CLOSED THE MEETING AT 10.45 AM

Data Intelligence
Team Manager

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Buckinghamshire & Milton Keynes Fire Authority



Meeting and date: Overview and Audit Committee, 5 November 2025

Report title: Corporate Risk Management Policy and Framework

Lead Member: Councillor Robin Stuchbury

Report sponsor: Anne-Marie Carter, Head of Service Improvement

Author and contact: Liam Parmar, Risk and Business Continuity Manager -
lparmar@bucksfire.gov.uk

Action: Decision

Recommendations: That the Corporate Risk Management Framework and Policy Statement set out in appendix A and B be recommended to the Executive Committee for approval.

Executive summary: The purpose of this paper is to present members with an updated policy and framework for Corporate Risk Management.

The updated policy and framework have been reviewed and updated to reflect:

- The changes in the governance structure since the last Corporate Risk Documents were reviewed, incorporating the Delivery Groups.
- The inclusion of The Organisational Risk Group (ORG).
- The revised approach in how risks are reviewed, monitored, scored and presented.

No changes to the existing corporate risk management reporting arrangements to the Overview and Audit Committee are proposed.

Financial implications: No direct financial implications arising from the presentation of this report. It is envisaged that the further development of the Authority's corporate risk management framework will be undertaken from within agreed budgets. If mitigations and actions require any financial decisions, this will follow the normal procedure for expenditure.

Risk management: The development, implementation and operation of effective corporate risk management structures, processes and procedures are considered critical to assure continuity of service to the public, compliance with relevant statutory and regulatory requirements and the successful delivery of the Authority's strategic objectives and plans.

The updated documents show how the Authority has revised its approach to risk in a different way. Firstly, the introduction of The Organisational Risk Group (ORG) ensures that the conversation about risk in different service areas is joined up. The delivery groups discuss risk in their own areas, and the ORG ensures that there is collaboration across these areas. This also encourages the Authority to approach risk in the same way, giving more validity to risk scores and mitigations.

Learning from other organisations, the way in which risks are scored has also changed. Before, where there were two scores given to risks (treated and untreated), now there are three. These are untreated, treated and target. The change splits up the treated score to separate the mitigations that are having a tangible effect on the risk score now (treated), and any future mitigations that are yet to have any influence (future). By honing into the mitigations and comparing the treated and target scores, the Authority can see where further action is needed. The approach, as described in the updated documents, also looks to add increased clarity to all stakeholders in regard to how we monitor risks in the Service.

Legal implications: The Overview & Audit Committee Terms of Reference require it “to monitor the effective development and operation of risk management and corporate governance within the Authority”. The Financial Regulations, at Section C, state that the Executive Committee is responsible for approving the Corporate Risk Management Policy after considering recommendations from the Overview & Audit Committee.

Privacy and security implications: There are no concerns regarding privacy and security. Corporate Risk is reviewed internally within the Authority, with documents protectively marked when appropriate. Progress on corporate risks will be presented to every Overview and Audit committee and other public forums where required.

Duty to collaborate: Corporate risk management falls outside the scope of current Thames Valley collaboration agreements and priorities. However, officers have had regard to the approaches used by neighbouring authorities in preparing this policy update and associated guidance. For example, Royal Berkshire Fire Authority, Bedfordshire Fire Authority and other members of the National Fire Chiefs Council’s Resilience Group.

Health and safety implications: Day to day management of occupational health and safety risks falls outside the scope of this policy and guidance. The Service has established processes and procedures for managing health and safety based on standards set by the Institute of Occupational Safety and Health (IOSH).

Environmental implications: Any environmental impacts associated with risks captured in the corporate and directorate risk registers are identified in the individual risk assessments together with details of the controls and mitigating actions.

Equality, diversity, and inclusion implications: This report does not directly affect equality, diversity or inclusion (EDI). The updated Corporate Risk Management Policy and framework are standard procedures that apply the same way across all service areas and are presented in accessible formats. The Authority is committed to making sure risk management is fair and inclusive. EDI impacts will continue to be looked for, even after the risk management policy has been implemented and reviewed.

Consultation and communication: The updated Corporate Risk Management Policy has been subject to internal consultation with stakeholders and has been presented at:

- CRMP Performance Board on Tuesday 23 September.
- Strategic Leadership Board on Monday 13 October.

It has also been shared with the leadership group of officers for comment.

Following approval of this policy it will be published to the Organisation as a whole and will be available to all Authority Members and Service staff. More detailed guidance and, where necessary, training will be provided to all Service managers and staff to enable them to identify, evaluate, record and report potential corporate risks.

If approved, the new format will be used to present in future Overview and Audit committees.

Background papers:

17 March 2021 Overview and Audit Committee, Pages 131 to 170 for previous documents: [\(Public Pack\)Agenda Document for BMKFA Overview & Audit Committee, 17/03/2021 10:00](#)

Appendix	Title	Protective Marking
A	Risk Management Policy Statement	N/A
B	Risk Management Framework	N/A

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Appendix A

Policy statement

Buckinghamshire & Milton Keynes Fire Authority (the 'Authority') recognises that risk management is a vital activity that underpins and forms part of our vision, values and strategic objectives. This activity includes operating effectively, efficiently and providing confidence to the communities we serve.

Risk is present in everything we do and it is therefore our policy to pro-actively identify, assess and manage key areas of risk.

We seek to embed risk management into the culture of the Authority and Buckinghamshire Fire & Rescue Service (the 'Service') and the behaviour of all people involved in the governance, management, operation and development of the Authority and Service.

Risk management needs to be embedded throughout all processes, projects and strategic decisions, including procurement and contracting which will ensure that the management of partnerships and third-party relationships are included within the scope of our risk management policy.

For risk management to be effective and enabling, we must ensure that we have a robust, consistent, communicated and formalised process across the Service. In turn, this approach enables the Authority to consider what levels of risk are acceptable, its 'risk appetite', and for this to be defined.

This Risk Management Policy and associated guidance form an integrated framework that supports the Authority and Service in the effective management of risk.

We will involve all staff in the identification and management of risk and empower them to take necessary action.

Management of risk activity will be regularly supported through discussion and appropriate action by the Strategic Leadership Team.

The Strategic Leadership Team will review all significant risks, evaluate their mitigation strategies and establish supporting actions to be taken to reduce them to an acceptable level.

Managing risks will be an integral part of both strategic and operational planning and the day-to-day running, monitoring, development and maintenance of the Authority and the services it provides to the public.

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**Risk Management
Framework**

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Introduction

This Risk Management Strategy sets out the approach to identifying, assessing, and managing risks across all areas, that could affect the ability to deliver services to the public and/or meet its strategic objectives. It supports the statutory duties under UK legislation and aligns with national frameworks to ensure The Authority delivers safe, effective, and resilient services.

By embedding risk management into culture and decision-making, The Authority aims to:

- Protect our communities, staff, and assets.
- Enhance operational readiness and business continuity.
- Support transparency, accountability, and continuous improvement.

This strategy provides a clear framework for managing risk at all levels, helping to respond confidently to current and emerging challenges.

Day to day management of occupational health and safety risks and the management of risk in the community fall outside the scope of this Strategy. The Service has established processes and procedures for managing health & safety based on standards set by the Institute of Occupational Health and Safety (IOSH). The identification, evaluation and treatment of risks to the public / communities is addressed via the Service's Community Risk Management Planning (CRMP) processes.

Project risks are not covered by this document and are managed through separate project governance arrangements.

If a project, community or health and safety risk is deemed to have a potential impact on the Service's strategic objectives or response capabilities, it will then be escalated through the risk management channels as conveyed in this document.

What is Risk Management and why is it important?

ISO 31000:2018 definitions of risk: Risk: “The effect of uncertainty on objectives” and Risk Management: “Coordinated activities to direct and control an organisation regarding risk”.

To put it in the simplest terms, Risk Management is identifying what could go wrong, evaluating how likely and severe it is, and taking steps to prevent or reduce the impact.

It’s about being proactive. Spotting potential problems before they happen and making decisions to keep people, assets and operations safe. This in turn will help the Authority to meet its strategic objectives.

Risk management is essential to ensuring the safety, effectiveness, and resilience of the Fire and Rescue Service. The Service operates in a high-risk environment where the consequences of failure can be severe for staff, the public, and the community it serves.

By proactively identifying and managing risks, the Authority will:

- **Support strategic decision-making** through informed understanding of threats and opportunities.
- **Enhance organisational resilience** by preparing for disruptions and maintaining continuity of critical services.
- **Protect life, property, and the environment** by ensuring safe and effective emergency response.
- **Build trust** in partners and stakeholders, reassuring all parties that the Authority is being proactive when it comes to potential threats and hindrances.
- **Ensure legal and regulatory compliance**, reducing the likelihood of enforcement action or reputational damage.
- **Promote a culture of accountability and continuous improvement**, where learning from risk is embedded in the Authority’s operations.

Effective risk management enables the Authority to deliver its core duties with confidence, adapt to emerging challenges, and maintain public trust.

Risk Appetite

Buckinghamshire Fire and Rescue Service (BFRS) recognises that risk is inherent in all aspects of strategic and operational planning. Our risk appetite defines the level and type of risk the Service is willing to accept in pursuit of its objectives, while maintaining the safety of the public, our staff, and our assets.

BFRS adopts a balanced and informed approach to risk-taking. We are risk-averse in areas that could compromise life safety, legal compliance, or public trust. Conversely, we may be more open to calculated risk in areas that support innovation, efficiency, and service improvement—provided that appropriate controls and oversight are in place.

Our appetite varies by context:

- **Strategic Risk:** Moderate tolerance. We accept some risk to pursue long-term improvements and transformation.
- **Operational Risk:** Low tolerance. We prioritise safety and compliance with operational standards.

This appetite is reviewed regularly by the Strategic Leadership Team and is embedded in our governance, planning, and decision-making processes.

Roles and Responsibilities

Effective risk management requires clear roles and responsibilities across all levels of the organisation:

<u>Group/Individual</u>	<u>Role</u>
Fire Authority	Provides strategic oversight and ensures that risk management is embedded in governance and decision-making. Approves the Risk Management Strategy and receives regular assurance reports.
Overview and Audit Committee	Monitors the effective development and operation of risk management and corporate governance within the Authority. Considers reports dealing with the management of risk across the organisation, identifying the key risks facing the Authority and seeking assurance of appropriate management action.
Chief Fire Officer (CFO)	Holds overall accountability for risk management within BFRS. Ensures that appropriate systems, resources, and leadership are in place to manage risk effectively.
Strategic Leadership Team (SLT)	Owns and monitors strategic risks. Champions a risk-aware culture and ensures that risk considerations are integrated into planning, performance, and resource allocation.
Risk and Business Continuity Manager	Provides expert advice, maintains the corporate risk register, supports risk owners, and ensures consistency in risk assessment and reporting.
Risk and Business Continuity Officer	Supports the Risk and Business Continuity Manager in maintaining the corporate risk register. Monitors current and potential risks that can affect the service's business continuity and risk management.
All Staff	Have a duty to be aware of risks in their work environment and to report concerns or incidents. Risk awareness is promoted through training, communication, and engagement.

Risk Management Process

The Service has established a structured and systematic approach to managing risk, which includes the following key components:

1. **Risk Identification:** Risks are identified through strategic planning, operational reviews, debriefs, audits, and staff feedback. Emerging risks are also monitored through horizon scanning and engagement with partners.
2. **Risk Assessment:** All risks are assessed using a standard 5x5 matrix, evaluating both likelihood and impact. This ensures consistency and comparability across the service.
3. **Risk Control:** Appropriate controls are identified and implemented to reduce risk to an acceptable level. These may include policies, training, equipment, procedures, or contingency plans.
4. **Risk Recording:** Risks are documented in local or corporate risk registers, depending on their scope and severity. Each risk is assigned an owner responsible for its management.
5. **Risk Review:** Risks are reviewed regularly at team, departmental, and strategic levels. Reviews consider changes in context, effectiveness of controls, and progress against mitigation actions.
6. **Risk Reporting:** Significant risks are reported to the SLT and Fire Authority. Risk information is also used to inform business planning, performance management, and assurance processes.
7. **Training and Awareness:** Staff are supported through training and guidance to understand their role in managing risk. A culture of openness and continuous improvement is encouraged.

These arrangements ensure that risk management is not a standalone activity but is embedded in the way the Service operates, plans, and delivers its services.

The risk management process can be simplified and shown via the graphic below.



Identification of risk

Buckinghamshire Fire & Rescue Service (BFRS) uses a range of trusted sources to identify, assess, and manage risks effectively across the organisation.

National Guidance

- **NFCC (National Fire Chiefs Council):** Provides frameworks for risk planning, including definitions, data analysis, and competency standards.
- **Government Risk Guidance:** Covers legal duties under the Fire and Rescue Services Act 2004, Fire Safety Order 2005, and Civil Contingencies Act 2004.

National, Local and Regional Intelligence

- **Risk Registers:** BFRS uses national, local, and community risk registers to track and respond to emerging threats.
- **Incident Data & Area Profiles:** Help identify trends and inform local planning.

Thames Valley Local Resilience Forum (TVLRF)

- BFRS works with partners across Berkshire, Oxfordshire, Buckinghamshire, and Milton Keynes to share intelligence and coordinate responses.
- **Local Resilience Groups (LRGs)** meet quarterly to discuss risks and influence updates to BFRS's risk registers and CRMP.

These sources ensure that BFRS's risk management is informed, collaborative, and aligned with national standards.

Analysing and Treating Risks

BFRS categorises risks into two primary types to ensure appropriate management and escalation:

- **Strategic Risks:** These are high-level risks that could impact the achievement of the Service's long-term objectives, reputation, or statutory obligations. Examples include changes in legislation, funding constraints, or failure to deliver key strategic programmes.

- **Operational Risks:** These relate to the day-to-day delivery of services and activities. They include risks to personnel safety, equipment failure, or disruption to emergency response capabilities.

Risks are identified and managed at the appropriate level but are also escalated through the organisation where necessary. Operational risks may inform or evolve into strategic risks. Regular reporting ensures that emerging threats are visible to strategic leaders and that mitigation strategies are aligned across the Service.

When a risk has been identified, it is given different scores. How the score is determined and how the risk is then treated is explained in this section.

- 1) **Untreated Score:** This is the raw rating that a risk will have, before mitigations are put in place to reduce the likelihood and impact of it.
- 2) **Current Score:** This is the score we give that considers the mitigations that The Authority are currently active.
- 3) **Target Score:** This score will take into account any future plans that the service still has to implement and is yet to take any tangible effect.

The 4 T's of Risk Management

The 4 T's are a widely used framework for determining how to respond to identified risks. Each T represents a different strategy:

4 T's	Definition:	When to use:	Example
1. Tolerate (or Accept)	Accept the risk without taking any action to mitigate it.	If the risk is low-impact or the cost of mitigation is higher than the potential loss.	A minor software bug that doesn't affect functionality.
2. Treat (or Mitigate)	Take steps to reduce the likelihood or impact of the risk.	When the risk is significant but manageable.	Implementing firewalls and antivirus software to reduce cybersecurity threats.
3. Transfer	Shift the risk to a third party.	When another party is better equipped to manage the risk.	Purchasing insurance or outsourcing a risky operation.
4. Terminate (or Avoid)	Eliminate the risk entirely by removing the source.	When the risk is too high and cannot be mitigated effectively.	Cancelling a project that poses unacceptable safety risks.

Risk Monitoring

Once a risk, and those managing it have been identified, the level of risk needs to be determined. This is done on different levels. The scoring is always based on the 5 x 5 matrix that we use below, which helps to assess the likelihood and impact of risks.

			Impact Score				
			1	2	3	4	5
			Low	Minor	Moderate	High	Major
Likelihood score	5	Almost Certain	5	10	15	20	25
	4	Likely	4	8	12	16	20
	3	Possible	3	6	9	12	15
	2	Unlikely	2	4	6	8	10
	1	Rare	1	2	3	4	5

Likelihood and Impact

Risk analysis and scoring inherently involve an element of subjectivity, informed by professional judgement, experience, and domain-specific knowledge. To support this evaluative process, a summary of key considerations relating to likelihood and impact is outlined below.

Likelihood Meanings

Score	Description	Characteristics
5	Almost Certain	<ul style="list-style-type: none"> Expected to occur in most circumstances. Likely to happen regularly (e.g., annually). Considered imminent.
4	Likely	<ul style="list-style-type: none"> Will probably occur in many circumstances. May happen, but not regularly. Has occurred previously.
3	Possible	<ul style="list-style-type: none"> Could occur under certain conditions. May happen occasionally. Has occurred in other organisations.
2	Unlikely	<ul style="list-style-type: none"> Not expected under normal circumstances. May occur infrequently. Limited evidence of prior occurrence.
1	Rare	<ul style="list-style-type: none"> Exceptional circumstances required. Unlikely to happen. No known precedent or history.

