

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
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Louise Harrison
Chief Fire Officer and Chief Executive

To: Members of Buckinghamshire and Milton Keynes Fire Authority

7 September 2026

**MEMBERS OF THE PRESS AND
PUBLIC**

Please note the content of Page
2 of this Agenda Pack

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

Dear Councillor

Your attendance is requested at a meeting of the **BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY** to be held in the **MEETING ROOM 1, THE BLUE LIGHT HUB, 3 THORNBURY, WEST ASHLAND, MILTON KEYNES MK6 4BB** on **16 SEPTEMBER 2026** at **11AM** 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.

Chairman: Councillor Monger

Councillors: Adoh, Banks, Carroll, Exon, Geary, Gomm, Hall, Hughes, Hussain A, Hussain M OBE, Hussain N, Khan, Rouse, Sherwell, Stuchbury & Wilson



MAKING YOU SAFER

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To observe the meeting as a member of the Press and Public

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/UCWmIXPWAscxl3vIiv7bh1Q>

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 'team's meeting invitation to join the meeting at the specified agenda item.

Petitions

Any Member of the constituent Councils, a District Council, or Parish Council, falling within the Fire Authority area may Petition the Fire Authority.

The substance of a petition presented at a Meeting of the Authority shall be summarised, in not more than four minutes, by the Member of the Council who presents it (as above). If the petition does not refer to a matter before the Authority, it shall be referred without debate to the appropriate 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.

COMBINED FIRE AUTHORITY - TERMS OF REFERENCE

1. To appoint the Authority's Standing Committees and Lead Members.
2. To determine the following issues after considering recommendations from the Executive Committee, or in the case of 2(a) below, only, after considering recommendations from the Overview and Audit Committee:
 - (a) variations to Standing Orders and Financial Regulations;
 - (b) the medium-term financial plans including:
 - (i) the Revenue Budget;
 - (ii) the Capital Programme;
 - (iii) the level of borrowing under the Local Government Act 2003 in accordance with the Prudential Code produced by the Chartered Institute of Public Finance and Accountancy; and
 - (c) a Precept and all decisions legally required to set a balanced budget each financial year;
 - (d) the Prudential Indicators in accordance with the Prudential Code;
 - (e) the Treasury Strategy;
 - (f) the Scheme of Members' Allowances;
 - (g) the Integrated Risk Management Plan and Action Plan;
 - (h) the Annual Report.
 - (i) the Capital Strategy
3. To determine the Code of Conduct for Members on recommendation from the Overview and Audit Committee.
4. To determine all other matters reserved by law or otherwise, whether delegated to a committee or not.
5. To determine the terms of appointment or dismissal of the Chief Fire Officer and Chief Executive, and deputy to the Chief Fire Officer and Chief Executive, or equivalent.
6. To approve the Authority's statutory pay policy statement.

AGENDA

Item No:

1. Apologies

2. Minutes

To approve, and sign as a correct record the Minutes of the meeting of the Fire Authority held on 10 June 2026 (item 2) **(Pages 7 - 28)**

3. Matters Arising from the Previous Meetings

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. Chairman's Announcements

To receive the Chairman's announcements (if any).

6. Petitions

To receive petitions under Standing Order SOA6.

7. Questions

To receive questions in accordance with Standing Order SOA7.

8. Recommendations from Committees:

Executive Committee – 9 September 2026

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

(a) Performance Management Q1

"It is recommended that the Performance Management – Q1 2026/27 be noted." (Pages 29 - 100)

9. High Wycombe Fire Station Redevelopment - Business Case

To consider item 9 (Pages 101 - 126)

10. His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) - Buckinghamshire Fire and Rescue Service (BFRS) Inspection Report 2025-27

To consider item 10 (Pages 127 - 188)

11. Armed Forces Covenant Update Presentation

To receive a presentation (Pages 189 - 200)

12. Exclusion of Press and Public

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 report and minutes contain information relating to any individual; and Paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972, as the report and minutes 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.

13. Exempt Minutes

To approve, and sign as a correct record the Exempt Minutes of the meeting of the Fire Authority held on 10 June 2026 (item 13).

14. Director of People Appointment

To consider item 14

15. Date of Next Meeting

To note that the next Meeting of the Fire Authority will be held on Wednesday 2 December 2026 at 11 am in the Paralympic Room, Buckinghamshire Council, The Gateway Offices, Gatehouse Road, Aylesbury, Bucks.

