BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY
BUCKINGHAMSHIRE FIRE AND RESCUE SERVICE

Director of Legal & Governance, Graham Britten
Buckinghamshire Fire & Rescue Service
Brigade HQ, Stocklake, Aylesbury, Bucks HP20 1BD
Tel: 01296 744441

Chief Fire Officer and Chief Executive
Louise Harrison

To: The Members of the Executive Committee

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

1 September 2026

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 **MEETING ROOM 1, HEADQUARTERS, STOCKLAKE, AYLESBURY, BUCKS HP20 1BD**, on **WEDNESDAY 9 SEPTEMBER 2026 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: Hussain (N)
Councillors: Geary, Hall, Hughes, Khan, Monger, Rouse and Stuchbury

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/UCWmIXPWAscxpL3vliv7bh1Q

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 15 July 2026 **(Pages 7 - 20)**

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. Budget Monitoring Report April - July 2026

To consider Item 6 **(Pages 21 - 36)**

7. Financial Stability Risk Update

To consider Item 7 **(Pages 37 - 42)**

8. Performance Management - Q1 2026/27

To consider Item 8 **(Pages 43 - 114)**

9. 2026-2027 Annual Delivery Plan Update

To consider Item 9 **(Pages 115 - 136)**

10. Disciplinary and Grievance Procedures for Executive Leadership Team

To consider Item 10 **(Pages 137 - 176)**

11. Exclusion of Public and Press

To consider excluding the public and press representatives from the meeting by virtue of Paragraph 1 of Part 1 of Schedule 12A of the Local Government Act 1972, as the reports contain information relating to any individual; and Paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972, as the reports contain information relating to the financial or business affairs of a person (including the Authority); and on these grounds it is considered the need to keep information exempt outweighs the public interest in disclosing the information.

12. Application for Flexible Retirement

To consider Item 12.

13. Establishment of an Assistant Chief Fire Officer (ACFO) / Assistant Chief Officer (ACO) Role

To consider Item 13.

14. Date of next meeting

To note that the next meeting of the Executive Committee will be held on Wednesday 18 November 2026 at 10 am.

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 15 JULY 2026 at 10.00 AM.

Present: Councillors Geary, Hall, Hussain N, Khan, Monger, Rouse and Stuchbury

Officers: L Harrison (Chief Fire Officer), S Tuffley (Deputy Chief Fire Officer), M Hemming (Director of Finance and Assets), R Davidson (Director of People), G Britten (Director of Legal and Governance), D Buchanan (Assistant Chief Fire Officer), A Hussain (Head of Finance and Assets), A Carter (Head of Service Improvement), A Collett (Head of People Services) and K Nellist (Democratic Services Officer)

Apologies: Councillor Hughes

The Chairman advised that although members of the public were able to attend and observe in person, following the meeting, a video recording would be uploaded to the Authority's YouTube Channel.

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

EX01 ELECTION OF CHAIRMAN

(Councillor Monger in the Chair)

It was proposed and seconded that Councillor N Hussain be elected Chairman of the Executive Committee for 2026/27.

RESOLVED –

That Councillor N Hussain be elected Chairman of the Executive Committee for 2026/27

(Councillor N Hussain in the Chair)

EX02 APPOINTMENT OF VICE-CHAIRMAN

It was proposed and seconded that Councillor Monger be elected Vice-Chairman of the Executive Committee for 2026/27

RESOLVED –

That Councillor Monger be elected Vice-Chairman of the Executive Committee for 2026/27

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EX03 MINUTES

RESOLVED –

That the Minutes of the Executive Committee meeting held on Wednesday 19 March 2026 be approved and signed by the Chairman as a correct record.

EX04 MATTERS ARISING FROM THE PREVIOUS MEETING

The Chairman advised Members there were no matters arising from the previous minutes.

A Member felt there was still limited business coming through the Executive Committee, although they welcomed the 50% increase in the number of items since the last meeting. Also, it had been over two years since Members last received a Succession Plan, when would Members receive an update.

The Vice-Chairman stated that if there were any items that Members wished to appear on the agenda, he was sure the Chairman would be happy to receive them.

The Chief Fire Officer concurred with the Member that a Succession plan update was due. — Director of People

EX05 DISCLOSURES OF INTERESTS

None.

EX06 BUDGET MONITORING REPORT APRIL 2025 – MARCH 2026 (PROVISIONAL OUTTURN)

The Head of Finance and Assets highlighted to Members as at 31 March 2026, the Authority's provisional revenue outturn showed a net underspend of £0.493m, comprising an expenditure underspend of £1.103m partially offset by a funding shortfall of £0.610m. The figures remained subject to final audit review and any accounting adjustments.

The underspend was mainly driven by vacancies in support roles, lower than expected on-call firefighter costs and reduced Airwave expenditure and the release of year-end provisions totalling £0.340m. These savings were partly offset by budget pressures in wholetime staffing, and agency staffing costs required to maintain service continuity during the administration review.

Two one-off provisions contributed to the favourable position, the first related to Unit 7, costs associated with vacating the premises were lower than anticipated

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enabling part of the provision to be released. The second provision related to a potential liability associated with a Thames Valley Police lease arrangement. Following an external audit review, the potential liability no longer met the criteria for a provision and was reclassified as a contingent liability.

Members should note that these provision releases were one-off savings and could not support ongoing revenue expenditure.

The Head of Finance and Assets advised Members that in addition, Treasury Management performance was also stronger than expected, with investment income exceeding budget by £0.724m due to higher cash balances and interest rates. As a result, a planned £0.501m contribution from reserves was not required. However, these higher returns were also considered temporary and were not expected to continue as cash balances reduce and interest rates normalised.

The funding position recorded a £0.109m shortfall, largely due to reductions in central government grants, including the withdrawal of the Airwave grant and lower pension grant funding. This was partly offset by additional income from the year-end business rates reconciliation.

Given the one-off nature of the underspend and provision releases, officers recommended using these resources to fund capital assets rather than ongoing revenue commitments. It was proposed that the funds supported the purchase of white fleet vehicles and a telehandler, improving operational resilience and capability.

The approved capital programme for 2025/26 was £8.843m, with provisional outturn of £1.335m, resulting in £7.479m of slippage into future years. The main causes of the delay were delays in securing planning permission for the Westcott Training Centre project and the build of red fleet vehicles.

A Member asked about the underspend in on-call recruitment.

The Assistant Chief Fire Officer advised the position had not changed, the Service was still below the FTE for on-call, and there had been no recruitment so far this financial year. The intention was to launch a recruitment campaign in the Autumn, but it would still take a while to build

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numbers back up and it would continue to be an underspend for a period of time.

A Member asked about the planning permission for Westcott, were the planners aware of the importance of this project.

The Director of Finance and Assets advised that as of Monday night, approval had been granted for Westcott.

A Member asked if the treasury management benefit was stripped out, would the Authority have overspent.

The Head of Finance and Assets advised that no, reserves would have been used. Although reserves were looking healthy at around £16m, looking at the Medium Term Financial Plan set in February, in five years' time, with the capital projects that were planned, they would go down to about £2m. From a financial point of view, any underspends or one-offs, really should be looking to build up that reserve because the capital programme was on average around £1.6m a year.

A Member felt that every year they were seeing quite significant capital spend slippage, could Members have a regular report on capital items and whether those capital items were likely to be slipping.

Director of Finance and Assets

A Member asked if the underspend had been dampened by an overspend on wholetime recruitment, would the Authority not be better off moving the establishment and setting a revised number. Could a report be brought back to Members on the establishment.

Director of People

The Director of Finance and Assets advised that officers were doing a piece of work looking at what the optimum number was. Based on the quarterly performance reports, which were looked at monthly, the Service was getting 12 appliances regularly. What officers need to do on the model was look what would be the incremental improvement adding an additional 10 posts, 20 posts etc.

The Director of Finance and Assets advised that a report would be brought back to this Committee once the resourcing modelling was finished alongside the budget as when the budget was set for future years, it was a core component of the budget.

Director of Finance & Assets

A Member felt there had been a lot of agency costs for support staff was there anything significant going on.

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The Head of Finance and Assets advised that in terms of agency costs, this related to the Administration Team review. People had been brought in on a temporary basis until the end of the review. Without that, support staff costs would probably be an underspend of around £0.250m.

A Member asked about the Protection gaps that were described, were officers worried about it.

The Assistant Chief Fire Officer felt it was quite a positive news story. For the last couple of years, a relatively cautious approach had been taken to the protection grant funding in terms of risk of it being removed, but it did seem to be consistently applied. Although frustratingly, MHCLG confirmed there was not a figure or a guarantee for next year's protection grant fund. A report had been taken through internal governance to substantiate some posts that were previously fixed term which was really positive. Also, the Service had recruited a very highly qualified Fire Safety Inspecting Officer who would be starting next week. Money for training had been invested for station staff, and six new dual contract roles were being introduced.

A Member asked about the hot weather equipment, do officers need to monitor and look at equipment purchases in more detail due to all this hot weather.

The Deputy Chief Officer advised that officers were reassured since 2022 they had a much better rural capability. There were still challenges around how it was resourced on a daily basis, but officers were working hard to ensure it could. Equipment wise the Service was in a very good position, but it was kept under review. If a broader range of equipment was required, it would be brought back to Members.

A Member asked about recommendation 3, the purchase of a telehandler which seemed a lot of money, could they see the specification for it.

The Director of Finance and Assets advised that it was the same specification used for the national Urban Search and Rescue (USAR) telehandlers that were being rolled out, and a copy of the specification could be sent to the Member.

Director of Finance and Assets

RESOLVED –

1. That the provisional outturn forecast for the Authority as of 31 March 2026 be noted.

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2. That the slippage of £7.479m on the capital programme is approved to be carried forward into 2026/27.
3. That the underspend of £0.493m is transferred into Revenue Contribution to Capital Reserve (RCCO) to cover the following capital purchases. The split will be as follow:
    - £0.138m to cover the purchase of 5 white fleet vehicles.
    - £0.105m to cover the purchase of a telehandler and associated equipment.
    - £0.250m to be transferred into RCCO to fund future capital programmes.
4. That a transfer of £0.098m into the future funding reserve be approved.
5. That £0.501m be transferred from the Workforce planning reserve to RCCO reserve.
6. That delegated authority be given to the Chief Finance Officer to authorise any late changes to the movements in reserves and capital slippage amounts resulting from accounting adjustments needing to be made during the year-end closedown process.
7. That should any changes to the amounts referred to above be required, then the Chief Finance Officer will report these to Members at the next available meeting.

EX07 RECRUITMENT UPDATE JULY 2026

The Head of People advised Members this report provided an update on recruitment activity across the Service's Wholetime, On-Call and Support Staff workforces highlighting three key areas.

The Wholetime recruitment campaign attracted significant interest, with 541 firefighter apprentice applications and 23 transferee applications, creating a strong talent pipeline for future workforce planning. Appointment decisions would be based on workforce requirements, vacancies, operational demand, and affordability. Positive action and

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attraction initiatives had also helped promote firefighting as an inclusive career option to a wider range of applicants.

On-Call recruitment would be strengthened through a 12-month pilot scheme from September 2026. The redesigned recruitment model aimed to improve recruitment outcomes, accessibility and candidate experience by introducing rolling recruitment, quarterly assessment days; more engagement opportunities through 'Have-a-Go' events; and the removal of several assessment stages that had previously led to candidate drop-out.

Selection standards would remain robust, and unsuccessful applicants would be offered a structured development pathway to support future applications. The pilot would be measured against outcomes such as candidate progression, recruitment timescales, operational availability and overall efficiency.

Support staff recruitment continued to enhance organisational capacity across key functions. Recruitment performance remained strong, with an average time-to-hire of 27 days, reflecting effective collaboration between recruiting managers and the People Directorate. Overall, recruitment activity across all workforce groups was supporting the Service's aim of maintaining a capable, resilient and sustainable workforce.

A Member asked about ED&I and recruitment, what was being done that was not done before.

The Head of People advised there were quarterly dashboards that get reported through internal governance. At the People Delivery Group, they look at key measures and milestones within the ED&I agenda and where the Service was trying to improve, which included the gender pay gap. In particular, for the recruitment campaigns 'Have-a-Go' days had been run, including a specific 'Have-a-Go' day for protected characteristics, and the most successful was a female only day which was fully subscribed. The Service was actively involved with the armed forces and had an Armed Forces Covenant and a number of members of staff who were active here.

The Deputy Chief Fire Officer advised officers were planning on bringing an Armed Forces Covenant update and a White Ribbon update to future Fire Authority

Deputy Chief Fire Officer

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meetings (September and December, one at each meeting).

A Member felt there were sufficient transferees to fulfil any short-term requirements for Wholetime recruitment, what steps were being taken to retain some interest in the 540 applicants and were they being asked if any of them were interested in on-call opportunities.

The Head of People advised that all applicants had been written to and been told the Service was reviewing its workforce planning requirements and it would be in touch with regards to the next steps for recruitment. The transferee response was the most successful seen for a number of years, and a number of those were ex-employees who had moved to other services but had expressed an interest in coming back.

A Member asked what were the risks around the changes to the apprenticeship funding, particularly the next 12 months moving to a 25% co-funding model.

The Head of People advised that officers were tracking the changes coming from government around apprenticeships. The Service was able to maximise the opportunity for some of the strategic level apprenticeships and enrol people in before the funding got removed for the level 7's. Officers were still exploring opportunities for levy transfers and the team were reviewing what was available and what the Service could utilise, as well as pay funding arrangements with the government. The Service was fully utilising its levy still.

A Member asked what work was being done with larger employer engagement across Buckinghamshire and Milton Keynes regarding on-call recruitment, and was the Service moving to a rolling campaign rather that a periodic campaign. Could Members have the targets that were being set around where the Service wants to be with on-call headcount by when, so it could be held to account on some key milestones. Also, when do officers believe the Service would be at headcount for on-call.

Assistant Chief Fire Officer

The Chief Fire Officer advised that for a while now the real direction of focus had been on wholetime numbers as opposed to on-call numbers. The Chief Fire Officer had been clear to the team that this was not to be rushed, as it was not just about recruitment, but about retention and ensuring there was the right infrastructure in place. As fast

as the Service recruited on-call staff, it was losing them. There was also the issue of getting them trained because the Service was restricted by the training slots it had with the Fire Service College.

The Assistant Chief Fire Officer, who leads the On-Call Improvement Programme, said that ideally the Service would finish all the groundwork first and then launch a recruitment campaign. Because on-call had been allowed to slip over several years, there were major issues to fix from training and qualifications to estates and the overall support structure. The Service had now agreed an internal mandate setting out what it wants to achieve for on-call by the end of the CRMP. A large recruitment campaign was planned for the autumn, aimed across the whole Service rather than at specific stations. Officers understand that Members had not had much visibility of this work so far. The Member Advisory Panel was intended to help support the programme, and officers were still keen to progress this, while apologising that it has not yet been brought forward.

A Member offered their assistance with recruitment or anything that officers feel Members could do to reach out to their communities. The Member also asked if the Service could reach out to 17-19 year olds on social media regarding apprenticeships and give them a link onto the Service's website.

The Director of People acknowledged it was a good idea and something officers had discussed previously about community engagement. Any support that Members could give was very much appreciated.

The Chairman stated that the Service use to visit various Mosques for recruitment, could it be done again, including the protection angle.

The Director of People agreed and felt the Service needed to be more proactive.

A Member asked how Members could support the process for on-call recruitment.

The Assistant Chief Fire Officer advised that through the existing governance arrangements, Members would get the right level of briefings and something measurable that Members could hold officers to account on over a period of time. Terms of Reference had already been drafted for a

Member Advisory Group which specifically was focussed around on-call. Hopefully, Members could bring their knowledge, experience and expertise to support officers with the whole journey.

The Chief Fire Officer advised that Members could support the Service, by firstly continuing support around Westcott, as Westcott would be critical in unlocking the Service's ability to not only get staff in, but to train them locally and help them gain the experience they were losing out on by not getting out. Secondly, advocacy on social media. Reposting the messages around fire safety, water safety. As soon as the recruitment campaign was open Members support would be helpful speaking to the local communities and making sure it was being brought to people's attention by reposting it.

A Member followed Thame Fire Station in Oxfordshire and asked was the Service's modelling the same as Oxfordshire Fire and Rescue Service (OFRS) or do they do something different as they seem to be recruiting on-call constantly.

The Assistant Chief Fire Officer advised that like a number of services, OFRS relied quite heavily on their own on-call to support their response standard, as well as wider resilience. OFRS had a significantly higher number of on-call stations and on-call staff, so their needs were slightly different. The Service had very good relationships with its Thames Valley partners and would be speaking to them about best practice. The campaign in the autumn was the start, and it needed to be done correctly.

RESOLVED –

That the content of this report and appendix be noted.

EX08 2026-2027 ANNUAL DELIVERY PLAN UPDATE

The Head of Service Improvement advised Members that this report provided a progress update on the Annual Delivery Plan, highlighting key developments since the last report to the Fire Authority.

The On-Call Improvement Programme remained a key part of delivering the Annual Plan's Response and Resilience commitments. Reporting had been enhanced to show the status of each recommendation providing greater transparency for Members. The staff consultation had been completed, and some special appliance relocations had taken place, resulting in improvements to appliance

availability. The programme was moving from the planning phase into delivery while continuing to engage with on-call staff.

The Head of Service Improvement advised Members that with regard to the local training facility, the project remained rated red due to delays previously experienced in the planning process. Since the report was published, planning permission had now been granted, representing a significant positive development. The project team would now review delivery timescales, dependencies and remaining risks. Ongoing market pressures continued to affect the project's financial forecast and would remain under close monitoring.

With regard to the High Wycombe Station renovation, the project had moved to a green rating. Although still at an early stage, good progress had been made on developing the business case and associated due diligence. Confidence in the project's planning, scope, development and next steps had increased.

The report also included a short section on collaborative project being delivered jointly with partners or through national frameworks. The Personal Protective Equipment (PPE) renewal programme had moved to amber status due to delays in the national procurement framework. This was currently a national rather than local issue, but the Service would continue to monitor any potential impact on local delivery plans.

The Head of Service Improvement advised that this report was presented for oversight and assurance only, and no decisions were required from Members at this stage. Any future decisions requiring approval would be brought through the appropriate governance processes.

A Member asked how the on-call improvement programme could be green, when under activities planned in next period, it was saying that there was still not a PID for the approach and scope and delivery in year two. It would be helpful to understand the judgement applied on progress to give it a green.

A Member asked about High Wycombe Fire Station and expressed support for the work underway. They also queried whether the lessons learned from the training facility project, particularly the issues highlighted in red, such as weaknesses in the planning process and

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stakeholder engagement would be incorporated into the High Wycombe programme. In addition, they asked about decanting options with Buckinghamshire Council and whether officers were also engaging with other major site owners in the High Wycombe area.

The Assistant Chief Fire Officer advised that the green assessment was probably a bit generous, and officers would take it away for consideration. The absence of the PID being approved had not stopped any activity and the PID was going to the Programme Board next week for approval.

The Head of Finance and Assets advised that officers were drawing not only on the lessons learned from Westcott, but also from West Ashland, particularly around staff engagement and ensuring teams were fully involved in the change process. Westcott was being used as an adapted blueprint, identifying what worked well and what did not. Officers were also responding to previous feedback about consultation and public engagement and were looking to build this into the approach. At this stage, several options were still being considered, including rebuilding, refurbishment, or exploring alternative sites. The intention was to bring a business case to Members in September outlining the preferred solution.

Director of Finance and Assets

The Head of Finance and Assets advised that officers had contacted Buckinghamshire Council and the NHS to see what they had available and were also looking at private organisations with private building that were available. Consideration had to be given to whether it was fit for purpose. The decant was the biggest challenge in terms of trying to find a space within close proximity and meeting those response times.

A Member asked how realistic was completion in March 2027.

The Head of Finance and Assets advised that he would expect that to be pushed back realistically to March 2028.

The Member felt it probably needed redoing with either a phasing completion and a total end date margin to make it clearer.

A Member asked whether it was possible to look for another training provider if that was the problem with the dates being too constrained.

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The Assistant Chief Fire Officer advised that at present the Service used the Fire Service College who provided training to many fire and rescue services. Over the period of the contract, it was becoming increasingly challenging for the Service to drive when it wanted to hold courses. Other training venues at other services had been explored and again capacity tended to be an issue. That was why Westcott was identified as a requirement, which would be huge in terms of enabling the Service to train its staff.

The Director of Finance and Assets advised the timescale was based on the contract with the Fire Service College which ends in May 2027. A lot of work had been undertaken while waiting for planning permission around groundworks tenders etc. The training department had been asked to come up with a plan for what training looked like in June, July and August in terms of whether to pull some forward, extend validation periods and other training. The go live date was built into workforce planning and working closely with HR in terms of recruit numbers.

RESOLVED –

It is recommended that the 2026-2027 Annual Delivery Plan Update be noted.

EX09 DATE OF NEXT MEETING

To note that the next meeting of the Executive Committee will be held on Wednesday 9 September 2026 at 10 am.

THE CHAIRMAN CLOSED THE MEETING AT 11.26 AM

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Executive Committee, 9 September 2026

Report title: Budget Monitoring Report April - July 2026

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 31 July 2026 be noted.

Executive summary:

The report at Appendix A presents the Authority's revenue and capital expenditure position as of 31 July 2026, together with the forecast outturn for the 2026/27 financial year.

The approved net revenue budget for 2026/27 is £43.880m, with current forecasts indicating an outturn of £43.646m, representing a projected expenditure underspend of £0.233m. This favourable variance is primarily driven by additional treasury income and underspends within support and on-call staffing budgets partly offset by overspends in the wholetime establishment.

Since the budget was approved, funding forecasts have reduced by £0.124m, mainly reflecting a lower than anticipated level of business rates income (£0.229m), partially offset by an increase in pension grant funding (£0.105m).

Taking both expenditure and funding variances into account, the Authority is forecasting an overall underspend of £0.109m for 2026/27.

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 2026/27 to 2030/31, Fire Authority Meeting 11 February 2026
https://buckinghamshire.moderngov.co.uk/documents/s114974/ITEM%208a_Medium%20Term%20Financial%20Plan%202026-27%20v3%20Final%20Broken%20Links.pdf

Appendix	Title	Protective Marking
A	Appendix A – Budget Monitoring Report April – July 2026	None

Appendix A - Service Overview

Table 1 | Budget and forecast outturn for the end of the 2026-27 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)	34.138	8.108	34.353	0.215
Non-Employee Costs (page 3)	9.741	3.034	9.294	-0.448
Total Expenditure	**43.880**	**11.142**	**43.646**	**-0.233**
Total Funding (page 8)	**-43.880**	**-16.467**	**-43.755**	**0.124**
Net Position	**0.000**	**-5.326**	**-0.109**	**-0.109**

- The total approved expenditure budget is £43.880m, with a forecast outturn of £43.646m, resulting in a projected underspend of £0.233m.
- The funding budget is £43.880m and the forecast £43.755m, leading to a projected overspend of £0.124m due to reduced grant allocations.
- Taking both expenditure and funding into account, **the net position is a forecast underspend of £0.109m**

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	23.654	5.645	24.025	0.371
On-Call	1.557	0.284	1.420	-0.137
Support	7.182	1.581	7.021	-0.161
Technicians	0.478	0.116	0.520	0.042
Sessional	0.085	0.017	0.089	0.005
Agency	0.022	0.011	0.012	-0.010
Indirect Staff Costs	1.161	0.454	1.265	0.105
Total Expenditure	**34.138**	**8.108**	**34.353**	**0.215**

- **Wholetime £0.371m Overspend** - The overspend reflects current staffing levels exceeding the budgeted establishment. A detailed workforce plan is provided on page 7 to illustrate the anticipated staffing trajectory.
- **On-Call £0.137m Underspend** - primarily attributed to vacant posts and associated allowances, which are activity and training-dependent.
- **Support £0.161m 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, gradually reducing the underspend.