Impact Meanings

Score	Description	Characteristics
5	Major	<p>Risks that could have a devastating impact on the operational capability of the Fire and Rescue Service — potentially leading to critical financial loss, major disruption to emergency response, or significant harm to the public and community safety. For example:</p> <ul style="list-style-type: none"> • Failure of Mobilising System - A critical IT failure or software outage in the mobilising system (e.g. FireCAD or equivalent). • Loss of Key Operational Assets - Destruction or unavailability of fire appliances, specialist rescue equipment, or PPE due to fire, theft, or contamination. • Industrial Action or Mass Absence of Staff - Widespread strike action or illness (e.g. pandemic) affecting operational crews or control staff. • Critical Financial Mismanagement or Budget Cuts - Severe budget shortfall or misallocation of funds. • Cybersecurity Breach – Attack on internal systems leading to data loss or operational disruption.
4	High	<p>Risks that could significantly impair the Fire and Rescue Service's ability to deliver key services, resulting in substantial financial loss, prolonged disruption to operations, or considerable impact on public safety and confidence. These risks may require coordinated recovery efforts and external support.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Extended Outage of a Key Station or Facility – Temporary closure due to structural damage, asbestos discovery, or utility failure. • Partial Failure of Mobilising System – System degradation affecting response times or dispatch accuracy. • Loss of Communications Infrastructure – Failure of radio network or mobile connectivity impacting incident coordination. • Significant IT System Failure – Disruption to HR, payroll, or asset management systems affecting internal operations. • Reputational Damage from Operational Error – Public criticism following a high-profile incident or procedural failure.
3	Moderate	<p>Risks that may cause noticeable disruption to service delivery or internal operations, with manageable financial implications and limited impact on public safety. These risks typically require localised response and recovery actions but do not threaten core service functions.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Temporary Unavailability of Equipment or Vehicles – Minor delays due to maintenance, servicing, or logistical issues. • Staffing Gaps at Individual Stations – Isolated crew shortages due to leave, training, or sickness, covered through redeployment. • Minor Breach of Policy or Procedure – Non-compliance with internal protocols requiring corrective action but no external consequences. • Delayed Routine Inspections or Training – Scheduling issues causing postponement of non-urgent activities.
2	Minor	<p>Risks that may cause short-term inconvenience or minor disruption to non-critical functions. These are typically resolved through routine procedures and have minimal financial or operational impact.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Brief Delay in Routine Maintenance – Slight postponement of scheduled servicing with no operational consequence. • Minor IT Issues – Temporary glitches in office software or intranet access. • Low-Level Staff Absence – Single crew member unavailable, covered through normal shift adjustments. • Minor Equipment Faults – Non-critical tools or devices requiring repair or replacement. • Administrative Errors – Mistakes in documentation or reporting with no external impact. • Low-Risk Health and Safety Concern – Easily rectifiable issue identified during inspection.
1	Low	<p>Risks with negligible impact on operations, finances, or public safety. These are typically managed as part of day-to-day business and require no formal intervention.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Minor Office Disruption – Temporary inconvenience due to noise, lighting, or workspace changes. • Routine System Updates – Scheduled IT updates causing brief downtime with no service impact. • Minor Delays in Internal Communications – Slight lag in email or message delivery. • Trivial Asset Issues – Misplacement of non-essential items (e.g. stationery, small tools).

Arrangements for Managing Risk

Each area of the Service holds its own risk register. These areas are People, Service Delivery and Finance and Assets.

The Organisational Risk Group (ORG) will be the focal point for risks from a corporate perspective, which also feeds into business continuity. This is the first port of call for discussions on emerging risks and current risks that the organisation has identified. The ORG allows for the three different areas to come together and collaborate on actions being taken to address risks that may or may not be shared across risk registers.

From the ORG, these follow into the three delivery groups that will also examine risks.

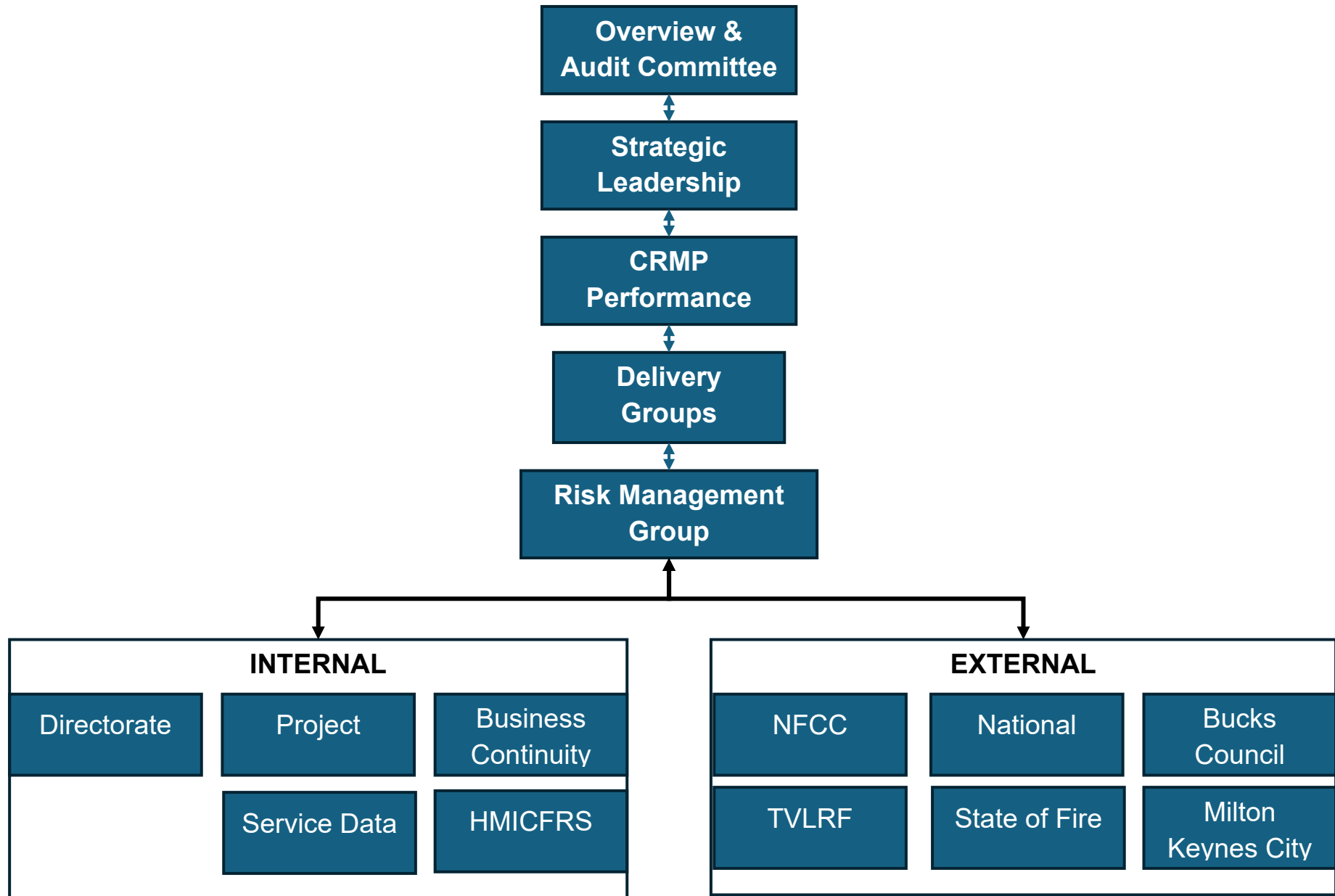
The next step for risk escalation, after the delivery groups, is to the CRMP Performance Board, This board oversees the corporate risk register, which has the highest priority risks that could have the biggest impacts on the organisation and its ability to meet strategic objectives, if not properly addressed.

Finally, the final internal step in the risk management process is to present risk at the Strategic Leadership Board.

This process is constant and by utilising this approach, the Service looks to address risk in all corners of the organisation.

Risk is presented to the Buckinghamshire and Milton Keynes Fire Authority at the Audit and Overview Committee. This ensures full transparency of the risks and shows to external bodies that the organisation is always looking at risk and taking risk management seriously.

Risk Management Flow Diagram – This shows how risk is discussed and fed up and down the organisation. These different boxes represent a different group in the organisation. These groups sit at different levels, with the groups on the right being the highest levels of escalation internally.



Risk Registers

Internal


Internally, risks are recorded and updated on the internal risk register template above. It suffices in helping to keep track of risks and recording any updates on them.

To support effective risk management and ensure a consistent approach across all identified risks, the fire and rescue service has developed a standardized template for its risk registers.

Risk ID	Date Raised	Risk Title, Description & impact	Risk status	Owner	Untreated Score	Current Mitigations	Current Score - Likelihood x severity	Trend	Future Mitigations	Target Score	Corporate Risk
Each risk should have an ID.		A brief description of the risk and the impact/consequences it would have	4T's			What are we doing now about the risk that is tangible?	3*4 = 12 What is the new risk score from the tangible mitigations we are taking?		What are we planning to do about the risk, but isn't currently active? Including timescales and owner	What is the risk score once planned actions are in place?	Yes/No Number

External

When it comes to presenting and reporting to stakeholders, another risk register template is used to make it clearer and easier to discuss. An example of the template is below:

Risk No	CR1.0	Risk	Workforce Availability / Stability					
Lead Member	Lead Member for Service Delivery, Protection & Collaboration		Strategic Owner	Deputy Chief Fire Officer		Delivery Group:	People Delivery Group	
Risk Description Inc impact	1/ Staff inability or reduced ability to work due to disruption caused by factors such as Pandemic Flu, fuel supply issues, industrial action etc. 2/Impact of employment market conditions on attraction of new staff, retention of existing staff, and overall workforce stability (specifically the ratio of experienced / competent staff to inexperienced staff / staff in development. 3/ Simultaneous loss of Principal Officers / Strategic Leadership Team members. This is a composite risk more detailed evaluations of individual risk components are contained in Directorate Risk Registers.							
Risk Scores	Untreated	4x3=12	Current	4x2=8	Target	3x2=6	Direction	
Risk Mitigation in place <i>How do these link back to mitigate the risk description??</i>	<ul style="list-style-type: none">• Business continuity plans in place & uploaded to Resilience Direct.• Succession Plans in place for key leadership and management personnel.• Contingency arrangements in place to mitigate risks to Principal Officer operational rota capacity.• Peer review of the business continuity arrangements							
Mitigating Actions								
Action			Owner	Deadline	Status	Update		
Latest update	November 2024 Firefighter Apprenticeship recruitment is due to go live in January 2025 for a September 2025 start date. Positive action and Have a Go days are factored into the plan.							

Training & Development

Basic risk awareness should be incorporated into all training and development programmes across the organisation. This ensures that staff at every level understand the importance of identifying and managing risks related to finance, reputation, legal obligations, service delivery, and strategic objectives. A shared understanding of corporate risk principles promotes consistency, improves accountability, and supports a proactive risk culture.

Targeted risk management training must be provided to individuals who act as risk owners or hold leadership roles. These individuals are responsible for overseeing specific risk areas, implementing mitigations, and reporting on risk status. Their training should include advanced risk assessment techniques, risk appetite and tolerance frameworks, governance structures, and the integration of risk into business planning and performance monitoring. By equipping leaders and risk owners with the necessary skills and knowledge, the service strengthens its ability to manage uncertainty, deliver value, and achieve its strategic goals.

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Executive Committee, 12 November 2025

Report title: Performance Management – Q2 2025/26

Lead Member: Councillor Llew Monger, Fire Authority Chair

Report sponsor: Simon Tuffley, Deputy Chief Fire Officer/Chief Operating Officer

Author and contact: Craig Newman, Data Intelligence Team Manager,
cnewman@bucksfire.gov.uk

Action: Noting and Approval

Recommendation:

That the report and recommendation below be approved for submission to the Fire Authority:

1. It is recommended that the Performance Management – Q2 2024/25 be noted.
-

Executive summary:

The Service monitors its performance on a monthly basis across three delivery boards. These then feed the Performance Board and the Strategic Leadership Board. One of the tools used to monitor performance is a Key Performance Measures pack. This is scrutinised, with any actions arising being captured and monitored.

The attached report now details 53 specific performance measures selected from the above-mentioned key performance measure pack. These are split across the Service's six objectives, as defined in the 2025-2030 community risk management plan (CRMP):

- 1) Reducing risk and keeping our community safe
- 2) Protecting people from the risk in the built environment
- 3) Responding quickly and effectively to emergencies
- 4) An Inclusive, healthy and engaged workforce
- 5) Making the most of our finances and assets
- 6) Optimising our technology and data

This report comprises of the Service performance against these measures for Q2 2025/26. This includes detail that shows performance alongside relevant trend information and where needed commentary.

At the end of Q2, 51 measures reported with a Blue, Green, Amber or Red status, one is awaiting information and one is currently for monitoring purposes only.

BRAG	Total	%
B	19	36%
G	18	34%
A	7	13%
R	7	13%
-	2	4%

Highlighted measures:

Objectives & Half Year Review

As of the end of September, objective setting returns reached 96%, up from 93% in August, successfully meeting our target following a final push. We have now begun reporting on half-year review returns, with the first month exceeding the 25% target, indicating strong initial engagement.

Monthly reports continue to support managers by identifying gaps in appraisal returns and comparing performance against target. Training sessions have been delivered throughout September and October to address barriers and support completion.

The Thrive Leadership Programme is enhancing leadership capability, focusing on improving the quality of conversations through coaching techniques such as the GROW model. These skills are being embedded in daily interactions and appraisals, particularly in Module 3, which aims to improve the quality and impact of appraisal conversations. We expect this to lead to more meaningful dialogue, improved documentation, and increased motivation and recognition for staff.

Bank Shifts

During Q2, there was a modest increase in bank shift numbers, primarily driven by a combination of long-term absences and seasonal leave pressures. One of these absences is offset by cost recovery arrangements linked to secondments, helping to mitigate the overall financial impact.

While the figures are slightly above those recorded in the same period last year, they remain comparatively low when viewed against historical trends. This reflects continued efforts to manage staffing levels efficiently.

In response to the data, officers have proactively implemented changes to the way leave is allocated, particularly around peak periods. These adjustments are aimed at further flattening demand for bank shifts in future years, ensuring a more balanced and sustainable approach to workforce planning.

Availability - On Call

It should be noted that the On-Call availability KPM is a directional target. For this reason, and based on improved performance compared with the previous reporting year, the RAG status is green for quarter 2. This modest improvement in performance can largely be attributed to some good work undertaken in relation to contract management for existing staff.

However, the current average of 16% across 18 appliances remains below the level required for operational resilience and does not represent value for money. Officers continue to explore opportunities for improvement within business as usual arrangements alongside scoping proposals for more significant change within the On-Call Improvement Programme.

Social Media – Engagement

A strong and consistent social media presence is vital for our Service as it enables us to connect with the public. By producing engaging content, we are able to grow our audiences and create the reach we need to share critical safety messages that help protect our communities, while also driving people towards our other channels such as the website. Recruitment activity has been a key driver of increased engagement, showcasing the Service as modern, excellent, and a welcoming place to work, supporting our ambition to be an employer of choice. Sharing our stories and successes helps build morale, inspire pride, and reinforce staff engagement, while social media more broadly is a key part of a multi-channel communications approach. Recent media training has equipped our leaders to act as advocates, further strengthening visibility and trust.

Financial implications: A detailed understanding of the Service's performance allows informed decision making in relation to future resource allocation. The balance of measures also allows an understanding of the Service's financial performance and enables a view to be formed of its overall value for money compared with others.

Risk management: Performance and risk information is designed and presented to assist the Authority in the strategic decision-making through understanding the communities we serve and associated risk profiles. Performance management information is a major contributor to service improvement and to the effective prioritisation of resources.

Legal implications: There are no legal implications arising directly from this report.

Privacy and security implications: There are no Privacy and Security implications arising from this paper.

Duty to collaborate: There are no opportunities to collaborate directly from this report.

Health and safety implications: There are no specific Health, Safety and Wellbeing implications arising from this paper. Performance reports on Health & Safety is subject to separate scrutiny and performance reporting.

Environmental implications: There are no environmental implications arising directly from this report.

Equality, diversity, and inclusion implications: There are no specific Equality, diversity and inclusion implications arising from this paper.

Consultation and communication: We aim to provide performance information incorporating stakeholder contributions. The report will be circulated throughout the organisation for information and awareness.

Board	Date	Outcome
CRMP Performance Board	21 October 2025	Approved
Strategic Leadership Board	21 October 2025	Approved
Executive Committee	12 November 2025	
Fire Authority	10 December 2025	

Next steps -

- The performance measures will be reported quarterly
- Indicators and targets will be reviewed annually

Background papers:

Fire Authority, 08 October 2025: Performance Management – Q1 2025/25
[\(Public Pack\)Agenda Document for Buckinghamshire & Milton Keynes Fire Authority, 08/10/2025 14:00](#)

Appendix	Title	Protective Marking
1	BFRS Key Performance Measures – Q2 – 25-26	N/A



KEY PERFORMANCE MEASURES - 2025-2026

QUARTER TWO - JUL to SEP

Introduction

This Key Performance Measures report has been designed as a rounded and balanced picture of how the Service is performing at a local level.

Due to the regular frequency of this report being produced, most indicators used within each measures represent change within the Service and does not always represent good or bad performance. For example, Accidental Dwelling Fires could increase, yet still have the fewest number within the country (relative). This level of detail will be covered in annual reports and ad-hoc reports when requested, as most national data is published annually.

The report contains many types of targets and methods of comparison. Some targets are aspirational, some are there to ensure minimum standards are met and others are there to identify exceptions within trends, allowing us to identify possible needs for change/reaction.