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



BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY

ROLE DESCRIPTION

LEAD MEMBERS

1. To take a lead role in providing support and constructive challenge to senior officers in the development of strategies and plans and contributing towards the strategic direction of the Authority, within the Authority's overall policy objectives.
2. To act as a 'sounding board' for senior officers on issues within the portfolio, and be supportive in dealing with any problems at a strategic level.
3. To review, in conjunction with senior officers, the service within the portfolio.
4. To keep abreast of related developments and policies at national, regional and local level.
5. To take the lead in reporting to the Authority, one of its committees, or panels on issues within the portfolio.
6. To attend the Overview and Audit Committee, at its request, in connection with any issues associated with the portfolio which is the subject of scrutiny.
7. To act as a spokesperson for the Authority on issues within the portfolio.
8. To represent the Authority on bodies, at events and at conferences related to the portfolio, as appointed by the Executive Committee and to feedback to the Authority any issues of relevance / importance.

(Approved 8 June 2007)



Buckinghamshire & Milton Keynes Fire Authority

MINUTES OF THE ANNUAL MEETING OF THE BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY HELD ON WEDNESDAY 10 JUNE 2026 AT 11 AM.

Present: Councillors Adoh, Banks, Carroll, Exon, Geary, Gomm, Hall, Hughes, Hussain A, Hussain OBE M, Hussain N, Khan, Monger, Rouse (part), Sherwell, Stuchbury and Wilson

Officers: L Harrison (Chief Fire Officer), S Tuffley (Deputy Chief Fire Officer), D Buchanan (Assistant Chief Fire Officer), G Britten (Director of Legal and Governance), M Hemming (Director of Finance and Assets), A Carter (Head of Service Improvement), R Davidson (Director of People), P Scanes (Head of Response and Resilience), A Burch (Head of Prevention and Protection), A Hussain (Head of Finance and Assets), C Newman (Data Intelligence Team Manager), E Hilling (Head of Communication and Marketing) and K Nellist (Democratic Services Officer)

In attendance: M Wallace (Fire Brigades Union (Buckinghamshire) Brigade Secretary)

Apologies: None.

The Director of Legal and Governance opened the Annual Meeting of the Buckinghamshire and Milton Keynes Fire Authority.

The Director of Legal and Governance 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>

FA01 ELECTION OF CHAIRMAN

(Director of Legal and Governance in the Chair)

There being more than one seconded nomination, a vote took place and Councillor Monger was duly elected Chairman of the Fire Authority for 2026/27.

RESOLVED –

That Councillor Monger be elected Chairman of the Authority for 2026/27.

(Councillor Monger in the Chair)

FA02 APPOINTMENT OF VICE CHAIRMAN

There being more than one seconded nomination, a vote took place and Councillor A Hussain was appointed Vice-Chairman of the Fire Authority for 2026/27.

RESOLVED –

That Councillor A Hussain be appointed Vice-Chairman of the Authority for 2026/27.

FA03 MINUTES

A Member wanted to raise concerns about the minutes from the Extraordinary Meeting on 18 March 2026. They felt the minutes departed from the usual approach by including quasi-verbatim content and naming individual councillors, rather than providing a concise summary. While they agreed it was right that contributions were recorded, that was already achieved via the meeting recording. Verbatim minutes needed to be accurate, and there were omissions and errors that called this into question.

The Member asked when the decision had been made to adopt this format, including naming councillors. The matter had not been discussed with members or group leaders, and the Member had found no precedent in similar meetings. The Member intended to propose that the minutes were not approved at this meeting, that they revert to the standard summary format, and that revised minutes be brought back.

The Chairman advised that his understanding was that this format had been used before, though he could not say when, but he was satisfied the minutes were as accurate a record as Members would expect, although he appreciated the Member took a different view. He noted the concerns about naming individual councillors. As the item was for factual accuracy only, he moved the minutes to be approved.

The Member wished to raise factual accuracy issues.

The Chairman agreed for these to be raised.

A Member proposed a motion that as there was some disagreement about whether the minutes were accurate, the item should be deferred to the next meeting, so that any inaccuracies could be taken up outside of the meeting, and a modified set of minutes be brought to the next meeting.

On being put to the vote, the motion was NOT CARRIED.

Councillor Rouse wanted it placed on record that he did not agree to the approval of the minutes, and he did not consider them a correct record.