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	5.449	1.406	5.517	0.068
Premises	2.780	1.392	2.679	-0.101
Transport	1.307	0.648	1.410	0.103
Capital Financing	1.977	0.000	1.977	0.000
Income	-1.772	-0.413	-2.290	-0.518
Total Expenditure	**9.741**	**3.034**	**9.294**	**-0.448**

- **Additional income of £0.518m** is forecast to be achieved, primarily driven by higher-than-budgeted investment returns. This is because the Bank of England base rate is now forecast to remain relatively stable during the year, supporting stronger investment yields. The timing of expenditure on capital projects will result in having funds to invest for longer periods of time. Further detail of Treasury income can be seen on page 5. Also included within these figures is income relating to seconded officers where the expenditure is seen against their employee cost budgets. Furthermore, rising fuel prices have led to increased fuel cost recoveries, which are also contributing to higher income levels.

Table 4 | Ringfenced Grant Funding

Subjective Area	Full Year Allocation £m	Actual Year to Date £m	Forecast Outturn £m	Projected Year End Balance £m
Protection Uplift	0.084	0.045	0.084	0.00
New Burdens Remediation	0.177	0.003	0.115	0.062
Total	**0.260**	**0.048**	**0.199**	**0.062**

The protection grant is a ringfenced funding allocated for specific Protection related activity purposes and received during the financial year, or residual balances carried over from previous year. The Protection grant includes a Protection Uplift and New Burdens remediation grant.

The Uplift Grant is intended to enhance services' protection capability and delivery, in alignment with locally agreed Corporate Risk Management Plans and risk-based inspection programmes. In November 2025, the Service successfully secured additional protection grant funding to support remediation efforts for residential buildings identified with unsafe cladding. The funding is predominantly used to fund additional posts and training in order to facilitate and enhance protection capability. Any residual balances will be carried forward into 2027/28 financial year.

Table 5 | Treasury

Investment Type	Investment Portfolio Amount (as at 31 July 2026)	2026/27 Average Investment Portfolio Amount (up to July 2026)	2026/27 Average Interest Rate (up to July 2026)	Total Interest Received for 2026/27 (up to July 2026)
Fixed Term Investments:				
- Banks	14,000,000	13,380,000	4.12%	183,762
- Local Authorities	3,000,000	4,984,000	4.40%	73,036
- Building Societies	3,000,000	3,742,000	3.87%	48,293
Variable Term investments: *(Money Market Funds (MMF) / Call Accounts, cash available same day / within 24hrs)*				
Lloyds Bank (Call Account)	4,053,366	3,044,113	3.93%	39,848
CCLA Public Sector Investment Fund (MMF)	2,018,872	1,682,949	3.96%	22,189
Aberdeen Liquidity fund (MMF)	2,039,304	1,731,147	3.91%	22,586
Bank Current Account	21,797	62,216	0.83%	518
Other Income *(PWLB early repayment discount)*				4,587
Total	**28,133,339**	**28,626,425**		**394,819**
Budget for the year				**800,000**
Projection for the year				**1,050,000**
(+) Over / (-) Under Achievement				**250,000**

Treasury is projecting a overachievement of £0.250m, driven by a slower-than-anticipated reduction in market rates and the availability of higher-than-usual balances for investment, reflecting the upfront receipt of pension remedy grant funding and forecast timing of expenditure on the capital programme.

Bank Costs

Chart 1 | Bank costs and forecast vs. budget

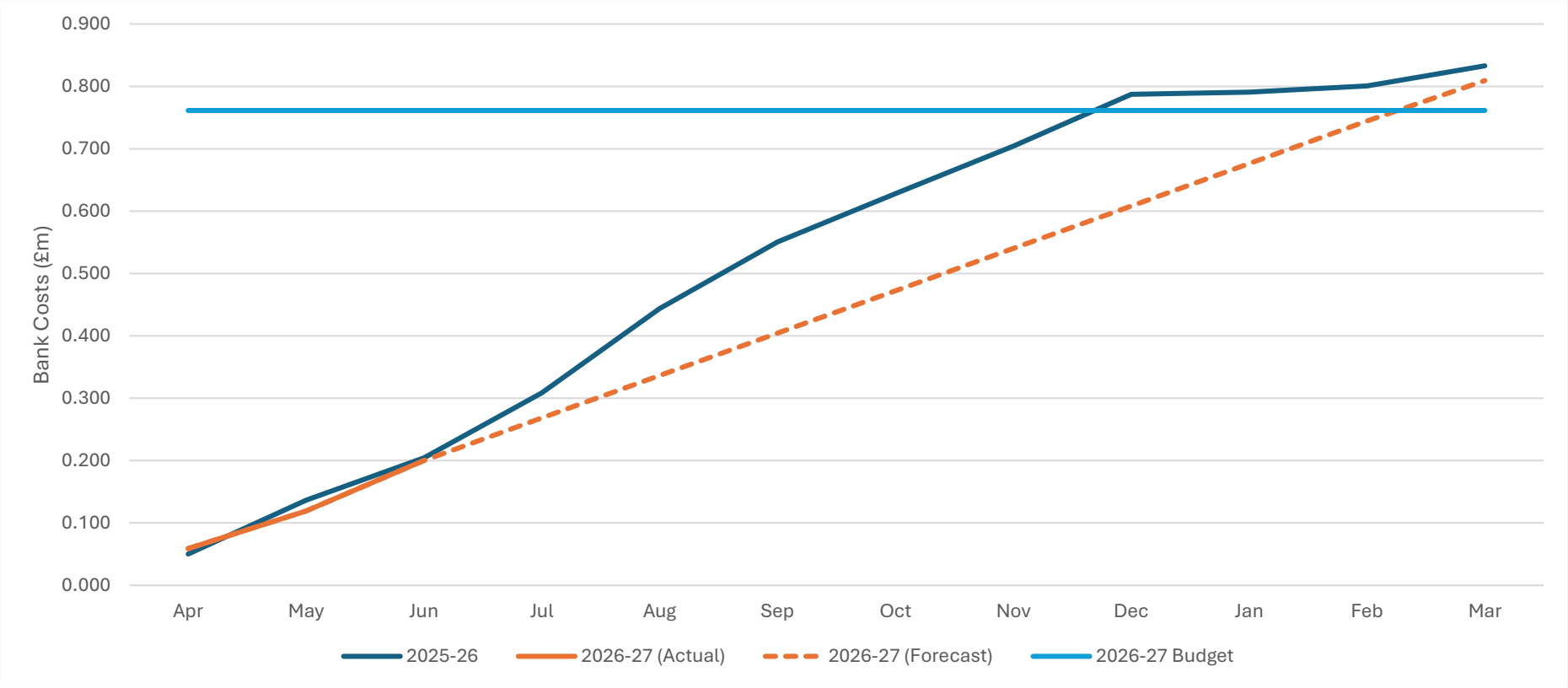

Chart 1 presents a comparative analysis of bank costs forecast in 2026-27 against the corresponding period in 2025-26. The bank forecasts include employer national insurance costs for 2026/27 and therefore 2025/26 have been restated for a comparison.

Wholetime Establishment

Chart 2 | Wholetime Establishment Roadmap

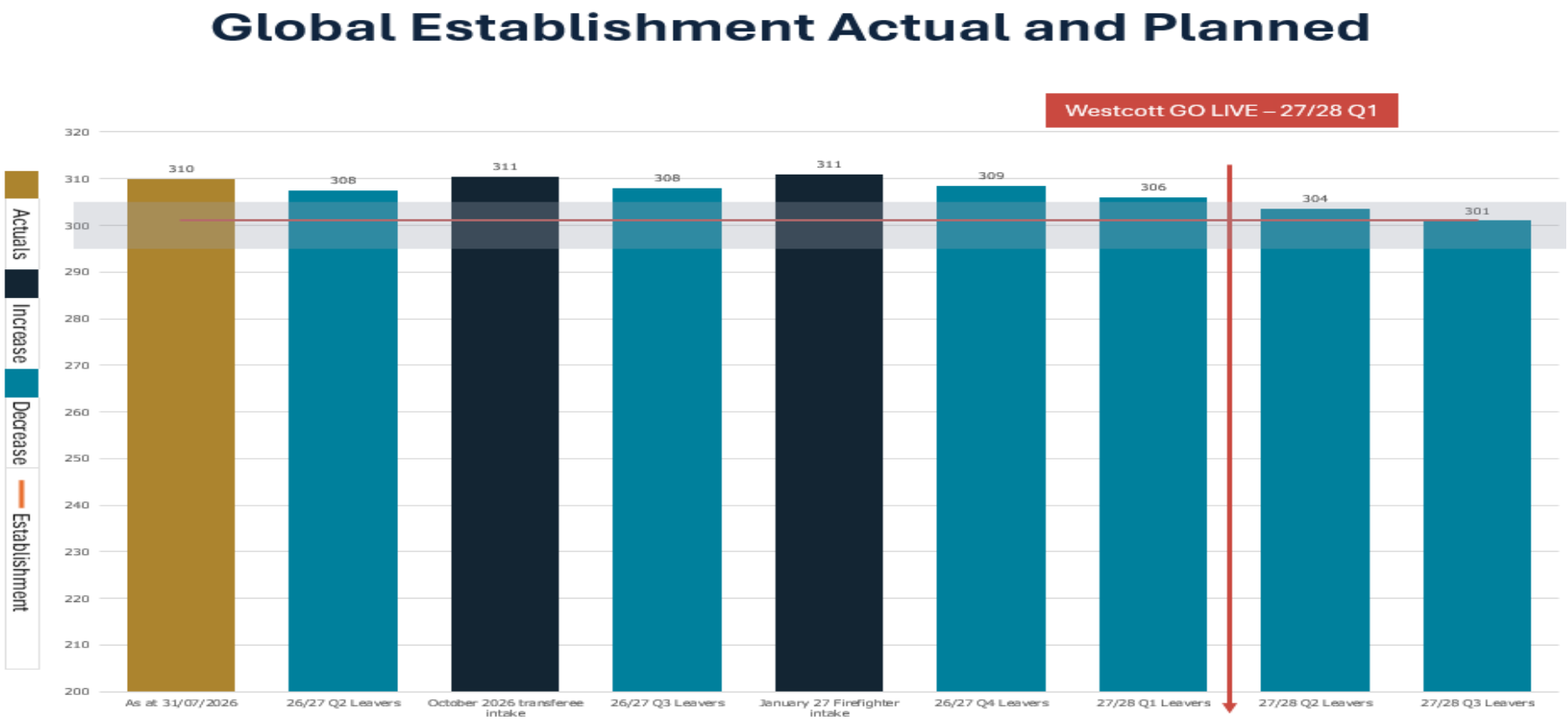

Chart 2 illustrates the wholetime operational establishment as of 31 July 2026 through to December 2027 taking into consideration projected retirees, leavers, transfers and recruitment of apprentices.

Funding

Table 6 | 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	-5.908	-3.208	-5.908	0.000
Fire Specific Grants	-1.769	-1.063	-1.874	-0.105
Business Rates	-5.490	-1.815	-5.261	0.229
Council Tax	-30.472	-10.381	-30.472	0.000
Transfers from Reserves	-0.240	0.000	-0.240	0.000
Total Funding	**-43.880**	**-16.467**	**-43.756**	**0.124**

A funding shortfall of approximately **£0.124m** is projected for 2026–27 financial year. This arose from changes in central grant allocations, namely:

- **Pension Grant:** An increase of approximately £105k compared to what we were anticipating based on previous years allocation.
- **Business Rates Reconciliation:** A shortfall of £229k is currently forecast, based on the latest estimates and adjustments identified since the budget was approved. However, this position remains subject to change and will be confirmed through the year-end reconciliation process, which could either increase or reduce the forecast shortfall.

  The funding position will continue to be closely monitored throughout the financial year, with any significant changes reported through the Authority's regular budget monitoring process.

Reserves

Table 7 | Reserves (including capital funding)

Reserve	Opening Balance (31 March 2026) £m	Use Of / (Contribution To) £m	Projected Year End Balance £m
General Fund Balance	-2.040	0.000	-2.040
Non-earmarked Reserves	**-2.040**	**0.000**	**-2.040**
Control Room Reserve (*)	-0.501	-0.090	-0.591
Future Funding Reserve	-0.355	0.355	0.000
Workforce Planning Reserve	-0.240	0.240	0.000
Earmarked Reserves (Revenue)	**-1.096**	**0.505**	**-0.591**
Usable Capital Receipts Reserve	0.000	0.000	0.000
Revenue Contribution to Capital	-13.805	5.103	-8.702
Earmarked Reserves (Capital)	**-13.805**	**5.103**	**-8.702**
Total Reserves	**-16.941**	**5.608**	**-11.333**

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

The projected balance on the Workforce Planning Reserve is expected to be fully utilised during 2026/27 to fund temporary roles that continue into the year, in line with the approved Medium Term Financial Plan (MTFP). Similarly, the Future Funding Reserve is forecast to be fully drawn down to support the approved budget carry-forward commitments from 2025/26.

The planned revenue contribution to capital reserves is dependent on significant progress being made on the Westcott and High Wycombe projects during 2026/27. Any delays in the delivery of these schemes are likely to result in associated budgets being carried forward into future years, with a corresponding reduction in the revenue contribution to capital reserves in the current year.

Capital Monitoring

Table 8 | Capital forecasts

Subjective Area	Full Year Budget £m	Actual Year to Date £m	Provisional Outturn £m	Projected C/F to 2027/28 £m	Projected Year End Variance £m
Property	9.306	0.137	6.117	3.189	0.000
Total Property Portfolio	**9.306**	**0.137**	**6.117**	**3.189**	**0.000**
Operational Red Fleet Vehicles	0.347	0.212	0.347	0.000	0.000
Operational White Fleet Vehicles	0.225	0.007	0.225	0.000	0.000
Total Fleet Vehicles	**0.572**	**0.219**	**0.572**	**0.000**	**0.000**
Operational Equipment	0.247	0.000	0.247	0.000	0.000
ICT Equipment	0.205	0.030	0.205	0.000	0.000
Total Equipment	**0.452**	**0.030**	**0.452**	**0.000**	**0.000**
Grand Total	**10.330**	**0.386**	**7.141**	**3.189**	**0.000**

Property: £6m was carried forward into 2026–27 in respect of the Westcott project, reflecting the phasing of expenditure across financial years. The remaining slippage related to other capital projects that were awaiting the outcome of the On-call review and the business case for High Wycombe.

Details of planned delivery for Property, along with Fleet, Equipment and ICT can be seen in Table 9.

Capital Monitoring

Table 9 | Delivery progress

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

Project	Start Date	End Date	Status	Full Year Budget	Actuals Year to Date	Provisional Outturn	Projected c/fwd to 2026-27	Commentary
Property – b/fwd from 2025-26								
Multiple sites – fire door replacement programme	Apr-26	Mar-27		54,000	38,320	54,000	0	Rolling programme
Drill tower Refurbishment	Apr-26	Mar-27		113,000	0	113,000	0	Some works delayed due to contractor availability
Planned Property Works 2026-27								
Wholetime and Day-Crewed Stations:								
Amersham - Roof Works	Apr-26	Jul-26		140,000	3,150	140,000	0	
On-Call Stations:								
On-Call Stations Alterations (OCIP)	-	-	-	281,300	0	0	281,300	Work to be scoped as part of on-call improvement programme.
Emergency Property Works 2026-27								
Unallocated Emergency Works Budget	-	-	-	53,651	0	53,651	0	To be allocated throughout the year
West Ashland – Roof & Balcony leaks failures	Apr-26	Jun-26		95,000	61,720	95,000	0	

Project	Start Date	End Date	Status	Full Year Budget	Actuals Year to Date	Provisional Outturn	Projected c/fwd to 2026-27	Commentary
Haddenham - Boiler and Pipework failures	Apr-26	Jul-26		30,500	27,472	30,500	0	
Brill - Damp	Apr-26	Mar-27		50,000	2,900	50,000	0	
West Ashland - Installation of Aircon Units in Gym	Jun-26	Jun-26		10,436	10,436	10,436	0	
Major Projects 2025-28								
Westcott – construction of new training centre	Apr-25	Sep-27		5,828,399	8,496	5,000,000	828,399	See separate project update report
High Wycombe – options appraisal	Aug-25	Oct-28		2,540,000	9,875	460,000	2,080,000	See separate project update report
Other Projects								
EDI and Welfare Works	-	-	-	90,000	0	90,000	0	Specific projects to be identified during the year
Transfer to Revenue	-	-	-	20,000	0	20,000	0	Funds for Ground Works
Red Fleet								
Water Carriers & Equipment x2	Dec-24	Jun-26		229,400	203,741	229,400	0	Vehicles delivered, remaining budget for additional equipment
Rural Firefighting Vehicles & Equipment x2	Dec-24	Nov-25		21,090	8,478	21,090	0	Vehicles delivered in 2025/26, remaining budget for additional equipment
Telehandler	Jul-26	Dec-26		96,500	0	96,500	0	
White Fleet								
Crew Vans x3	Jun-25	Aug-26		78,000	0	78,000	0	Delays with the manufacturing

Project	Start Date	End Date	Status	Full Year Budget	Actuals Year to Date	Provisional Outturn	Projected c/fwd to 2026-27	Commentary
Workshops Van & Equipment	Jul-24	Dec-25		9,057	7,448	9,057	0	Vehicles delivered in 2025/26, spend in 2026/27 relates to vehicle modifications
5 x Service Cars	Jul-26	Dec-26		138,000	0	138,000	0	
Equipment								
ICT Equipment								
ICT Hardware	Apr-26	Mar-27		99,215	0	99,215	0	
MDTs	Apr-26	Sep-26		67,785	0	67,785	0	
System Security	Apr-26	Mar-27		25,000	0	25,000	0	
Data Migration and Storage	-	-	-	55,000	0	55,000	0	Requirements to be reviewed during the year
Operational Equipment								
Operational Equipment	Apr-26	Mar-27		105,000	0	105,000	0	
Hydraulic Equipment	Apr-26	Mar-27		59,000	0	59,000	0	
Thermal Imaging Cameras	Apr-26	Jun-26		20,852	20,853	20,852	0	
Drysuits	Apr-26	Mar-27		20,250	9,400	20,250	0	
Total				**10,330,435**	**412,288**	**7,140,736**	**3,189,699**	

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Executive Committee, 9 September 2026

Report title: Financial Stability Risk Update

Lead Member: Councillor Niknam Hussain

Report sponsor: Louise Harrison, Chief Fire Officer / Chief Executive

Author and contact: Mark Hemming - mhemming@bucksfire.gov.uk

Action: Noting

Recommendations: That the Committee note the updated financial stability risk score.

Executive summary:

At the meeting of the Overview and Audit Committee on 22 July 2026, the financial stability risk score was discussed as part of Item 8, Corporate Risk Management.

The Director of Finance and Assets advised that since the Committee papers had been published the national pay award had been agreed at 3.8%. Whilst this was slightly lower than the budget included within the medium-term financial plan of 4%, only 54% of members voted in favour of accepting the award. Furthermore, inflation figures released on the day of the meeting showed that it had fallen slightly, but analysts expect it to increase again.

Future pay awards are being budgeted at 3% for each of the next three years, but given the points noted above, this may not be high enough. As circa 75% of the Service's costs are pay related, small changes in pay awards could have a significant impact on future years' budgets.

The Director of Finance and Assets suggested to Members that the finance risk be elevated to four by four on the grid (high impact, likely probability) from three by four (high impact, possible probability).

It being proposed and seconded, the Committee resolved that the financial sustainability risk be increased from 4x3 to 4x4.

The Chairman (of the Committee) was advised that the decision of the Committee to increase the financial sustainability risk score would be conveyed to the Lead Member for him to apprise the Authority.

A copy of the corporate risk register's risk map, with the update agreed by the Overview and Audit Committee at its 22 July 2026 meeting, is set out at Appendix A for ease of reference.

Financial implications: As set out in the Executive Summary.

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 aims, priorities and plans.

Legal implications: No direct impact.

Privacy and security implications: No direct impact.

Duty to collaborate: No direct impact.

Health and safety implications: No direct impact.

Environmental implications: No direct impact.

Equality, diversity, and inclusion implications: No direct impact.

Consultation and communication: No direct impact.

Background papers: Corporate Risk Management (Item 8), Overview and Audit Committee, 22 July 2026. Available at: OVERVIEW-AND-AUDIT-COMMITTEE-AGENDA-AND-REPORTS-220726-min.pdf (pp.23-53)

Corporate Risk Management Policy and Framework, Overview and Audit Committee, 5 November 2025. Available at: https://buckinghamshire.moderngov.co.uk/documents/g19449/Public%20reports%20pack%2005th-Nov-2025%2014.00%20BMKFA%20Overview%20Audit%20Committee.pdf?T=10 (pp.53-75)

Appendix	Title	Protective Marking
1	Corporate Risk Map and Risk Scoring Methodology	None

Corporate Risk Map

Probability	Impact: 1 Low	2 Minor	3 Moderate	4 High	5 Major
5 Almost Certain					
4 Likely			MAJOR INCIDENT READINESS (New) McCLOUD/SARGEANT (↔)	FINANCIAL STABILITY (↑)	
3 Possible			LOCAL GOVERNMENT REORGANISATION (↔) SUSTAINABILITY (New)	MISCONDUCT (↔) INFORMATION MANAGEMENT (↔) WORKFORCE AVAI/STAB (↔) INDUSTRIAL ACTION (↔)	
2 Unlikely					
1 Rare					DEVOLUTION (↔)

Risk Scoring Methodology

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.

Likelihood score		Impact Score 1 Low	2 Minor	3 Moderate	4 High	5 Major
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**	• Expected to occur in most circumstances. • Likely to happen regularly (e.g., annually). • Considered imminent.
4	**Likely**	• Will probably occur in many circumstances. • May happen, but not regularly. • Has occurred previously.
3	**Possible**	• Could occur under certain conditions. • May happen occasionally. • Has occurred in other organisations.
2	**Unlikely**	• Not expected under normal circumstances. • May occur infrequently. • Limited evidence of prior occurrence.
1	**Rare**	• Exceptional circumstances required. • Unlikely to happen. • No known precedent or history.

Impact Meanings

Score	Description	Characteristics
5	**Major**	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: • **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**	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. **Examples:** • **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**	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. **Examples:** • **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**	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. **Examples:** • **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**	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. **Examples:** • **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).

[Source: Risk Management Framework]

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Executive Committee, 9 September 2026

Report title: Performance Management – Q1 2026/27

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 Decision

Recommendation:

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

1. It is recommended that the Performance Management – Q1 2026/27 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 56 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 Q1 2026/27. This includes detail that shows performance alongside relevant trend information and where needed commentary.

The report also includes details of changes made to both the report layout and individual measures, since the last quarterly report.

At the end of Q1, 56 measures reported with a Blue, Green, Amber or Red status, one is awaiting information and one is currently for monitoring purposes only.

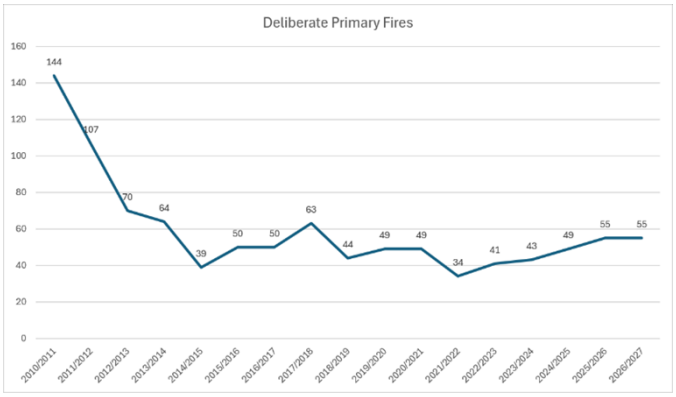
BRAG	Total	%
B	13	23%
G	21	38%
A	10	18%
R	9	16%
-	3	5%

Highlighted measures:

PRV 1.07 Deliberate Primary Fires

As you will see within the quarter one pack, deliberate primary fires increased when compared to the previous five year average.

The chart to the right shows the history of deliberate primary fires in Buckinghamshire and Milton Keynes between April and June since 2010.



The incidents during 2026 comprised 19 woodland fires, 19 vehicle fires, 7 fires involving outdoor structures, and 10 building fires, including 4 residential properties and 6 commercial premises.

Of the 10 building fires, six were not deemed to be serious (no flame damage, or was confined to the item that first ignited). Properties included: Public toilets, a private garage, a houseboat and a caravan.