	Monthly (in most cases)	Cumulative (in most cases)
Better than expected	B	B
As expected (within trend/target)	G	G
Worse than expected	A	A
Considerably worse than expected	R	R

REDUCING RISK AND KEEPING OUR COMMUNITY SAFE



PRV.1.03 - Home Fire Safety Visits Completed

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	> 10%
	Target	400	400	400	400	400	400	400	400	400	400	400	400	G	Within 10%
	2025/2026	368	469	430	464	468	432							A	< 10%
	Status	G	B	G	B	B	G							R	< 20%
Cumulative		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	What is good	
	Target	400	800	1200	1600	2000	2400	2800	3200	3600	4000	4400	4800	More is better	
	2025/2026	368	837	1267	1731	2199	2632								
	Status	G	G	G	G	G	G								

Ref	PRV.1.03
Owner	Prevention
Comparison	Target
Delivery Group	Service Delivery Group

The total number of HFSV completed from all sources. This includes referrals, hot strikes and targeted locations. This does not include any advice given online.

Whilst it is positive to see that our teams have exceeded the quarterly target, it is especially encouraging that a significant proportion of visits have been delivered to those most at risk, specifically, households where at least one occupant is considered to be at greater risk from the effects of a fire in the home.

PRV.1.04 - Home Fire Safety Visits - % Vulnerable

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	=> 80%
	Target	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	G	=> 70%
	2025/2026	83%	78%	75%	81%	80%	82%							A	=> 60%
	Status	B	G	G	B	B	B							R	< 60%
Cumulative		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	What is good	
	Target	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	Higher is better	
	2025/2026	83%	80%	78%	79%	79%	80%								
	Status	B	G	G	G	G	B								

Ref	PRV.1.04
Owner	Prevention
Comparison	Target
Delivery Group	Service Delivery Group

The percentage of HFSV that were deemed to be supporting a dwelling that contained a vulnerable person. This definition is taken from the Home Office guidance note.
The target is based on the national average across the sector.

HFSV completion has continued to meet target across Q2, which is positive and demonstrates our continued focus on those most at risk in our communities. Partner referrals remain strong, ensuring we are reaching highly vulnerable individuals, while station staff continue to use vulnerability data to identify and engage those at increased risk of fire. This targeted approach supports our ambition to reduce harm and protect the most vulnerable across Buckinghamshire and Milton Keynes.

PRV.2.01 - Number of Accidental Dwelling Fires (ADF)

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 20%
	Prev 5 year	22.2	23.2	24.2	16.8	17	21.8	22	24	24.8	24	24.2	21.2	G	Within 20%
	2025/2026	27	20	20	30	22	22							A	> 20%
	Status	A	G	G	R	A	G							R	> 30%
Cumulative														What is good	
	Prev 5 year	22.2	45.4	69.6	86.4	103.4	125.2	147.2	171.2	196.0	220.0	244.2	265.4		
	2025/2026	27	47	67	97	119	141							Less is better	
	Status	A	G	G	G	G	G								

Ref	PRV.2.01	Number of dwelling fires where the cause of the fire was recorded as accidental. 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.
Owner	Prevention	
Comparison	Previous five year average	
Delivery Group	Service Delivery Group	

Average response times to accidental dwelling fires (ADFs) during Q2 remained well within the Service target. A noticeable increase in incidents in July contributed to a slight rise compared with the 5 year average. This reporting period has coincided with an increase in Home Fire Safety Visit (HFSV) delivery, many of which were carried out following post-incident hot strikes.

All accidental dwelling fires that result in a serious injury feed into our domestic dwelling fire methodology, which helps ensure that our prevention activity and HFSV delivery remain focused across our nine Service Delivery Areas on those at greatest risk of death or serious injury from fire. Quarter 3 will see the rollout of a refreshed targeting methodology that incorporates both incident data and wider datasets to further refine our approach.

PRV.2.03 - ADF Fire-Related Fatalities

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	
	Prev 5 year	0	0	0.4	0	0.2	0.2	0.4	0	0	0	0.2	0.6	G	0
	2025/2026	1	2	0	0	0	0							A	> 0 a year
	Status	A	A	G	G	G	G							R	> 3 a year
Cumulative														What is good	
	Prev 5 year	0.0	0.0	0.4	0.4	0.6	0.8	1.2	1.2	1.2	1.2	1.4	2.0		
	2025/2026	1	3	3	3	3	3							Less is better	
	Status	A	A	A	A	A	A								

Ref	PRV.2.03	Number of fire related fatalities recorded at accidental dwelling fires. In general, 'fire-related deaths' are those that would not have otherwise occurred had there not been a fire.
Owner	Prevention	
Comparison	Previous five year average	
Delivery Group	Service Delivery Group	

It is pleasing to report that there were no fire-related fatalities during the quarter.

PRV.2.04 - ADF Fire Related Serious Injuries

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	
	Prev 5 year	0.4	0	0.2	0.2	0.6	0	0	0	0.8	0.4	0	0.4	G	< 3 a year
	2025/2026	0	0	0	0	0	1							A	> 2 a year
	Status	G	G	G	G	G	A							R	> 4 a year
Cumulative															
	Prev 5 year	0.4	0.4	0.6	0.8	1.4	1.4	1.4	1.4	2.2	2.6	2.6	3.0	What is good	
	2025/2026	0	0	0	0	0	1							Less is better	
	Status	G	G	G	G	G	G								

Ref	PRV.2.04	Number of fire related serious injuries recorded at accidental dwelling fires. In general, 'serious injury' can be defined as: at least an overnight stay in hospital as an in-patient.
Owner	Prevention	
Comparison	Previous five year average	
Delivery Group	Service Delivery Group	

This is not a trending statistic. This looks to be an isolated event involving expanding foam coming into contact with a hot surface. This incident did not warrant a hot strike.

A Social media campaign will be developed to highlight household product safety labels.

PRV.2.05 - Deliberate Dwelling Fires

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 2 per month
	Prev 5 year	1.4	2.4	1.8	1.8	3	0.6	2.8	1.4	0.6	0.8	1.6	1.2	G	2 per month
	2025/2026	3	1	1	0	1	1							A	> 2 per month
	Status	A	B	B	B	B	B							R	> 4 per month
Cumulative															
	Prev 5 year	1.4	3.8	5.6	7.4	10.4	11.0	13.8	15.2	15.8	16.6	18.2	19.4	What is good	
	2025/2026	3	4	5	5	6	7							Less is better	
	Status	A	G	B	B	B	B								

Ref	PRV.2.05	Number of dwelling fires where the fire was started deliberately by someone other than the owner/occupant. This includes derelict properties - derelict are buildings which are unfit for further use.
Owner	Prevention	
Comparison	Previous five year average	
Delivery Group	Service Delivery Group	

The number of deliberate dwelling fires is consistent with the previous 5 year average. In all cases, an appropriate level of fire investigation was carried out and TVP informed of the deliberate fire.

During this reporting period, we have reviewed and improved our threat of arson procedure with TVP, which aims to improve communication between us as blue light partners of potential risks of arson and allow us to put in place preventative measures.

PRV.3.01 - Deliberate Primary Fires (to other's property)

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 10%
	Prev 5 year	13	15	15.2	20.6	19.8	12.8	11.2	8.8	7.6	9	8.4	11.4	G	Within 10%
	2025/2026	16	17	22	14	21	7							A	> 10%
	Status	R	A	R	B	G	B							R	> 20%
Cumulative														What is good	
	Prev 5 year	13	28	43	64	84	96	108	116	124	133	141	153	Less is better	
	2025/2026	16	33	55	69	90	97								
	Status	R	R	R	G	G	G								

Ref	PRV.3.01	Number of Primary fires that were deliberately started by somebody that wasn't the owner. Primary fires are potentially more serious fires that harm people or cause damage to non-derelict property such as buildings, vehicle or (some) outdoor structures. Prison Fires have been excluded from these numbers.
Owner	Prevention	
Comparison	Previous five year average	
Delivery Group	Service Delivery Group	

Quarter 2 saw lower-than-average incident numbers, with 16 of the 42 outdoor fires involving grassland, woodland, or crops, and 14 involving vehicles. While no clear patterns or trends have been identified in relation to incident types or locations, we continue to work proactively with partners to share insights, monitor activity and take action against offenders where possible.

Property Level 1	Property Level 2	Incidents	Station Ground	Incidents
Car		8	High Wycombe	7
Van		3	West Ashland	6
Motorcycle		3	Broughton	5
Dwelling	Converted Flat/Maisonette - multiple occupancy	1	Gerrards Cross	5
	Licensed HMO	1	Amersham	4
Non Residential	Other private non-residential building	1	Newport Pagnell	4
	Public admin, security and safety	1	Beaconsfield	3
	Public toilets	1	Great Missenden	3
	Electricity power station	2	Aylesbury	2
Grassland, woodland and crops	Stacked/baled crop (incl manure heap)	3	Marlow	2
	Woodland/forest - broadleaf/hardwood	12	Winslow	1
	Woodland/forest - conifers/softwood	1	Total	42
Other outdoors (including land)	Other outdoor location	1		
Outdoor equipment and machinery	Garden equipment	1		
	Other outdoor equipment/machinery	1		
Outdoor structures	Other outdoor structures	1		
Other		1		
Total		42		

Station Ground	Car	Grassland, woodland and crops	Motorcycle	Van	Total
High Wycombe	2	3		1	6
Amersham		3	1		4
Gerrards Cross	1	2	1		4
Beaconsfield	2	1			3
Broughton	2			1	3
West Ashland	1	1	1		3
Great Missenden		2			2
Marlow		2			2
Newport Pagnell		1		1	2
Winslow		1			1
Total	8	16	3	3	30

PRV.3.02 - Deliberate Secondary Fires (to other's property)

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 10%
	Prev 5 year	34	32	40.6	40	45.8	25.2	19.2	18.8	11.8	10.4	15	21.8	G	Within 10%
	2025/2026	55	48	28	33	44	21							A	> 10%
	Status	R	R	B	B	G	G							R	> 20%
Cumulative															
	Prev 5 year	34	66	107	147	192	218	237	256	267	278	293	315	What is good	
	2025/2026	55	103	131	164	208	229							Less is better	
	Status	R	R	R	A	G	G								

Ref	PRV.3.02	Number of secondary fires that were deliberately started by somebody that wasn't the owner. 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.
Owner	Prevention	
Comparison	Previous five year average	
Delivery Group	Service Delivery Group	

Deliberate secondary fires involving other people's property during Quarter 2 were in line with the previous five-year average. The incidents were varied in type, with trees, grassland, and loose refuse accounting for nearly 50 per cent of all occurrences. 30 of the 98 incidents took place within the West Ashland station area. These insights will be shared with Thames Valley Police and local authority community risk teams to ensure that deliberate fire-setting and anti-social behaviour risks are considered within wider community risk management activity.

Station Ground	Total	Property Level 1	Property Level 2	Total
West Ashland	30	Grassland, woodland and crops	Tree scrub (includes single trees not in garden)	12
Gerrards Cross	15		Grassland, pasture, grazing etc	11
High Wycombe	14		Private/Domestic garden/allotment (vegetation)	5
Aylesbury	9		Hedge	4
Broughton	7		Roadside vegetation	4
Amersham	4		Scrub land	4
Waddesdon	4		Canal/riverbank vegetation	2
Beaconsfield	3		Straw/stubble burning	2
Buckingham	3		Woodland/forest - broadleaf/hardwood	1
Newport Pagnell	3		Woodland/forest - conifers/softwood	1
Great Missenden	2	Non Residential	Other private non-residential building	1
Princes Risborough	2	Other outdoors (including land)	Loose refuse (incl in garden)	15
Marlow	1		Other outdoor location	3
Olney	1		Park	3
Total	98		Cycle path/public footpath/bridleway	2
			Highway/road surface/pavement	2
			Lake/pond/reservoir	1
			Playground (not equipment) or Recreational area	1
		Outdoor structures	Wasteland	1
			Small refuse/rubbish/recycle container (excluding wheelie bin)	8
			Refuse/rubbish tip	6
			Other outdoor items including roadside furniture	4
			Common external bin storage area	2
			Fence	1
			Large refuse/rubbish container (eg skip)	1
			Wheelie Bin	1
		Total		98

PROTECTING PEOPLE FROM RISK IN THE BUILT ENVIRONMENT



PRT.1.01 - Fire Safety Audits

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	> 70 Per month
	Target	66	66	66	66	66	66	66	66	66	66	66	66	G	> 59 Per month
	2025/2026	37	54	43	59	68	53							A	> 49 Per month
	Status	R	A	R	A	G	A							R	< 50 Per month
Cumulative															
	Target	66	132	198	264	330	396	462	528	594	660	726	792	What is good	
	2025/2026	37	91	134	193	261	314							More is better	
	Status	R	R	R	R	A	A								

Ref	PRT.1.01	Number of Fire Safety Audits Completed. A fire safety audit is an examination of the premises and relevant documents to ascertain how the premises are being managed with regards to fire safety. Occupants will need to demonstrate to our officers that they have met the duties required by the Fire Safety Order.
Owner	Protection	
Comparison	Target	
Delivery Group	Service Delivery Group	

Between July and September 2025, Buckinghamshire Fire & Rescue Service (BFRS) completed 180 fire safety audits, compared with 134 in the first quarter (April to June). This represents a 34% increase in audit activity and reflects sustained improvement over the summer period.

Fire safety audits are a core statutory duty under the Regulatory Reform (Fire Safety) Order 2005. They ensure that dutyholders are complying with their legal responsibilities to keep people safe from fire. Our Fire Safety (Protection) officers examine risk assessments, evacuation strategies, fire protection systems, and management arrangements to evaluate how fire safety is maintained in each premises.

This improved performance is a direct result of the Service’s continued investment in staff development. Many of our Protection team are progressing through nationally recognised qualifications, from apprenticeships to a degree in Fire Engineering, and their growing skills and confidence are now translating into higher audit throughput, without compromising on rigour or quality.

Although the cumulative target for Quarter 1 (198 audits) was not met, the consistent progress made in Quarter 2 has narrowed the gap. By the end of September, the team had completed a total of 314 audits against a target of 396. The Service is now well-positioned to increase monthly audit output, supported by the fact that several staff members are expected to become fully qualified in the coming months.

As well as increasing volume, we remain focused on targeting high-risk premises under our Risk-Based Inspection Programme (RBIP). Audit activity continues to be intelligence-led and prioritised to maximise life safety impact.

A Protection Report will be presented to the Full Authority meeting in December 2025, providing assurance on the progress and effectiveness of the ongoing Protection improvement journey.

PRT.3.01 - Non-domestic Property Fires - Accidental

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 5 per month
	Prev 5 year	9.8	11	9.2	10.8	11.4	7.4	11.8	10.6	9.4	9.6	9.2	12.0	G	< 11 per month
	2025/2026	12	12	12	15	12	9							A	< 16 per month
	Status	A	A	A	A	A	G							R	=> 16 per month
Cumulative														What is good	
	Prev 5 year	9.8	20.8	30.0	40.8	52.2	59.6	71.4	82.0	91.4	101	110	122	Less is better	
	2025/2026	12	24	36	51	63	72								
	Status	A	A	A	A	A	A								

Ref	PRT.3.01	Number of primary fires in non-domestic properties where the cause was recorded as accidental. This excludes derelict properties (unless four or more pumps were needed) and Prisons.
Owner	Protection	
Comparison	Previous five year average	
Delivery Group	Service Delivery Group	

In Q2 the Service recorded 36 accidental fires in non-domestic properties, matching the number recorded in Q1. Encouragingly, September saw a reduction to single figures for the first time this year.

The incidents were varied in nature, including fires involving sheds, garages, and other non-domestic structures. Where premises were identified as falling within the scope of the Fire Safety Order (FSO), these were assessed and, where appropriate, followed up through fire investigation, audit, or business engagement activity.

Property Level 1	Property Level 2	Total
Car Parks	Other	1
Education	Infant/primary school	1
	Secondary school	1
Entertainment and culture	Club/night club	1
Food and Drink	Other Restaurant/café – not licensed	1
Hospitals and medical care	Hospital	1
Industrial Manufacturing	Assembly	1
	Engineering	2
	Other	1
	Printing	1
Industrial Processing	Recycling	1
Offices and call centres	TV/film/music/art studio	1
Other buildings/use not known		1
Other private non-residential building		1
Private garage		3
Private Garden Shed		4
Public Utilities	Other	1
Retail	Bakery	1
	Petrol station	1
	Shopping Centre	1
	Single shop	2
Vehicle Repair		1
Hostel (e.g. for homeless people)		1
Hotel/motel		1
Other holiday residence (cottage, flat, chalet)		1
Residential Home	Retirement/Elderly	1
Sheltered Housing – not self contained		3
Total		36

PRT.3.02 - Non-domestic Property Fires - Deliberate

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 1 per month
	Prev 5 year	2.4	1.6	2.2	2.6	1.8	1.6	1	0.4	1.6	1.6	1.6	1.8	G	< 3 per month
	2025/2026	0	2	1	4	1	0							A	> 2 per month
	Status	B	G	G	A	B	B							R	> 4 per month
Cumulative	Prev 5 year	2.4	4.0	6.2	8.8	10.6	12.2	13.2	13.6	15.2	16.8	18.4	20.2	What is good	
	2025/2026	0	2	3	7	8	8							Less is better	
	Status	B	G	G	G	G	G								

Ref	PRT.3.02	Number of fires in non-domestic properties where the cause was recorded as deliberate (where the fire was started deliberately by someone other than the owner/occupant). This excludes derelict properties (unless four or more pumps were needed) and Prisons.
Owner	Protection	
Comparison	Previous five year average	
Delivery Group	Service Delivery Group	

In Q2, there were five deliberate fires in non-domestic premises across Buckinghamshire and Milton Keynes, compared with three in Q1. This small increase was largely driven by a spike in July, with numbers returning to low levels in August and zero incidents in September.