The Chairman proposed that the minutes be approved subject to the amendments already indicated by a Member below:

1. Could the Chief Fire Officer again clarify why her view was that **add 'it'** was a strong response from the public **add 'staff'**. Also, on the Equality Impact Assessment, do officers believe the Equality Impact Assessment was full and complete in its assessment of the protected groups from a member of public perspective –
2. The Chief Fire Officer advised she did say that the CRMP identified that the Service did not require 18 on-call fire engines, **but she would stand corrected it did not explicitly say that but** certainly **implicitly** within the CRMP and the HMICFRS reports, there was a clear indication that the Service had fire engines that were not used.
3. The Chief Fire Officer assured Members that people's comments had not been ignored. Officers had spent hours looking at the comments and looking at the quantitative as well as the qualitative data. Initially Haddenham was one of the stations that was being considered for closure. But, listening to the public, it was decided that Haddenham was still a viable station in terms of its usage (**Haddenham Fire Station was not part of the public consultation**). Officers were still committed to trying to actively recruit in that area.
4. The Chief Fire Officer confirmed that the Authority did have an underspend, but Members had been fully briefed as to why that was and they were one off payments. The fact that the Authority had an incredible finance team who were prudent in trying to plan for the future, was not something to be criticised, although having an underspend was not where the Authority would prefer to be. **Councillor Rouse advised that his observation on the overspend was not a criticism of the finance team but he was stating for the fourth year running the Service had a significant underspend.**
5. The Assistant Chief Fire Officer appreciated that Councillor Rouse wanted a legal position, but the FBU's

Representative's words were in relation to a dispute, not industrial action. Also, there was nothing from staff that suggested that there would be a mandate for the FBU to take industrial action in this service over this issue. ***Councillor Rouse advised that he was clear in the language he used which was notice of a potential industrial dispute not potential industrial action.***

The Chairman added that he would have a discussion with any Members who may wish to be involved on the future recording of minutes and stressed that the accuracy or otherwise of the minutes does not affect the decisions made at that meeting.

A Member, supported by two others, requested a recorded vote:

Members moved to a recorded vote:

	For	Against	Abstain
Adoh		✓	
Banks	✓		
Carroll		✓	
Exon	✓		
Geary		✓	
Gomm		✓	
Hall		✓	
Hughes			✓
Hussain A	✓		
Hussain M		✓	
Hussain N	✓		
Khan	✓		
Monger	✓		
Rouse		✓	

Sherwell	✓		
Stuchbury	✓		
Wilson			✓

The Chairman used his casting vote and voted in favour of the recommendation.

RESOLVED –

That the Minutes of the Extraordinary meeting of the Fire Authority held on 18 March 2026, be approved, subject to the amendments already made by Councillor Rouse, and signed by the Chairman as a correct record.

FA04 MATTERS ARISING FROM THE PREVIOUS MINUTES

The Director of Legal and Governance advised Members there was the following matters arising from the previous minutes:

FA65 – PUBLIC CONSULTATION – SHAPING OUR FUTURE ON-CALL SERVICE AND OPERATIONAL INDEPENDENCE FOR THE CHIEF FIRE OFFICER - hard copies of documents given to Members on the day of the meeting would be added to the website after the meeting so that they could be seen by the public. The Deputy Chief Fire Officer advised that this had been done.

FA05 DISCLOSURES OF INTERESTS

None.

FA06 CHAIRMAN'S ANNOUNCEMENTS

The Chairman announced:

Change in Membership

He would like to welcome all new Members onto the Authority Councillors Geary, Hughes, A Hussain and Khan and thanked the outgoing Members for their hard work and commitment. Councillor Keith McLean joined the Authority in January 2018 and was Lead Member for Health and Safety and Corporate Risk from 2020-2025 and was appointed Vice-Chairman for 2024-2025. Councillor Tracey Bailey joined the Authority in May 2024 and was Vice Chairman for 2025-2026. Councillor James Lancaster joined the Authority in October 2024, and Councillor Moriah Priestley joined the Authority in

May 2025 and was Lead Member for People, Equality and Diversity and Assurance 2025-2026.

Recruitment Activity

He would like to provide a brief update on our current recruitment activity, which remains a key priority in ensuring the Service is well positioned to meet both current and future operational demands. We are making good progress with our Wholetime Apprentice recruitment campaign. There has been strong interest, with a high volume of applications. Alongside this, we have been actively engaging with prospective candidates through a series of “Have a Go” sessions held across the county. These events have been very well attended and extremely well received, providing us with a valuable opportunity to showcase the Service while also supporting individuals through the early stages of the process. Over the coming months, we will continue to move candidates through the various stages of assessment, with the aim of appointing a new cohort of apprentices early next year.

In parallel, we are also progressing recruitment for Wholetime Transferees. Interest in this pathway has been encouraging, and we will shortly begin the next stages of that process, with the intention of making several appointments later this year across a range of roles. Taken together, this activity reflects a steady and proactive approach to workforce planning, ensuring we maintain a capable, resilient, and future-ready Service.