The Service continues to work closely with a range of partners, including Thames Valley Police, local authorities, housing providers, schools and community groups, to reduce the occurrence of deliberate fire-setting and address the factors that contribute to such behaviour. This includes targeted educational programmes, community engagement activities, intelligence sharing, and interventions aimed at individuals and locations identified as being at increased risk.

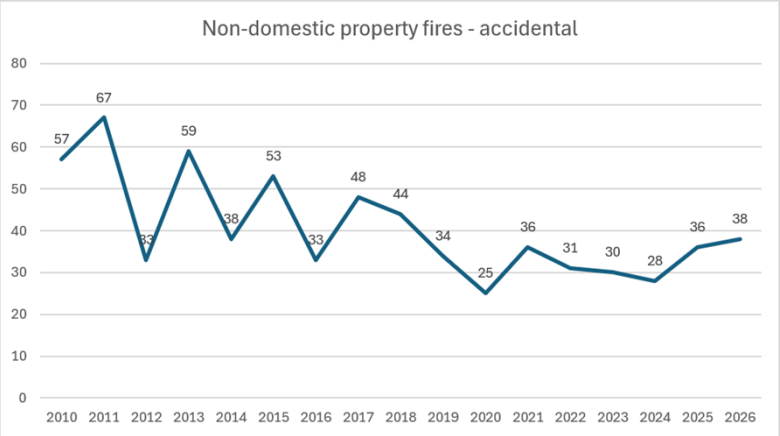
Reducing the incidents and impact of deliberate fires remains a key priority. Through continued partnership working, targeted prevention initiatives and an effective operational response, the Service aims to minimise both the occurrence of these incidents and the risks posed to communities, property and the environment.

PRT 1.02 Non-domestic Property Fires - Accidental

Quarter one of 2026/2027 saw higher than expected accidental non-domestic property fires.

The table to the right shows the history of these types of incidents.

While it is pleasing to see a positive trend over the longer period, the last couple of years have seen numbers start to increase again.



As mentioned in the report, certain property types can clearly be attributed to this increase. Garden sheds (8) and private garages (4) accounted for 12 of the 38 incidents. During the same period in 2022, there were only two recorded fires across these two property types and five in 2023. See the chart below for more details:

Property Type	2022/2023	2023/2024	2024/2025	2025/2026	2026/2027
Private garage	4	1	2	5	4
Private Garden Shed	4	1	3	7	8

It is worth noting that that these types of property fires are more prevalent during longer periods of hot and dry weather.

Finally, there were no serious injuries or fatalities recorded at non-domestic property fires during this period.

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.

Strategic Leadership Board	19 August 2026	Approved
Executive Committee	9 September 2026	
Fire Authority	16 September 2026	

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 2025/26
(Public Pack)Agenda Document for Buckinghamshire & Milton Keynes Fire Authority, 08/10/2025 14:00

Fire Authority, 01 December 2025: Performance Management – Q2 2025/26

(Public Pack)Agenda Document for Buckinghamshire & Milton Keynes Fire Authority, 10/12/2025 14:00

Fire Authority, 11 February 2026: Performance Management – Q3 2025/26

(Public Pack) Performance Management Pack Q3 2025/26 for Buckinghamshire & Milton Keynes Fire Authority

Fire Authority, 10 June 2026: Annual Report – 2025/26

(Public Pack) 2025-2026 Annual Report for Buckinghamshire & Milton Keynes Fire Authority

Appendix	Title	Protective Marking
1	BFRS Key Performance Measures – Q1 – 26-27	N/A

KEY PERFORMANCE MEASURES 2026-2027

Quarter one - April to June 2026

1. Contents

Introduction

This Key Performance Measures report has been designed as a rounded and balanced picture of how the Service is performing against our Community Risk Management Plan (CRMP). As such, the report is broken down into the six objectives and enablers detailed within the CRMP.

Due to the regular frequency of this report being produced, most indicators used within each measure represents 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.

It is worth noting that while there are over 50 measures detailed in this report, the Service monitors over three times this many measures, that are reported on and monitored on a monthly basis through our governance process.

Finally, there have been some changes made to the pack since the last pack that was shared in 2025/2026. Details of these changes can be found below;

1. The software used to edit the KPI pack will no longer be supported my Microsoft. This has resulted in the pack being produced is Microsoft Word, resulting in a slightly different look.
2. The RAG target indicator at the top right of each measure/page now aligns with what is good, for example, if 'less is better', the blue and green will be at the bottom of the indicator. If 'more is better' the blue and green will be at the top of the indicator.
3. The target for Non-domestic Property False Alarms has been changed from a comparison with the previous five-year average, to a comparison with the previous year's figures. The rationale for this: The way Buckinghamshire Fire & Rescue Service responds to automatic fire alarms in non-domestic buildings changed in 2024. These calls are now challenged and have reduced by roughly 50 per cent. The new target now helps us identify any changes in demand for these types of incidents, as opposed to promoting the success of the Automatic Fire Alarm procedure change.
4. Previously included KPI 'Response Model' has now been removed. This KPI showed the average number of appliances that were available at the beginning of each shift, split between day and night shift. The measure was originally built to support the 2020-2025 Public Safety Plan, the equivalent to our current Community Risk Management Plan (CRMP) however, our focus is now on our other availability measures that records appliance availability to the minute.
5. Availability On-Call and Availability On-Call – Immediately Available: The targets and historic data provided for these measures will now only use the information for our 12 On-

Call fire engines. It does not compare/include availability of appliances that are no longer part of our fleet (as not to show a false improvement in availability).

6. The previously named 'Maintenance of Operational Skills' has been changed to 'Maintenance of Operational Competence' This measure now focuses on the core competencies. The skills that were previously included within this measure have been split out and are monitored separately by the Service.
7. Mandatory E-Learning now includes On-Call firefighter targets and figures.
8. Absence – Wholetime, On-Call and Support have all seen changes to their targets. Previously the target was a comparison to the national figure and based on shifts lost per 1000's employees. The way in which this national benchmark is reported has changed and the data used in our previous benchmarking methodology is no longer available. Because of this we have moved to the average number of shifts lost per employee, allowing us to once again compare ourselves to the national picture.
9. RIDDOR reportable injuries has now been replaced with RIDDOR reportable incidents. This now covers incidents as well as just injuries.

REDUCING RISK AND KEEPING OUR COMMUNITY SAFE

Home Fire Safety Visits – PRV.1.01

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

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

What is good?	More is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	400	400	400	400	400	400	400	400	400	400	400	400
	Actual	**456**	**466**	**398**									
	Status	**B**	**B**	**G**									
Cumulative	Target	400	800	1200	1600	2000	2400	2800	3200	3600	4000	4400	4800
	Actual	**456**	**922**	**1320**									
	Status	**B**	**B**	**B**									

Supporting Commentary

During Q1, a total of 1,320 Home Fire Safety Visits (HFSVs) were completed, exceeding the quarterly target by 120 visits (10.0%) and representing a 4.2% increase compared with the same period in the previous year (1,267). This strong performance provides continued assurance that the Service is sustaining a high volume of HFSV activity and maintaining its commitment to prevention and community safety.

During the same period, the Service received 1,015 referrals from partner agencies and third parties, compared with 943 referrals during Quarter 1 of the previous year, representing a 7.6% year-on-year increase. This continued growth provides confidence that our prevention campaigns, promotional activity, and partnership working arrangements are successfully strengthening referral pathways across the county. The increase in referrals demonstrates growing awareness of our services amongst partner organisations and supports the identification and engagement of vulnerable individuals who may benefit from a Home Fire Safety Visit.

Home Fire Safety Visits - % Vulnerable – PRV.1.02

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.

B	=> 80%
G	=> 70%
A	=> 60%
R	< 60%

What is good?	Higher is better
Target	National average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%
	Actual	**75.0%**	**75.5%**	**81.2%**									
	Status	**G**	**G**	**B**									
Yearly Avg	Target	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%
	Actual	**75.0%**	**75.3%**	**77.1%**									
	Status	**G**	**G**	**G**									

Supporting Commentary

During Q1 Over 77% of visits were delivered to individuals who met the Service's high-risk criteria against a target of 70%, demonstrating that resources continue to be effectively targeted towards those most vulnerable to fire and other domestic risks. This targeted approach ensures that prevention activity is focused where it can have the greatest impact in reducing risk and improving community safety outcomes.

Number of Accidental Dwelling Fires (ADF) – PRV.1.03

The 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. This does not include properties such as hotels/hostels and residential institutions.

R	> 30% of target
A	> 20% of target
G	Within 20% of target
B	< 20% of target

What is good?	Fewer is better
Target	Five year average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	24	23	23	19	17	23	24	24	25	25	21	21
	Actual	**29**	**23**	**21**									
	Status	**A**	**G**	**G**									
Cumulative	Target	24	47	70	89	106	129	153	177	202	227	248	270
	Actual	**29**	**52**	**73**									
	Status	**A**	**G**	**G**									

Supporting Commentary

During Q1, the Service attended 73 accidental dwelling fires, which is slightly above the performance target of 70 incidents for the reporting period. While this represents a marginal increase of three incidents (4.3%) above target, it remains broadly in line with expected performance levels.

Although the overall number of accidental dwelling fires remains relatively stable, the increase highlights the continued importance of targeted prevention activity to reduce fire risk and protect vulnerable members of our communities. Understanding where incidents occur, who is most at risk, and the factors that contribute to fire occurrence remains a key focus of the Service's prevention strategy.

To further strengthen this approach, a new Domestic Dwelling Fire Targeting Methodology has been introduced. The methodology uses a range of historical incident, demographic and vulnerability data to identify household groups and communities that are at an elevated risk of experiencing a serious fire-related injury within each Service Delivery Area (SDA). This intelligence-led approach provides a clearer understanding of local risk profiles and enables prevention resources to be directed more effectively towards those individuals and households most likely to benefit from intervention.

This enables the Service to undertake meaningful community safety initiatives, increase fire safety awareness amongst higher-risk groups, and improve access to prevention services, including Home Fire Safety Visits and referrals to partner support agencies where appropriate.

By aligning prevention activity with identified risk, the Service aims to reduce the likelihood of accidental dwelling fires, minimise the potential for serious fire-related injuries, and ensure that resources are focused where they can deliver the greatest benefit to the communities we serve. The effectiveness of this approach will continue to be monitored throughout the year to ensure prevention activity remains responsive to emerging risks and changing community needs.

ADF Fire Related Fatalities – PRV.1.04

The 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.

R	> 3 a year
A	> 0 a year
G	0
B	

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	0	0	0	0	0	0	0	0	0	0	0	0
	Actual	**0**	**0**	**0**									
	Status	**G**	**G**	**G**									
Cumulative	Target	0	0	0	0	0	0	0	0	0	0	0	0
	Actual	**0**	**0**	**0**									
	Status	**G**	**G**	**G**									

Supporting Commentary

It is particularly pleasing to report that there were no recorded fire fatalities during Q1, compared with two fire-related fatalities during the same reporting period in the previous year. While each fatality is a tragedy with a profound impact on families, friends and local communities, this year's outcome represents a positive indicator of the effectiveness of the Service's ongoing efforts to reduce fire risk and improve community safety.

Whilst the reduction in fire fatalities is encouraging, the Service remains mindful that fire-related deaths are, fortunately, low-frequency events and can fluctuate from year to year. As such, a single reporting period does not in itself indicate a long-term trend. Continued focus on identifying those at greatest risk, delivering targeted prevention activity, and learning from incidents remains essential to sustaining this positive performance.

The Service will continue to work closely with partners and local communities, using risk and vulnerability data to ensure that prevention resources are directed towards those most in need.

ADF Fire Related Serious Injuries – PRV.1.05

The 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.

R	> 4 a year
A	> 2 a year
G	< 3 a year
B	

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	0	0	0	0	0	0	0	0	0	0	0	0
	Actual	**0**	**0**	**0**									
	Status	**G**	**G**	**G**									
Cumulative	Target	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3
	Actual	**0**	**0**	**0**									
	Status	**G**	**G**	**G**									

Supporting Commentary

It is encouraging to report that no serious injuries were recorded as a result of accidental dwelling fires during Q1. While any fire incident has the potential to cause significant harm, this outcome provides positive assurance that the Service's prevention, protection and operational response activities are continuing to contribute towards reducing the impact of fire on our communities.

Although the total number of accidental dwelling fires has increased slightly compared with both the target and the same period last year, the absence of serious injuries suggests that early intervention, improved fire safety awareness, safer behaviours within the home, and effective emergency response arrangements are helping to mitigate the consequences of these incidents.

Whilst this performance is encouraging, the Service recognises that a single serious fire incident can have devastating consequences, and therefore continued vigilance and investment in prevention activity remain essential to sustaining these positive outcomes.

Deliberate Dwelling Fires – PRV.1.06

The 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.

R	> 4 per month
A	> 2 per month
G	<= 2 per month
B	<= 1 per month

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3	< 3
	Actual	**1**	**3**	**0**									
	Status	**B**	**A**	**B**									
Cumulative	Target	< 3	< 5	< 7	< 9	< 11	< 13	< 15	< 17	< 19	< 21	< 23	< 25
	Actual	**1**	**4**	**4**									
	Status	**B**	**G**	**G**									

Supporting Commentary

There were four deliberate dwelling fires recorded during Q1, compared with five incidents during the same reporting period in the previous year. Whilst deliberate dwelling fires remain relatively low in number, each incident has the potential to place occupants, firefighters and members of the wider community at significant risk, as well as causing substantial damage to property and impacting community confidence.

Dwelling Fires Overview

Broughton - April – A fire in a single-occupancy house limited to first item ignited.

Beaconsfield - May – A fire involving a permanently occupied caravan/mobile home caused significant damage to the entire dwelling.

West Ashland – May – A fire in a purpose-built flat/maisonette with only smoke and heat damage recorded.

Newport Pagnell -May – A fire aboard a houseboat was limited to the first item ignited, preventing wider fire spread.

Two of the fires were successfully contained to the first item ignited, while one incident resulted only in minor smoke and heat damage. The remaining incident involved a permanently occupied caravan/mobile home, where the fire spread to affect the whole structure, reflecting the combustible nature of the construction and its limited fire resistance. Despite the varying

levels of property damage, there were no casualties, rescues, or injuries reported in any of the incidents and the average response time across all four incidents was 9 minutes and 18 seconds.

Given the comparatively low number of incidents, fluctuations can occur from year to year; however, maintaining a downward trend remains an important objective. The Service will continue to monitor deliberate fire activity closely, using incident and intelligence data to identify patterns.

Deliberate Primary Fires (to other's property) – PRV.1.07

The 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.

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

What is good?	Fewer is better
Target	Five year average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	14	14	16	19	22	12	11	9	7	9	9	12
	Actual	**24**	**23**	**8**									
	Status	**R**	**R**	**B**									
Cumulative	Target	14	28	44	64	85	98	109	118	125	134	143	155
	Actual	**24**	**47**	**55**									
	Status	**R**	**R**	**R**									

Supporting Commentary

During Q1, the Service attended 55 deliberate primary fires, which is consistent with the number recorded during the same reporting period in the previous year, but an increase when compared to the previous five year average. These incidents comprised 19 woodland fires, 19 vehicle fires, 7 fires involving outdoor structures, and 10 building fires, including 4 residential properties and 6 commercial premises.

The Service continues to work closely with a range of partners, including Thames Valley Police, local authorities, housing providers, schools and community groups, to reduce the occurrence of deliberate fire-setting and address the factors that contribute to such behaviour. This includes targeted educational programmes, community engagement activities, intelligence sharing, and interventions aimed at individuals and locations identified as being at increased risk.

Reducing the incidents and impact of deliberate fires remains a key priority. Through continued partnership working, targeted prevention initiatives and an effective operational response, the Service aims to minimise both the occurrence of these incidents and the risks posed to communities, property and the environment.

Deliberate Secondary Fires (to other's property) – PRV.1.08

The 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.

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

What is good?	Fewer is better
Target	Five year average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	37	34	36	41	44	22	23	20	12	12	15	21
	Actual	**44**	**58**	**33**									
	Status	**A**	**R**	**G**									
Cumulative	Target	37	71	108									
	Actual	**44**	**102**	**135**									
	Status	**A**	**R**	**R**									

Supporting Commentary

During Q1, the Service attended 135 deliberate secondary fires, compared with 131 during the same reporting period in the previous year, representing an increase of 4 incidents (3.1%). Secondary fires are generally smaller fires that occur outdoors and do not directly involve occupied property or persons. These incidents typically include refuse fires, grassland fires, and fires involving derelict buildings or vehicles, unless the incident results in casualties, rescues, or requires a significant operational response.

During the reporting period, 70% of all secondary fires were outdoor fires involving grassland, woodland, and loose refuse, with no structures involved.

The slight year-on-year increase highlights the need to maintain a continued focus on prevention, education and partnership activity to help reduce opportunities for deliberate fire-setting. While the increase is relatively small, with 135 incidents recorded during the quarter, deliberate secondary fires continue to account for a significant proportion of operational activity and therefore remain an area of focus for the Service.

To support a proactive approach to reducing deliberate fire-setting, all incidents identified as suspected arson are reported to Thames Valley Police (TVP) for investigation and follow-up by local policing teams. Details of these incidents are also reviewed and shared with Station Commanders through monthly reporting processes, enabling local trends, patterns and emerging hotspots to be identified at an early stage. This collaborative approach allows the

Service, TVP and Community Safety partners to assess whether additional intervention is required, including targeted community engagement, educational activity, environmental improvements, or place-based prevention initiatives.

The Service will continue to monitor deliberate secondary fire activity closely throughout the year.

A breakdown of the deliberate secondary fires can be found below:

Property Type	April	May	June	Total
Loose refuse (including in garden)	9	15	9	33
Tree scrub (includes single trees not in garden)	3	9	3	15
Small refuse/rubbish/recycle container (excluding wheelie bin)	2	8	3	13
Refuse/rubbish tip	3	4	1	8
Roadside vegetation	3	1	3	7
Grassland, pasture, grazing etc	2	2	2	6
Hedge	0	0	6	6
Wasteland	2	4	0	6
Other outdoor location	5	0	0	5
Park	2	2	0	4
Canal/riverbank vegetation	3	0	0	3
Fence	0	2	1	3
Other outdoor items including roadside furniture	2	1	0	3
Playground (not equipment) or Recreational area	2	1	0	3
Wheelie Bin	0	2	1	3
Car	0	1	2	3
Private/Domestic garden/allotment (vegetation not equipment/building)	1	1	0	2
Purpose Built Flat/Maisonette - multiple occupancy	2	0	0	2
Scrub land	1	1	0	2
Cables	0	1	0	1
Cycle path/public footpath/bridleway	0	0	1	1
Heathland or moorland	0	1	0	1
Large refuse/rubbish container (eg skip)	0	0	1	1
Other buildings/use not known	1	0	0	1
Other outdoor structures	0	1	0	1
Permanent Agricultural	1	0	0	1
River/canal	0	1	0	1
Total	44	58	33	135

PROTECTING PEOPLE FROM RISK IN THE BUILT ENVIRONMENT

Fire Safety Audits – PRT.1.01

The 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.

B	> 70 per month
G	> 59 per month
A	> 49 per month
R	< 50per month

What is good?	More is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	66	66	66	66	66	66	66	66	66	66	66	66
	Actual	**59**	**70**	**73**									
	Status	**A**	**G**	**B**									
Cumulative	Target	66	132	198	264	330	396	462	528	594	660	726	792
	Actual	**59**	**129**	**202**									
	Status	**A**	**G**	**G**									

Supporting Commentary

Protection completed 202 fire safety audits during the first quarter, exceeding the quarterly target of 198 and achieving 102% of target. This is an excellent result and reflects a strong team effort.

Audit activity continues to be directed through the refreshed Risk-Based Intervention Programme introduced on 1 April 2026, which prioritises premises presenting the greatest risk. During the quarter, approximately 85% of audits were undertaken at higher-risk premises, while 92% identified non-satisfactory fire safety standards. These results provide confidence that audit activity is effectively identifying and targeting premises where fire safety standards are most likely to be inadequate.

Where deficiencies are identified, inspectors use proportionate engagement and enforcement action to secure the necessary improvements. Overall, the quarter demonstrates strong audit performance while maintaining a clear focus on higher-risk premises and securing improvements where they are most needed.

Non-Domestic Property Fires - Accidental – PRT.1.02

The 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.

R	=> 16 per month
A	< 16 per month
G	=< 10 per month
B	< 5 per month

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	10	10	10	10	10	10	10	10	10	10	10	10
	Actual	**13**	**14**	**11**									
	Status	**A**	**A**	**A**									
Cumulative	Target	10	20	30	40	50	60	70	80	90	100	110	120
	Actual	**13**	**27**	**38**									
	Status	**A**	**A**	**A**									

Supporting Commentary

Whilst the number of accidental fires in non-domestic premises remained above target throughout the first quarter, performance improved in June, with incidents reducing from 14 in May to 11. There were 38 incidents during the quarter against a cumulative target of 30, resulting in an Amber position.

A notable feature of the quarterly data is the number of incidents involving ancillary structures. Garden sheds and private garages accounted for 12 of the 38 incidents (32%), rather than fires within occupied commercial or public premises. The remaining incidents occurred across a broad range of premises, with no single premises or sector driving the overall position. The data therefore reflects incident volume rather than a pattern of serious fires or deterioration within a particular business sector.

Relevant incidents are reviewed to identify fire safety concerns, repeat trends and opportunities for business engagement. Where premises fall within the scope of the Fire Safety Order, Protection activity is considered in accordance with the Risk-Based Inspection Programme and the circumstances of the incident.

Non-Domestic Property Fires - Deliberate – PRT.1.03

The 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.

R	> 4 per month
A	> 2 per month
G	=< 2 per month
B	< 1 per month

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	2	2	2	2	2	2	2	2	2	2	2	2
	Actual	**2**	**3**	**1**									
	Status	**G**	**A**	**G**									
Cumulative	Target	2	4	6	8	10	12	14	16	18	20	22	24
	Actual	**2**	**5**	**6**									
	Status	**G**	**A**	**G**									

Supporting Commentary

There were six deliberate fires in non-domestic premises during the first quarter, meeting the cumulative target and resulting in a Green position. Monthly performance varied, with two incidents in April, three in May and one in June.

The incidents involved a range of property types. These included a private garage in April; vehicle repair, retail, and hospital or medical care premises in May; and a public building in June. No single premises type or sector was identified as driving performance, and the low number of incidents does not indicate a wider trend.

Relevant incidents are reviewed to identify repeat locations, emerging trends and any fire safety or safeguarding concerns. Intelligence is shared with partner agencies where appropriate, and Protection or business engagement activity is considered according to the circumstances of each incident.

Non-Domestic Property False Alarms – PRT.1.04

The 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.