PRT.3.07 - Non-domestic Property False Alarms

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 10%
	Prev 5 year	114	115	117	121	122	140	147	139	131	120	100	109	G	Within 10%
	2025/2026	62	62	46	65	66	64							A	> 10%
	Status	B	B	B	B	B	B							R	> 20%
Cumulative		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	What is good	
	Prev 5 year	114	229	346	467	589	729	877	1016	1147	1267	1366	1476		
	2025/2026	62	124	170	235	301	365							Less is better	
	Status	B	B	B	B	B	B								

Ref	PRT.3.07	Number of incidents attended in non-domestic properties that were recorded as a False Alarm. These could have been fire related or a special service i.e. flooding. However, this does not include where we attended as a co-responder. These numbers do not include incidents in Prisons.
Owner	Protection	
Comparison	Previous five year average	
Delivery Group	Service Delivery Group	

The number of false alarms in non-domestic premises rose slightly in Quarter 2, with BFRS recording 195 attendances between July and September, compared to 170 in Quarter 1.

While this represents a modest increase, the overall number of false alarms remains significantly lower, 50% of the five-year average, highlighting the continued effectiveness of the changes introduced in July 2024 to our response to Automatic Fire Alarms (AFAs). Under this policy, the Service no longer automatically mobilises to AFA activations in low- and medium-risk premises unless specific criteria are met, such as confirmed signs of smoke or fire.

This shift has enabled a more risk-proportionate response model, ensuring that fire engines and firefighters are more readily available for genuine emergencies. Our Protection teams continue to work closely with businesses to reduce unnecessary activations through business engagement activity.

The increase from Quarter 1 is a minor fluctuation within an overall improving trend. We will continue to monitor this area closely in collaboration with dutyholders to sustain progress and further reduce false alarms.

RESPONDING QUICKLY AND EFFECTIVELY TO EMERGENCIES



RSP.2.01 - Average Attendance Time to all Incidents (exc Co-Res)

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Monthly	Prev 5 years	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	B < 08:30
	2025/2026	08:54	08:43	08:49	08:52	09:03	08:51						G =< 09:30
	Status	G	G	G	G	G	G						A > 09:30
													R > 10:00
YTD	Prev 5 years	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	What is good
	2025/2026	08:54	08:49	08:49	08:50	08:52	08:52						Less is better
	Status	G	G	G	G	G	G						

Ref	RSP.2.01	The average attendance time to all incidents (excluding co-responding incidents). The average time is the minutes and seconds elapsed from the time the first appliance was assigned to the incident, to the arrival of the first appliance at the incident.
Owner	Response	
Comparison	Prev 5 year average	
Delivery Group	Service Delivery	

Attendance times are reviewed monthly via the Service Delivery Group and Performance Board. We also review attendance times by exception following significant incidents.

Our current performance has provided assurance that our 12 immediately available wholtime appliances, meet the day to day demand of incident response.

RSP.2.02 - Average Attendance Time to ADFs

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Monthly	Prev 5 year	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	B < 08:30
	2025/2026	07:33	07:41	07:42	08:14	08:18	08:50						G =< 09:30
	Status	B	B	B	B	B	G						A > 09:30
													R > 10:00
Cumulative	Prev 5 year	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	10:00	What is good
	2025/2026	07:33	07:37	07:38	07:49	07:54	08:03						Less is better
	Status	B	B	B	B	B	B						

Ref	RSP.2.02	The average attendance time to Accidental Dwelling Fires. The average time is the minutes and seconds elapsed from the time the first appliance was assigned to the incident, to the arrival of the first appliance at the incident.
Owner	Response	
Comparison	Previous five year average	
Delivery Group	Service Delivery	

The slight increase in response times to accidental dwelling fires during September can mostly be attributed to the locations of the incidents. The average time still falls within our response standards however, we will continue to monitor the performance of this measure closely over the next few months to ensure this isn't a trend.

RSP.3.01 - Response Model - All

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	> 12
Day	2024/2025	12.9	12.9	12.4	12.8	12.3	12.3	12.3	13.4	13.0	14.9	14.1	14.2	G	> 10
	2025/2026	14.2	13.5	13.2	13.3	12.8	13.5							A	=> 9
	Status	B	B	B	B	B	B							R	< 9
Night	2024/2025	13.1	13.2	12.7	13.5	13.6	13.2	13.1	14.5	14.0	16.3	15.5	15.6	What is good	
	2025/2026	15.8	15.3	14.9	14.5	13.7	14.8							Higher is better	
	Status	B	B	B	B	B	B								

Ref	RSP.3.01	The average number of pumps available at the beginning of each shift, broken down by day shift and night shift.
Owner	Response	
Comparison	Previous year	
Delivery Group	Service Delivery	

The territorial Group Commanders work closely with the Resource Management Team and People services to greater understand how absences affect appliance availability.

Equally work is taking place to reduce the reliance on bank shifts and reduce the number of standbys between stations.

Improvements have been made to the operational leave guidance and a review of operational establishments to ensure we have the right people in the right place.

RSP.3.02 - Availability - Wholetime

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	99% - 99.9%
	2024/2025	97.9%	99.1%	96.7%	97.0%	96.5%	96.2%	96.8%	98.0%	97.5%	99.2%	99.3%	98.5%	G	98% - 98.9%
	2025/2026	98.9%	97.5%	98.4%	97.0%	96.8%	97.3%							A	96% - 97.9%
	Status	G	A	G	A	A	A							R	<96%
Cumulative	2024/2025	97.9%	98.5%	97.9%	97.7%	97.4%	97.2%	97.2%	97.3%	97.3%	97.5%	97.6%	97.7%	What is good	
	2025/2026	98.9%	98.2%	98.3%	97.9%	97.7%	97.7%							Higher is better	
	Status	G	G	G	A	A	A								

Ref	RSP.3.02	The availability of BFRS pumps to respond to incidents. This measure reflects when pumps are "on the run". With this in mind, should an appliance be at an incident, it would still be recorded as being available. Reasons for an appliance being "off the run" include, crew/skill deficient, vehicle defects and decontamination.
Owner	Response	
Comparison	Target	
Delivery Group	Service Delivery	

The availability of our wholetime pumps remain above our 2024/2025 performance. However, due to numerous impacts on our staff, such as absence, secondment and training, the availability remained below the target of 98% throughout the quarter.

RSP.3.04 - Bank Shifts

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 10%
	2024/2025	197	137	260	202	311	270	224	176	209	40	63	104	G	=< 0%
	2025/2026	163	252	199	293	385	304							A	> 0%
	Status	B	R	B	R	R	R							R	> 10%
Cumulative															
	2024/2025	197	334	594	796	1107	1377	1601	1777	1986	2026	2089	2193	What is good	
	2025/2026	163	415	614	907	1292	1596							Less is better	
	Status	B	R	A	R	R	R								

Ref	RSP.3.04	The number of banks shift utilised per month.
Owner	Response	
Comparison	Previous Year	
Delivery Group	Service Delivery	

The bank shift numbers remain high this quarter.

Impacts on these numbers include a spike in annual leave and a continued level of absence, this was alongside supporting training courses and secondments.

To assist in the requirement to reduce the number of bank shifts, a review has been carried out of the operational leave guidance and adjustments made to change the bank exchange process. While we would expect to see an improvement off the back of these changes during the next few months, we expect to see greater improvements into 2026/2027.

RSP.4.01 - Availability - On-Call

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	=> 25%
	2024/2025	10.6%	9.6%	7.3%	11.2%	10.8%	11.6%	10.8%	13.5%	11.1%	20.9%	18.8%	17.5%	G	=> 15%
	2025/2026	18.5%	17.7%	16.1%	15.5%	11.3%	15.9%							A	=> 10%
	Status	G	G	G	G	A	G							R	< 10%
YTD Avg	2024/2025	10.6%	10.8%	9.15%	9.7%	9.9%	10.2%	10.3%	10.7%	10.7%	11.8%	12.3%	12.8%	What is good	
	2025/2026	18.5%	18.1%	17.4%	16.9%	15.8%	15.8%							Higher is better	
	Status	G	G	G	G	G	G								

Ref	RSP.4.01	The availability of BFRS pumps to respond to incidents. This measure reflects when pumps are “on the run”. With this in mind, should an appliance be at an incident, it would still be recorded as being available. Reasons for an appliance being “off the run” include, crew/skill deficient, vehicle defects and decontamination.
Owner	Response	
Comparison	Target	
Delivery Group	Service Delivery	

Whilst we continue to see an improving trend of availability in comparison to 2024/2025, 16% availability across 18 appliances does not represent a good level of resilience or value for money.

Service Delivery management are working closely to make BAU improvements with our current staffing pool.

The On-Call working group has been reestablished to identify and improve all local elements within our current establishment. This has already seen the completion of a full contract review, identifying more appropriate and realistic declarations of availability. The group is now focused on training and retention of our current staff, as well as the ability to offer a better tiered availability.

An on call improvement programme has been established to identify more fundamental change and improvement to meet the requirements of the CRMP.

RSP.4.02 - Availability - On-Call - Immediately Available

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B => 20%
	2024/2025	5.9%	5.6%	3.5%	6.3%	5.5%	5.2%	6.3%	9.0%	7.0%	14.3%	11.7%	9.7%	G => 10%
	2025/2026	11.6%	10.9%	9.9%	8.7%	6.9%	8.9%							A => 5%
	Status	G	G	A	A	A	A							R < 5%
Cumulative	2024/2025	5.9%	5.7%	5.0%	5.3%	5.4%	5.3%	5.5%	5.9%	6.0%	6.9%	7.3%	7.5%	What is good
	2025/2026	11.6%	11.2%	10.8%	10.3%	9.6%	9.5%							Higher is better
	Status	G	G	G	G	A	A							

Ref	RSP.4.02	The availability of BFRS On-Call pumps to respond to incidents. This measure reflects when pumps are “on the run”, but does not include when the pump is available with a slower response time (i.e. excludes 2nd, 3rd and 4th line). Reasons for an appliance being “off the run” include, crew/skill deficient, vehicle defects and decontamination.
Owner	Response	
Comparison	Target	
Delivery Group	Service Delivery	

Immediate On-Call availability presents a challenging picture, which is currently being addressed by the On-Call improvement programme.

We will continue to address the immediately available On-Call pumps via local management with our current staff, governed by the Service Delivery Group.

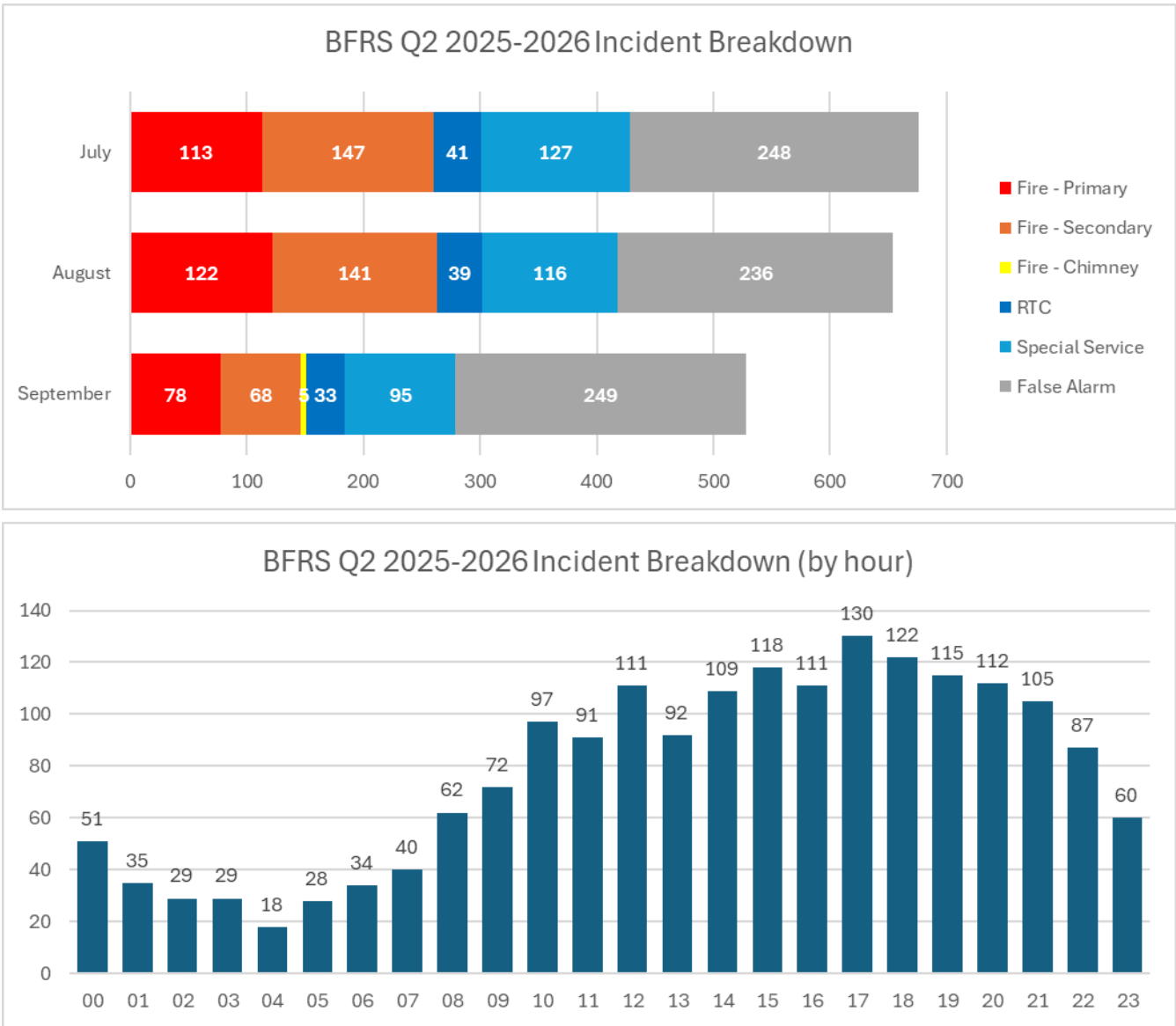
RSP.7.01 - Total Incidents (exc co-responders)

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B < 2.51%
	Prev 5 year	562	575	604	652	652	619	607	573	551	555	480	502	G Within 2.5%
	2025/2026	566	534	559	676	654	528							A > 2.51%
	Status	G	B	B	A	G	B							R > 10%
Cumulative														
	Prev 5 year	562	1137	1741	2393	3045	3664	4272	4844	5395	5951	6431	6933	What is good
	2025/2026	566	1100	1659	2335	2989	3517							Monitor
	Status	G	B	B	G	G	B							

Ref	RSP.7.01	Total number of incidents attended within Buckinghamshire and Milton Keynes (excluding co-responder incidents).
Owner	Response	
Comparison	Previous five year average	
Delivery Group	Service Delivery	

Incidents during Q2 remained on season trend across most types of incident. However, we have seen a noticeable decrease in the number of serious RTCs that we have attended during this period.

A breakdown of the incident type and time of incident can be seen below.



RSP.7.02 - OTB Mobilisations into BFRS Grounds

Monthly

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Prev 5 year	129	131	151	201	195	150	149	132	138	117	114	117
2025/2026	132	133	156	242	196	146						
Status	G	G	G	R	G	G						

B	< 10%
G	Within 10%
A	> 10%
R	> 20%

Cumulative

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Prev 5 year	129	260	410	611	807	957	1106	1238	1376	1493	1606	1723
2025/2026	132	265	421	663	859	1005						
Status	G	G	G	G	G	G						

What is good
Less is better

Ref	RSP.7.02	Number of mobilisations of appliance from Over The Border (OTB) into BFRS grounds.
Owner	Response	
Comparison	Previous five year average	
Delivery Group	Service Delivery	

Below is breakdown of Q2 2025-2026 Mobilisations into Buckinghamshire and Milton Keynes from other Fire and Rescue Services.