FA07 MEMBERSHIP OF THE AUTHORITY

The Authority noted that the following Members had been appointed by the Constituent Authorities to serve on the Fire Authority for 2026/27:

Buckinghamshire Council (11)

Councillors Adoh, Carroll, Gomm, Hall, Hussain M OBE, Hussain N, Monger, Rouse, Sherwell, Stuchbury and Wilson

Milton Keynes Council (6)

Councillors Banks, Exon, Geary, Hughes, Hussain and Khan

FA08 COMMITTEE MATTERS

- (a) Local Government and Housing Act 1989 and Local Government (Committees and Political Groups) Regulations 1990

The Authority noted that the allocation of seats on the Authority was:

(i) Conservative Group:	7 seats	(41.18%)
(ii) Liberal Democrat Group:	5 seats	(29.41%)
(iii) Labour Group:	2 seats	(11.76%)
(iv) Bucks Independent:	1 seat	[5.88%]
(v) IMPACT Alliance:	1 seat	[5.88%]
(vi) Reform UK	1 seat	[5.88%]

(b) Committee Matters – Committee Appointments

RESOLVED –

That the following Committees be appointed and seats be allocated, as follows:

Executive Committee (8 Members):

- (i) Conservative -
- (ii) Liberal Democrats –
- (iii) Labour -
- (iv) Ungrouped –

Overview and Audit Committee (9 Members)

- (i) Conservative -
- (ii) Liberal Democrats –
- (iii) Labour –
- (iv) Ungrouped -

RESOLVED –

1. That the following Members be appointed to the Executive Committee:

Councillors Geary, Hall, Hussain N, Khan, Monger, and Rouse in accordance with the Group Leaders' wishes.

2. That the following Members be appointed to the Overview and Audit Committee:

Councillors Adoh, Banks, Carroll, Exon, Gomm, Hussain A, Hussain M OBE, and Sherwell in accordance with the Group Leaders' wishes.

The Chairman asked for nominations for the ungrouped Members to be appointed onto the Executive Committee and proposed and it was seconded Councillors Stuchbury and Hughes.

A Member proposed and it was seconded Councillors Stuchbury and Wilson onto the Executive Committee.

The Director of Legal and Governance advised that as there were three nominations to fill two vacancies, in accordance with the standing orders on voting for appointments, the meeting would proceed by filling vacancies sequentially, applying the majority and elimination process for each. The meeting would firstly elect one Member, if no member receives more than half of the votes cast, the candidate with the fewest votes would be struck off.

The nominations were taken in alphabetical order. On being put to a vote, Councillor Hughes and Stuchbury were appointed to the Executive Committee.

RESOLVED –

Councillors Hughes and Stuchbury be appointed to the Executive Committee

Councillor Wilson be appointed to the Overview and Audit Committee.

3. That the authority be delegated to the Monitoring Officer, upon the written confirmation of a Group Leader, to vary the nomination on a given Committee and to make the appropriate amendments to membership (and notify all Members and the Chairman of the appropriate Committee of the change) including variations to nominations by a Group Leader as a result of any in year changes to the membership of the Authority.

FA09 CALENDAR OF MEETINGS

The Authority considered proposed dates for its meetings and meetings of its committees during 2026/27.

RESOLVED –

1. That meetings of the Authority be held on Wednesday 16 September 2026, Wednesday 2 December 2026, Wednesday 24 February 2027 and Wednesday 9 June 2027.
2. That meetings of the Executive Committee be held on Wednesday 15 July 2026, Wednesday 9 September 2026, Wednesday 18 November 2026, Wednesday 17 February 2027 and Wednesday 14 April 2027.
3. That meetings of the Overview and Audit Committee be held on Wednesday 22 July 2026, Wednesday 14

October 2026, Wednesday 27 January 2027 and
Wednesday 24 March 2027.

FA10 APPOINTMENT OF REPRESENTATIVES TO OUTSIDE BODIES

The Authority considered the appointment of representatives to outside bodies having received nominations which were seconded:

RESOLVED –

1. That Councillors Monger and Wilson be appointed to attend the Local Government Association Annual Conference.
2. That Councillor Monger be appointed as the Authority's representative (and Councillor A Hussain as the Standing Deputy) to the Local Government Association Fire Commission.
3. That Councillors Monger and Wilson be appointed as the Authority's representatives to the Local Government Association Annual Fire Conference.
4. That Councillors Monger and Banks be appointed as the Authority's representatives on the Thames Valley Fire Control Service Joint Committee.
5. That Councillors A Hussain and Sherwell be nominated as substitute members of the Thames Valley Fire Control Service Joint Committee.