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

What is good?	Fewer is better
Target	2025/2026 figures

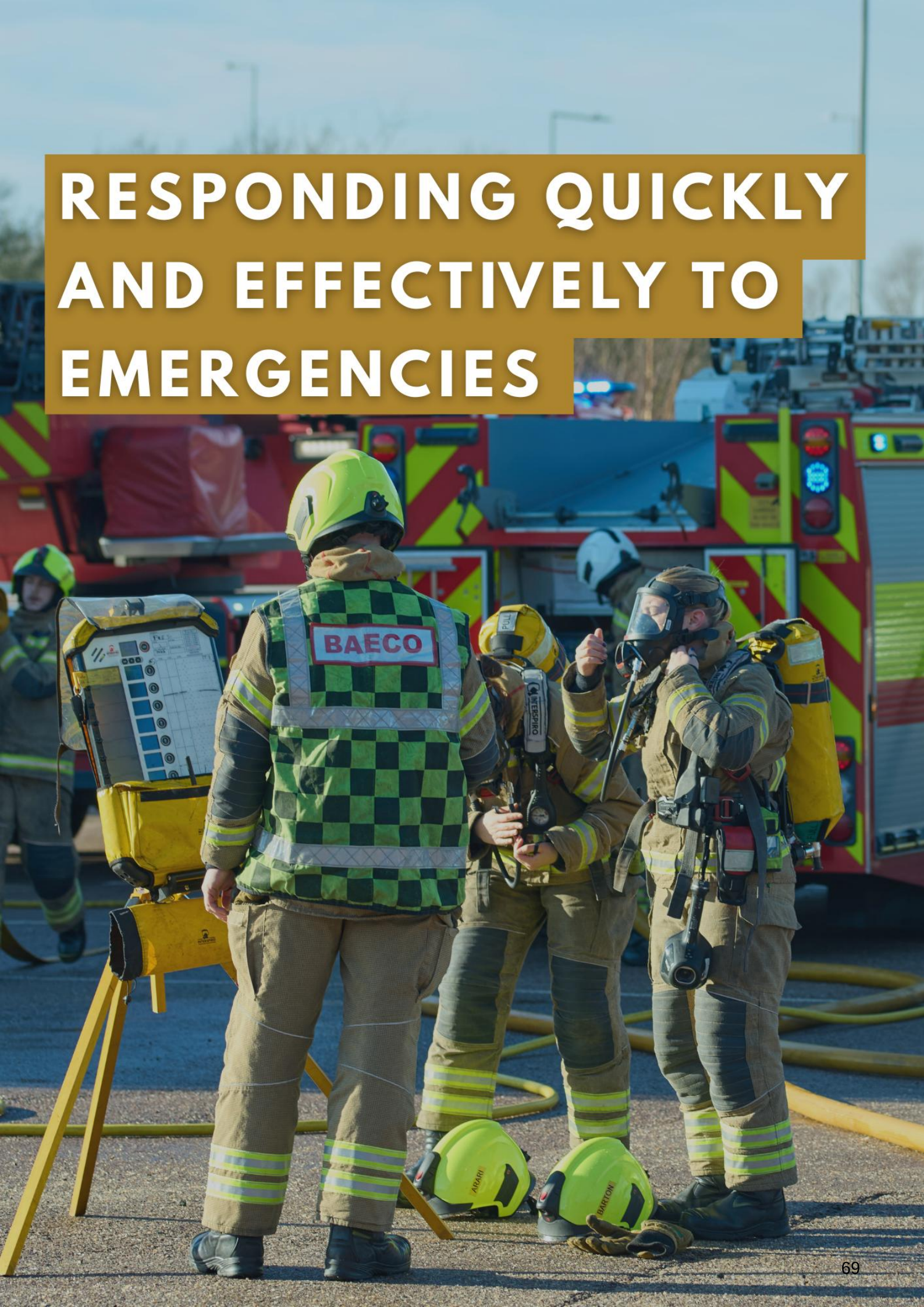
		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	62	62	46	65	66	66	71	78	56	66	49	59
	Actual	**53**	**83**	**62**									
	Status	**B**	**R**	**R**									
Cumulative	Target	62	124	170	235	301	367	438	516	572	638	687	746
	Actual	**53**	**136**	**198**									
	Status	**B**	**G**	**A**									

Supporting Commentary

There were 198 false alarms in non-domestic premises during the first quarter, compared with a cumulative target of 170, resulting in an Amber position. Monthly performance varied, with 53 incidents in April, 83 in May and 62 in June. Although incidents reduced by 25% between May and June, the June total remained above the lower monthly target of 46.

The incidents continue to be concentrated mainly within education premises and residential care settings, including care homes, retirement accommodation and sheltered housing. Work is already under way across both sectors through targeted business engagement, direct contact with premises and the promotion of guidance intended to reduce unwanted fire signals. Incident data will continue to be reviewed to identify repeat premises, common causes and opportunities for further intervention.

RESPONDING QUICKLY AND EFFECTIVELY TO EMERGENCIES



Average Attendance Time To All Incidents – RSP.1.01

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.

R	=> 10:00
A	> 09:30
G	=< 09:30
B	=< 08:30

What is good?	Quicker is better
Target	Set times

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00
	Actual	**09:10**	**08:56**	**09:12**									
	Status	**G**	**G**	**G**									
Yearly Avg	Target	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00
	Actual	**09:10**	**09:02**	**09:05**									
	Status	**G**	**G**	**G**									

Supporting Commentary

The average time to all incidents remains stable and consistent within a few seconds of the previous year's times and within the Service's target of 10:00.

This measure is continually monitored through our Service Delivery Group meetings monthly and any anomalies that are identified are scrutinised appropriately.

Average Attendance Time To Accidental Dwelling Fires – RSP.1.02

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.

R	=> 10:00
A	> 09:30
G	=< 09:30
B	=< 08:30

What is good?	Quicker is better
Target	Set times

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00
	Actual	**09:45**	**07:37**	**07:26**									
	Status	**A**	**B**	**B**									
Yearly Avg	Target	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00	<10:00
	Actual	**09:45**	**08:49**	**08:25**									
	Status	**A**	**G**	**B**									

Supporting Commentary

Whilst there was a longer average attendance time in April, this was still below the target set. The reasons for the three slowest responses in April were:

- The slowest response took 17 mins and 06 seconds. However, the reason for the slower response was due to crews being directed to holding point, where they waited for clearance by TVP before attending the incident. The time captured for this incident was when the appliance reached the incident, not the holding point.
- The second slowest response was due to the nearest two appliances having been mobilised to another serious incident minutes prior to the details of this incident being received.
- The third slowest response was in a rural area. The nearest/quickest wholetime fire engine was available and responded to the incident.

May and Junes times were significantly lower than the target. This measure is continually monitored through our Service Delivery Group meetings monthly and any anomalies that are identified are scrutinised appropriately.

Availability - Wholetime –RSP.1.03

The availability of BFRS wholetime pumps (fire engines) 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.

B	99% - 100%
G	98% - 98.99%
A	96% - 97.99%
R	< 96%

What is good?	Higher is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%
	Actual	**98.5%**	**97.6%**	**96.5%**									
	Status	**G**	**A**	**A**									
Yearly Avg	Target	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%
	Actual	**98.5%**	**98.1%**	**97.5%**									
	Status	**G**	**G**	**A**									

Supporting Commentary

The Service operates a relatively lean response model to maintain availability across the 12 wholetime appliances.

While the Q1 performance only fell marginally short of it's target, wholetime firefighter sickness levels did present challenges to resourcing at times.

Appliance degradation due to resourcing deficiencies is not the only reason unavailability, but there were 32 shifts during the quarter where the Service was reduced to 11 wholetime fire engines.

Bank Shifts – RSP.1.04

The number of banks shift utilised per month.

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

What is good?	Fewer is better
Target	2025/2026 Figures

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	191	254	193	294	379	300	212	213	225	7	27	83
	Actual	**149**	**169**	**221**									
	Status	**B**	**B**	**R**									
Cumulative	Target	191	445	638	932	1311	1611	1823	2036	2261	2268	2295	2378
	Actual	**149**	**318**	**539**									
	Status	**B**	**B**	**B**									

Supporting Commentary

Whilst we saw a reduction in Bank shifts for both April and May, we did have a spike in June. This was down to covering both short- and long-term absences and Bank shifts supporting the continuation of training and development courses/activities.

This year's target compares our bank usage compared with 2025/2026 however, below is a table show historic bank usage during the first quarter of the year, and shows the progress made in reducing the utilisation of this function:

Year	Apr	May	Jun	Q1 Total
2020/2021	292	322	370	984
2021/2022	349	355	394	1098
2022/2023	400	354	399	1153
2023/2024	319	306	277	902
2024/2025	197	137	260	594
2025/2026	191	254	193	638
2026/2027	149	169	221	539

The investment in additional frontline wholetime firefighters and the implementation of changes to the wholetime firefighters' leave policy have both contributed to a reduction in reliance on bank staff.

Availability On-Call – RSP.1.05

The availability of BFRS On-Call pumps (fire engines) 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.

B	=> 50%
G	=> 35%
A	=> 25%
R	< 25%

What is good?	Higher is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
	Actual	**31.6%**	**30.5%**	**32.2%**									
	Status	**A**	**A**	**A**									
Yearly Avg	Target	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
	Actual	**31.6%**	**31.1%**	**31.4%**									
	Status	**A**	**A**	**A**									

Supporting Commentary

It is pleasing to report improvements in actual overall availability, but acknowledging there is a lot more work to do to reach and get beyond the set target.

Workstreams continue and being driven through the On-Call Improvement Programme to concentrate on On-Call availability of both fire engines and specialist appliances.

A breakdown of appliance availability can be found below:

Callsign	Station	April	May	June
JC13P2	Broughton	36.5%	32.2%	43.3%
JC15P1	Olney	68.4%	60.9%	39.2%
JC16P3	West Ashland	41.0%	57.1%	59.4%
JC21P4	Aylesbury	12.8%	13.1%	5.5%
JC22P2	Buckingham	27.4%	15.7%	31.0%
JC23P1	Winslow	49.6%	32.9%	33.6%
JC24P1	Brill	20.3%	19.1%	15.8%
JC25P1	Waddesdon	51.4%	46.1%	72.8%
JC26P1	Haddenham	0.0%	0.0%	0.0%
JC32P1	Chesham	16.2%	23.0%	18.6%
JC42P1	Princes Risborough	38.5%	44.0%	46.0%
JC44P1	Marlow	17.2%	21.6%	21.4%
Total		31.6%	30.5%	32.2%

Availability On-Call – Immediately Available – RSP.1.06

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.

B	> 33%
G	=> 20%
A	< 20%
R	< 10%

What is good?	Higher is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%
	Actual	**17.3%**	**16.8%**	**18.1%**									
	Status	**A**	**A**	**A**									
Yearly Avg	Target	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%
	Actual	**17.3%**	**17.1%**	**17.4%**									
	Status	**A**	**A**	**A**									

Supporting Commentary

It is pleasing to report improvements in immediate availability, but acknowledging there is a lot more work to do to reach and get beyond the set target.

Workstreams continue and being driven through the On-Call Improvement Programme to concentrate on On-Call availability of both fire engines and specialist appliances.

A breakdown of appliance availability can be found below:

Callsign	Station	April	May	June
JC13P2	Broughton	22.5%	22.2%	25.7%
JC15P1	Olney	38.1%	32.7%	16.6%
JC16P3	West Ashland	35.9%	42.9%	46.9%
JC21P4	Aylesbury	7.2%	9.7%	5.4%
JC22P2	Buckingham	17.2%	5.0%	20.7%
JC23P1	Winslow	26.9%	19.5%	21.3%
JC24P1	Brill	11.0%	11.9%	9.4%
JC25P1	Waddesdon	14.8%	15.7%	26.0%
JC26P1	Haddenham	0.0%	0.0%	0.0%
JC32P1	Chesham	6.3%	11.4%	12.3%
JC42P1	Princes Risborough	13.3%	10.6%	13.7%
JC44P1	Marlow	14.8%	19.4%	19.1%
Total		17.3%	16.8%	18.1%

Total Incidents – RSP.1.07

The total number of incidents attended within Buckinghamshire and Milton Keynes (excluding co-responder incidents).

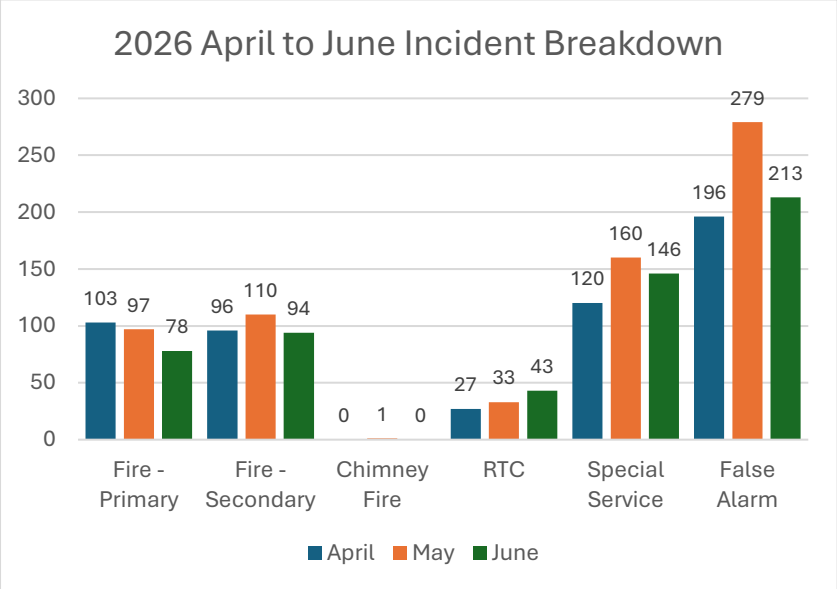
R	> 10.0% of target
A	> 2.5% of target
G	Within 2.5% of target
B	< 2.49% of target

What is good?	Monitor Only
Target	Five year average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	565	567	601	671	648	613	601	581	548	570	480	514
	Actual	**542**	**680**	**574**									
	Status	**B**	**R**	**B**									
Cumulative	Target	565	1132	1733	2404	3052	3665	4266	4846	5394	5964	6445	6959
	Actual	**542**	**1222**	**1796**									
	Status	**B**	**A**	**A**									

Supporting Commentary

A breakdown of the incident types by month can be found below:



A further breakdown of the false alarms can be found below:

Initial Call Type	Apr	May	Jun
Alarms	131	188	141
Fires	55	74	61
RTC	2	1	
Special Service	8	16	11
Total	196	279	213

OTB Mobilisations into BFRS Grounds – RSP.1.08

The number of mobilisations of appliance from Over The Border (OTB) into BFRS grounds.

R	=> 20% of target
A	=> 10% of target
G	Within 10% of target
B	< 10% of target

What is good?	Fewer is better
Target	Five year average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	145	145	170	254	220	163	146	154	162	132	116	124
	Actual	**144**	**136**	**153**									
	Status	**G**	**G**	**B**									
Cumulative	Target	145	290	460	714	935	1098	1244	1397	1559	1691	1807	1931
	Actual	**144**	**280**	**433**									
	Status	**G**	**G**	**G**									

Supporting Commentary

Whilst we have seen a reduction in mobilisations from OTB appliances. This is fairly close to the numbers in comparison to last year.

As we operate under the principle of 'quickest is quickest' in the Thames Valley. We will always incur cross border support.

It is important to remember that mutual aid arrangements with surrounding services continue to offer benefits to the communities we serve.

The vast majority of the support into BFRS comes from Thames Valley partners as assets are mobilised based on quickest is quickest.

Gerrards Cross station grounds receives roughly 40 per cent of all mobilisations into BFRS grounds. To put this in context, each of Slough's fire engines are utilised more than all of Northamptonshire, Hertfordshire and London's fire engines combined.

OTB Mobilisations out of BFRS Grounds – RSP.1.09

The number of mobilisations of appliance from BFRS into Over The Border (OTB) grounds.

R	=> 20% of target
A	=> 10% of target
G	Within 10% of target
B	< 10% of target

What is good?	Fewer is better
Target	Five year average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	45	57	53	64	59	46	53	41	37	42	35	44
	Actual	**60**	**84**	**77**									
	Status	**R**	**R**	**R**									
Cumulative	Target	45	102	155	219	278	324	378	418	455	497	532	576
	Actual	**60**	**144**	**221**									
	Status	**R**	**R**	**R**									

Supporting Commentary

Whilst we have seen an increase in mobilisations out of our service grounds in comparison to the previous year, we operate under the principle of 'quickest is quickest' we will always therefore support resourcing cross border incidents.

As with over the border mobilisations into BFRS grounds, mutual aid arrangements with surrounding services continue to offer benefits to the communities we serve.

AN INCLUSIVE, HEALTHY AND ENGAGED WORKFORCE

Actual vs Establishment - Wholetime – PPL.1.01

The total number of people in Wholetime roles v's budgeted establishment as at the last day of the month.

B	Within 0% of target
G	Within 3.5% of target
A	Within 5.0% of target
R	Outside 5.0% of target

What is good?	Closer to target
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	301	301	301	301	301	301	301	301	301	301	301	301
	Actual	**312**	**310**	**310**									
	Status	**A**	**G**	**G**									
Yearly Avg	Target	301	301	301	301	301	301	301	301	301	301	301	301
	Actual	**312**	**311**	**311**									
	Status	**A**	**G**	**G**									

Supporting Commentary

During Quarter 1, the Wholetime Establishment remained broadly stable, decreasing from 312 FTE in April to 310 FTE in May. Throughout the period, our monthly leaver rate continued to improve, reducing from 0.9 in April, to 0.6 in May, and reaching 0 in June. This positive trend indicates a reduction in workforce turnover and reflects a period of relatively low natural attrition across the Service.

Several changes were recorded within the operational staffing structure during the quarter, these changes reflect routine personnel movements, promotions and workforce management activities designed to maintain operational effectiveness and appropriate supervisory capacity across the Service.

Continued monitoring of establishment levels, promotion pathways and attrition trends has enabled the Service to manage staffing changes proactively while maintaining operational resilience and preparedness.

Overall, Quarter 1 reflects a stable operational workforce position characterised by low attrition, controlled establishment movements and proactive workforce planning. The reduction in projected leaver rates across the quarter, coupled with ongoing recruitment and succession planning activity, places the Service in a strong position to maintain operational resilience while responding effectively to future workforce and service delivery requirements.

Actual vs Establishment – On-Call – PPL.1.02

The total number of people in On-Call roles v's budgeted establishment (FTE).

B	Within 5% of target
G	Within 10% of target
A	Within 15% of target
R	Outside 15% of target

What is good?	Closer to target
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	96	96	96	96	96	96	96	96	96	96	96	96
	Actual	**59.3**	**59.8**	**59.9**									
	Status	**R**	**R**	**R**									
Yearly Avg	Target	96	96	96	96	96	96	96	96	96	96	96	96
	Actual	**59.3**	**59.5**	**59.6**									
	Status	**R**	**R**	**R**									

Supporting Commentary

The On-Call Establishment FTE increased steadily throughout Quarter 1, rising from 59.25 FTE in April 2026 to 59.92 FTE in June 2026, representing a net increase of 0.67 FTE over the period. While this demonstrates positive movement, the establishment remains below the budgeted level of 96 FTE. It is important to note that FTE does not directly equate to headcount, as a single FTE can be fulfilled by multiple individuals under the flexible On-Call employment model.

Establishment changes during the quarter resulted in an overall increase in On-Call FTE. This was mainly due to new On-Call appointments, additional Wholetime employees taking on On-Call contracts, and several employees increasing their contracted availability from 40 to 60 hours per week. These gains outweighed a small number of leavers and reductions in contracted hours, resulting in a positive net movement across the quarter.

A key focus during the quarter has been the review of the On-Call recruitment process. Benchmarking activity has been undertaken with other Fire and Rescue Services to identify good practice and opportunities for improvement. Building on this work, a proposal for a redesigned On-Call recruitment programme was presented at the People Delivery Group, and approval gained for a 12-month pilot commencing in September 2026. The proposed model includes rolling recruitment campaigns, consolidated weekend assessment days, enhanced candidate engagement and support, and streamlined assessment arrangements aimed at

improving attraction, conversion and appointment rates while reducing unnecessary barriers to entry.

Overall, Quarter 1 has delivered small but positive growth in On-Call establishment levels, alongside important foundational work to improve data quality, contract management and recruitment processes. These initiatives are intended to support a more sustainable and effective On-Call workforce model, ensuring the Service remains agile, responsive and well-positioned to meet future operational demands.

Actual vs Establishment - Support – PPL.1.03

The total number of people in Support roles v's budgeted establishment as at the last day of the month (FTE).

B	Within 0% of target
G	Within 7.5% of target
A	Within 10% of target
R	Outside 10% of target

What is good?	Closer to target
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1
	Actual	**129.1**	**130.1**	**131.1**									
	Status	**G**	**G**	**G**									
Yearly Avg	Target	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1	137.1
	Actual	**129.1**	**129.6**	**130.1**									
	Status	**G**	**G**	**G**									

Supporting Commentary

During Quarter 1, the Support Establishment remained broadly stable, with the target establishment maintained at 137.11 FTE throughout the reporting period. Actual establishment increased from 129.13 FTE in April and May to 130.13 FTE in June, representing an increase of 1.00 FTE over the quarter. Despite this improvement, the establishment remained below target resulting in continued recruitment activity across support functions.

Support staff establishment changed during the quarter due to a mix of new starters, leavers and changes to contracted hours. April and May saw several increases and reductions in working hours, alongside new starters and leavers, reflecting normal workforce movement and ongoing alignment of resources to organisational needs. June delivered a modest improvement, with one new starter and one leaver, increasing actual FTE to 130.13 — the highest level recorded during the quarter. This suggests recruitment activity is beginning to offset attrition, although vacancies remain across several support areas and recruitment to these continues.

Although the gap between the target and actual establishment remains significant at approximately 7.0 FTE, the overall position remained relatively stable during the quarter, with a slight upward trend in June. Ongoing recruitment initiatives and workforce planning activity will continue to be monitored closely to support organisational resilience, maintain service delivery standards and ensure support functions remain aligned with current and future Service priorities.

Staff Turnover – PPL.1.04

The percentage of employees who leave the Service, expressed as a percentage of the total workforce.

R	=> 2% per month
A	< 2% per month
G	< 1% per month
B	

What is good?	Less is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%	<1%
	Actual	**0.8%**	**0.6%**	**0.2%**									
	Status	**G**	**G**	**G**									
Cumulative	Target	<1%	<2%	<3%	<4%	<5%	<6%	<7%	<8%	<9%	<10%	<11%	<12%
	Actual	**0.8***	**1.4%**	**1.6%**									
	Status	**G**	**G**	**G**									

Supporting Commentary

During Quarter 1, the organisation recorded a total of eight employee leavers across the Wholetime, On Call and Support workforces. Turnover levels remained low throughout the period and continued to reflect a stable workforce position, with departures largely attributable to natural attrition, contract completions and individual career decisions rather than any emerging workforce concern.

Encouragingly, the number of leavers reduced month-on-month during the quarter, falling from four in April to one in June, indicating a positive workforce retention position.

The Service continues to monitor workforce turnover trends closely and work collaboratively with managers to ensure effective workforce planning arrangements remain in place. This includes maintaining oversight of attrition patterns, succession planning requirements and recruitment activity to ensure appropriate staffing levels are sustained across all areas of the organisation.

Overall, Quarter 1 presents a positive workforce stability picture, with low levels of employee turnover and no significant indicators of retention risk. Continued monitoring and proactive workforce planning will support organisational resilience and ensure the Service remains well-positioned to meet current and future operational and service delivery requirements.

Maintenance of Operational Competence – PPL.1.05

The progress against maintenance of operational competencies by:
- Wholetime firefighters and supervisory managers
- On-Call firefighters and supervisory managers

Where a firefighter has dual roles, only their primary role is counted.

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

What is good?	Higher is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Wholetime	Target	12%	24%	36%	36%	48%	60%	60%	72%	84%	84%	96%	96%
	Actual	**33.8%**	**42.8%**	**56.5%**									
	Status	**B**	**B**	**B**									
On-Call	Target	12%	24%	36%	36%	48%	60%	60%	72%	84%	84%	96%	96%
	Actual	**18.7%**	**23.7%**	**31.8%**									
	Status	**B**	**G**	**A**									

Supporting Commentary

This measure represents the planned competency maintenance workload for staff between April 2026 and March 2027. It is intended solely to reflect the volume of activity required and does not identify or suggest that any firefighter is not competent in their role.

Maintenance of Competence (MOC) performance for WT is currently exceeding the forecast target at Q1, indicating a strong focus on competence-related activity.

The introduction of pdrPro has resulted in a significant change to the way MOC activities are recorded, managed, and reported. As personnel continue to adapt to the new system, a period of transition is expected, with some short-term impact on performance reporting. Targeted communications, guidance, and engagement activity will continue through established channels to improve user confidence, increase system adoption, and support the delivery of MOC performance against target levels.

Mandatory E-Learning – PPL.1.06

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.

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

What is good?	Higher is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Wholetime	Target	11%	22%	33%	44%	55%	66%	77%	88%	95%	95%	95%	95%
	Actual	**20%**	**34%**	**49%**									
	Status	**B**	**B**	**B**									
On-Call	Target	11%	22%	33%	44%	55%	66%	77%	88%	95%	95%	95%	95%
	Actual	**20%**	**34%**	**43%**									
	Status	**B**	**B**	**B**									
Support	Target	11%	22%	33%	44%	55%	66%	77%	88%	95%	95%	95%	95%
	Actual	**17%**	**28%**	**45%**									
	Status	**B**	**B**	**B**									

Supporting Commentary

As at the end of the quarter, module completion rates are as follows:

Q1 April-June focus - EDI - 56%
Q2 July-September focus - Health & Safety and Protection - 64%
Q3 October-December - Data Protection - 27%

This modular approach to e-learning enables employees to focus on a specific set of modules each quarter, breaking learning into manageable, bite-sized elements and helping to ensure completion rates remain on track.