Service	Appliances Assigned	Time unavailable
Berkshire	287	220:08:44
Oxfordshire	112	146:37:18
Bedfordshire	73	49:47:39
Hertfordshire	51	18:52:10
London	34	9:25:30
Northamptonshire	20	9:36:22
Surrey	7	5:24:52
Total	584	459:52:35

Station Ground	Appliances Assigned	Time Unavailable
Gerrards Cross	222	162:07:38
Beaconsfield	76	50:37:02
Aylesbury	57	28:08:06
Brill	42	72:17:12
West Ashland	32	19:41:07
Olney	19	6:48:33
High Wycombe	19	9:43:54
Buckingham	18	20:10:41
Broughton	17	10:09:01
Waddesdon	12	18:53:54
Haddenham	12	8:12:03
Newport Pagnell	11	8:28:45
Chesham	10	5:38:57
Amersham	9	5:59:20
Princes Risborough	7	6:35:09
Winslow	6	8:52:56
Great Missenden	5	10:39:40
Stokenchurch	5	3:33:54
Marlow	5	3:14:43
Total	584	459:52:35

Incident type - at time of call	Appliances Assigned	Time unavailable	Average time unavailable
ALARM - INDUSTRIAL / COMMERCIAL	4	1:35:22	0:23:50
ALARM - RETAIL / PUBLIC ASSEMBLY	12	2:38:05	0:13:10
ALARM - RESIDENTIAL	20	4:39:56	0:14:00
ALARM - SMOKE ALARM ACT	5	1:27:55	0:17:35
ALARM - CARBON MONOXIDE ALARM ACT	3	0:54:24	0:18:08
FIRE - INDUSTRIAL / COMMERCIAL	6	8:46:50	1:27:48
FIRE - FIRE UNKNOWN ORIGIN	3	2:59:56	0:59:59
FIRE - SMOKE IN THE AREA	10	4:31:43	0:27:10
FIRE - RETAIL/ PUBLIC ASSEMBLY	12	3:23:24	0:16:57
FIRE - SCHOOL/COLLEGE	3	0:40:29	0:13:30
FIRE - RESIDENTIAL	12	2:39:18	0:13:16
FIRE - PERSONS REPORTED RESIDENTIAL	1	0:32:09	0:32:09
FIRE - HIGHRISE	13	3:59:37	0:18:26
FIRE - HOSPITALS	2	0:13:34	0:06:47
FIRE - PRISONS / DETENTION / SECURE ACCOM	10	2:15:43	0:13:34
FIRE - DOMESTIC	28	31:09:29	1:06:46
FIRE - PERSONS REPORTED DOMESTIC	25	9:49:13	0:23:34
FIRE - CHIMNEY	1	2:18:55	2:18:55
FIRE - AGRICULTURAL	1	0:42:50	0:42:50
FIRE - OTHER BUILDINGS	12	13:48:01	1:09:00
FIRE - DERELICT BUILDINGS	2	1:25:38	0:42:49
FIRE - CARAVAN / CAMPING	4	5:31:58	1:23:00
FIRE - PERSONS REPORTED CARAVAN / CAMPING	9	24:58:15	2:46:28
FIRE - FIRE IN THE OPEN	105	110:08:55	1:02:57
FIRE - IN THE OPEN LARGE	9	15:42:25	1:44:43
FIRE - RECYCLING / LANDFILL	6	17:07:54	2:51:19
FIRE - FIELD	56	50:19:48	0:53:55
FIRE - ELECTRICAL INSTALLATION	4	4:00:35	1:00:09
HAZMAT - GAS / RELEASE / LEAKS	4	0:59:21	0:14:50
HAZMAT - SMALL	6	3:00:14	0:30:02
MOBILISING - STANDBY	19	24:29:29	1:17:20
RESCUE - RESCUE FROM HEIGHTS	1	0:06:00	0:06:00
RESCUE - RESCUE FROM WATER	5	1:20:03	0:16:01
RESCUE - RESCUE OF SMALL ANIMALS	3	2:03:51	0:41:17
RESCUE - RESCUE OF LARGE ANIMALS	4	2:20:51	0:35:13
SPECIAL SERVICE - RELEASE	4	2:24:50	0:36:13
SPECIAL SERVICE - PERSON SHUT IN LIFT	13	5:01:42	0:23:12
SPECIAL SERVICE - PERSON(S) LOCKED IN	5	1:01:23	0:12:17
SPECIAL SERVICE - PERSON(S) LOCKED OUT	1	0:15:51	0:15:51
SPECIAL SERVICE - ATTEMPTED SUICIDE	1	0:56:18	0:56:18
SPECIAL SERVICE - INTERNAL FLOODING	3	2:33:31	0:51:10
TRANSPORT - RTC PERSONS TRAPPED SMALL VE	28	19:38:19	0:42:05
TRANSPORT - RTC PERSONS TRAPPED LARGE VE	1	0:46:41	0:46:41
TRANSPORT - RTC PERSONS TRAPPED FIRE SMA	1	1:30:06	1:30:06
TRANSPORT - RTC SCENE SAFETY	12	9:00:49	0:45:04
TRANSPORT - AIRCRAFT LIGHT	3	1:03:09	0:21:03
TRANSPORT - BOAT ON FIRE	1	0:43:49	0:43:49
TRANSPORT - SMALL VEHICLE ON FIRE	72	39:35:18	0:32:59
TRANSPORT - LARGE VEHICLE ON FIRE	19	12:38:39	0:39:56

RSP.7.03 - OTB Mobilisations out of BFRS Grounds

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 10%
	Prev 5 year	36	50	41	54	53	40	49	39	45	39	32	36	G	Within 10%
	2025/2026	58	84	88	69	70	67							A	> 10%
	Status	R	R	R	R	R	R							R	> 20%
Cumulative														What is good	
	Prev 5 year	36	86	127	181	234	274	323	362	407	445	478	514	Within range is better	
	2025/2026	58	142	230	299	369	436								
	Status	R	R	R	R	R	R								

Ref	RSP.7.03	Number of mobilisations of appliance from BFRS into Over The Border (OTB) grounds.
Owner	Response	
Comparison	Previous five year average	
Delivery Group	Service Delivery	

Below is breakdown of where BFRS supported other Fire and Rescue Services with incidents outside of Buckinghamshire and Milton Keynes, during Q2 2025-2026.

Station	Wholetime/ On-Call	Appliance Type	Appliances Assigned	Time Unavailable
Broughton	WT	Pump	13	7:12:43
Broughton	OC	Pump	1	0:29:36
Newport Pagnell	WT	Pump	3	1:24:34
West Ashland	WT	Special	3	9:34:29
West Ashland	WT	Pump	20	13:54:03
West Ashland	WT	Pump	6	5:58:15
Aylesbury	WT	Pump	24	17:29:24
Aylesbury	WT	Pump	4	3:26:07
Buckingham	WT	Pump	21	14:51:45
Brill	OC	Pump	3	1:30:23
Waddesdon	OC	Pump	1	0:18:03
Aylesbury (USAR)	WT	USAR	1	1:41:57
Aylesbury (USAR)	WT	USAR	1	3:17:44
Aylesbury (USAR)	WT	USAR	3	0:35:43
Amersham	WT	Pump	4	1:31:55
Chesham	OC	Special	1	1:05:06
High Wycombe	WT	Aerial	8	3:21:11
High Wycombe	WT	Special	2	2:21:09
High Wycombe	WT	Pump	25	23:36:14
High Wycombe	WT	Pump	17	13:16:04
Princes Risborough	OC	Pump	1	0:13:23
Princes Risborough	OC	Special	4	5:34:20
Marlow	OC	Pump	2	1:38:41
Marlow	OC	Special	1	0:27:10
Beaconsfield	WT	Pump	16	8:07:03
Beaconsfield	WT	Boat	1	2:54:45
Gerrards Cross	WT	Pump	20	10:01:59
Total			206	155:53:46

Service	Appliances Assigned	Time Unavailable
Berkshire	64	33:32:19
Oxfordshire	57	53:11:47
Bedfordshire	35	29:46:26
Northamptonshire	25	22:53:57
Hertfordshire	18	12:31:49
London	7	3:57:29
Total	206	155:53:46

AN INCLUSIVE, HEALTHY AND ENGAGED WORKFORCE



PPL.1.01 - Actual vs Establishment - Wholetime

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	>100%
	Target	301	301	301	301	301	301	301	301	301	301	301	301	G	> 94.9%
	2025/2026	314	312	310	310	307	310							A	< 95%
	Status	B	B	B	B	B	B							R	< 90%
Average YTD														What is good	
	Target	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	Closer to Target	
	2025/2026	104%	104%	104%	103%	103%	103%								
	Status	B	B	B	B	B	B								

Ref	PPL.1.01	Total number of people in Wholetime roles v's budgeted establishment as at the last day of the month.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

Throughout quarter two, we've have completed the Wholetime Firefighter Campaign and the successful applicants— our new Wholetime Firefighter Apprentices - commenced employment on 22 September 2025 and will be undertaking their in-house training until Monday 13th October and then move onto their training at Fire Service College. This cohort includes one internal candidate from the Prevention team and two On Call employees, reflecting our commitment to internal development and career progression. This recruitment outcome is fully aligned with our workforce planning, onboarding a cohort of six allows us to maintain operational strength while preserving flexibility for future workforce adjustments.

As of September, our projected monthly wholetime leaver rate has increased from 0.9 to 1.2. We have had two Wholetime employees leave this month, one Firefighter and one Crew Commander. There has also been one Firefighter transfer over to a Support role.

Looking ahead, we are planning a Transferee intake for 2027. However, we will continue to monitor workforce data on a monthly basis to inform decision-making and ensure our recruitment strategy remains responsive and robust. Any further Operational recruitment will be carefully evaluated in line with evolving organisational needs.

Role	Head Count
Senior Management	3 (1 Temp)
Area Commander	2
Group Commander	7 (1 Temp)
Station Commander	20 (1 SC on secondment)
Watch Commander	44
Crew Commander	53
Firefighter	181 (inc 2 FF on secondment & 1 FF on sabbatical)
Total establishment	310

PPL.1.02 - Actual vs Establishment - On-Call

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	> 95%
	Target	96	96	96	96	96	96	96	96	96	96	96	96	G	> 89.9%
	2025/2026	60.0	59.8	60.8	59.7	59.5	55.7							A	< 90%
	Status	R	R	R	R	R	R							R	< 85%
Average YTD															
	Target	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	What is good	
	2025/2026	62%	62%	63%	63%	62%	62%							Closer to Target	
	Status	R	R	R	R	R	R								

Ref	PPL.1.02	Total number of people in On-Call roles v's budgeted establishment (FTE) as at the last day of the month.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

While the budgeted Full-Time Equivalent (FTE) for On-Call stations is 96, it is important to note that this figure does not directly equate to headcount. As highlighted by HR and Finance, a single FTE may be fulfilled by multiple individuals, reflecting the flexible nature of On-Call contracts.

Since the last quarter, we opened up our On-Call Firefighter recruitment campaign which went live on 1 September 2025. Once the campaign closes, the HR Team will work closely with the On Call Managers to progress the applications through the recruitment process. Importantly, we are not placing a cap on the number of recruits from this campaign. Instead, we are adopting a phased approach to onboarding, allowing us to keep candidates engaged with 'Welcome/Brew with a Crew evenings' and bring them in gradually throughout the year. These initiatives support continuous progress toward our establishment targets while ensuring operational readiness and integration at station level.

The September FTE figures were shaped by several key changes including current employees increasing or decreasing their hours of availability and current Wholetime employees taking on new On Call contracts, alongside their Wholetime roles.

Our On-Call workforce comprises of 55.5 Full Time Equivalents (FTE), represented by a total of 121 individual employees. Of these, 52 employees are dual contract, serving as both Wholetime and On-call in Bucks. This accounts for 43% of the total On-Call workforce.

In addition, we have 8 employees who are Wholetime with us and doing On-Call in another Service. These Services are; Northamptonshire, Oxfordshire and Bedfordshire.

PPL.1.03 - Actual vs Establishment - Support

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	>100%
	Target	133.1	135.1	135.1	137.1	137.1	137.1							G	> 94.9%
	2025/2026	128.3	128.3	130.3	131.3	130.9	128.1							A	< 95%
	Status	G	A	G	G	G	A							R	< 90%
%															
	Target	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	What is good	
	2025/2026	96.4%	95.7%	95.9%	95.9%	95.8%	95.4%							Closer to Target	
	Status	G	G	G	G	G	G								

Ref	PPL.1.03	Total number of people in Support roles v's budgeted establishment as at the last day of the month.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

The table below presents the current status of our support establishment over the last quarter, comparing targeted versus actual Full-Time Equivalent (FTE) figures.

Month	Target	FTE
July	137.11	131.25
	2 x People Business Partner	
August	137.11	130.92
	No change	
September	137.11	128.13
	No change	

Key Movements:

Support Full-Time Equivalent (FTE) levels continue to demonstrate month-on-month variation, reflecting the dynamic nature of our workforce and the ongoing evolution of staffing arrangements across the Organisation. These fluctuations are influenced by a range of factors, including employee turnover, internal role changes, and adjustments to individual working patterns.

During this quarter, we recorded the departure of five support employees, each leaving for a variety of reasons such as career progression, retirement, or personal circumstances. In parallel, six new support employees have joined the Organisation, contributing fresh skills and perspectives to our teams. These new starters are being integrated into their respective departments, with onboarding plans tailored to support a smooth transition and early contribution to service delivery.

In addition to these changes in headcount, other variances in the reported FTE figures stem from existing employees modifying their contracted hours. This includes individuals opting to reduce their working hours to accommodate flexible working arrangements, as well as others increasing their hours in response to operational needs or personal preference. Such adjustments are a natural part of our commitment to supporting a flexible and responsive working environment.

The targeted FTE figure for 2025/26 encompasses both budgeted and temporary positions, with the latter playing a critical role in enabling departments to manage increased workloads and deliver priority projects within required timeframes. Where possible, we aim to recruit into roles ahead of planned leavers, allowing for a comprehensive and effective handover process. Recent months have seen a high volume of recruitment activity, with the majority of vacancies successfully filled, contributing to a more resilient workforce. FTE levels also fluctuate due to existing employees adjusting their contracted hours, either increasing or decreasing their FTE hours.

These movements reflect ongoing efforts to align resources with service demands. While overall FTE remains below the target, staffing levels are closely monitored to ensure continuity and quality of service delivery.

The HR Operations team continues to collaborate closely with managers, providing support throughout recruitment campaigns to ensure we attract and appoint the most suitable candidates for each role.

PPL.1.04 - Staff Turnover

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	
	Target	< 1%	< 1%	< 1%	< 1%	< 1%	< 1%	< 1%	< 1%	< 1%	< 1%	< 1%	< 1%	G	<= 1% per month
	2025/2026	1.4%	0.6%	0.6%	0.6%	0.6%	0.8%							A	> 1% per month
	Status	A	G	G	G	G	G							R	> 1.9% per month
YTD															
	Target	< 1%	< 2%	< 3%	< 4%	< 5%	< 6%	< 7%	< 8%	< 9%	<10%	<11%	<12%	What is good	
	2025/2026	1.4%	2%	2.6%	3.2%	3.8%	4.6%							Less is better	
	Status	A	G	G	G	G	G								

Ref	PPL.1.04	Percentage of employees who leave the Service, expressed as a percentage of the total workforce.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

During the second quarter of the financial year, the organisation recorded a total of eleven employee leavers. This comprised of two operational and three support employees who resigned, and four operational and two support employees who retired. These movements reflect the natural ebb and flow of workforce dynamics and are consistent with anticipated patterns for this period.

While we continue to monitor our monthly leaver rate as part of broader workforce planning efforts, overall turnover remains within acceptable and manageable thresholds. The organisation remains committed to maintaining service continuity and operational resilience through proactive planning and strategic resourcing. To support this, we are working closely with managers across departments to identify potential risks and required recruitment interventions. These include succession/workforce planning, with early recruitment to enable effective handovers, and ongoing engagement initiatives to support employee satisfaction and career development.

Our approach ensures that staffing levels are aligned with service needs, and that we remain agile in responding to changes within our workforce. By maintaining a focus on retention and forward planning, we aim to safeguard organisational stability and deliver consistent, high-quality service outcomes.

PPL.2.05 - Maintenance of Operational Skills - WT

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	> 10% per month
	Target	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	G	> 7.99% per month
	2025/2026	4.2%	10.7%	11.9%	11.4%	4.3%	7.3%							A	< 8% per month
	Status	R	B	B	B	R	A							R	< 6% per month
Cumulative														What is good	
	Target	8%	16%	24%	32%	40%	48%	56%	64%	72%	80%	88%	96%	Higher is better	
	2025/2026	4.2%	14.9%	26.8%	38.2%	42.5%	49.8%								
	Status	R	A	G	G	G	G								

Ref	R3.01	Progress against maintenance of operational skills by wholetime firefighters and supervisory managers.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

During quarter 2 of 2025/26, progress in maintenance of operational skills (MOS) among wholetime firefighters showed steady performance with cumulative results indicating steady growth, which aligned with targets.

Performance in the month of July was exceptionally high, with the completion rate of 11.4% well above the target of 10% and continuing the good results experienced at the end of Q1. This boosted cumulative progress, surpassing the 32% cumulative target to reach 38.1%.

August experienced a sharp decline to 4.3%, placing it in the red category. Despite this dip, the cumulative figure remained strong at 42.5%, suggesting that prior gains helped buffer the impact.

A modest rebound in September to 7.3% brought performance up just below the target of 8%. Cumulative progress continued to improve to 49.8%, keeping it ahead of the 48% target. This figure is slightly lower than the previous year at this stage (51% in 2024).

The cumulative performance remains on track, consistently above target throughout Q2. Despite the underperformance in August, overall quarterly results reflect successful retention of progress due to a strong July and acceptable September performance. The fluctuation in monthly performance is reflective of the peak annual leave period for wholetime firefighters, as well as the training staff who were not available during this period for station training visits.

Looking forward, training staff are already conducting scheduled station training visits which will supplement the regular monthly training plans for every station. The Training Assurance Manager has disseminated the Q2 report to all operational staff and distributed individual watch/ department reports to each of the station commanders for audit and review.