FA11 LEAD MEMBER RESPONSIBILITIES

Each having been nominated and seconded it was:

RESOLVED -

That Members be appointed as Lead Members for 2026/27 as follows:

Responsibility	Lead Member
Service Delivery, Protection and Collaboration	Councillor Monger
People, Equality and Diversity and Assurance	Councillor Khan
Finance and Assets, Information Security, and IT	Councillor N Hussain

Health and Safety and Corporate Risk	Councillor Stuchbury
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FA12 ANNUAL REVIEW 2025-2026

The Data Intelligence Team Manager advised Members the report was the Service’s Annual Review for 2025/26, covering the period from 1 April 2025 to 31 March 2026, and it was the first time it had been brought to Members in this format. It was also the first-year review of delivery against the Community Risk Management Plan (CRMP) 2025–2030.

The paper aimed to provide Members with a clear and integrated overview of performance and progress against the Service’s priorities and measures. It highlighted areas of strong delivery, identified where performance had fallen short of expectations, and outlined the improvement actions being taken. The report was intended to offer a more cohesive and comprehensive assessment of delivery across the strategic objectives and enablers set out in the CRMP, rather than presenting a collection of separate performance updates.

The CRMP establishes the Service’s long-term strategic direction, setting out how the Service would reduce risk, protect people, and respond effectively to emergencies. It was supported by enabling work across workforce, finance and assets, and digital and data. The Annual Delivery Plan translated these priorities into specific actions for each year. This Annual Review provided the first opportunity to reflect on the full first year of delivery and assess how effectively those plans had been implemented.

The Data Intelligence Team Manager hoped Members would see there were some strong areas of performance and clear evidence of progress. There were areas where performance had been mixed and where improvement work was continuing. There had been strong delivery in prevention, particularly in home fire safety and safeguarding. Home Fire Safety Visits had exceeded their target. The use of the online Home Fire Safety Check had grown significantly. Safeguarding arrangements had been strengthened with a multi-agency review and 23 of 25 actions implemented and the initial referral activity had improved. There had been good progress in protection and business engagement. The report highlighted the continued effect of call challenging which had resulted in reduced attendance at non-domestic false alarms

by almost 50%. With regard to response, average attendance to accidental dwelling fires remained stable at 08:07, wholetime pump availability had improved, and on-call engine availability had risen to 18.0%.

A key theme running through the report was the central role of the workforce. The review highlighted a number of notable developments in the People area that merit Members' attention. The new workwear offer was introduced following extensive staff consultation, the Thrive leadership development programme had been rolled out, and this had been supported by the establishment of a formal mentoring scheme.

The Data Intelligence Team Manager advised Members that although the overall picture was positive, the report helped officers understand where to focus effort next, as the CRMP was a five-year plan, and year one should be used to inform future years.

A Member asked about secondary fires, were they a reflection of climate change or a non-contributory factor.

The Data Intelligence Team Manager advised that the weather does influence secondary fires but was not the only cause. This Service sits comfortably nationally regarding secondary fires and had a lot less than other services. This was monitored every month, looking at causes, locations, times etc.

A Member asked if the recent Authority decisions regarding the On-Call Improvement Programme would enhance resilience and capability to deal with climate change.

The Assistant Chief Fire Officer agreed that was the expectation and through the evidence of the CRMP, the Service could deal with day-to-day demand with the wholetime appliances, where further work was needed was around surge demand and simultaneous incidents, to ensure the Service had the ability to call up specialist vehicles and additional support, within the county when needed.

A Member asked what were the two or three key areas where the Service underperformed or where the Service had fallen short in the prior year.

The Data Intelligence Team Manager advised that the main two areas were absence; officers were very aware that absence had spiked recently, and the availability of some of the appliances, especially on-call and specials.

The Director of People advised that absence had increased over the last six to twelve months. Focus was on management training, return to work, looking at underlying themes and mental health. There was a robust approach not just with HR but at local management level to ensure processes were being followed and any mental health concerns monitored.

A Member asked about the forensic fire investigation project, why had funding only been secured for one year, how could the Service get this on a more stable footing.

The Head of Prevention and Protection advised Members that officers were in regular contact with Thames Valley Police (TVP), Royal Berkshire Fire and Rescue Service and Oxford Fire and Rescue Service around how this would be funded and supported moving forward. There was a long-term intention to bring together Tier 2 fire investigation and forensic fire investigation within a single Thames Valley Fire Investigation Unit. However, progress was complicated by the fact that the regulator's code had not yet been confirmed. A new regulator had recently been introduced, leading to ongoing discussions about which version of the code would apply, as well as the milestones the Service would need to meet to achieve full compliance.

A Member stated that diversity and inclusion, had been a large part of the improvement, and clearing the cause of concern last year. Could officers share what work the Service had done on tackling anti-Semitism and assuring Jewish members of staff that they could feel safe in the Service.