Monthly reports continue to be provided to managers, enabling them to effectively support their teams and ensuring the Service remains on course to achieve its KPIs.

Our People Administrator continues to work closely with Subject Matter Experts (SMEs) to ensure content remains current and relevant. They also oversee the timely introduction of modules throughout the year, aligning learning activity with the Service's strategic objectives.

We will continue to develop our management reporting as new modules are introduced to ensure the annual completion is evenly distributed and clearly communicated.

Appraisal and Objectives Completion – PPL.1.07

The percentage of all staff that have received their:

- 2025/2026 end of year review (appraisal).
- 2026/2027 objectives
- 2026/2027 half year review

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

What is good?	Higher is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Appraisal	Target	30%	60%	90%	95%	95%	95%	-	-	-	-	-	-
	Actual	**68%**	**80%**	**83%**				**-**	**-**	**-**	**-**	**-**	**-**
	Status	**B**	**B**	**A**				**-**	**-**	**-**	**-**	**-**	**-**
Objectives	Target	30%	60%	90%	95%	95%	95%	-	-	-	-	-	-
	Actual	**20%**	**54%**	**66%**				**-**	**-**	**-**	**-**	**-**	**-**
	Status	**A**	**A**	**R**				**-**	**-**	**-**	**-**	**-**	**-**
Review	Target	-	-	-	-	-	-	25%	50%	75%	80%	80%	80%
	Actual	**-**	**-**	**-**	**-**	**-**	**-**						
	Status	**-**	**-**	**-**	**-**	**-**	**-**						

Supporting Commentary

Returns throughout this period have been lower than expected. This is due to various factors:

- More stringent quality assurance checking of returns pushing back on Managers to complete forms in full,
- Emails / tickets being submitted and never received meaning Managers are having to locate and re-submit,
- Incorrect forms being submitted following the launch of the new form in April 2026.
- Delays in uploading due to the sheer volume of requests (not rectified due to a manual entry process alongside the upload process.

Monthly reports continue to be provided to managers, enabling them to effectively support their teams and ensuring the Service remains on course to achieve its KPIs.

Training is periodically delivered across the service in group sessions, 1-2-1 sessions and Thrive to enable our managers to have meaningful, career guiding, development conversations. The form launched in 2026 is now fully aligned with the Behavioural and Leadership Framework as well as the Training Needs Analysis (TNA) process, encouraging employers to holistically review their development and career goals with their managers.

We will Continue to support our managers with Appraisal conversations and returns as we progress through Q2 and approach the mid-year point. The aim is to identify and remove the barriers that have resulted in low returns at the start of the year, and to achieve the Appraisal and Objectives KPIs as soon as possible so that managers can fully focus on the mid-year Appraisal process. Training will be arranged for September and October to provide support where needed.

Absence Rate – Wholetime Staff – PPL.1.08

The average number of shifts lost per wholetime firefighter due to sickness vs the average of the national average of the previous three years.

This covers short and long-term sickness.

R	> 20% of target
A	> 10% of target
G	= 10% of target or less
B	< 20% of target

What is good?	Less is better
Target	National Average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	0.84	0.84	0.84									
	Actual	**1.54**	**1.14**	**1.19**									
	Status	**R**	**R**	**R**									
Cumulative	Target	0.84	1.68	2.52									
	Actual	**1.54**	**2.67**	**3.86**									
	Status	**R**	**R**	**R**									

Supporting Commentary

Whilst the number of sickness episodes reduced during Q1, Wholetime absence remained above the desired level, largely due to a small number of complex long-term cases. Musculoskeletal conditions, particularly back and lower-limb injuries, remained the main causes of absence, with several station hotspots identified.

The impact of prolonged absence is reduced operational availability and increased pressure on workforce resilience. Through the Attendance Management Improvement Plan, greater emphasis is being placed on early intervention, improved case management and regular oversight through Station and Group Commander attendance meetings. This includes timely Occupational Health referrals, alternative duties, phased returns and clearer return-to-work plans to help employees return safely and sustainably.

Absence Rate – On-Call Staff – PPL.1.09

The average number of calendar days lost per On-Call firefighter due to sickness vs the average of the national average of the previous three years.

This covers short and long-term sickness.

R	> 20% of target
A	> 10% of target
G	= 10% of target or less
B	< 20% of target

What is good?	Less is better
Target	National Average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	1.18	1.18	1.18									
	Actual	**1.06**	**1.21**	**1.79**									
	Status	**G**	**G**	**R**									
Cumulative	Target	1.18	2.36	3.54									
	Actual	**1.06**	**2.27**	**4.06**									
	Status	**G**	**G**	**A**									

Supporting Commentary

On-call absence during Q1 was significantly influenced by a small number of long-term cases. Musculoskeletal conditions remained the main cause, alongside mental health, cardiac or circulatory conditions and post-operative recovery. Some absence also relates to employees who hold both Wholetime and on-call contracts.

The impact is reduced on-call availability and additional pressure on operational resilience within affected areas. Active cases are being reviewed more consistently through the Attendance Management Improvement Plan, with a focus on regular welfare contact, early Occupational Health support and clear case actions. Alternative duties and supported returns are considered wherever appropriate to reduce the duration of absence and improve availability.

Absence Rate – Support Staff – PPL.1.10

The average number of shifts lost per support staff employee due to sickness vs the average of the national average of the previous three years.

This covers short and long-term sickness.

R	> 20% of target
A	> 10% of target
G	= 10% of target or less
B	< 20% of target

What is good?	Less is better
Target	National Average

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	0.74	0.74	0.74									
	Actual	**1.12**	**1.36**	**1.29**									
	Status	**R**	**R**	**R**									
Cumulative	Target	0.74	1.48	2.22									
	Actual	**1.12**	**2.48**	**3.77**									
	Status	**R**	**R**	**R**									

Supporting Commentary

Support staff absence during Q1 was primarily driven by a small number of complex long-term cases. Mental-health-related absence was the most significant contributor, with absence concentrated within a small number of departments.

The impact includes reduced capacity within affected teams and additional workload pressures for colleagues. The Attendance Management Improvement Plan is supporting a more structured approach to case management, including targeted reviews where departmental hotspots are identified. Early Occupational Health and wellbeing support, regular welfare contact, workplace adjustments and phased returns are being used to address individual needs.

Grievances – PPL.1.11

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.

R	> 2 per month
A	2 per month
G	< 2 per month
B	

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2
	Actual	**0**	**0**	**1**									
	Status	**G**	**G**	**G**									
Cumulative	Target	<2	<4	<6	<8	<10	<12	<14	<16	<18	<20	<22	<24
	Actual	**0**	**0**	**1**									
	Status	**G**	**G**	**G**									

Supporting Commentary

Throughout Q1, one new case was opened. At the end of quarter, there are three live cases, two are open from the previous period. These relate to:

- Conduct & process unfairness – open 107 days
- Conduct & process unfairness – open 106 days
- Unacceptable behaviour - open 15 days

No specific trends can be established. 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.

Disciplinaries – PPL.1.12

The number of new disciplinaries recorded each month.

R	> 2 per month
A	2 per month
G	< 2 per month
B	

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2
	Actual	**0**	**0**	**0**									
	Status	**G**	**G**	**G**									
Cumulative	Target	<2	<4	<6	<8	<10	<12	<14	<16	<18	<20	<22	<24
	Actual	**0**	**0**	**0**									
	Status	**G**	**G**	**G**									

Supporting Commentary

Throughout Q1, no new cases have been opened. At the end of the quarter, there are two live cases.

In relation to case resolution times, a small number of complex matters have taken longer to progress due to factors outside the Service's direct control. Appropriate oversight remains in place, with regular monitoring of progress and continued focus on the welfare and wellbeing of those involved. The Service remains committed to ensuring these matters are managed effectively and progressed as soon as circumstances allow.

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.

Independent Reporting Line Calls – PPL.1.13

The number of independent reporting line calls received each month.

R	
A	
G	
B	

What is good?	Monitor
Target	N/A

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	-	-	-	-	-	-	-	-	-	-	-	-
	Actual	**0**	**3**	**4**									
	Status	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
Cumulative	Target	-	-	-	-	-	-	-	-	-	-	-	-
	Actual	**0**	**3**	**7**									
	Status	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

Supporting Commentary

During Q1, seven new cases were opened, with seven cases remaining live at the end of the quarter. It should be noted that some of the cases relate to the same underlying concerns raised through separate individual calls. Appropriate oversight remains in place to ensure these matters are managed consistently and progressed in line with relevant processes.

The concerns raised are from different staffing groups across the Service and are being managed through the assessment panel and investigated accordingly. No patterns can be determined from the concerns raised, and it is reassuring that staff feel confident and able to report concerns through this platform.

Compliments – PPL.1.14

The number of compliments received each month.

B	> 5 per month
G	=> 0 per month
A	
R	

What is good?	More is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	-	-	-	-	-	-	-	-	-	-	-	-
	Actual	**4**	**6**	**14**									
	Status	**G**	**B**	**B**									
Cumulativ	Target	-	-	-	-	-	-	-	-	-	-	-	-
	Actual	**4**	**10**	**24**									
	Status	**G**	**G**	**B**									

Supporting Commentary

During Q1 2026, Buckinghamshire Fire & Rescue Service received 24 compliments and expressions of thanks from members of the public, partner organisations, community groups and emergency service colleagues. The majority (63%) was relating to operational incident response. Additionally, 21% recognised community engagement activities, 8% educational presentations, 4% Home Fire Safety Visits, 8% fell into miscellaneous category.

Feedback over the last quarter consistently highlighted the professionalism and dedication demonstrated by crews during incidents ranging from:

- Fire and carbon monoxide activations
- Animal rescue
- Major incidents
- Community engagement and educational activities

One particularly noteworthy compliment was received from the owners of a farm following a significant fire at their premises. They praised attending crews for their professionalism, care and kindness during a distressing incident. They stated that they "knew we were in safe hands". In recognition of the support received, they also expressed a wish to make a charitable donation to the FF charity.

Complaints – PPL.1.15

The number of complaints received each month. This does not identify if the complaints were upheld.

R	> 2 per month
A	2 per month
G	<= 1 per month
B	

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2	<2
	Actual	**0**	**0**	**2**									
	Status	**G**	**G**	**A**									
Cumulative	Target	<2	<3	<4	<5	<6	<7	<8	<9	<10	<11	<12	<13
	Actual	**0**	**0**	**2**									
	Status	**G**	**G**	**G**									

Supporting Commentary

During Q1 2026, a total of 2 complaints were received during the reporting period.

The first complaint related to an allegation of professional misconduct in connection with a safeguarding referral.

The second complaint concerned the accuracy of incident location mapping on the Service website. The complainant reported that some incident maps did not correspond to the incident location and, in some cases, displayed locations outside Buckinghamshire. The complaint also highlighted dissatisfaction with the lack of response to previous reports of the issue.

Both complaints were formally recorded and allocated for investigation in line with the Service's complaints process.

Injury Rate – PPL.1.16

The injury rate shows the number of people injured over a month, based on a group of 1,000 employees or workers.

R	=> 10 per month
A	< 10 per month
G	< 8 per month
B	< 5 per month

What is good?	Less is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<8	<8	<8	<8	<8	<8	<8	<8	<8	<8	<8	<8
	Actual	**3.8**	**3.8**	**1.9**									
	Status	**B**	**B**	**B**									
YTD Avg	Target	<8	<8	<8	<8	<8	<8	<8	<8	<8	<8	<8	<8
	Actual	**3.8**	**3.8**	**3.2**									
	Status	**B**	**B**	**B**									

Supporting Commentary

We are delighted that our injury rate remains significantly below the sector average, reflecting our ongoing commitment to creating a safe and healthy working environment for all employees.

While this achievement is the result of a comprehensive approach to health and safety, it is ultimately our people who deserve much of the credit. Their dedication, vigilance, and willingness to engage with our safety processes help ensure that potential hazards are identified and addressed before they can result in harm.

Workplace Injuries – PPL.1.17

The number of workplace injuries reported across the Service. This includes operational staff, support staff, agency and visitors.

R	=> 6 per month
A	< 6 per month
G	=< 2 per month
B	0 per month

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<3	<3	<3	<3	<3	<3	<3	<3	<3	<3	<3	<3
	Actual	**2**	**2**	**1**									
	Status	**G**	**G**	**G**									
Cumulative	Target	<3	<5	<7	<9	<11	<13	<15	<17	<19	<21	<23	<25
	Actual	**2**	**4**	**5**									
	Status	**G**	**G**	**G**									

Supporting Commentary

Of the five recorded workplace injuries recorded, one was recorded as moderate and the remaining four as minor. A breakdown of these can be found below.

Moderate:
- A dog bite to the hand. Firefighter sustained a minor scratch

Minor:
- Eye injury from debris, while wearing eye protection
- Eye irritation following water exposure at a local canal
- Hand injury the servicing of a ladder, resulting in a cut knuckle
- Lower back injury after misplacing a weighted step on uneven ground at an incident

Following the above mentioned injuries, the Service will continue to communicate the importance of PPE, especially eye protection.

RIDDOR Reportable Incidents – PPL.1.18

The number of incidents that required reporting to the HSE under RIDDOR 2013.

R	> 2 per month
A	=< 2 per month
G	=< 0.5 per month
B	

What is good?	fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<1	<1	<1	<1	<1	<1	<1	<1	<1	<1	<1	<1
	Actual	**0**	**0**	**1**									
	Status	**G**	**G**	**A**									
Cumulative	Target	<1	<2	<2	<3	<3	<4	<4	<5	<5	<6	<6	<7
	Actual	**0**	**0**	**1**									
	Status	**G**	**G**	**G**									

Supporting Commentary

The one RIDDOR reportable incident related to an injury that resulted in the staff member being off work for more than seven days.

This incident was still under investigation at the time of writing. However, actions already being taken include the review of the Service's Health and Safety Manual Handling E-Learning package.

Near Miss Events Recorded – PPL.1.19

The number of complaints received each month. This does not identify if the complaints were upheld.

R	=> 10 per month
A	= 0 or => 5 per month
G	Between 1 and 5 per month
B	

What is good?	Closer to target
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5
	Actual	**0**	**2**	**3**									
	Status	**A**	**G**	**G**									
Cumulative	Target	<5	<9	<13	<17	<21	<25	<29	<33	<37	<41	<45	<49
	Actual	**0**	**2**	**5**									
	Status	**A**	**G**	**G**									

Supporting Commentary

Of the five recorded near miss events recorded, two were recorded as moderate and the remaining three as minor. Details of the moderate events can be found below.

During routine servicing of Breathing Apparatus (BA), items other than the BA mask were found in the BA mask bags. This presented a potential risk of injury to the wearer and could have caused a significant air leak through free-flow activation.

As a result of this incident there has been actions put in place which include:

- An email was sent to all operational staff, reaffirming procedures surrounding the use of BA bags
- Territorial commanders have been tasked with organising regular checks of BA bags
- Health and Safety team to include BA bag checks when visiting stations.

A portable air conditioning unit that was plugged into an extension lead. This resulted in the extension lead/plug overheating. The following actions were taken:

- The Service checked all industrial air-con units across all sites to ensure they were installed correctly. This included a critical message to all staff in relation to the use of industrial air-con units.
- Facilities to instal additional sockets at certain stations.

MAKING THE MOST OF OUR FINANCES AND ASSETS

Forecast – Outturn (£000's) – Fin.1.01

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.

R	> 2% of target
A	Within 2.0% of target
G	Within 1.0% of target
B	Within 0.5% of target

What is good?	Closer to target
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	-	-	43,880									
	Actual	**-**	**-**	**43,646**									
	% Difference	**-**	**-**	**-0.53%**									
	Status	**-**	**-**	**G**									

Supporting Commentary

The current forecast indicates an underspend of £325k, primarily driven by additional treasury income and underspends within support and on-call roles. This is partially offset by overspends within the wholetime establishment, which is currently operating at 310 personnel against a budget of 301.

Plans are in place to utilise the forecast underspend to support delivery of the Annual Plan. Officers are developing business cases and will be submitting funding bids for projects that align with strategic priorities and enable the effective use of the available resources.

Forecast – Wholetime and On-Call Cost (£000's) – Fin.1.02

The financial measure compares the approved revenue for our wholetime and On-Call operations budget (target) against the forecast revenue outturn position (forecast). Negative % difference indicates an underspend whereas positive % difference indicating an overspend.

R	> 2% of target
A	Within 2.0% of target
G	Within 1.0% of target
B	Within 0.5% of target

What is good?	Closer to target
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Wholetime	Target	-	-	23,654									
	Actual	**-**	**-**	**24,025**									
	% Difference	**-**	**-**	**1.57%**									
	Status	**-**	**-**	**A**									
On-Call	Target	-	-	1,557									
	Actual	**-**	**-**	**1,420**									
	% Difference	**-**	**-**	**-9.65%**									
	Status	**-**	**-**	**R**									

Supporting Commentary

The wholetime establishment is currently operating at 310 personnel against a budgeted establishment of 301, resulting in a projected overspend of £331k. The establishment position continues to be closely monitored through the workforce planning process, with careful consideration given to projected leavers, retirements, and other workforce changes when planning and implementing recruitment campaigns. This approach is intended to maintain operational resilience while managing staffing costs within the approved budget framework.

Forecast – Capital Spend (£000's) – Fin.1.03

R	> 2% of target
A	Within 2.0% of target
G	Within 1.0% of target
B	Within 0.5% of target

What is good?	Closer to target
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	-	-	10,330									
	Actual	**-**	**-**	**7,141**									
	% Difference	**-**	**-**	**-30.9%**									
	Status	**-**	**-**	**R**									

Supporting Commentary

The Capital Programme comprises a range of investments across property, operational vehicles, operational equipment, and ICT infrastructure. Two significant property projects are scheduled to commence in 2026: the development of a new training facility at Westcott and the regeneration of High Wycombe Fire Station.

Progress against the Capital Programme is monitored closely throughout the year to ensure effective delivery and financial oversight. Any anticipated slippage or changes to project timelines are identified, reported, and managed through established governance arrangements as they arise.

For more information, please see the detailed Q1 monitoring report.

Energy Usage – Electricity (000's – Kilowatts per hour) – Fin.1.04

Monthly usage (kWh) of Electricity across the Buckinghamshire Fire & Rescue Estate

R	=> 10% of target
A	> 5% of target
G	Within 5% of target
B	< 5% of target

What is good?	Less is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	120	120	120	120	120	120	120	120	120	120	120	120
	Actual	**125**	**119**	**106**									
	Status	**G**	**G**	**B**									
Cumulative	Target	120	240	360	480	600	720	840	960	1,080	1,200	1,320	1,440
	Actual	**125**	**244**	**350**									
	Status	**G**	**G**	**G**									

Supporting Commentary

Usage since July 2025 has been monitored using smart meters to establish a baseline target. Usage will continue to be monitored closely during the remainder of 2026-27.

Energy Usage – Gas (000's – Kilowatts per hour) – Fin.1.05

Monthly usage (kWh) of Gas across the Buckinghamshire Fire & Rescue Estate

R	=> 10% of target
A	> 5% of target
G	Within 5% of target
B	< 5% of target

What is good?	Less is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	160	120	100	100	100	110	150	220	240	260	220	210
	Actual	**143**	**111**	**74**									
	Status	**B**	**B**	**B**									
Cumulative	Target	160	280	380	480	580	690	840	1,060	1,300	1,560	1,780	1,990
	Actual	**143**	**254**	**328**									
	Status	**B**	**B**	**B**									

Supporting Commentary

Usage since July 2025 has been monitored using smart meters to establish a baseline target. Usage will continue to be monitored closely during the remainder of 2026-27.

Overdue Internal Audits – Fin.1.06

Each year an Internal Audit plan is agreed based on the risks and needs of the service.
The progress and findings are reported to the Overview and Audit committee. This measure shows how many actions are overdue broken down by medium/high rating.

R	> 2
A	2
G	< 2
B	

What is good?	Fewer is better
Target	Set number

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	0	0	0	0	0	0	0	0	0	0	0	0
	Actual	**0**	**0**	**0**									
	Status	**G**	**G**	**G**									
Cumulative	Target	0	0	0	0	0	0	0	0	0	0	0	0
	Actual	**0**	**0**	**0**									
	Status	**G**	**G**	**G**									

Supporting Commentary

The Service has had no overdue audit actions this quarter.

Audits and their subsequent actions are reported to each Overview and Audit Committee meeting. The last update was taken on the 22nd July 2026 and can be found here: OVERVIEW AND AUDIT COMMITTEE - 22 JULY 2026 - Buckinghamshire Fire & Rescue Service

Projects – Fin.1.07

The service sets out its Annual plan each year to support the delivery of the Community Risk management plan. Annual plan progress is reviewed monthly at the internal Programme Board. This measure shows how many projects the service has on track and the number of project that are Risk to Progress.

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

What is good?	Fewer is better
Target	Set number

		Q1	Q2	Q3	Q4
On Track	Target	-	-	-	-
	Actual	**20**			
	Status	**-**	**-**	**-**	**-**
Risk to Progress	Target	<3	<3	<3	<3
	Actual	**3**			
	Status	**A**			

Supporting Commentary

There are 33 items on the 2026/27 Annual plan including 8 carried over from last year.

At the end of Q1, 20 projects are currently on track with 3 project at either risk to progress or Off Track, these projects are:

1) Enhance our reward and recognition framework
2) Complete build of local training facility
3) Commence scoping of Firefighting PPE and develop an implementation plan, to support delivery

There is one project awaiting an evaluation:

1) Introduce a new Maintenance competency system

All projects are scrutinised at our monthly internal governance meetings with major project providing detailed highlight reports to our Programme Board.

An annual plan update is now submitted to Member's via the Executive committee. The last update was taken on the 15th July 2026 and can be found here: EXECUTIVE COMMITTEE - 15 JULY 2026 - Buckinghamshire Fire & Rescue Service

OPTIMISING OUR TECHNOLOGY AND DATA

Website – Active Users (000's) – 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.

B	> 15 per month
G	> 10 per month
A	=> 8 per month
R	< 8 per month

What is good?	More is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	10	10	10	10	10	10	10	10	10	10	10	10
	Actual	**14.6**	**14.9**	**11.2**									
	Status	**G**	**G**	**G**									
Cumulativ	Target	10	20	30	40	50	60	70	80	90	100	110	120
	Actual	**14.6**	**29.5**	**40.7**									
	Status	**G**	**G**	**G**									

Supporting Commentary

It is very positive that active users on our website are currently 36 per cent above target, as this highlights the website's value as a trusted source of information.

Higher than expected usage suggests that members of the public, media, staff and partners are using the site to find and view the information and services they need online.

Increased viewing and access to our corporate information helps maximise the return on our investment in digital services, communication, and marketing campaigns. It also indicates an increasing interest in our content, Service updates and the opportunities we offer.

Exceeding the active user target by such a significant margin also supports wider organisational objectives around accessibility, prevention and public safety. With more users engaging through digital channels, important safety messages, operational updates and community information is reaching a larger audience.

Site data on individual page, and area visits helps us to monitor where interest is targeted and subsequently inform our work to develop our channels and improve customer experience by providing convenient, reliable and efficient access to information. Ultimately this work can also reduce pressure on other contact channels, allowing resources to be focused where they are needed most.

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

The total number of unique engagements with our social media content across Facebook, Instagram, Twitter and LinkedIn.

B	=> 30 per month
G	=> 20 per month
A	< 20 per month
R	< 16 per month

What is good?	More is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	20	20	20	20	20	20	20	20	20	20	20	20
	Actual	**45.9**	**34.9**	**26.0**									
	Status	**B**	**B**	**G**									
Cumulativ	Target	20	40	60	80	100	120	140	160	180	200	220	240
	Actual	**45.9**	**80.8**	**106.8**									
	Status	**B**	**B**	**B**									

Supporting Commentary

Social media engagement is critically important for us as a fire and rescue service. It enables rapid communication to warn and inform when required, public education, and community engagement at scale and speed.