PPL.2.07 - Mandatory E-Learning

Wholetime

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Target	11%	22%	33%	44%	55%	66%	77%	88%	95%	95%	95%	95%
2025/2026	43%	46%	48%	65%	68%	69%						
Status	B	B	B	B	B	B						

B	> Target
G	< 0 - 9.9 %
A	< 10 - 19.9 %
R	< 20%

Support

	8%	16%	24%	40%	56%	72%	80%	88%	95%	95%	95%	95%
Target	8%	16%	24%	40%	56%	72%	80%	88%	95%	95%	95%	95%
2025/2026	33%	34%	41%	56%	61%	62%						
Status	B	B	B	B	B	A						

What is good
Higher is better

Ref	PPL.2.07	All BFRS staff are required to complete a number of mandatory e-learning packages every year. These packages cover three main subjects across Health & Safety, Equality Diversity & Inclusion and Data Protection. Within the subjects, there are packages such as Safety Event Reporting, ED&I in the Workplace and Responsible for Information.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

While there was a slight increase of completion over the period, there is a need for Support staff to focus on completion of the Q2 packages, as the KPI for September is 72%. Throughout September, comms will be sent to all support staff managers to highlight this.

Throughout Q3, the focus for eLearning is on Data Protection. Throughout Q3, Safeguarding and Prevent training will be reviewed with a view to be included in the mandatory eLearning packages for all staff and reports will be generated to allow managers to track their teams completion of this package.

PPL.3.01 - Appraisal Completion

Appraisals

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Target	30%	60%	90%	95%	95%	95%	95%	95%	95%	95%	95%	95%
2024/2025	71%	79%	87%	90%	92%	95%						
Status	B	B	A	A	A	B						

B	>10% of target or 95%
G	=> 0% of Target
A	< 0% of target
R	< 10% of target

Ref	PPL.3.01	The percentage of all staff that have received their 2024/2025 end of year review.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

What is good
Higher is better

As of the end of September, returns have increased to 95% vs last month, 92%. A final push for returns has resulting us achieving the target.

Monthly reports continue to be generated to provide managers with a clear indication of where our gaps in appraisal returns are. These reports also detail the % return vs the KPI so they are aware of how the Service is performing against the target. Training continues to be provided to support completion with further training has been scheduled throughout September and October to ensure we are working to overcome any barriers to appraisal facilitation and completion.

The internally developed Thrive Leadership Programme will focus on the ability of our leaders to have better quality and more curious conversations using tools like GROW and coaching techniques. One of the moments where this is evident is within 1:1 meetings, daily conversations and also specifically documented within an appraisal conversation which will be covered in Module 3. We expect that the quality and confidence of the conversation that supports the documentation of this process will improve and that the individuals being assessed are more motivated and feel valued as a result.

PPL.3.02 - Objectives & Half Year Review

Objectives

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Target	30%	60%	90%	95%	95%	95%	95%	95%	95%	95%	95%	95%
2025/2026	32%	47%	82%	89%	93%	96%						
Status	G	R	A	A	A	B						

B	>10% of target or 95%
G	=> 0% of Target
A	< 0% of target
R	< 10% of target

Review

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Target	-	-	-	-	-	25%	50%	75%	75%	75%	75%	75%
2025/2026	-	-	-	-	-	35%						
Status	-	-	-	-	-	G						

What is good
Higher is better

Ref	PPL.3.02	The percentage of all staff that have received their 2025/2026 Objectives, and have then had their half year review.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

As of the end of September, objective setting returns have increased to 96% vs last month, 93%. A final push for returns has resulting us achieving the target.

As of this month, we are now reporting on the returns for half year reviews, this month exceeding our target of 25% and an excellent return rate for the first month of reporting.

Monthly reports continue to be generated to provide managers with a clear indication of where our gaps in appraisal returns are. These reports also detail the % return vs the KPI so they are aware of how the Service is performing against the target. Training continues to be provided to support completion with further training has been scheduled throughout September and October to ensure we are working to overcome any barriers to appraisal facilitation and completion.

The internally developed Thrive Leadership Programme will focus on the ability of our leaders to have better quality and more curious conversations using tools like GROW and coaching techniques. One of the moments where this is evident is within 1:1 meetings, daily conversations and also specifically documented within an appraisal conversation which will be covered in Module 3. We expect that the quality and confidence of the conversation that supports the documentation of this process will improve and that the individuals being assessed are more motivated and feel valued as a result.

PPL.4.01 - Absence - Wholetime Staff

Count	Target	-	-	-	-	-	-	-	-	-	-	-	B	< 20%
	2025/2026	40	60	29	39	36	33						G	=< 0%
	Status	-	-	-	-	-	-	-	-	-	-	-	A	> 0%
													R	> 10%
Shifts	Target	297	295	293	293	291	293						What is good	
	2025/2026	283	360	210	269	266	265						Less is better	
	Status	G	R	B	G	G	G							

Ref	PPL.4.01	The number of occasions wholetime employees are absent due to sickness and number of working days lost per month due to sickness. This covers short and long-term sickness. The target is based on the national average of days/shifts recorded per WT FF across 2024-25. This does not account for seasonal trends.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

Quarter 2 Overview: Absence levels—both in terms of frequency and total days lost—remained within acceptable parameters, with the exception of a notable spike in May, which was due to a large number of gastroenteritis cases.

Long-Term Sickness Absence: During Quarter 2, the number of ongoing long-term sickness cases rose steadily: from seven in July, to nine in August, and reaching 14 in September. Although September recorded the highest number of cases, six of these were resolved within the same month.

The top reasons for long-term sickness absence within Quarter 2 was musculoskeletal injuries, followed by mental-health – stress (work related). Whilst the majority of musculoskeletal cases are ongoing and continue to be managed under the Service’s Attendance Management Procedure, all cases of mental-health – stress have concluded.

Short-Term Sickness Absence: The number of working days lost due to short-term sickness cases steadily decreased throughout Quarter 2; from 140 days in July, to 137 days in August and down to 94 days in September.

Short-term sickness cases showed a downward trend throughout Quarter 2, decreasing from 30 in July to 27 in August, and further to 19 in September. Most of these absences were self-certified and lasted fewer than seven days.

The top reasons for short-term sickness absences within Quarter 2 was gastroenteritis / sickness / diarrhoea / abdominal pain, followed by musculoskeletal injuries.

Emerging Trends: Across both long-term and short-term sickness absence cases, musculoskeletal issues have emerged as a recurring cause. The People team is investigating this trend and exploring targeted training and resources to better support employees affected by such conditions.

The CIPD Biennial Report on Health and Wellbeing at Work, published 09 September 2025 (which provides benchmarking data and analysis on current and emerging health and wellbeing trends and practices) reported a sharp increase in sickness absence, currently being the highest in more than 15 years. The most common causes of absence for short-term was minor illness, e.g. cold/flu, headache, mental ill health, stress and musculoskeletal injuries and for long-term was mental ill health, musculoskeletal, long-term ill health conditions, e.g. neurological, respiratory conditions, cancer and stress.

The report stated the most common interventions include access to counselling, phased returns to work and access to an Employee Assistance Programme. All of these are provided by the Service. What we are looking at in addition is more targeted interventions, such as sessions on musculoskeletal, training and toolkits for managers in spotting the signs of mental ill health and having sensitive conversations.

Ongoing Focus and Support: Efforts to manage sickness absence continue to be a priority, with regular governance reviews by the People Delivery group aimed at driving consistent reductions. Additionally, wellbeing initiatives—including promotional events, resources, and training opportunities—will be made available to help employees access support and adopt healthier lifestyle choices.

Absences are handled at local level, with the People team assisting line managers to ensure support is given to absence case management. Key priorities include closing absence records to maintain accurate data, conducting return-to-work meetings, and continuous monitoring.

During the autumn and winter months, short-term sickness absence due to cold and flu typically increases. To help protect employees against the most common flu viruses, the Service’s Occupational Health provider will be running flu vaccination clinics during October and November. These clinics offer flu jabs to employees who wish to take advantage of this health benefit.

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PPL.4.03 - Absence - On-Call Staff

Count

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Target	-	-	-	-	-	-	-	-	-	-	-	-
2025/2026	10	13	8	11	11	12						
Status	-	-	-	-	-	-	-	-	-	-	-	-

Days

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Target	169	167	169	169	169	169						
2025/2026	112	183	136	209	252	242						
Status	B	A	G	R	R	R						

B	< 20%
G	=< 0%
A	> 0%
R	> 10%

What is good
Less is better

Ref	PPL.4.03	The number of occasions OC employees are absent due to sickness and calendar days (not shifts) lost per month due to sickness. This covers short and long-term sickness. The target is based on the national average of days/shifts recorded per OC FF across 2024-25. This does not account for seasonal trends.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

Long-Term Sickness Absence: During Quarter 2, the number of ongoing long-term sickness absences cases rose steadily; from five in July and August to seven in September. A number of these cases have been absent for a significant period and are being appropriately managed through the Service’s Attendance Management Procedure.

The top reasons for long-term sickness absence within Quarter 2 was musculoskeletal injuries. Cases continue to be appropriately managed under the Service’s Attendance Management Procedure, in conjunction with Occupational Health advice.

Short-Term Sickness Absence: The number of working days lost due to short-term sickness cases fluctuated throughout Quarter 2, increasing from 64 days in July, to 97 days in August and down to 44 days in September. Decreasing from six reported cases in July and August to five in September. Most of these absences were self-certified and lasted fewer than seven days.

The top reasons for short-term sickness absence within Quarter 2 was ear/nose/throat issues, followed by gastroenteritis/sickness/diarrhoea/abdominal pain and musculoskeletal injuries.

Emerging Trends: For long-term sickness absence cases, musculoskeletal issues have emerged as a recurring cause. The People team is investigating this trend and exploring targeted training and resources to better support employees affected by such conditions.

The CIPD Biennial Report on Health and Wellbeing at Work, published 09 September 2025 (which provides benchmarking data and analysis on current and emerging health and wellbeing trends and practices) reported a sharp increase in sickness absence, currently being the highest in more than 15 years. The most common causes of absence for short-term was minor illness, e.g. cold/flu, headache, mental ill health, stress and musculoskeletal injuries and for long-term was mental ill health, musculoskeletal, long-term ill health conditions, e.g. neurological, respiratory conditions, cancer and stress.

The report stated the most common interventions include access to counselling, phased returns to work and access to an Employee Assistance Programme. All of these are provided by the Service. What we are looking at in addition is more targeted interventions, such as sessions on musculoskeletal, training and toolkits for managers in spotting the signs of mental ill health and having sensitive conversations.

PPL.4.05 - Absence - Support Staff

Count		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	< 20%
	Target	-	-	-	-	-	-	-	-	-	-	-	-	G	=< 0%
	2025/2026	14	19	14	17	22	17							A	> 0%
	Status	-	-	-	-	-	-	-	-	-	-	-	-	R	> 10%
Shifts														What is good	
	Target	103	103	105	105	105	103							Less is better	
	2025/2026	122	117	58	44	88	77								
	Status	R	R	B	B	G	B								

Ref	PPL.4.05	The number of occasions SS employees are absent due to sickness and working days (shifts) lost per month due to sickness. This covers short and long-term sickness. The target is based on the national average of days/shifts recorded per FTE across 2024-25. This does not account for seasonal trends.
Owner	People Services	
Comparison	Target	
Delivery Group	People Delivery Group	

Quarter 2 Overview: Absence levels—both in terms of frequency and total days lost—generally remained within acceptable limits. However, April and May saw a noticeable increase, primarily driven by a combination of post-operative recovery and mental health-related absences. Additionally, an issue was identified where the non-closure of employee absence records contributed to inflated overall absence figures.

Long-Term Sickness Absence: During Quarter 2, the number of ongoing long-term sickness absences cases rose steadily; from zero in July, to two in August and September. The top reason for long-term sickness absence within Quarter 2 was post-operative recovery.

Short-Term Sickness Absence: The number of working days lost due to short-term sickness cases fluctuated throughout Quarter 2, increasing from 40 days in July, to 49 days in August and down to 47 days in September. The number of reported cases fluctuated from 16 cases in July, to 20 in August to 15 in September. Most of these absences were self-certified and lasted fewer than seven days. The top reasons for short-term sickness absence within Quarter 2 was gastroenteritis / sickness / diarrhoea / abdominal pain, followed by cold/cough/influenza.

Emerging Trends: There are no trends for long-term and short-term sickness absences.

The CIPD Biennial Report on Health and Wellbeing at Work, published 09 September 2025 (which provides benchmarking data and analysis on current and emerging health and wellbeing trends and practices) reported a sharp increase in sickness absence, currently being the highest in more than 15 years. The most common causes of absence for short-term was minor illness, e.g. cold/flu, headache, mental ill health, stress and musculoskeletal injuries and for long-term was mental ill health, musculoskeletal, long-term ill health conditions, e.g. neurological, respiratory conditions, cancer and stress.

The report stated the most common interventions include access to counselling, phased returns to work and access to an Employee Assistance Programme. All of these are provided by the Service. What we are looking at in addition is more targeted interventions, such as sessions on musculoskeletal, training and toolkits for managers in spotting the signs of mental ill health and having sensitive conversations.

Ongoing Focus and Support: Efforts to manage sickness absence continue to be a priority, with regular governance reviews by the People Delivery group aimed at driving consistent reductions. Additionally, wellbeing initiatives—including promotional events, resources, and training opportunities—will be made available to help employees access support and adopt healthier lifestyle choices.

Absences are handled at local level, with the People team assisting line managers to ensure support is given to absence case management. Key priorities include closing absence records to maintain accurate data, conducting return-to-work meetings, and continuous monitoring.

The report stated the most common interventions include access to counselling, phased returns to work and access to an Employee Assistance Programme, all of these are provided by the Service. What we are looking at in addition is more targeted interventions, such as sessions on musculoskeletal, training and toolkits for managers in spotting the signs of mental ill health and having sensitive conversations.

PPL.5.02 - Grievances

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	
	2024/2025	1	1	4	2	1	4	4	2	1	1	4	3	G	< 2 per month
	2025/2026	3	2	0	2	1	1							A	2 per month
	Status	R	A	G	A	G	G							R	> 2 per month
YTD															
	2024/2025	1	2	6	8	9	13	17	19	20	21	25	28		What is good
	2025/2026	3	5	5	7	8	9								Less is better
	Status	R	A	G	G	G	G								

Ref	PPL.5.02	The number of new grievances recorded each month. Figures include both informal and formal grievances. Where an informal grievance is escalated to being a formal grievance, this will be counted twice.
Owner	People Services	
Comparison	Previous Year	
Delivery Group	People Delivery Group	

The number of grievances raised – both in terms of those raised during the month and overall within the first two quarters of 2025 – remained low, other than in April, where three informal grievances were raised in one month.

Of the nine grievances raised to date during this reporting year, five cases involved Wholetime employees, one an On-call employee and three Support Services employees.

As of the end of September, there were four active cases — three being addressed through the formal procedure and one being managed informally. Of the five cases that have been closed, all were handled informally. Two required no further action following management intervention, one was withdrawn after a management discussion, and one progressed to the formal stage after remaining unresolved during the informal process.

The average time for grievance closure from April to September is 26 days.

We continually review grievances raised to identify if any trends are appearing and to date none have been established. Following the completion of the grievance we undertake a review to identify any learns either from the process itself or for the organisation.

We are committed to addressing concerns promptly and at the most appropriate level. All grievances are handled with transparency, fairness, and respect. The number of grievances raised reflects employees’ confidence in the process. When a concern involves an employee, it is managed with fairness and proportionality. We ensure that each issue is addressed using the correct procedures, with suitable resources allocated for investigation and appropriate support provided to all parties involved. Our goal is to resolve matters efficiently and within a reasonable timeframe.

PPL.5.04 - Disciplinarys

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	
	2024/2025	1	1	0	2	0	2	1	3	0	2	5	6	G	< 2 per month
	2025/2026	0	0	0	0	1	1							A	2 per month
	Status	G	G	G	G	G	G							R	> 2 per month
YTD														What is good	
	2024/2025	1	2	2	4	4	6	7	10	10	12	17	23		
	2025/2026	0	0	0	0	1	2								
	Status	G	G	G	G	G	G							Less is better	

Ref	PPL.5.04	The number of new disciplinarys recorded each month.
Owner	People Services	
Comparison	Previous Year	
Delivery Group	People Delivery Group	

The number of discipline cases – both in terms of those raised during the month and overall within the first two quarters of 2025 – remained low, with no cases raised between April and July and one case raised in August and one in September.

At the end of Quarter 2 there were four live cases (some relating to previous reporting year) being addressed formally through the Service’s Discipline Procedure and at various stages of the process. These cases involved matters from serious misconduct, performance and unacceptable behaviour.

We continually review disciplinarys to identify if any trends are appearing and to date none have been established. Following the completion of the case we undertake a review to identify any learns either from the process itself or for the organisation.

We are committed to addressing concerns promptly and at the most appropriate level. All discipline cases are handled with transparency, fairness, and respect. When a concern involves an employee, it is managed with fairness and proportionality. We ensure that each issue is addressed using the correct procedures, with suitable resources allocated for investigation and appropriate support provided to all parties involved. Our goal is to resolve matters efficiently and within a reasonable timeframe.

PPL.5.06 - Independent Reporting Line Calls

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	
	Target	-	-	-	-	-	-	-	-	-	-	-	-	G	
	2025/2026	2	3	1	0	5	0							A	
	Status	-	-	-	-	-	-	-	-	-	-	-	-	R	
YTD														What is good	
	Target	-	-	-	-	-	-	-	-	-	-	-	-	Monitor	
	2025/2026	2	5	6	6	11	11								
	Status	-	-	-	-	-	-	-	-	-	-	-	-		

Ref	PPL.5.06	The number of independent reporting line calls received each month
Owner	People Services	
Comparison	-	
Delivery Group	People Delivery Group	

No concerns were raised in September. Five concerns were raised in August, no concerns were raised in July,

Our Safecall numbers show that employees have the confidence to raise issues, and when a concern or complaint is raised about an employee they are treated fairly and proportionately.