The Deputy Chief Fire Officer informed Members that officers received regular security briefings and were working with the National Fire Chiefs Council to ensure a consistent approach. Internal threat-level meetings were also held, and crews had visited synagogues, particularly in Milton Keynes, to provide advice, support, and ensure that accurate risk information was in place to safeguard these sites. Officers continued to offer regular reassurance to staff and were planning an additional dedicated briefing to provide further internal support where needed.

The Chief Fire Officer reassured Members that officers hold weekly pre and post-weekend meetings, alongside National Intelligence Liaison Officers, to review current events, consider community diversity, and identify any necessary actions. Guidance was also sought from the National Fire

Chiefs Council (NFCC) regarding national threat levels. Current risks, including those relating to anti-Semitism, were closely monitored, along with any other local or national issues that could impact the community.

A Member was pleased that the rural community had been mentioned along with the differences in the climate. The Member would like to arrange a meeting with the Assistant Chief Fire Officer regarding some of the key messages in the report that he would like to take back to the farming community.

RESOLVED –

That the Annual Review 2025-2026 report be noted.

FA13 MEMBER UPDATE ON THE FIRE BRIGADES UNION (FBU) IMPROVEMENT AGENDA

The Deputy Chief Fire Officer advised Members that the report provided a year end update on progress against the Fire Brigades Union (FBU) Improvement Agenda for 2025/26, which has been jointly developed by officers and the FBU.

The update in Appendix 1 was structured to reflect the key themes of the Bucks FBU's Improvement Agenda, with each section focusing on a specific priority area. For each item, the report set out the original recommendation for improvement, the jointly agreed update, the actions completed, the next steps, and the overall impact and status.

The Service had achieved good progress across a number of areas, notably the introduction of enhanced maternity and parental entitlements of up to 52 weeks, as well as improvements in water rescue training. Appendix 2 was provided for information and outlined last year's agenda; Appendix 3 looked ahead setting out the FBU's proposed improvement agenda for the future.

The FBU Brigade Secretary highlighted to Members the importance of regular progress meetings between the FBU and officers, noting that they had provided a consistent and constructive platform to review progress, identify challenges, and support collaborative working. While progress had been achieved in several areas, including the introduction of enhanced maternity and parental leave of up to 52 weeks and improvements in water rescue training, further work remained to be done. Whilst the FBU and officers do not

Assistant Chief
Fire Officer

agree on every issue, discussions were ongoing in an open, constructive and professional manner.

Appendix 3 outlined the FBU's longer-term Improvement Framework for 2025–2030, along with the proposed priorities for 2026/27. The framework was structured around a number of key themes, including operational response and resilience; workforce health, safety and wellbeing; safe staffing and workforce planning; training, competence and professional development; equality, diversity and inclusion; prevention, protection and community safety; infrastructure, fleet and equipment.

The framework focused on improving appliance availability and crewing, strengthening wellbeing and welfare support, enhancing training capacity and safety, supporting recruitment and retention, promoting fairness and inclusion, and ensuring that stations, equipment, and systems remain fit for purpose. It set out a clear forward plan aligned with the CRMP timeframe, establishing defined priorities to support ongoing collaborative working between the FBU and the Service.

A Member asked the FBU Brigade Secretary to identify one area where progress was not advancing quickly enough and where the Authority should focus its scrutiny.

The FBU Brigade Secretary advised it was difficult to prioritise the list, but with the Service striving towards the development of an in-house training centre, he would prioritise training over all else currently.

A Member asked about incident welfare and whether the welfare unit was on the run yet.

The Deputy Chief Fire Officer advised that a decision had been made to procure a new unit. While the chassis had arrived and construction was underway, a confirmed date for when it would become operational was not yet available.

RESOLVED –

That the Member Update on the Fire Brigades Union Improvement Agenda 2025/26 be noted.

FA14 2026-2027 ANNUAL DELIVERY PLAN UPDATE

The Head of Service Improvement advised Members that this was the first time this type of update had been presented to Members. The report was designed to give a clear overview of progress against the Annual Delivery Plan. The 2026-2027

Annual Delivery plan represented the second year of the Community Risk Management Plan. It was structured around the Service's three strategic objectives, Prevention, Protection and Response and Resilience and supported by key enablers, People, Finance and Assets, Digital, Data and Technology. It was intended to help Members quickly identify what was on track, what was under pressure, and where escalation or decisions may be required.

There were currently 24 projects within this year's Annual Delivery Plan. To ensure proportionate oversight, these projects were tiered according to their scale, complexity, and risk, with major projects subject to enhanced governance and support.