Despite the target being doubled since last year, the figures clearly demonstrate growing engagement, and potential influence through social networks.

We can attribute part of this increase to how we now monitor social media trends and adapt our content to ensure digital relevance to our target audiences and beyond.

This increase supports growth in reach of our prevention and business engagement safety messages and campaigns, awareness and updates of incidents, and recruitment opportunities.

Positive engagement demonstrates our messaging is resonating with far larger, and growing audiences.

High engagement levels are essential because they increase the likelihood that critical fire safety advice is seen, understood, and acted upon. This ultimately helps to reduce risk and save lives, and elevates our status as an employer of choice, creating an interest and desire to be a part of the Service.

Intranet – Active Users – 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.

B	=> 98%
G	=> 90%
A	=> 80%
R	< 80%

What is good?	Higher is better
Target	Set numbers

		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Monthly	Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
	Actual	**94%**	**95%**	**96%**									
	Status	**G**	**G**	**G**									
YTD Avg	Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
	Actual	**94%**	**95%**	**95%**									
	Status	**G**	**G**	**G**									

Supporting Commentary

Staff intranet engagement continues to perform exceptionally well, with usage reaching 95 per cent against a target of 90 per cent, demonstrating the important role the platform plays in keeping colleagues informed, connected and engaged.

This strong level of usage reflects the relevance and value of the content being shared across the organisation.

Among the most popular pages were the:

- "Appraisal Form Now Live" announcement, showing staff engagement with performance and development processes.
- "Celebrating Excellence", highlighting the importance of recognising achievements and success across the service.
- "Female Incident Commander Development Event", which generated significant interest and showcased the organisation's commitment to developing talent and supporting inclusive leadership.

Together, these results demonstrate that the intranet is successfully delivering content that matters to staff, and supports awareness of and engagement in work to support key organisational priorities.

Reportable Data Breaches – DDT.1.04

Each year an Internal Audit plan is agreed based on the risks and needs of the service.
The progress and findings are reported to the Overview and Audit committee. This measure shows how many actions are overdue broken down by medium/high rating.

R	> 0
A	
G	0
B	

What is good?	Fewer is better
Target	Set number

		2020/2021	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	2026/2027
Yearly	Target	0	0	0	0	0	0	0
	Actual	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Status	**G**	**G**	**G**	**G**	**G**	**G**	**G**

Supporting Commentary

The were no recorded data breaches between 1st April 2026 and 30th June 2026.

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Executive Committee, 9 September 2026

Report title: 2026-2027 Annual Delivery Plan Update

Lead Member: Councillor Llew Monger, Chairman

Report sponsor: Simon Tuffley, Deputy Chief Fire Officer

Author and contact: Anne-Marie Carter, Head of Service Improvement

Action: Noting

Recommendations:

It is recommended that the 2026-2027 Annual Delivery Plan Update be noted.

Executive summary: This report provides Members with an overview of progress against the Annual Delivery Plan for 2026/27, viewed from a PMO assurance perspective. It focuses on our major projects, setting out what has been delivered this period, what is planned next, and where there are any emerging risks.

There are currently 24 projects within the Annual Delivery Plan. This is the status of those projects as at the end of July 2026:

	Complete/ Evaluation	On Track	Risk to Progress	Not due to be started
Total	**0**	**19**	**2**	**3**

Overall, the projects are progressing as expected for this stage of the year. The On-Call Improvement Programme has moved into delivery and remains on track. The High Wycombe Station Redevelopment/Restoration has moved to green status and is progressing through business case stage. The Local Training Facility continues to face challenges in relation to planning and timelines, and this remains an area of focus.

The report also highlights a number of collaborative programmes; PPE renewal remains at an amber status due to a delay in the delivery of the national framework.

The full report can be found in Appendix 1.

Financial implications: The Medium-term financial plan (MTFP) factored in the 26/27 Annual plan so there are no direct financial implications arising from this paper.

Financial positions for individual major projects are set out within the attached highlight reports, and any future requests for additional funding or approval will be progressed through the established governance.

Risk management: Risks, issues and dependencies are actively managed through the PMO's project controls and are summarised in each major project highlight report. The report provides Members with visibility of any material exceptions and the mitigating actions in place.

Legal implications: There are no legal implications arising directly from this report. Any project-specific legal considerations will be addressed as part of the relevant procurement, contracts and business case.

Privacy and security implications: There are no privacy and security implications arising directly from this report. Any project-specific privacy/security assessments (e.g., DPIAs) will be completed where required within the scope of individual projects.

Duty to collaborate: A number of Annual Plan initiatives are delivered collaboratively, including the Thames Valley Fire Control replacement and national programmes (PPE and ESN). This supports interoperability and value for money across partner services.

Health and safety implications: There are no health and safety implications arising directly from this report. Any project-level health and safety impacts will be assessed and managed within the scope of individual projects and enabling works.

Environmental implications: There are no new environmental implications arising directly from this report. Any project-level health environmental impacts will be assessed and managed within the scope of individual projects.

Equality, diversity, and inclusion implications: There are no direct equality, diversity and inclusion implications arising from this report, which is provided for assurance purposes.

However, a number of projects within the Annual Delivery Plan have specific EDI considerations embedded in their development, including the completion of Equality Impact Assessments (EqIAs) where appropriate and ongoing engagement with affected staff and communities. This ensures that equality considerations are reflected in decision-making and service delivery as projects progress.

Consultation and communication: Major project work with the Marketing and Communications team to build a communication plan that takes into account the appropriate level of stakeholder engagement needed.

Background papers:

Community Risk Management Plan 2025-2030: Community Risk Management Plan 2025-2030 - Buckinghamshire Fire & Rescue Service

Annual Delivery Plan 2026-2027: Annual Delivery Plan 2026-2027 - Buckinghamshire Fire & Rescue Service

Fire Authority Meeting, 12 February 2026: 2026-27 Annual Delivery Plan: FIRE AUTHORITY MEETING - 11 FEBRUARY 2026 - Buckinghamshire Fire & Rescue Service

Previous Update

Fire Authority Meeting, 10 June 2026: 2026-27 Annual Delivery Plan Update:

FIRE-AUTHORITY-ANNUAL-MEETING-AGENDA-AND-REPORTS-10-JUNE-2026-min.pdf

Appendix	Title	Protective Marking
1	2026-2027 Annual Delivery Plan Update – August 2026	N/A

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Buckinghamshire
Fire & Rescue Service
Making a difference together

2026-2027 Annual Delivery Plan Update

PMO Assurance

August 2026

CONTENTS

INTRODUCTION

This review provides Members with a view of progress across the Annual Plan's strategic objectives, Prevention, Protection, Response & Resilience and the enabling work across People, Finance & Assets, and Digital, Data & Technology.

It is written from a Portfolio Management Office (PMO) perspective, using a consistent, exception-based reporting approach to provide assurance on delivery.

The report currently focuses on our major projects, summarising what we have delivered, and the key priorities for the next period. It also highlights any material risks, issues, or dependencies that could affect delivery, alongside the actions being taken to manage them through established governance arrangements and performance monitoring.

The PMO exists to strengthen delivery assurance and organisational grip. It does this by applying consistent standards for planning and reporting, tracking delivery against milestones and measurable indicators, maintaining a transparent record of risks, issues, and dependencies, and ensuring timely escalation where delivery confidence reduces.

The PMO allocates appropriately trained project management professionals to priority workstreams and projects, providing day-to-day delivery support and strengthening governance, pace and consistency across the portfolio.

SUMMARY

Across the 26-27 Annual Delivery Plan there are 24 projects. Following reporting at the end of July the current status of these projects are:

	Complete/ Evaluation	On Track	Risk to Progress	Not due to be started	Total Actions
Prevention	0	4	0	0	**4**
Protection	0	2	0	2	**4**
Response	0	3	0	0	**3**
People	0	3	0	1	**4**
Finance & Assets	0	2	2	0	**4**
Digital, Data & Technology	0	5	0	0	**5**
Total	**0**	**19**	**2**	**3**	**24**

To strengthen oversight and ensure resources are aligned to risk and complexity, projects have been split into different tiers based on cost, impact, or risk to ensure they have the appropriate support and governance.

The current split of projects is:

Tier 1 - Major	Tier 2 – Medium	Tier 3 – Small
5	**7**	**12**

Major Projects Summary

This report focuses on the Service's major projects, with highlight reports outlining delivery confidence, progress to date, and planned next steps.

On-Call Improvement Programme is currently reported as **Green** overall, with Project initiation document completed setting out the year 2 objectives. Delivery planning continues, including finalising workstream detailed plans. Timescale is flagged Amber to reflect the programme's multi-year implementation profile and the need to maintain pace through year-two planning.

Local Training Facility has moved to **Amber**, reflecting planning permission being received, further work is needed to understand the impact on delivery from both a supplier and internal perspective. The project continues to be monitored closely, with emerging cost risks reviewed in detail at a strategic level. Spend-to-date is reported as in line with the current phase, and the latest forecast position is described in the report, including the drivers behind variance and contingency use.

High Wycombe Redevelopment/Restoration continues to be **Green** overall. The structural survey is now complete and the findings alongside other investigatory work has been used to build the business case. The business case is scheduled to be presented to the Fire Authority in September 2026.

OUR ANNUAL DELIVERY PLAN 2026/2027

The Buckinghamshire Fire & Rescue Service Annual Plan 2026–2027 sets out how we will translate our strategic priorities into the everyday decisions and actions required to keep our communities safe, building on the progress already made and targeting resources where they add the most value. The actions below are supported by measures of success and detailed team plans.

Prevention
• Plan, resource, and deliver local and national road and water safety initiatives and campaigns. • Develop a Youth Inclusion Programme • Deliver the Prevention Community Engagement Communications Plan, ensuring consistent messaging across all Service Delivery Areas (SDA's) • Embed the Domestic Dwelling Fire Targeting Methodology across all nine SDAs, monitoring and reporting on its effectiveness
Protection
• Work with partners to ensure effective management, enforcement, and ongoing implementation of fire safety remediation plans for multi-occupied residential properties • Utilise station-based crews for targeted fire safety and protection initiatives • Upgrade PRMS workflows and processes to achieve measurable efficiency improvements • Transition the FFSIU and Thames Valley Fire Investigation team into business-as-usual delivery
Response & Resilience
• Define and deliver year two of our On-Call Improvement Programme • Review our water rescue capacity & capability to understand long term requirements • Complete a review of Working at Height (W@H) provision defining service needs
People
• Implement a refreshed People Directorate structure & function that enhances service delivery and meets future needs • Develop advanced people analytics capabilities to provide real-time workforce insights and support data-driven decision-making • Evaluate how newly introduced people frameworks and processes have been adopted and the difference they have made for staff and the service • Implement a communication skills development initiative to improve internal collaboration and external engagement
Finance & Assets
• Deliver Year 2 of the property standards programme by investing £360k in station facilities • Complete build of local training facility (subject to agreement) • Secure funding and finalise plans for the redevelopment or refurbishment of High Wycombe Fire Station • Commence scoping of Firefighting PPE and develop an implementation plan, to support delivery
Digital & Data
• Collaborate with other Thames Valley fire & rescue Services for the replacement of the Command & Control system (Year 1) • Review provision of risk data within the current Command & Control system • Embed branding standards across all departments and monitor compliance to ensure consistency in digital and physical assets • Collaborate with national and regional partners to ensure operational and technical readiness for the Emergency Services Mobile Communications Programme • Develop a roadmap for AI integration across key functions and define next steps for implementation

MAJOR PROJECTS HIGHLIGHT REPORTS

On Call Improvement Programme

Sponsor: Assistant Chief Fire Officer

STATUS – This period:	***Green***	***Last period***	***Green***
Agreed Project completion date:	Implementation 2026-2030		

Timescale	Amber	**Cost**	Green	**Scope**	Green	**Risk**	Green	**Resource**	Green

Overall Project Objective
The On-Call Improvement Programme (Years 2–5) aims to build on the foundations established during its first year to create a more resilient, reliable, and sustainable On-Call service model across Buckinghamshire Fire & Rescue Service. The programme will take forward the Fire Authority-approved changes to the number and location of On-Call appliances and develop a modernised approach to staffing, training, mobilisation, and operational support.

Key activities completed in this reporting period

- Project Initiation Document (PID) approved, defining scope and delivery approach for year 2 (26/27). The 4 objectives for the year are:
  - Implement the Fire Authority-approved structural changes to the On-Call model
  - Develop and begin to deliver a sustainable On-Call attraction and recruitment approach
  - Design the future On-Call training, competence and skill model
  - Stabilise the revised On-Call operating model through better integration, support and station planning
- Programme plan and detailed workstream requirements continuing to be worked on, ensuring alignment on scope, milestones and resource needs across all delivery areas
- On Call recruitment review completed and changes approved supporting a modernised, and streamlined approach to attracting and appointing On-Call firefighters. This new process will be utilised later this year
- Station planning tool being trialled in two areas to feed into future requirements and design

Activities planned in next period

- Finalise the programme plan and confirm detailed workstream requirements.
- Continue building options appraisal for future use of Great Missenden & Stokenchurch proposal.
- Work with Members to agree the Terms of Reference for an On-Call Improvement Programme Members Advisory Group with a meeting being scheduled for Sept/Oct

Approved Project Spend:	N/A	***Project Spend to date:***	N/A
Finance Update: Any business cases needed for the project will be brought through governance.			

R / I NO	DESCRIPTION	TREATMENT	OWNER	ORIGINAL SCORE	CURRENT SCORE
	There are no identified risks that push the project into amber but we continue to work with the workstream leads to ensure all risks have been identified, documented and mitigated as needed.				

Recommendation progress

	RECOMMENDATION	TARGET DATE	STATUS RAG	LATEST UPDATE
1	**Removal of the following On-Call crewed fire engine**			
1a	Amersham	~~Jul '26~~ Oct '26	G	System appliance removal complete. Awaiting physical asset redistribution or disposal.
1b	Beaconsfield	~~Jul '26~~ Oct '26	G	
1c	Great Missenden	Jun '26	Complete	Appliance removed
1d	High Wycombe	~~Jul '26~~ Oct '26	G	System appliance removal complete. Awaiting physical asset redistribution or disposal.
1e	Stokenchurch	~~Jul '26~~ Oct '26	G	
1f	West Ashland (2nd)	~~Jul '26~~ Oct '26	G	
2	**Closure and decommissioning of**			
2a	Great Missenden	Mar '27	G	Turnout system to be removed
2b	Stokenchurch	Mar '27	G	Turnout system to be removed
3	**Provision of a dual purpose 4x4 lightweight fire engine**			
	Buckingham	Sept '26	Complete	Appliance in place & staff training complete
4	**Move the following specials**			
4a	Rural Firefighting Vehicle at Amersham	Sept '26	A	Training to be confirmed as part of BAU. Monitoring Chesham changes first
4b	Crew Welfare unit to Beaconsfield	Sept '26	A	Awaiting delivery of vehicle
4c	Rural Firefighting Vehicle at West Ashland	Jul '26	Complete	
6	**Recommendations for the future of Great Missenden and Stokenchurch sites will be brought to the Executive Committee**			
		TBC	G	Valuations complete, awaiting report. Options appraisal being drafted to be discussed as Advisory panel

Note: Recommendation 5 was "The timing and phased implementation of the approved changes be delegated to the Chief Fire Officer"

Local Training Facility

Sponsors: *Director of Finance & Assets & Director of People*

STATUS – This period:	***Amber***	***Last period***	***Red***
Agreed Project completion date:	~~March 2027~~ Sept 2027		

Timescale	Amber	**Cost**	Amber	**Scope**	Green	**Risk**	Amber	**Resource**	Green

Overall Project Objective

The development of a dedicated Technical and Training Centre at Westcott Venture Park. This bespoke solution will deliver the functions of a Training school. USAR Technical Training Centre, and Logistics Hub.

Key activities completed in this reporting period

- Planning Permission was received on 13th July 2026. The whole site plan can be found on page 11.
- Due to planning permission being received, we have reassessed the risk ratings for timelines and moved from Red to Amber and move the overall status to Amber. Further work is now needed to understand the next part of the plan before this can move to a Green status.
- Identified key workstreams, with a workshop held to align teams to support build and delivery, The workstreams are:
  - Property
  - Training
  - Stores
  - BAU Operating
  - Community Engagement
  - Collaboration
- WVP are currently in the market, with contractors tendering for the groundworks package. This will support contractor selection and ensure sufficient lead-in time for mobilisation on site once planning approval is secured.

Activities planned in next period

- Start to build detailed delivery plan, ensuring all workstreams are captured.
- Work through the approved planning application pre commencement conditions.
- Westcott Venture Park Final Agreement to Lease to be completed.
- Continue engagement with the local community through Westcott Parish Council.
- We have now gone beyond the secured fixed pricing deadline, 12 June 2026, with 2 key suppliers and are awaiting updated quotations for both parties.

Approved Project Spend:	£5.5m	***Project Spend to date:***	£179k

Finance Update:
The forecast cost is now £5.682m, which is 3% over budget (including the contingency amount). There is a risk of further increases due to the ongoing conflict in the Middle East.

SUMMARY OF KEY RISKS AND ISSUES

R / I NO	DESCRIPTION	TREATMENT	OWNER	ORIGINAL SCORE	CURRENT SCORE
3	Planning approval not granted to Westcott Venture Park or process takes longer than envisioned	Training programme under review to see what can be rescheduled or undertaken via an interim provider	Group Commander Operational Training & Assurance	15	20

Whole Site Plan

Training Centre Stakeholder Engagement Assurance

The development of the new Training Centre is being supported by a structured stakeholder engagement plan to ensure that all parties with an interest in, or influence over, the project are identified and appropriately engaged. The stakeholder mapping exercise has categorised stakeholders according to their level of influence and interest, enabling engagement activities to be targeted and proportionate.

Particular focus is being placed on those key stakeholders identified, including the local community, key staff groups and Westcott Venture Park,. Engagement is already taking place with key partners, and Members are being involved in supporting engagement with local representatives and the wider community.

The Service recognises that the local community has a significant interest in the development. Westcott Parish Council and local Councillors have already been engaged through initial meetings, and further discussions are planned to ensure concerns, particularly regarding the potential impact of training activities such as smoke from live fire exercises, can be fully understood and addressed.

In addition, local businesses, staff, other fire and rescue services and other interested parties have been identified within the engagement plan and will continue to receive information and updates appropriate to their level of interest and influence.

Stakeholder engagement will remain a key part of the project governance arrangements throughout the planning, construction and operational phases of the Training Centre. The stakeholder register and engagement approach will be reviewed regularly to ensure emerging concerns are identified early and that the project continues to reflect the needs of the communities and partners it serves.

High Wycombe Station Redevelopment/Restoration

Sponsor: *Head of Finance & Assets (Deputy Director)*

STATUS – This period:	***Green***	***Last period***	***Green***
Agreed Project completion date:	October 2028 (TBC)		

Timescale	*Green*	**Cost**	Green	**Scope**	Green	**Risk**	Green	**Resource**	Green

Overall Project Objective

The High Wycombe fire station redevelopment/restoration project aims to ensure the station remain fit for purpose, safe and capable of supporting modern emergency response requirements across the service area.

Key activities completed in this reporting period

- Structural survey has been completed supported by a completed asbestos survey, these have confirmed baseline condition and informed design assumptions.
    - Further diesel tank condition report ordered
- Business Case including financial has been completed for presentation at the Fire Authority in September 2026
- New governance covering strategic and tactical now in place ensuring regular engagement & oversight of the project

Activities planned in next period

- Confirm the scope and implications of the existing diesel tank at the current site, including survey findings, options, and impacts on programme approach.
- Continue development of the Project initiation document to establish detailed delivery plan.

Approved Project Spend:	N/A	***Project Spend to date:***	£12k

Finance Update:
Financial business case will include the full costs of the project, costs incurred to date relate to the options appraisal and relevant surveys and structural surveys carried out which will aid decision making.
Current Project costs are being funded/resourced from business as usual budgets.

SUMMARY OF KEY RISKS AND ISSUES

R / I NO	DESCRIPTION	TREATMENT	OWNER	ORIGINAL SCORE	CURRENT SCORE
R1	There is a risk that a suitable decant location	Current options are being agreed by SLT to ensure the	Head of	12	9

	may not be within close proximity of the current station, which could impact response times.	tolerances of a decant location are acceptable.	Response & Resilience		
R3	Unknown condition of fuel tank could pose a risk to budget and operations if it requires removal, newer legislation would mean the tank cannot be in its current location due to risk to the waterway.	A condition survey is currently being undertaken. This will clarify what is required to either continue to use this tank or replace it.	Property Manager	9	9

COLLABORATIVE PROJECTS

A number of key initiatives within the Annual Plan are being delivered collaboratively with partner organisations. These programmes are typically complex, high-value and high-impact, and collaboration enables the Service to share expertise, reduce duplication, improve interoperability and consistency across services, and strengthen value for money through collective procurement and common standards. Where programmes are national in nature, our local focus is on ensuring we remain prepared to adopt new capabilities safely and effectively, without disrupting operational delivery.

Thames Valley Fire Control replacement

Current Status: GREEN

We are working with our Thames Valley partners on replacing the current Fire Control System. This is a significant and critical technology investment which will modernise the systems that provide for call handling and mobilisation. The programme is currently in the procurement phase, with implementation expected to begin in October 2026 and a planned go-live in April 2028. Our focus during this phase is to ensure the selected solution is operationally fit for purpose, resilient, and provides a robust platform for future improvements.

Personal Protective Equipment (PPE) renewal

Current Status: AMBER

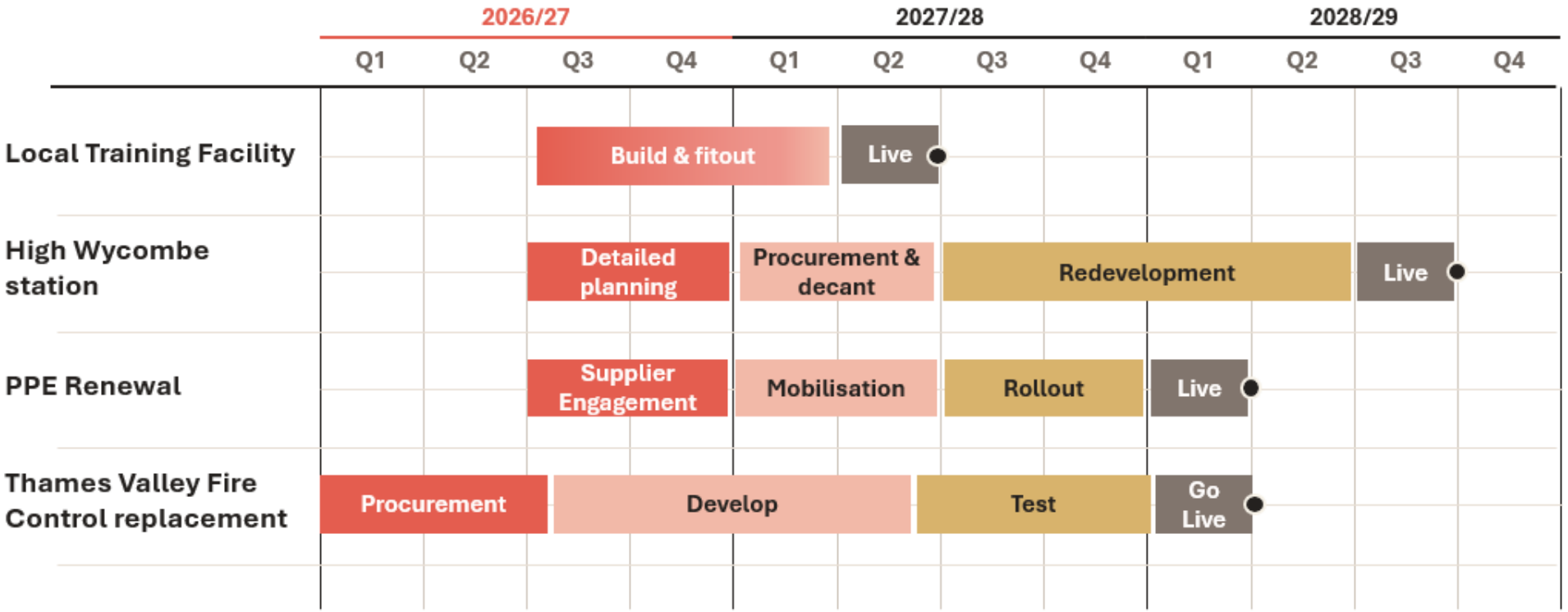
This project has remained at Amber for this reporting period due to a delay in the national framework being released. It was finally released w/c 10th August 2026. We will continue to progress the PPE renewal through a national programme which provides an approved procurement framework. This supports consistent standards, reduces procurement risk and enables the Service to access compliant PPE while achieving value for money. Locally, activity is focused on planning for implementation, with a project initiation document progressing through interna governance.