Whilst the concerns have been reported separately, and are from different staffing groups across the Service, all are assessed through the assessment panel and investigated accordingly.

PPL.5.09 - Complaints

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	0
	Target	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2	G	=< 1 per month
	2025/2026	0	2	2	2	3	5							A	> 1 per month
	Status	B	A	A	A	A	R							R	> 2 per month
YTD	Target	<2	<3	<4	<5	<6	<7	<8	<9	<10	<11	<12	<13	What is good	
	2025/2026	0	2	4	6	9	14							Less is better	
	Status	B	G	A	A	A	R								

Ref	PPL.5.09	Number of complaints received each month. This does not identify if the complaints were upheld.
Owner	Information Governance	
Comparison	Target	
Delivery Group	People Delivery Group	

There were ten complaints received between July 2025 and September 2025. Of these ten, three were upheld.

A breakdown of the types of complains can be found below:

6 - Miscellaneous

1 - Damage to Property

1 - Driving

1 - Community Engagement

1 – Incident

PPL.5.10 - Compliments

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	>5 per month
Monthly	2024/2025	1	3	7	4	6	4	3	8	6	5	11	4	G	>0 per month
	2025/2026	0	2	7	5	16	6							A	
	Status	G	G	B	G	B	B							R	
YTD	2024/2025	1	4	11	15	21	25	28	36	42	47	58	62	What is good	
	2025/2026	0	2	9	14	30	36							More is better	
	Status	G	G	G	G	B	B								

Ref	PPL.5.10	Number of compliments received each month.
Owner	Information Governance	
Comparison	Prev Year	
Delivery Group	People Delivery Group	

Between July and September 2025, we received a total of 27 compliments. A detailed breakdown of the areas these compliments pertain to is provided below:

1 – Educational

7 – Miscellaneous

3 – Community Engagement

4 – Home Fire Safety Visit

12 – Incident

PPL.6.03 - Injury Rate

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
	2024/2025	5.99	7.95	6.00	4.02	1.97	7.72	5.80	9.70	9.65	5.83	7.78	3.83	B < 5 per month
	2025/2026	1.91	7.68	1.90	5.74	7.66	1.92							G < 8 per month
	Status	B	G	B	G	G	B							A < 10 per month
YTD Avg		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
	2024/2025	5.99	6.97	6.65	6.00	5.18	5.62	5.64	6.16	6.55	6.48	6.60	6.36	What is good
	2025/2026	1.91	4.79	3.82	4.30	4.97	4.47							Less is better
	Status	B	B	B	B	B	B							

Ref	PPL.6.03	The injury rate give the number of people injured over a month, based on a group of 1,000 employees or workers.
Owner	Health & Safety	
Comparison	Previous year	
Delivery Group	People Delivery Group	

PPL.6.04 - Workplace injuries

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
	2024/2025	3	4	3	2	1	4	3	5	5	3	4	2	B 0 per month
	2025/2026	1	4	1	3	4	1							G =< 3 per month
	Status	G	A	G	G	A	G							A < 6 per month
YTD		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
	2024/2025	3	7	10	12	13	17	20	25	30	33	37	39	What is good
	2025/2026	1	5	6	9	13	14							Less is better
	Status	G	G	G	G	G	G							

Ref	PPL.6.04	The number of workplace injuries reported across the Service. This includes operational staff, support staff, agency and visitors.
Owner	Health & Safety	
Comparison	Previous year	
Delivery Group	People Delivery Group	

Of the eight record workplace injuries, three were deemed moderate, the remaining five were minor.

The three moderate related to;

- Following water rescue training, a firefighter became ill and required more than seven calendar days off work, triggering a RIDDOR report. As a result of this absence, future water based training will now take place at an alternative location. Additionally, water training for Bucks fire staff will, from April 2026 take place at HR Wallingford which provides a controlled environment for water training.
- During a training session with the Service's boat, a firefighter slipped on a wet surface when entering the water and landed awkwardly on their right knee. Due to the absence lasting over seven calendar days, this triggered a RIDDOR report, as such making this a moderate injury.
- During an incident, while using a bucket of water on a charred area of ground, the action resulted in flames forming to a level that singed the firefighter's hair. Due to timings, this incident was still under investigation at the time of writing.

PPL.6.05 - RIDDOR reportable Incidents

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	
Monthly	2024/2025	1	0	1	1	0	2	1	1	1	2	2	0	G	< 1 per month
	2025/2026	0	2	1	1	1	0							A	=> 1 per month
	Status	G	R	A	A	A	G							R	=> 2 per month
YTD	2024/2025	1	1	2	3	3	5	6	7	8	10	12	12	What is good	
	2025/2026	0	2	3	4	5	5							Less is better	
	Status	G	R	A	A	A	G								

Ref	PPL.6.05	Number of safety incidents that required reporting to the HSE under RIDDOR 2013. This would include items such as RIDDOR reportable workplace injuries and RIDDOR reportable dangerous occurrences.
Owner	Health & Safety	
Comparison	Previous year	
Delivery Group	People Delivery Group	

The two RIDDOR reportable incidents related to;

- Following water rescue training, a firefighter became ill and required more than seven calendar days off work, triggering a RIDDOR report. As a result of this absence, future water based training will now take place at an alternative location. Additionally, water training for Bucks fire staff will, from April 2026 take place at HR Wallingford which provides a controlled environment for water training.
- During a training session with the Service's boat, a firefighter slipped on a wet surface when entering the water and landed awkwardly on their right knee. Due to the absence lasting over seven calendar days, this triggered a RIDDOR report, as such making this a moderate injury.

PPL.6.07 - Near Miss Events Recorded

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	<div>B</div> < 2 per month
	2024/2025	2	1	3	2	3	5	2	1	1	1	2	3	<div>G</div> < 4 per month
	2025/2026	1	1	2	0	4	1							<div>A</div> < 5 per month
	Status	B	B	G	B	A	B							<div>R</div> => 5 per month
YTD	Target	2	3	6	8	11	16	18	19	20	21	23	26	What is good
	2025/2026	1	2	4	4	8	9							Monitor
	Status	B	B	B	B	B	B							

Ref	PPL.6.07	Number of near miss events recorded across the Service. A near miss is where a safety event (an accident or incident) occurs, but no personal injury, damage or financial loss results.
Owner	Health & Safety	
Comparison	Previous year	
Delivery Group	People Delivery Group	

Of the five near miss events recorded, four were deemed to be minor with final event being major.

Due to the timing of this incident, this incident was still under investigation at the time of reporting.

MAKING THE MOST OF OUR FINANCES AND ASSETS



FIN.1.01 - Forecast - Outturn (£000's)

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
Target			42,989	42,989	42,989	42,989							B	Within 0.5%
Forecast	-	-	42,832	42,960	42,997	42,850							G	Within 1.0%
% Difference	-	-	-0.00%	-0.07%	0.02%	0.32%							A	Within 2.0%
Status	-	-	B	B	B	B							R	> 2% difference

What is good

Closer to Target

Ref	FIN.1.01
Owner	Finance
Comparison	Target
Delivery Group	Finance & Assets

The financial measure compares the approved revenue budget (target) against the forecast revenue outturn position (forecast). Negative % difference indicates an underspend whereas positive % difference indicating an overspend.

For more detail in relation to our financial position, please refer to the most recent Budget Monitoring Report (see link in Background Papers).

FIN.2.01 - Capital Spend (£000's)

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
Target			£8,801	£8,801	£8,801	£5,800							B	Within 0.5%
Forecast	-	-	£8,801	£8,801	£8,801	£5,825							G	Within 1.0%
% Difference	-	-	0%	0%	0%	0.4%							A	Within 2.0%
Status	-	-	B	B	B	B							R	> 2% difference

What is good
Closer to Target

Ref	FIN.2.01	The financial measure compares the approved revenue budget (target) against the forecast revenue outturn position (forecast). Negative % difference indicates an underspend whereas positive % difference indicating an overspend.
Owner	Property	
Comparison	Target	
Delivery Group	Finance & Assets	

For more detail in relation to our financial position, please refer to the most recent Budget Monitoring Report (see link in Background Papers).

FIN.2.03 - Energy Usage

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
Monthly	Target												B	
	2025/2026												G	
	Status												A	
Cumulative	Target												R	
	2025/2026													
	Status													

What is good
Less is better

Ref	FIN.2.02	
Owner	Property	
Comparison	Target	
Delivery Group	Finance & Assets	

The smart electricity meters across all our sites were activated in June 2025. The smart gas meters will be activated during Q2 so data will be available from the next quarter onwards. This pack will show the trend for our whole estate, but more detailed analysis comparing sites and looking at root causes of usage will be undertaken within the Property team.

FIN.3.01 - Wholetime Cost (£)

Monthly

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Target	-	-	22,126	22,126	22,269	22,669						
Forecast	-	-	22,541	22,483	23,044	22,914						
% Difference	-	-	1.9%	1.6%	1.7%	1.1%						
Status	-	-	A	A	A	A						

B	Within 0.5%
G	Within 1.0%
A	Within 2.0%
R	> 2% difference

What is good
Closer to Target

Ref	FIN.3.01	The financial measure compares the approved revenue for our wholetime operations budget (target) against the forecast revenue outturn position (forecast). Negative % difference indicates an underspend whereas positive % difference indicating an overspend.
Owner	Response	
Comparison	Target	
Delivery Group	Finance & Assets	

For more detail in relation to our financial position, please refer to the most recent Budget Monitoring Report (see link in Background Papers).

FIN.3.03 - On-Call Cost (£)

Monthly

	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Target	-	-	1,456	1,456	1,498	1,498						
Forecast	-	-	1,235	1,244	1,314	1,324						
% Difference	-	-	-15.2%	-14.6%	-12.3%	-11.6%						
Status	-	-	R	R	R	R						

B	Within 0.5%
G	Within 1.0%
A	Within 2.0%
R	> 2% difference

What is good
Closer to Target

Ref	FIN.3.03	The financial measure compares the approved revenue for our On-Call operations budget (target) against the forecast revenue outturn position (forecast). Negative % difference indicates an underspend whereas positive % difference indicating an overspend.
Owner	Response	
Comparison	Target	
Delivery Group	Finance & Assets	

For more detail in relation to our financial position, please refer to the most recent Budget Monitoring Report (see link in Background Papers).

FIN.5.01 - Overdue Internal Audits

High		Mar-25	Jul-25										
	Target	-	-	-	-	-	-	-	-	-	-	-	-
	2025/2026	0	0										
	Status	B	B										
Medium	Target	-	-	-	-	-	-	-	-	-	-	-	-
	2025/2026	2	0										
	Status	A	B										

B	0
G	1
A	2
R	>2

What is good	
Less is better	

Ref	FIN.5.01	<p>Each year an Internal Audit plan is agreed based on the risks and needs of the service.</p> <p>The progress and findings are reported to the Overview and Audit committee.</p> <p>This measure shows how many actions are overdue broken down by medium/high rating.</p>
Owner	PMO	
Comparison	Target	
Delivery Group	Finance & Assets	

The most recent progress on Internal Audit actions was taken to the Overview and Audit committee on the 16th July 2025 and can be found here: : [\(Public Pack\)Agenda Document for BMKFA Overview & Audit Committee, 16/07/2025 10:00](#) .

The next update is due October 2025

FIN.5.02 - Projects

On Track		Q1	Q2	Q3	Q4
		-	-	-	-
	2025/2026	28	29		
		-	-	-	-
Risk to Progress	Target	<3	<3	<3	<3
	2025/2026	4	6		
	Status	A	R		

B	0 off track
G	< 3 off track
A	< 5 off track
R	> 4 off track

What is good
Less is better


Ref	FIN.5.02	<p>The service sets out its Annual plan each year to support the delivery of the Community Risk management plan.</p> <p>Annual plan progress is reviewed monthly at the internal Programme Board.</p> <p>This measure shows how many projects the service has on track and the number of project that are Risk to Progress.</p>
Owner	PMO	
Comparison	Target	
Delivery Group	Finance & Assets	

There are 42 items on the 2025/26 Annual plan including 5 carried over from last year.

At the end of Q2, there are 5 projects that are now complete, 35 are currently in progress but we have seen an increase in the risk to progress projects to 6.

We review our project progress monthly at both the delivery groups and Programme board.

Risk to Progress projects are scrutinised more closely to understand what work/resource is needed to get them back on track.



OPTIMISING OUR TECHNOLOGY AND DATA

DDT.1.01 - Website - Active Users (000's)

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	> 15,000
	Prev 2 years	14.2	14.9	15.9	15.1	18.1	15.3	16.5	15.3	11.7	17.8	13.7	12.0	G	> 10,000
	2025/2026	11.0	11.9	12.5	13.0	13.9	10.7							A	=> 8,000
	Status	G	G	G	G	G	G							R	< 8,000
Cumulative	Prev 2 years	14.2	29.1	45.0	60.1	78.3	93.5	110	125	137	155	169	181	What is good	
	2025/2026	11.0	22.9	35.4	48.4	62.2	72.9							Higher is better	
	Status	G	G	G	G	G	G								

Ref	DDT.1.01	Our website is our biggest public communication and engagement channel. Website traffic is monitored for user analysis. Currently, we monitor this superficially due to capacity and conflicting priorities. However it enables us to react, when required, yielding valuable insights to help identify audience, improve the customer experience and website performance.
Owner	MarComms	
Comparison	Previous 2 years	
Delivery Group	Finance & Assets	

Although the number of users is lower than previous years, it has still been consistently above the target of 10,000 per month throughout the first quarter.

DDT.1.02 - Social Media - Engagement (000's)

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	> 15,000
	Prev 3 year	14.6	11.5	10.8	21.9	17.1	13.3	11.5	11.4	13.5	14.8	18.2	19.7	G	> 10,000
	2025/2026	32.4	24.1	21.3	15.5	24.3	26.8							A	=> 8,000
	Status	B	B	B	B	B	B							R	< 8,000
Cumulative	Prev 3 year	14.6	26.2	36.9	58.8	75.9	89.2	100.7	112.1	125.6	140.4	158.6	178.3	What is good	
	2025/2026	32.4	56.5	77.8	93.2	117.5	144.3							Higher is better	
	Status	B	B	B	B	B	B								

Ref	DDT.1.02	Total number of unique engagements with our social media content across Facebook, Instagram, Twitter and LinkedIn.
Owner	MarComms	
Comparison	Previous 3 years	
Delivery Group	Finance & Assets	

Facebook: 24,567 (last month 22,853): Introduction video of newest recruits got over 100K views which had a positive impact on engagements increasing.

Instagram: 1,669 (last month 1,053): 4.33% increase in content I sent out compared to last month.

LinkedIn: 553 (last month 322): 52.58% increase in content sent out compared to last month.

X: 8 (last month 31) : Less content published/ incident posted.

Overall engagements across all platforms for September 2025: **26,797**

DDT.1.03 - Intranet Active Users

Monthly		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	B	=> 98%
	2024/2025	94.2%	93.6%	92.6%	94.6%	91.9%	93.8%	94.4%	94.8%	91.9%	96.1%	95.9%	95.8%	G	=> 90%
	2025/2026	95.2%	95.4%	95.2%	97.9%	94.2%	95.6%							A	=> 80%
	Status	G	G	G	G	G	G							R	< 80%
YTD Avg														What is good	
	2024/2025	94.2%	93.9%	93.5%	93.8%	93.4%	93.5%	93.6%	93.8%	93.8%	93.8%	94.0%	94.2%	Higher is better	
	2025/2026	95.2%	95.3%	95.3%	95.9%	95.6%	95.6%								
	Status	G	G	G	G	G	G								

Ref	DDT.1.03	The percentage of staff that access BFRS' intranet each month. Higher numbers of staff accessing the intranet leads to improved communication, enhanced collaboration, streamlined information access, and increased employee engagement.
Owner	MarComms	
Comparison	Monitor	
Delivery Group	Finance & Assets	

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FINANCE & ASSETS - INFORMATION GOVERNANCE

DDT.3.01 - Reportable Data Breaches

Annual		20/21	21/22	22/23	23/24	24/25	25/26	B	
	Target	0	0	0	0	0	0	G	0
	Actual	0	0	0	0	0	0	A	
	Status	G	G	G	G	G	G	R	> 0
What is good									
Less is better									

Ref	DDT.3.01	A data breach means a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data. A reportable data breach is one that triggers a requirement for notification to the Information Commissioner's Office (ICO) where a breach is likely to result in a significant risk to an individual to whom the data relates.
Owner	Legal & Governance	
Comparison	Target	
Delivery Group	Finance & Assets	

There have been no reportable data breaches.
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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Executive Committee, 12 November 2025

Report title: Budget Monitoring Report April 2025 - September 2025

Lead Member: Councillor Niknam Hussain

Report sponsor: Mark Hemming. Director of Finance and Assets

Author and contact: Asif Hussain, ahussain@bucksfire.gov.uk, 01296 744421

Action: Noting

Recommendations:

That the provisional outturn forecast for the Authority as of 30 September 2025 be noted.

Executive summary:

The report in Appendix A sets out the Authority's revenue and capital spending position as at 30 September 2025, together with the projected outturn position for the financial year.