In terms of the major projects:

- **On-Call Improvement Programme:** This remained a key element of delivering the Response and Resilience commitments and also reflected the wider On-Call Improvement Programme approved following public consultation. This quarter focused on mobilisation, with the mandate and objectives already agreed, establishment of governance, sponsor and tactical kick off meetings taking place, and initial consultation with effected staff held. The next quarter was about moving the mobilisation into delivery and also further Member engagement.
- **Local Training Facilities:** The status remained red, primarily due to delays in the planning process and ongoing timeline pressures. The report also highlighted wider market pressures, particularly rising construction costs. While the project remained viable, it required close monitoring and strong governance, as confidence in the timeline was currently below expectations.
- **High Wycombe Station Renovation:** This project was currently rated amber and remained in the early development stage and was currently focused on building the evidence base to inform future decisions. The next phase would include surveys, confirmation of site related constraints, and progressing the PID and business case through governance. The amber status reflected early-stage uncertainty rather than a lack of progress.

The report also highlighted key collaborative programmes, including the Thames Valley Fire Control replacement

programme, Personal Protective Equipment (PPE) renewal programme, and the national transition from Airwave to the Emergency Services Network.

This first portfolio update was presented for oversight and assurance, and no decision was required from Members at this time. Any future decisions would be brought forward through the appropriate governance processes. Moving forward, quarterly portfolio updates would be presented to Members, with the next update scheduled for the Executive Committee meeting in July.

A Member felt it would be helpful to understand how and where it would be reported and when Members would be able to see the ongoing benefits realisation tracking and reporting of these projects, and the ones that preceded it.

(Councillor Gomm declared an interest in this item).

A Member asked for more formal reporting for Members regarding the local training facility, since the initial business case there had only been verbal reporting. Members needed to be overseeing this project and scrutinising it. Also, the Member was seeking assurance that Westcott Parish Council, the local Members and the local community's concerns would be addressed. Their main concern was regarding air quality, the air quality report provided was a desk top report and no one had been to site to undertake the air quality. The Member would like officers' views on putting in place a stakeholder engagement forum; to give local residents the opportunity to raise any issues they have with the facility.

The Director of Finance and Assets gave Members an overview of the current position. All information had been submitted to the Planners, who had come back requesting more detail on some of the ecology aspects, which Westcott would provide. In terms of community engagement, the Director of Finance and Assets had attended a meeting of the Parish Council to listen to their concerns, and some adjustments had been made to accommodate some of their concerns. There does, however, remain a fundamental difference of opinion around the air quality and the Member had alluded to an air quality report. This was not helped by the fire last year at Bucks Recycling, which required them to keep their windows and doors shut. The nature of that fire and what the Service would be doing was very different. Officers had invited the Member in for a further meeting given the passage of time since the initial meeting.

A Member queried the redevelopment of High Wycombe Fire Station and suggested a brainstorming session at the station. This would enable the Members to review data, assess the site and its challenges, and collaboratively develop a clear plan, as they felt there was currently no defined strategy for this key station.

The Chairman advised that he had recently been to High Wycombe Fire Station and been shown around by the senior officers involved and could assure Members they had a very clear idea of what the options were and what they would like to achieve for the station and for the residents they serve.

The Director of Finance and Assets advised it would be difficult to host all Members at once, given the layout and parking at High Wycombe Fire Station, but he invited any Member who would like a tour either individually, or in small group, to get in touch. He noted that plans for the station's redevelopment were progressing, with officers having consulted staff to identify key issues and required improvements. These primarily related to layout, decontamination, staff welfare, and safety, with a focus on providing the best possible facilities. The main challenge would be maintaining response times during the works, as it would not be feasible to retain an operational presence on site. Officers were therefore exploring a range of options for temporarily relocating staff. Once these arrangements were clearer, a more detailed plan would be presented to Members.

A Member asked whether officers were on track to finalise the High Wycombe Fire Station refurbishment decant options and present the full business case to Members in July 2026. Looking at the detailed summaries, which indicated a green status for both the local training facility and High Wycombe projects, the Member sought reassurance that sufficient resources had been allocated to both. In addition, they asked whether dedicated delivery resources were in place to ensure effective project management.

The Head of Service Improvement advised that the business case for the local training facility included dedicated resources, comprising specific property and ICT support, with additional resources to be allocated as required. The High Wycombe business case does not yet include dedicated resources; however, when it was presented to Members, it

would incorporate a funding request to secure that dedicated resource.

The Head of Finance and Assets advise that he was the sponsor for High Wycombe and advised that a structural survey had been carried out, but it was likely that officers would not have the results by July's meeting. It was likely that the business case would be delayed until September for all the information to be available.