Emergency Services Network (ESN) transition

Current Status: GREEN

The transition from Airwave to the Emergency Services Network is a long-term national programme affecting all emergency services. BFRS continues to play an active role, working with Thames Valley fire partners and wider emergency service stakeholders. Our focus is on maintaining operational continuity, understanding readiness requirements, and managing dependencies (technical, operational and training) as national timelines and delivery plans develop.

High Level Timeline



Note: Timescales are subject to change

GOVERNANCE

BFRS uses a structured governance framework to monitor progress and manage risk against the Annual Delivery Plan

Delivery Groups

Delivery groups report monthly to the CRMP Performance and Programme Boards, ensuring that performance and risk are coordinated and that progress against objectives is reviewed routinely.

CRMP Performance Board

The Community Risk Management Plan Performance Board (CRMP Performance Board) monitors performance across objectives and enablers monthly.

Programme Board

Programme Board provides strategic direction and oversight of change delivery aligned to the CRMP and Annual Plan.

Strategic Leadership Board

Provides strategic oversight and assurance prior to reporting to the Fire Authority and its committees.

SUPPORTING INFORMATION

RAG Status

- Major problems identified which mean the project is unlikely to be delivered on time, on budget or to the required standard.
- Remedial plans are not proving effective.
- Escalate to the next level with costed options.

- Significant problems identified which may put the project timetable, costs and/or benefits at risk.
- Remedial plan is in place and is being monitored closely to ensure that risk is mitigated.
- Escalate to the next level.

- Project is proceeding according to plan.
- Risks / issues are being managed within the project.

Risk reporting approach (exception-based)

In line with established public-sector programme reporting practice, this quarterly update is an exception report, designed to give Members clear oversight without overloading the paper with operational detail.

Accordingly, the risk and issues sections highlight only:

- items above the agreed risk score threshold (or those judged “material” due to impact on time/cost/scope/benefits), and
- items that require Member visibility because they may affect delivery confidence, tolerances, or future decision points.

All other risks are tracked and treated within project and programme risk registers, reviewed routinely through governance arrangements, and escalated if they become significant.

Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Executive Committee, 9 September 2026

Report title: Disciplinary and Grievance Procedures for Executive Leadership Team

Lead Member: Naseem Khan – Lead Member for People

Report sponsor: Ronnie Davidson – Director of People

Author and contact: Anna Collett – Head of People

Action: Decision

Recommendation:

It is recommended that:

1 the following procedures be approved:
   a. Disciplinary Procedure for Executive Leadership Team (Appendix A), and
   b. Grievance Procedure for Executive Leadership Team (Appendix B); and

2 it be noted that a further report will be presented to a future meeting of the Executive Committee to approve a procedure for the handling of grievances raised by the Chief Fire Officer or the Statutory Officers about the Authority and/or Authority Member(s).

Executive Summary

The Fire Authority has a statutory responsibility to ensure that appropriate governance arrangements are in place for the management of employment matters involving the Service's most senior employees.

Buckinghamshire Fire and Rescue Service currently has no specific disciplinary or grievance procedures that govern how concerns, allegations or grievances involving Executive Leadership Team members are managed. Whilst corporate disciplinary and grievance procedures exist for the wider workforce, they do not establish the governance, decision-making and oversight arrangements required for the Service's most senior officers.

The development of these procedures addresses this gap by formalising the processes for investigation, hearing, decision-making and appeals relating to Executive Leadership Team members. The proposed procedures have therefore been developed to provide clear, transparent and robust arrangements for managing disciplinary and grievance matters concerning members of the Executive Leadership

Team, including the Chief Fire Officer, Deputy Chief Fire Officer, Assistant Chief Fire Officers and Directors.

The procedures have been designed to:

- Provide appropriate governance oversight by the Fire Authority.
- Ensure that any actual or perceived conflicts of interest are effectively managed.
- Establish clear decision-making arrangements, including investigation, hearing and appeal stages.
- Strengthen transparency, accountability and confidence in organisational processes.

The procedures distinguish between matters involving the Chief Fire Officer and Statutory Officers, where the Fire Authority will have direct oversight, and matters involving other members of the Executive Leadership Team, where independent investigation, hearing and appeal arrangements are incorporated into the process.

The introduction of these procedures addresses a gap in the Service's current governance framework by establishing clear and transparent arrangements for the management of disciplinary and grievance matters involving Executive Leadership Team members. This provides assurance that investigations, hearings, decision-making and appeals will be undertaken consistently, independently and with appropriate scrutiny, supporting accountability, good governance and public confidence.

Appendix A – Disciplinary Procedure for Executive Leadership Team

Appendix B – Grievance Procedure for Executive Leadership Team

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Financial implications:

There are no direct financial implications arising from approval of the procedures.

In the event that formal investigations are commissioned under either procedure, there may be costs associated with securing independent external investigators, independent HR advisers or independent legal advisers. Such costs would only be incurred when required and would be managed within existing governance and professional services budgets wherever possible.

Risk management:

Failure to maintain appropriate governance arrangements for employment matters involving Executive Leadership Team members could expose the Service and Fire Authority to significant organisational, governance and reputational risk.

Approval of the procedures will mitigate risks by:

- Providing a clear and transparent framework for managing concerns involving senior leaders.
- Ensuring independence and procedural fairness.
- Reducing the potential for conflicts of interest.
- Supporting legally compliant decision-making.
- Protecting public confidence in the Authority's governance arrangements.

Legal implications:

The procedures are consistent with The National Joint Council (NJC) for Brigade Managers Constitution and Scheme of Conditions of Service - the Gold Book sixth edition. August 2025 ('the Gold Book'). Appendix D - Guidance on the management of disciplinary, capability and grievance procedures.

The Terms of Reference of the Executive Committee reserve to it the functions of determining policies, codes or guidance relating to grievance, disciplinary, conduct, capability, dismissals and appeals relating to employees contracted to "Gold Book" terms and conditions in whole or in part.

Privacy and security implications:

There are no direct privacy or security implications arising from approval of the procedures.

Any case managed under either procedure will be handled in accordance with data protection legislation, information governance requirements and Service policies relating to confidentiality and records management.

Duty to collaborate:

No specific duty to collaborate implications have been identified.

However, where appropriate, independent support may be sought from other Fire and Rescue Services through the use of investigators or advisers to support impartiality and good governance.

Health and safety implications:

No direct health and safety implications have been identified.

The procedures contain provisions to support employee wellbeing, including requirements to consider welfare arrangements where individuals are subject to investigations or suspension.

Environmental implications:

No environmental implications have been identified.

Equality, diversity, and inclusion implications:

The proposed procedures have been developed to ensure fairness, consistency and equal treatment.

The procedures include provisions relating to:

- Equality, diversity and inclusion.
- Procedural fairness.
- Reasonable adjustments.
- Management of conflicts of interest.
- Independent oversight where appropriate.

An Equality Impact Assessment has been completed to support the development of the procedures.

Consultation and communication:

Members of Executive Leadership Team have been consulted on the content of the procedures.

Appendix	Title	Protective Marking
A	Disciplinary Procedure for Executive Leadership Team	
B	Grievance Procedure for Executive Leadership Team	
C	Equality Impact Assessment - Disciplinary Procedure for Executive Leadership Team	
D	Equality Impact Assessment - Executive Grievance Procedure	

Service Document Procedure:

Disciplinary Procedure for Executive Leadership Team

1. Changes since the last version

Version: 1.0	**Initial issue**
Information Asset Owner:	**Director of People**
Author:	**SC People**
Approval:	**People Delivery Group**

Please note that as Service Documents are frequently updated, if you print a document, its accuracy cannot be guaranteed. Always check the intranet for the latest version.

2. Index

3. Purpose and scope

This procedure sets out the arrangements for managing allegations of misconduct involving the post-holders listed below.

The procedure should be read alongside the Buckinghamshire Fire and Rescue Service Disciplinary Procedure.

The purpose of this procedure is to ensure that disciplinary matters involving the most senior leaders within the Service are managed fairly, independently, transparently and with appropriate governance oversight.

This procedure is underpinned by:

- The ACAS Code of Practice on Disciplinary and Grievance Procedures.
- Principles of natural justice and procedural fairness.
- Relevant employment legislation.
- Buckinghamshire and Milton Keynes Fire Authority governance arrangements.
- The Service Values and Code of Conduct.
- The National Joint Council (NJC) for Brigade Managers Constitution and Scheme of Conditions of Service - the Gold Book sixth edition. August 2025 ('the Gold Book'). Appendix D - Guidance on the management of disciplinary, capability and grievance procedures

This procedure applies to:

- Chief Fire Officer/ Executive.
- Deputy Chief Fire Officer.
- Assistant Chief Fire Officer(s).
- Director of Finance and Assets (Statutory Officer).
- Director of Legal and Governance (Statutory Officer).
- Director of People.
- Any Director-level post if contracted in whole or in part to the Gold Book.

This procedure does not apply to Heads of Service or other employees of Buckinghamshire Fire and Rescue Service who remain subject to the Service Disciplinary Procedure.

This procedure does not form part of any employee's contract of employment. BFRS may amend this procedure at any time, subject to any applicable consultation and governance requirements.

Relationship to the Service Disciplinary Procedure

Unless specifically varied by this procedure, all provisions contained within the Buckinghamshire Fire and Rescue Service Disciplinary Procedure shall apply.

This includes:

- Definitions of misconduct and gross misconduct.

- Investigation standards.
- Rights of representation.
- Suspension principles.
- Available disciplinary sanctions.
- Appeals principles.

Where there is any conflict between this procedure and the Service Disciplinary Procedure, this procedure shall take precedence.

4. Roles and responsibilities

Fire Authority

The Fire Authority is responsible for governance oversight of disciplinary matters involving the Chief Fire Officer and designated Statutory Officers.

The Fire Authority may establish panels or committees to discharge disciplinary responsibilities.

Chair of the Fire Authority

The Chair of the Fire Authority will:

- Receive notification of allegations concerning individuals covered by this procedure.
- Determine appropriate governance arrangements.
- Commission investigations where required.
- Ensure independence throughout the process.

Director of People

The Director of People will:

- Provide professional HR advice.
- Ensure procedural compliance.
- Support hearing panels.
- Maintain confidential records.

Where the Director of People is the subject of the allegation, or where the Head of People has had prior involvement or otherwise has an actual or potential conflict of interest, independent HR advice will be commissioned.

Monitoring Officer

The Monitoring Officer will provide advice regarding:

- Governance requirements.
- Constitutional arrangements.
- Conflicts of interest.
- Legal compliance.

Where the Monitoring Officer is the subject of the allegation, alternative independent legal advice will be obtained.

Investigating Officer

The Investigating Officer will:

- Conduct a fair and impartial investigation.
- Gather evidence.
- Interview witnesses.
- Produce an investigation report.

The Investigating Officer will not determine disciplinary outcomes.

5. Formal Investigation

A formal investigation will be commissioned by the Chair of the Fire Authority where it is necessary and appropriate to do so, having regard to all the circumstances and the seriousness of the alleged misconduct.

Investigations will normally be undertaken by an independent external investigator. The commissioning manager will ensure that the Investigating Officer appointed has the appropriate knowledge, skills, experience and independence to undertake the investigation, taking account of the nature of the allegations and the principles of equality, diversity, inclusion and procedural fairness. Any alternative arrangement must be approved by the Chair of the Fire Authority, following consultation with the relevant independent HR and/or legal adviser. The Terms of Reference will be approved by the commissioning manager, following consultation with the relevant HR and/or legal adviser, before the investigation commences. The purpose of the investigation is to establish facts and determine whether there is a case to answer.

The Investigating Officer will not determine whether allegations are substantiated.

Investigation reports should normally be completed within 30 working days, although this may be extended where complexity or availability of witnesses requires.

Where a grievance is raised during a disciplinary process the disciplinary process may be temporarily suspended in order to deal with the grievance. Where the

grievance and disciplinary cases are related it may be appropriate to deal with both issues concurrently.

6. Suspension

Suspension is a neutral act and does not imply guilt.

Suspension will only be considered where:

- There is a risk to the investigation.
- There is a risk to Service operations.
- There is a safeguarding concern.
- There is a significant reputational risk.
- There is a risk to individuals or the organisation.

Alternatives to suspension must always be considered before any decision is taken. The Suspension Checklist associated with, the BFRS Disciplinary Procedure must be completed before a decision to suspend is made. The completed checklist and the rationale for the decision must be retained as part of the confidential case record.

Where suspension is deemed necessary:

- The rationale must be documented.
- Welfare arrangements must be established.
- Suspension reviews must be undertaken regularly.
- A suspension stress risk assessment must be completed.

7. Hearing Arrangements

Chief Fire Officer/ Chief Executive & Statutory Officers

Where allegations concern the Chief Fire Officer/ Chief Executive and Statutory Officers, a disciplinary hearing will be convened by the Fire Authority.

The decision-making panel will comprise three Fire Authority Members who have had no previous involvement in the matter. One of those Members will be appointed as Chair of the panel.

The panel will be supported by an Independent HR Adviser and an Independent Legal Adviser. The advisers will provide professional advice and procedural support but will not take part in the panel's decision-making.

The panel will determine:

- Whether allegations are substantiated.

- Whether misconduct or gross misconduct has occurred.
- Any appropriate disciplinary sanction.

Where dismissal is being considered, the panel may seek additional independent advice as appropriate.

Deputy Chief Fire Officer, Assistant Chief Fire Officer and Directors

Where allegations concern the Deputy Chief Fire Officer, Assistant Chief Fire Officer or a Director, the hearing will normally be chaired by the Chief Fire Officer.

The decision-making panel will comprise:

- The Chief Fire Officer, who will chair the panel.
- An independent Chief Fire Officer, or equivalent senior officer, from another Fire and Rescue Service.

The panel will be supported by an Independent HR Adviser, who will provide professional advice and procedural support but will not take part in the panel's decision-making.

Decisions of the panel must be unanimous. Where the panel is unable to reach a unanimous decision, the matter will be referred to the Chair of the Fire Authority to determine the appropriate next steps.

Where the Chief Fire Officer is conflicted or unavailable, an independent Chief Fire Officer from another Fire and Rescue Service will chair the hearing.

8. Disciplinary sanctions

The usual penalties for misconduct are set out below:

- First Written Warning.
- Final Written Warning.
- Alternatives to dismissal.
- Dismissal.

Any sanction imposed must be proportionate, reasonable and consistent with the principles contained within the Buckinghamshire Fire and Rescue Service Disciplinary Procedure.

Any recommendation to dismiss the Chief Fire Officer or a Statutory Officer must be referred to the Fire Authority for determination.

9. Appeals

Chief Fire Officer/ Chief Executive & Statutory Officers

Appeals will be heard by a Fire Authority Appeals Panel comprising three Fire Authority Members who have had no previous involvement in the matter. One of those Members will be appointed as Chair of the Appeals Panel. The Appeals Panel will be supported by an Independent HR Adviser and, where appropriate, an Independent Legal Adviser. The advisers will not take part in the Appeals Panel's decision-making.

Deputy Chief Fire Officer, Assistant Chief Fire Officer and Directors

Appeals will be heard by

- An independent Chief Fire Officer from another Fire and Rescue Service.
- Supported by an independent HR Adviser.

10. Confidentiality

All parties involved in disciplinary matters must maintain confidentiality throughout the process.

Information will only be shared on a strict need-to-know basis and in accordance with applicable legislation and Service policies.

11. Appendix A – Governance and Decision-Making Matrix

Subject of Allegation	Initial Assessment	Commissioning Manager	Investigating Officer	Hearing Chair	Appeal Chair
Chief Fire Officer/ Chief Executive or Statutory Officers	Chair of Fire Authority	Chair of Fire Authority	Independent External Investigator	Chair of Fire Authority	Fire Authority Member with no prior involvement in the matter.
Deputy Chief Fire Officer	Chief Fire Officer / Chair of Fire Authority	Chief Fire Officer	Independent External Investigator	Chief Fire Officer or External CFO	Independent External CFO

Assistant Chief Fire Officer	Chief Fire Officer/ Chair of Fire Authority	Chief Fire Officer	Independent External Investigator	Chief Fire Officer or External CFO	Independent External CFO
Director of People	Chief Fire Officer / Chair of Fire Authority	Chief Fire Officer	Independent External Investigator	Chief Fire Officer or External CFO	Independent External CFO

12. Consultation/publication/communication

Formal consultation will be undertaken with recognised trade unions and other relevant stakeholders before the procedure is submitted for final approval.

Formal consultation was undertaken with recognised trade unions and other relevant stakeholders between [date] and [date]. The procedure was considered by [JCF/People Delivery Group/other governance body] on [date] and approved by [approving body] on [date]. The approved procedure will be published on the Service intranet and communicated to relevant employees, managers, HR advisers and Fire Authority Members.

13. Impact Assessments

A) Equality Impact Assessment (EIA)

Completion of an Equality Impact Assessment should be considered to identify and address any issues which may result in a group being disadvantaged by the process.

B) Data Protection Impact Assessment Screening Questions

If the document includes any personally identifiable information (PII) a Data Protection Impact Assessment (DPIA) will be required. This should be discussed with the Data Protection Officer (the Information Governance & Compliance Manager) and the DPIA file location referenced at this point in your document.

Where no PII is involved it should be stated at this point in your document.

The Data Protection Officer holds the master copies of all completed DPIA in N:Common/Information Assets/DPIAs.

The DPIA needs to be reviewed periodically to ensure that any PII is adequately considered.

The DPIA template and guidance can be found here.

Service Document Procedure:

Grievance Procedure for Executive Leadership Team

1. Changes since the last version

Version: 1.0	**Initial issue**
Information Asset Owner:	**Director of People**
Author:	**SC People**
Approval:	**People Delivery Group**

Please note that as Service Documents are frequently updated, if you print a document, its accuracy cannot be guaranteed. Always check the intranet for the latest version.

2. Index

3. Purpose and scope

This procedure sets out the arrangements for managing grievances involving the post-holders listed below.

This procedure should be read in conjunction with the Buckinghamshire Fire and Rescue Service Grievance Procedure.

The purpose of this procedure is to ensure that grievances involving the Service's most senior leaders are managed fairly, independently, confidentially and with appropriate governance oversight.

This procedure is underpinned by:

- The ACAS Code of Practice on Disciplinary and Grievance Procedures.
- Principles of natural justice and procedural fairness.
- Relevant employment legislation.
- Buckinghamshire and Milton Keynes Fire Authority governance arrangements.
- The Service Values and Code of Conduct.
- The National Joint Council (NJC) for Brigade Managers Constitution and Scheme of Conditions of Service - the Gold Book sixth edition. August 2025 ('the Gold Book'). Appendix D - Guidance on the management of disciplinary, capability and grievance procedures

This procedure applies to:

- Chief Fire Officer/Chief Executive.
- Deputy Chief Fire Officer.
- Assistant Chief Fire Officer(s).
- Director of Finance and Assets (Statutory Officer).
- Director of Legal and Governance (Statutory Officer).
- Director of People.
- Any Director-level post if contracted in whole or in part to the Gold Book.

This procedure does not apply to Heads of Service or other employees of Buckinghamshire Fire and Rescue Service who remain subject to the Service Grievance Procedure.

This procedure does not form part of any employee's contract of employment. BFRS may amend this procedure at any time, subject to any applicable consultation and governance requirements.

Relationship to the Service Grievance Procedure

Unless expressly varied by this procedure, the Buckinghamshire Fire and Rescue Service Grievance Procedure shall apply. Where any conflict exists between the two procedures, this procedure shall take precedence.

4. Roles and responsibilities

Fire Authority

The Fire Authority is responsible for ensuring grievances involving the Chief Fire Officer/Chief Executive and designated Statutory Officers are managed in accordance with the Authority's governance arrangements and this procedure. The Fire Authority may establish panels or committees to discharge its responsibilities in relation to grievances.

Chair of the Fire Authority

The Chair of the Fire Authority will:

- Receive notification of grievances concerning individuals covered by this procedure where appropriate.
- Determine the appropriate governance route and panel arrangements.
- Commission investigations where required.
- Ensure independence and fairness throughout the process.

Director of People

The Director of People will:

- Provide professional HR advice.
- Ensure procedural compliance.
- Facilitate informal resolution where appropriate.
- Support grievance hearings and appeals.
- Maintain confidential records.

Where the Director of People is the subject of the grievance, or where the individual providing HR advice has a conflict of interest or prior involvement, independent HR advice will be commissioned.

Monitoring Officer

The Monitoring Officer will provide advice regarding:

- Governance requirements.
- Constitutional arrangements.
- Conflicts of interest.
- Legal compliance.

Where the Monitoring Officer is the subject of the grievance, independent legal advice will be obtained.

Investigating Officer

The Investigating Officer will:

- Conduct a fair and impartial investigation.
- Gather evidence.
- Interview witnesses.
- Produce an investigation report.

The Investigating Officer will not determine the outcome of the grievance.

Confidentiality

All parties involved in the grievance process must maintain confidentiality throughout the proceedings. However, there may be times when confidentiality cannot be maintained, such as where there is suspected criminal activity, or disciplinary or management issues and this will be discussed with the individual if necessary.

Information will only be shared on a strict need-to-know basis and in accordance with:

- Data protection legislation.
- Employment legislation.
- Service policies and procedures.

Records relating to grievances will be retained and managed in accordance with the Service's information governance requirements.

Where there is a breach of confidentiality by any party involved in the process, formal action may be taken as appropriate.

5. Conflicts of Interest

Any individual involved in commissioning, investigating, advising or determining a grievance must declare any actual, potential or perceived conflict of interest.

Where a conflict exists, an alternative independent individual will be appointed to ensure fairness, impartiality and confidence in the process.

6. Informal Resolution

The Service encourages grievances to be resolved informally wherever appropriate.

Members of the Executive Leadership Team are expected to seek to address concerns through constructive discussion, facilitated conversations, mediation or other informal resolution mechanisms where reasonable to do so.

Informal resolution may not be appropriate where concerns involve:

- Allegations of discrimination.
- Bullying or harassment.
- Victimisation.
- Serious breaches of governance.
- Significant relationship breakdowns.
- Matters of substantial organisational impact.

The decision to proceed directly to a formal grievance will depend on the nature and seriousness of the issues raised.

7. Formal Grievance

Where informal resolution has not been successful, is considered inappropriate, or where the nature of the concern warrants formal consideration, a grievance may be raised under this stage of the procedure.

The grievance should normally be submitted in writing. Where this is not reasonably practicable, the Service will consider reasonable adjustments, including recording the grievance in an alternative format. The grievance should include:

- The nature of the grievance.
- Relevant facts and background information.
- Details of any steps already taken to resolve the matter.
- Any supporting evidence.
- The outcome sought.

Upon receipt of a formal grievance, the initial assessment will be undertaken by the individual identified within **Appendix A – Governance and Decision-Making Matrix**, to determine the most appropriate method of handling the matter. This may include:

- Mediation.

- Facilitated resolution.
- Formal investigation.
- Referral to another organisational process where appropriate.

Where a grievance is raised during a disciplinary process the disciplinary process may be temporarily suspended in order to deal with the grievance. Where the grievance and disciplinary cases are related it may be appropriate to deal with both issues concurrently.

8. Investigation

Investigations will normally be undertaken by an independent external investigator. The commissioning manager identified within Appendix A will ensure that the Investigating Officer appointed has the appropriate knowledge, skills, experience and independence to undertake the investigation, taking account of the nature of the grievance and the principles of equality, diversity, inclusion and procedural fairness. Any alternative arrangement must be approved by the Chair of the Fire Authority, or other commissioning manager identified in Appendix A, following consultation with the relevant HR and/or legal adviser.