The budget for 2025/26 is £42.989m, with a forecast outturn of £42.649m, resulting in a projected underspend of £0.340m. This underspend is predominantly due to lower direct employee costs than previously forecast, and higher-than-budgeted investment returns. However, following the budget-setting process, funding forecasts have reduced by £0.201m, mainly due to the removal of the Airwave grant (circa £0.050m) and a significant reduction in the Pension Grant (circa £0.150m). These funding changes, which were only communicated after the budget was set, partially offset the expenditure underspend and additional income, resulting in an overall projected underspend of £0.139m (0.3% variance against the total budget).

Financial implications: As set out in the main body of the report.

Risk management: Management of our financial resources is a key risk to the Authority and the performance reports to Committee inform Members of the main financial risks facing the Authority in year.

Legal implications: None.

Privacy and security implications: None.

Duty to collaborate: None.

Health and safety implications: None.

Environmental implications: None.

Equality, diversity, and inclusion implications: None.

Consultation and communication: None.

Background papers: Medium Term Financial Plan 2023/24 to 2028/29, Fire Authority Meeting 12 February 2025 <https://bucksfire.gov.uk/wp-content/uploads/2025/02/FIRE-AUTHORITY-AGENDA-AND-REPORTS-12-FEBRUARY-2025-INCLUDING-LATE-URGENT-ITEMS-1-2-AND-3.pdf> (pp.31-45) and https://bucksfire.gov.uk/wp-content/uploads/2025/02/Item-8a_Revised-Appendices-1-and-2-Final.pdf

Appendix	Title	Protective Marking
A	Budget Monitoring Report April 2025 – September 2025	None

Appendix A

Service Overview

Table 1 | Budget and forecast outturn for the end of the 2025-26 financial year

Subjective Area	Full Year Budget £m	Actual Year to Date £m	Forecast Outturn £m	Projected Year End Variance £m
Employee Costs (page 2)	32.782	16.170	32.509	-0.273
Non-Employee Costs (page 5)	10.207	3.654	10.140	-0.067
Total Expenditure	42.989	19.825	42.649	-0.340
Total Funding (page 6)	-42.989	-21.374	-42.788	0.201
Net Position	0.000	-1.550	-0.139	-0.139

- The total approved expenditure budget is £42.989m, with a forecast outturn of £42.649m, resulting in a projected underspend of £0.340m.
- The funding budget is £42.989m and the forecast £42.788m, leading to a projected overspend of £0.201m due to reduced grant allocations.
- Taking both expenditure and funding into account, **the net position is a forecast underspend of £0.139m**

Table 1.1 | Ringfenced Grant Funding

Subjective Area	Full Year Allocation £m	Actual Year to Date £m	Forecast Outturn £m	Projected Year End Balance £m
Protection Uplift	0.140	0.098	0.140	0.000

Ringfenced funding is for a specific purpose and is received and allocated during the year. The Protection Uplift grant is for services to increase their protection capability and delivery, aligning with locally agreed integrated risk management plans and risk-based inspection programmes.

Employee Costs

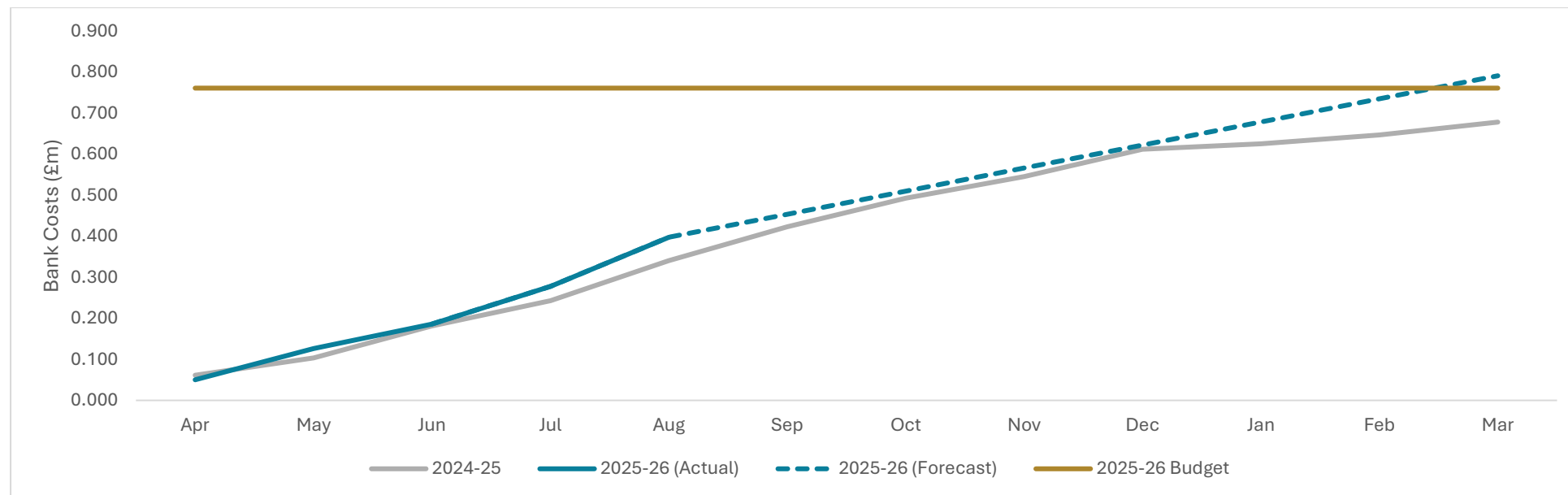
Table 2 | Direct and indirect employee subjective budgets

Subjective Area	Full Year Budget £m	Actual Year to Date £m	Forecast Outturn £m	Projected Year End Variance £m
Wholetime	22.770	11.399	22.914	0.144
On-Call	1.505	0.622	1.324	-0.181
Support	6.794	3.186	6.505	-0.289
Technicians	0.499	0.207	0.462	-0.037
Sessional	0.085	0.027	0.080	-0.005
Agency	0.025	0.079	0.120	0.095
Indirect Staff Costs	1.104	0.649	1.104	0.000
Total Expenditure	32.782	16.170	32.509	-0.273

- **Wholetime £0.144m Overspend** - The overspend reflects current staffing levels exceeding the budgeted establishment. Since Q1, we have had several retirements/leavers that have reduced the overspend forecast for the year. A detailed workforce plan is provided on page 4 to illustrate the anticipated staffing trajectory.
- **On-Call £0.181m Underspend** - primarily attributed to vacant posts and associated allowances, which are activity and training-dependent.
- **Support £0.289m Underspend** - currently under budget due to vacant posts that are in the process of being advertised and recruited. To mitigate service disruption, some roles have been temporarily filled via agency contracts. Recruitment is expected to progress throughout the remainder of the year.
- **Agency £0.095m Overspend** - Agency costs have exceeded budget expectations, largely due to the temporary filling of vacant support roles. While this ensures continuity of service, it represents a short-term financial pressure. These costs are expected to decline as permanent recruitment is completed.

Bank Costs

Chart 1 | Bank costs and forecast vs. budget



Note: The figures presented above exclude National Insurance (NI) contributions.

Chart 1 presents a comparative analysis of bank costs incurred up to Q2 of 2025-26 against the corresponding period in 2024-25. Bank costs for Q2 2025/26 are slightly higher than the previous year's costs for the same period. The operational leave policy has been revised which should see a reduction in bank costs in the future.

The budget setting process for 2025-26 identified a saving of over £0.300m that was reallocated to support other priorities. Current projections indicate that this saving may not be fully realised by year-end, subject to ongoing monitoring and review.

Wholetime Establishment

Chart 2 | Wholetime establishment roadmap

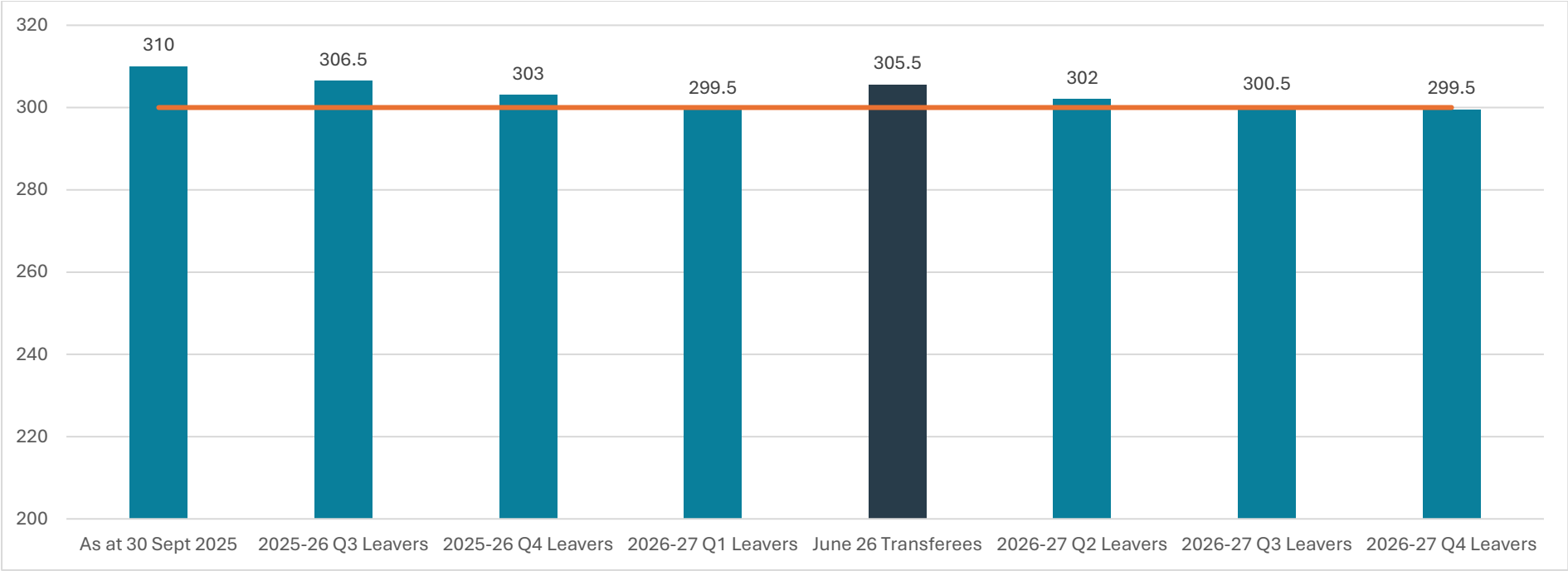


Chart 2 illustrates the wholetime operational establishment as of 30 September 2025 through to March 2027 taking into consideration projected retirees, leavers, transfers and recruitment of apprentices.

Non-Employee Costs

Table 3 | Non-employee subjective budgets

Subjective Area	Full Year Budget £m	Actual Year to Date £m	Forecast Outturn £m	Projected Year End Variance £m
Supplies and Services	5.221	2.054	5.388	0.168
Premises	2.378	1.610	2.442	0.064
Transport	1.337	0.783	1.347	0.010
Capital Financing	2.922	0.042	2.922	0.000
Income	-1.650	-0.836	-1.959	-0.309
Total Expenditure	10.207	3.654	10.140	-0.067

- **Additional Income of £0.309m** - primarily driven by higher-than-budgeted investment returns. This is due to the Bank of England base rate remaining static, which has sustained stronger yields. However, economic indicators suggest a potential reduction in the base rate over the next 12 months, as part of broader efforts to manage inflation. This may impact future investment income projections and will be monitored closely.

Funding

Table 4 | Funding by source and forecast outturn position

Subjective Area	Full Year Budget £m	Actual Year to Date £m	Forecast Outturn £m	Projected Year End Variance £m
Government Funding	-4.111	-2.616	-4.111	0.000
Fire Specific Grants	-2.237	-0.369	-2.038	0.199
Business Rates	-5.995	-3.284	-6.000	-0.005
Top-up Grant	-1.615	-0.840	-1.607	0.008
Council Tax	-28.530	-14.265	-28.530	0.000
Transfers from Reserves	-0.501	0.000	-0.501	0.000
Total Funding	-42.989	-21.374	-42.787	0.202

A funding shortfall of approximately £0.202m is currently projected for the 2025-26 financial year. This shortfall arises from two key changes in central grant allocations:

- Airwave Grant: A reduction of approximately £50k following the complete removal of this funding stream.
- Pension Grant: A significant decrease of approximately £150k compared to the previous year's allocation.

The pension grant shortfall is primarily attributable to an update in the data used within grant allocation methodology, which resulted in a lower overall award. Importantly, notification of these changes was received only after the annual budget had been set, limiting the opportunity to adjust financial plans in advance.

The impact of this funding gap and future outcome of the fair funding review is being assessed, and mitigation strategies will be considered as part of ongoing budget monitoring and medium-term financial planning.

Reserves

Table 5 | Reserves (including capital funding)

Reserve	Opening Balance (31 March 2025) £m	Use Of / (Contribution To) £m	Transfers Between Reserves £m	Projected Year End Balance £m
General Fund Balance	-2.040	0.000	0.000	-2.040
Non-earmarked Reserves	-2.040	0.000	0.000	-2.040
Workforce Planning Reserve	-1.175	0.501	0.434	-0.240
Control Room Reserve (*)	-0.479	-0.050	0.000	-0.529
USAR Reserve	-0.817	0.000	0.817	0.000
Future Funding Reserve	-0.205	0.205	0.000	0.000
Transformation Reserve	-3.298	0.000	3.298	0.000
Earmarked Reserves (Revenue)	-5.974	0.656	4.549	-0.769
Usable Capital Receipts Reserve	0.000	0.000	0.000	0.000
Revenue Contribution to Capital	-6.894	3.026	-4.549	-8.417
Earmarked Reserves (Capital)	-6.894	3.026	-4.549	-8.417
Total Reserves	-14.908	3.682	0.000	-11.226

(*) This figure represents this Authority's share of the joint control room renewals fund (which is held by Oxfordshire).

The projected balance in the Workforce Planning Reserve will be fully utilised during 2026-27 to fund temporary roles that will continue into that year as per the approved medium term financial plan.

Capital Monitoring

Table 6 | Capital forecasts

Subjective Area	Full Year Budget £m	Actual Year to Date £m	Provisional Outturn £m	Projected Year End Variance £m	Projected c/fwd to 2026-27 £m
Property	7.408	0.224	4.408	0.000	3.000
Total Property Portfolio	7.408	0.150	4.408	0.000	3.000
Operational Red Fleet Vehicles	0.905	0.438	0.905	0.000	0.000
Operational White Fleet Vehicles	0.114	0.000	0.114	0.000	0.000
Total Fleet Vehicles	1.019	0.126	1.019	0.000	0.000
Operational Equipment	0.185	0.065	0.210	0.025	0.000
ICT Equipment	0.188	0.032	0.188	0.000	0.000
Total Equipment	0.373	0.061	0.373	0.000	0.000
Grand Total	8.800	0.337	5.800	0.000	3.000

- **Property** - £3m is currently being forecast to carry forward into 2026-27 to reflect an early estimate of the split of expenditure across the two years for this project. The project is still forecast to be within the total budget.

Details of planned delivery for Property Works and Operational Red Fleet Vehicles can be found on pages 9 and 10.

Capital Monitoring – Property and Operational Red Fleet

Table 7 | Delivery progress

Complete
 On track
 Risk to progress
 - Not due to be started

Project	Start Date	End Date	Status	Commentary (mandatory if risk to progress)
Property – b/fwd from 2024-25				
Drill tower refurbishment	Apr 25	Mar 26	On track	
Broughton – repair and resurface drill yard	Apr 25	Aug 25	Risk to progress	Quotation exceeded budget – being reviewed
Multiple sites – fire door replacement programme	May 25	Sep 25	On track	
Planned Property Works 2025-26				
Newport Pagnell – roof, guttering and downpipes	Apr 25	Mar 26	On track	
Amersham – roof, guttering and downpipes	Apr 25	Mar 26	On track	
Stokenchurch – roof, guttering and downpipes	Apr 26	Mar 27	-	Deferred to 2026-27
Chesham – roof, front yard, M&E, refurbishment	Apr 25	Mar 26	On track	
Brill – drainage	May 25	Jun 25	Complete	
Various sites – EDI/contaminants improvements	Jun 25	Mar 26	On track	
Emergency Property Works 2025-26				
West Ashland – male shower block	Apr 25	Jul 25	Complete	
Broughton – drainage	Apr 25	May 25	Complete	
West Ashland – DSEAR improvements	Jun 25	Jun 25	Complete	
Major Projects 2025-26				

Project	Start Date	End Date	Status	Commentary (mandatory if risk to progress)
Westcott – construction of new training centre	Apr 25	Mar 27		
High Wycombe – options appraisal	Aug 25	Dec 25		Options to be presented to Authority Feb 26
Operational Red Fleet				
Rural Firefighting Vehicle (x 2)	Apr 25	Sep 25		See detail below
Water Carrier (x 2)	Apr 25	Feb 26		

- **Broughton – repair and resurface drill yard** – quotations have been received to undertake the planned works, but these were significantly higher than the allocated budget. Work is being undertaken to see if these costs can be reduced by retendering and/or re-specification of the required work.
- **Rural Firefighting Vehicle (x 2)** – Both of the Rural Firefighting vehicles are due to be delivered in October. The current vehicles will continue to be available until these new vehicles are in service.