The Terms of Reference will be approved by the commissioning manager following consultation with the relevant HR and/or legal adviser before the investigation commences. The purpose of the investigation is to establish the relevant facts and determine whether there is sufficient information for the grievance to be considered at a formal grievance hearing.

Investigation reports should normally be completed within 30 working days, although this may be extended where complexity, availability of witnesses or other factors make this necessary.

Interim Arrangements

Where appropriate, temporary arrangements may be put in place whilst a grievance is being considered.

Such arrangements may apply to the individual raising the grievance, the individual who is the subject of the grievance, or both, depending on the circumstances of the case. Examples include:

- Temporary reporting line adjustments.
- Alternative working arrangements.
- Changes to responsibilities.

- Facilitation or mediation support.
- Temporary redeployment where appropriate.
- Other measures considered necessary and proportionate.

Any interim arrangements will:

- Be reasonable and proportionate.
- Be regularly reviewed.

The implementation of temporary arrangements does not imply any findings regarding the grievance.

9. Hearing Arrangements

Chief Fire Officer/Chief Executive & Statutory Officers

Where a grievance concerns the Chief Fire Officer/Chief Executive or a Statutory Officer, a grievance hearing will be convened by the Fire Authority.

The hearing panel will comprise three Fire Authority Members who have had no previous involvement in the matter.

One Member will be appointed Chair of the panel.

The panel will be supported by an Independent HR Adviser and an Independent Legal Adviser. The advisers will provide professional advice and procedural support but will not take part in the panel's decision-making.

Neither adviser will participate in decision-making.

The panel's role is to determine the grievance and make any appropriate recommendations arising from its findings. In reaching its decision, the panel will consider:

- The grievance submission.
- The investigation findings.
- Any supporting evidence.
- Any representations made by the parties.

The panel will determine:

- Whether the grievance is upheld in full.
- Whether the grievance is upheld in part.

- Whether the grievance is not upheld.
- Any appropriate recommendations or actions.

Deputy Chief Fire Officer, Assistant Chief Fire Officer and Directors

Where a grievance concerns the Deputy Chief Fire Officer, Assistant Chief Fire Officer or a Director, the hearing will normally be chaired by the Chief Fire Officer/Chief Executive.

The panel will comprise:

- The Chief Fire Officer/Chief Executive (Chair).
- An independent Chief Fire Officer, or equivalent senior leader, from another Fire and Rescue Service

Where the panel is unable to reach agreement, the matter will be referred to the Chair of the Fire Authority to determine the appropriate next steps.

The panel will be supported by an Independent Legal Adviser and an Independent HR Adviser. The advisers will not participate in decision-making. The panel's role is to determine the grievance and make any appropriate recommendations arising from its findings.

In reaching its decision, the panel will consider:

- The grievance report.
- The investigation findings.
- Any representations made by the parties.
- Any supporting evidence.

The panel will determine:

- Whether the grievance is upheld in full.
- Whether the grievance is upheld in part.
- Whether the grievance is not upheld.
- Any recommendations or actions arising from the grievance.

Where the Chief Fire Officer/Chief Executive is unavailable or has a conflict of interest, an independent Chief Fire Officer from another Fire and Rescue Service will chair the hearing.

10. Outcomes

Following consideration of all available information, the hearing panel may determine that the grievance is:

- Upheld.
- Partially upheld.
- Not upheld.

Where appropriate, recommendations arising from the grievance may include:

- Mediation.
- Facilitated discussions.
- Management action.
- Coaching or development support.
- Review of policies, procedures or working practices.
- Governance improvements or organisational learning.
- Any other action considered reasonable and proportionate.

Any recommendations should seek to address the issues raised and support effective working relationships and organisational effectiveness.

11. Appeals

Appeals

An individual may appeal against the outcome of a formal grievance where they believe:

- The decision was unreasonable.
- Relevant evidence was not considered.
- New evidence has become available which was not reasonably available during the grievance investigation or hearing.
- There was a procedural irregularity.

Appeals should normally be submitted in writing. Where this is not reasonably practicable, reasonable adjustments will be considered, including submission in an alternative format.

The decision of the appeal panel is final and concludes the Service's internal grievance procedure.

Chief Fire Officer/Chief Executive & Statutory Officers

Appeals will be heard by a Fire Authority Appeals Panel comprising three Fire Authority Members who have had no prior involvement in the matter.

The Appeals Panel will be supported by an Independent HR Adviser and, where appropriate, an Independent Legal Adviser. The advisers will provide professional advice and procedural support but will not take part in the panel's decision-making.

Neither adviser will participate in decision-making.

Deputy Chief Fire Officer, Assistant Chief Fire Officer and Directors

Appeals will be heard by:

- An independent Chief Fire Officer from another Fire and Rescue Service.

The Appeal Chair will be supported by an Independent HR Adviser and, where appropriate, an Independent Legal Adviser. The advisers will provide professional advice and procedural support but will not take part in the appeal decision.

The HR Adviser will not participate in decision-making.

12. Appendix A – Governance and Decision-Making Matrix

Subject of Grievance	Initial Assessment	Investigating Officer	Hearing Chair	Appeal Chair
Chief Fire Officer/Chief Executive & Statutory Officers	Chair of the Fire Authority	Independent External Investigator	Chair of the Fire Authority	Fire Authority Member with no prior involvement in the matter.

Subject of Grievance	Initial Assessment	Investigating Officer	Hearing Chair	Appeal Chair
Deputy Chief Fire Officer	Chief Fire Officer/Chief Executive or Chair of Fire Authority (if conflicted)	Independent External Investigator	Chief Fire Officer/Chief Executive or Independent External CFO	Independent External CFO
Assistant Chief Fire Officer	Chief Fire Officer/Chief Executive	Independent External Investigator	Chief Fire Officer/Chief Executive or Independent External CFO	Independent External CFO
Directors	Chief Fire Officer/Chief Executive	Independent External Investigator	Chief Fire Officer/Chief Executive or Independent External CFO	Independent External CFO

13. Consultation/publication/communication

Formal consultation was undertaken with recognised trade unions and other relevant stakeholders between [date] and [date]. The procedure was considered by [JCF/People Delivery Group/other governance body] on [date] and approved by [approving body] on [date]. The approved procedure will be published on the Service intranet and communicated to relevant employees, managers, HR advisers and Fire Authority Members.

14. Impact Assessments

A) Equality Impact Assessment (EIA)

Completion of an Equality Impact Assessment should be considered to identify and address any issues which may result in a group being disadvantaged by the process.

B) Data Protection Impact Assessment Screening Questions

If the document includes any personally identifiable information (PII) a Data Protection Impact Assessment (DPIA) will be required. This should be discussed

with the Data Protection Officer (the Information Governance & Compliance Manager) and the DPIA file location referenced at this point in your document.

Where no PII is involved it should be stated at this point in your document.

The Data Protection Officer holds the master copies of all completed DPIA in N:Common/Information Assets/DPIAs.

The DPIA needs to be reviewed periodically to ensure that any PII is adequately considered.

The DPIA template and guidance can be found here.

Bucks Fire & Rescue Service

Equality Impact Assessment (EIA)

Policy /Project/ Function	**Disciplinary Procedure for Executive Leadership Team V0.2**				**Date of Assessment**		**27 July 2026**	
Assessment Rating: please tick 1 box (*The assessment rating is identified after the analysis has been completed - See Completion Notes*).	**RED**		**AMBER**		**GREEN**	**X**	Proportionate means achieving a legitimate aim/can be objectively justified.	No adverse equality impact is identified from the procedure itself. Its independence, evidence, conflict, welfare and appeal safeguards support fair treatment. The assurance measures below will help maintain accessible and consistent implementation.

Please list methods used to analyse impact on people (e.g. consultations forums, meetings, data collection)	Desktop review against the Equality Act 2010, Public Sector Equality Duty, ACAS Code and principles of natural justice. Consideration was given to independence, conflicts of interest, accessibility, confidentiality, representation, suspension safeguards, hearing and appeal arrangements, and consistent decision-making.
Please list any other policies that are related to or referred to as part of this analysis	BFRS Disciplinary Procedure; Executive Grievance Procedure; Code of Conduct; Dignity at Work; Whistleblowing; Capability/Performance procedures; Reasonable Adjustments guidance; Suspension Checklist and stress risk assessment; Data Protection requirements; Fire Authority Constitution and Standing Orders.
Please list the groups of people potentially affected by this proposal. (e.g. applicants, employees, customers, service users, members of the public)	Executive Leadership Team members and designated Statutory Officers; employees raising concerns; witnesses and companions; investigators; Fire Authority Members; Chief Fire Officer/Chief Executive; independent HR/legal advisers; People Services; recognised trade unions and the wider workforce.

What are the aims and intended effects of this proposal (project, policy, function, service)?

To provide a fair, independent, confidential and transparent process for allegations involving the Service's most senior leaders; establish facts through impartial investigation; ensure clear governance and decision-making; apply proportionate outcomes; and provide an independent appeal route.

Is any Equality Data available relating to the use or implementation of this proposal (policy, project, or function, service? Please Tick
(See Completion notes)

Bucks Fire & Rescue Service

Yes: ☐ No: ☒ No procedure-specific, disaggregated implementation/outcome data was supplied. Existing workforce profile data and future case/application data should be used for monitoring, subject to data protection and small-number safeguards.
List any Consultations e.g. with employees, service users, Unions or members of the public that has taken place in the development or implementation of this proposal (project, policy, function)?
Capsticks legal review has informed the draft. Formal consultation with recognised trade unions and relevant stakeholders is planned before final approval. Fire Authority governance requirements should be verified, with consultation dates, feedback and approval details recorded before publication.
Financial Analysis No fixed implementation cost is identified. Case-dependent costs may include independent investigation, HR/legal advice, panel time and welfare support. These arrangements support procedural fairness and appropriate governance and should remain proportionate to the complexity and seriousness of each case.

Costs £: Not quantified / case dependent	Projected returns: Non-cash benefits expected
Implementation: Existing resources plus actions below	Projected savings: Not quantified

Equality Impact Assessment (EIA)

What impact will the implementation of this proposal have on people who share characteristics protected by *The Equality Act 2010*? (See Completion notes)				
Protected Characteristic	Neutral Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification if determining proportionate means of achieving legitimate aims exists
Sex (Men and Women)	**X**			The procedure applies according to role rather than sex. Independent investigation, structured evidence review and appeal arrangements support consistent treatment. Routine assurance can help confirm that decisions and sanctions remain fair.
Race (All Racial Groups)	**X**			No differential impact is identified. Objective evidence, independent investigators and clear decision records support fair consideration across racial groups and help avoid cultural assumptions.
Disability (Mental, Physical, and Carers of Disabled people)		**X**		Welfare arrangements, stress risk assessment, representation and regular suspension review provide supportive safeguards. Reasonable procedural adjustments should be agreed where needed for correspondence, meetings, evidence and timescales.
Religion or Belief	**X**			No differential impact is identified. Reasonable consideration can be given to meeting dates, religious observance, dress and communication needs without affecting the fairness of the process.
Sexual Orientation (Lesbian, Gay, Bisexual, and Straight)	**X**			No differential impact is identified. Confidentiality and strict need-to-know information sharing support privacy where matters include personal or relationship information.
Pregnancy and Maternity		**X**		The procedure can accommodate pregnancy, maternity leave and related availability through reasonable timescales and meeting arrangements, ensuring fair participation throughout the process.
Marital Status (Married and Civil Partnerships)	**X**			The procedure applies consistently regardless of marital or civil partnership status. Any relevant personal conflicts should be declared and managed through the governance arrangements.
Gender Reassignment	**X**			No differential impact is identified. Confidential handling and accurate use of names and personal information support dignity and privacy throughout the process.

Equality Impact Assessment (EIA)

(Includes non-binary)				
Age (People of all ages)	**X**			The process is based on evidence and role rather than age. Independent decision-making supports fairness and avoids assumptions linked to seniority, length of service or future career plans.

What impact will the implementation of this proposal have on people who are impacted by and / or local factors that sit outside the Equality Act 2010 (non-legislative). Examples include social economic factors (i.e. poverty and or isolation), caring responsibility, unemployment, homelessness, urbanisation, rurality, health inequalities any other disadvantage. (See Completion notes)				
Identified impact non-legislative factor.	Neutral Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification if determining proportionate means of achieving legitimate aims exists
Power, hierarchy and confidence to raise concerns		**X**		Independent investigation, external panel input and conflict safeguards provide reassurance where allegations concern senior leaders. Clear support for complainants and witnesses reinforces this.
Mental health and wellbeing		**X**		Named welfare arrangements, regular suspension reviews and a stress risk assessment support wellbeing. Individual support needs should continue to be reviewed throughout.
Location, digital access and representation	**X**			Secure remote or in-person participation and accessible documentation can be arranged according to individual circumstances without altering the substance of the procedure.

Name of department head / project lead:	Director of People / Head of People Services
Date of EIA sign off:	To be completed following consultation and approval
Date(s) of review of assessment:	At 6 and 12 months where stated, then at the scheduled document review or earlier if evidence, feedback or legislation changes.

Equality Impact Assessment (EIA)

Assurance Plan Owner: Director of People / Head of People Services	Commencement date: 27 July 2026	Sign-off date: To be completed

As a result of performing this analysis, what actions are proposed to remove or reduce any negative impact of adverse outcomes identified on people (employees, applicants' customers, members of the public etc.) who share characteristics protected by *The Equality Act 2010 or are non-legislative characteristics?*

Action Planning

Identified Impact Protected Characteristic or local non-legislative factor	Recommended Actions	Responsible Lead	Completion Date	Review Date
Disability and accessibility	Continue to identify and agree reasonable procedural adjustments at the outset and review them as the case progresses.	Head of People	From implementation	Each case
All protected characteristics	Use structured investigation, hearing and outcome templates linking findings and sanctions clearly to the evidence considered.	Head of People / Monitoring Officer	Before first case	Annual
Power and hierarchy	Ensure confidential reporting, appropriate witness support and clear protection from victimisation are communicated to relevant parties.	Commissioning manager	From implementation	Each case
Governance and independence	Verify panel composition, chairing, quorum, dismissal and appeal arrangements against the Constitution and Standing Orders before final approval.	Monitoring Officer	Before approval	At governance change
Wellbeing	Maintain a named welfare contact, proportionate timescale updates, regular suspension reviews and access to representation.	Commissioning manager	From implementation	Each case
Routine assurance	Review anonymised themes, procedural exceptions and feedback where numbers allow, recognising the small cohort covered by the procedure.	Head of People	From implementation	Annual

Equality Impact Analysis (EqIA)

Completion Notes:	
Analysis Ratings:	The assessment rating is located at the top of the document so that if you have several impact assessments you will be able to determine priority impact status. To assure the assessment determines the rating, the rating should not be determined before the assessment has been completed. **Red:** As a result of performing this assessment, it is evident a risk of discrimination exists (direct, indirect, unintentional, or otherwise) to one or more of the nine groups of people who share *Protected Characteristics (and / or local non-legislative factors).* In this instance**, it is recommended that the use of the activity or policy be suspended** until further work or analysis is performed. If it is considered this risk of discrimination (is *objectively justified*, and/or the use of this proposal (policy, activity, function) is a *proportionate means of achieving a legitimate aim*; this should be indicated and further professional advice taken. **Amber:** As a result of performing this assessment, it is evident a risk of discrimination (as described above) exists, and this risk may be removed or reduced by implementing the actions detailed within the *Action Planning s*ection of this document. **Green:** As a result of performing this assessment, no ***adverse effects*** on people who share Protected Characteristics *and / or local non-legislative factors* are identified - no further actions are recommended at this stage.
Equality Data:	Equality data is internal or external information that may indicate how the activity or policy being analysed can affect different groups of people who share the nine Protected Characteristics *and / or local non-legislative factors*. Examples of *Equality Data* include: (this list is not definitive) 1: Application success rates by *Equality Groups* 2: Complaints by *Equality Groups* 3: Service usage and withdrawal of services by *Equality Groups* 4: Grievances or decisions upheld and dismissed by *Equality Groups*

Legal Status:	This document is designed to assist organisations in *"Identifying and eliminating unlawful Discrimination, Harassment and Victimisation"* as required by *The Equality Act Public Sector Duty 2011.* The FRSs may be keen to extend "due regard" to local/non-legislative factors such as social economic factors (i.e. poverty and or isolation), caring responsibility, unemployment, homelessness, urbanisation, rurality, health inequalities any other disadvantage. ☐(See Completion notes). **What impact will the implementation of this proposal have on people for which there is no legal requirement**? (consider each local non-legislative factor separately). Doing this assessment may also identify opportunities to *foster good relations* and *advance opportunity* between those who share Protected Characteristics *and / or local non-legislative factors* and those that do not. *An EIA is not legally binding and should not be used as a substitute for legal or other professional advice.*
Objective and/or Proportion-ate	Certain discrimination may be capable of being defensible if the determining reason is: (i) *objectively justified* *(ii) a proportionate means of achieving a legitimate aim* of the organisation For *objective justification*, the determining reason must be a real, objective consideration, and not in itself discriminatory. To be *'proportionate'* there must be no alternative measures available that would meet the aim without too much difficulty that would avoid such a discriminatory effect. Where (i) and/or (ii) is identified it is recommended that professional (legal) advice is sought prior to completing an Equality Impact Assessment.

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Bucks Fire & Rescue Service

Equality Impact Assessment (EIA)

Policy /Project/ Function	**Executive Grievance Procedure V1.0 Draft**				**Date of Assessment**		**27 July 2026**	
Assessment Rating: please tick 1 box (*The assessment rating is identified after the analysis has been completed - See Completion Notes*).	**RED**		**AMBER**		**GREEN**	**X**	Proportionate means achieving a legitimate aim/can be objectively justified.	No adverse equality impact is identified from the procedure itself. Its independence, conflict, confidentiality and appeal safeguards support fair treatment. The assurance measures below will help maintain accessible and consistent implementation.

Please list methods used to analyse impact on people (e.g. consultations forums, meetings, data collection)	Desktop review against the Equality Act 2010, Public Sector Equality Duty, ACAS Code and principles of natural justice. Consideration was given to accessibility, independence, conflicts of interest, confidentiality, representation, interim arrangements, hearing and appeal arrangements, and consistent decision-making.
Please list any other policies that are related to or referred to as part of this analysis	BFRS Grievance Procedure; Executive Disciplinary Procedure; Dignity at Work; Whistleblowing; Code of Conduct; Mediation arrangements; Reasonable Adjustments guidance; Data Protection and records-retention requirements; Fire Authority Constitution and Standing Orders.
Please list the groups of people potentially affected by this proposal. (e.g. applicants, employees, customers, service users, members of the public)	Executive Leadership Team members and designated Statutory Officers; employees raising or responding to grievances; witnesses and companions; investigators; Fire Authority Members; independent HR/legal advisers; People Services; recognised trade unions and the wider workforce.

What are the aims and intended effects of this proposal (project, policy, function, service)?

To provide a fair, independent, confidential and transparent process for grievances involving the Service's most senior leaders; encourage appropriate informal resolution; ensure formal concerns are properly investigated; manage conflicts; and provide a clear hearing and appeal route.

Is any Equality Data available relating to the use or implementation of this proposal (policy, project, or function, service? Please Tick
(See Completion notes)

Yes: ☐ No: ☒ No procedure-specific, disaggregated implementation/outcome data was supplied. Existing workforce profile data and future case/application data should be used for monitoring, subject to data protection and small-number safeguards.

Bucks Fire & Rescue Service

List any Consultations e.g. with employees, service users, Unions or members of the public that has taken place in the development or implementation of this proposal (project, policy, function)?	
Formal consultation with recognised trade unions and other relevant stakeholders is planned before final approval. The procedure should also be checked against Fire Authority governance arrangements, with consultation dates, feedback and approval details added before publication.	
Financial Analysis No fixed implementation cost is identified. Case-dependent costs may include an independent investigator, HR/legal advice, mediation and panel time. These arrangements support procedural fairness and appropriate governance and should remain proportionate to the complexity of the case.	
Costs £: Not quantified / case dependent	Projected returns: Non-cash benefits expected
Implementation: Existing resources plus actions below	Projected savings: Not quantified

Equality Impact Assessment (EIA)

What impact will the implementation of this proposal have on people who share characteristics protected by *The Equality Act 2010*? (See Completion notes)				
Protected Characteristic	Neutral Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification if determining proportionate means of achieving legitimate aims exists
Sex (Men and Women)	X			The procedure applies according to role rather than sex. Independent investigation, structured evidence review and appeal arrangements support consistent treatment. Routine monitoring can help confirm that decisions remain fair.
Race (All Racial Groups)	X			No differential impact is identified. Objective evidence, independent investigators and clear decision records support fair consideration across racial groups and help avoid cultural assumptions.
Disability (Mental, Physical, and Carers of Disabled people)		X		The flexible process, representation rights and ability to make proportionate interim arrangements support disabled and neurodivergent employees. Reasonable procedural adjustments should be agreed where required for correspondence, meetings, evidence and timescales.
Religion or Belief	X			No differential impact is identified. Reasonable consideration can be given to meeting dates, religious observance, dress and communication needs without affecting the fairness of the process.
Sexual Orientation (Lesbian, Gay, Bisexual, and Straight)	X			No differential impact is identified. Confidentiality and strict need-to-know information sharing support privacy where a grievance includes personal or relationship information.
Pregnancy and Maternity		X		The procedure can accommodate pregnancy, maternity leave and related availability through reasonable timescales and meeting arrangements, ensuring that absence does not prevent fair participation.
Marital Status (Married and Civil Partnerships)	X			The procedure applies consistently regardless of marital or civil partnership status. Any relevant personal conflicts should be declared and managed through the existing conflict provisions.
Gender Reassignment	X			No differential impact is identified. Confidential handling and accurate use of names and personal information support dignity and privacy throughout the process.

Equality Impact Assessment (EIA)

(Includes non-binary)				
Age (People of all ages)	**X**			The process is based on evidence and role rather than age. Independent decision-making supports fairness and avoids assumptions linked to seniority, length of service or future career plans.

What impact will the implementation of this proposal have on people who are impacted by and / or local factors that sit outside the Equality Act 2010 (non-legislative). Examples include social economic factors (i.e. poverty and or isolation), caring responsibility, unemployment, homelessness, urbanisation, rurality, health inequalities any other disadvantage. (See Completion notes)				
Identified impact non-legislative factor.	Neutral Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification if determining proportionate means of achieving legitimate aims exists
Power, hierarchy and confidence to speak up		**X**		Independent investigation, conflict declarations and external decision-makers provide reassurance where concerns involve senior leaders. Clear anti-victimisation and support arrangements reinforce this.
Mental health and wellbeing		**X**		Informal resolution, mediation, proportionate interim arrangements and timely communication can support wellbeing. Individual support needs should be reviewed throughout.
Location, digital access and representation	**X**			Secure remote or in-person participation and accessible documentation can be arranged according to individual circumstances without altering the substance of the procedure.

Name of department head / project lead:	Director of People / Head of People Services
Date of EIA sign off:	To be completed following consultation and approval
Date(s) of review of assessment:	At 6 and 12 months where stated, then at the scheduled document review or earlier if evidence, feedback or legislation changes.

Equality Impact Assessment (EIA)

Assurance Plan Owner: Director of People / Head of People Services	Commencement date: 27 July 2026	Sign-off date: To be completed

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All protected characteristics	Use structured investigation and outcome templates linking conclusions and recommendations clearly to the evidence considered.	Director of People / Monitoring Officer	Before first case	Annual
Power and hierarchy	Ensure confidential reporting, appropriate support and clear protection from victimisation are communicated to all parties and witnesses.	Commissioning manager	From implementation	Each case
Governance and independence	Verify panel composition, chairing, quorum and appeal arrangements against the Constitution and Standing Orders before final approval.	Monitoring Officer	Before approval	At governance change
Wellbeing	Maintain proportionate timescale updates, access to representation and regular review of any interim arrangements.	Commissioning manager	From implementation	Each case
Routine assurance	Review anonymised themes, procedural exceptions and feedback where numbers allow, recognising the small cohort covered by the procedure.	Director of People	From implementation	Annual

Equality Impact Analysis (EqIA)

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