The Head of Finance and Assets assured Members that officers were doing everything possible to try and reach a stage where the business case could be presented. He had also started to initiate discussions with Buckinghamshire Council's estate team to understand what estates were available in Buckinghamshire for the Station to decant to.

RESOLVED –

That the 2026-2027 Annual Delivery Plan Update be noted.

FA15 OPERATIONAL ACTIVITY AND COMMUNICATIONS UPDATE

The Head of Prevention and Protection delivered a presentation to Members outlining four recent incidents attended by the Service. The presentation highlighted how the Service coordinated its operational response, managed communications, and carried out community reassurance activities. It aimed to complement regular Member briefings by offering greater insight into both the immediate response and the follow-up actions taken after each incident.

The Head of Response and Resilience informed Members that the incidents occurred between 26 April - 7 May this year. Across these events, the Service demonstrated a swift, adaptable, and resilient operational response to a range of complex, high-risk situations. Initial attendance was consistently prompt, with fire engines typically arriving within 5 - 9 minutes, enabling early intervention and effective scene assessment. Resources were then escalated dynamically, ensuring levels of response were proportionate to the risks presented.

For the more significant and prolonged incidents, the Operational Support Room (OSR) was stood up, providing vital organisational resilience. These incidents also highlighted the importance of utilising On-Call fire engines to support relief demands, maintain operational cover, and support flexible resourcing models that enable the Service to manage multiple concurrent pressures. In all cases, close and

effective collaboration with partner agencies was essential, demonstrating strong interoperability

The Head of Response and Resilience informed Members that, taken together, these incidents demonstrated a professional, well-coordinated, and adaptable operational response. This was supported by strong initial attendance and clear escalation protocols, effective deployment of specialist capabilities, robust OSR support, and well-established multi-agency collaboration. As a result, even during periods of heightened operational demand, the Service maintained public safety, operational effectiveness, and organisational resilience.

The Head of Prevention and Protection advised that, alongside the operational response, officers delivered a range of targeted prevention and business engagement activities to reassure local communities and reinforce key fire safety messages. In addition, a programme of broader protection work was planned throughout the year, focusing on safety and compliance in licensed premises through fire safety audits, performance inspections, and ongoing business engagement initiatives.

Fire Investigation Officers established the likely causes of the incidents and, where appropriate, worked closely with colleagues from Thames Valley Police. Crucially, their findings indicated that there was no evidence to suggest any link between the incidents. Learning from operational activity remained a key priority, with debriefs, incident feedback processes, and, where necessary, Significant Incident Reviews undertaken. Any resulting actions and recommendations were tracked and monitored through the Service's Operational Assurance framework and governance arrangements.

The Head of Communication and Marketing informed Members that, while operational crews were responding to these incidents, communications played a vital supporting role in keeping communities informed, reassured, and safe. This involved issuing timely safety advice, providing updates on road closures and disruption, responding to media enquiries, and ensuring the public had access to reliable information as incidents unfolded. Close collaboration with partners, including Thames Valley Police, local authorities, and the ambulance service, ensured messaging was coordinated and consistent. It was emphasised that

communications during major incidents extended beyond social media activity, focusing on supporting public safety and maintaining community confidence.

The Head of Communication and Marketing also advised that Members had previously asked how officers know they were reaching different communities and advised that no single channel reached everyone, which was why there was a mix of social media, local media, the website, community engagement activity and partner networks.

It was also acknowledged that not everyone engaged with social media. During incidents, officers work closely with local media, councils, community groups, and partner agencies to ensure key information is shared through a range of channels. Success was not measured by followers or likes, but by ensuring that accurate and timely information reaches the right people, helping to keep communities informed and safe.

A Member asked if at large incidents where a lot of people were on Facebook live streaming what was happening, did the Service intend to have any of the officers live casting about everyone being safe for reassurance.

The Head of Response and Resilience advised that from an operational point of view, officers would have to be absolutely assured that those premises were evacuated appropriately, as it was a very dynamic situation, it would be unlikely that officers would live stream at the time.

The Communications and Marketing Manager advised that live streaming in those scenarios needed careful consideration. However, the Service was reviewing its social media channels to ensure it reached appropriate audiences. For the Pink Punters incident, officers used Instagram for immediate updates, appropriate for the audience, and shared content via reels and similar platforms. Officers adapt the approach based on demographics and would address any gaps identified.

(Councillor Rouse left the meeting)

FA16 EXCLUSION OF PUBLIC AND PRESS

RESOLVED –

That the public and press representatives be excluded from the meeting by virtue of Paragraph 1 of Part 1 of Schedule 12A of the Local Government Act 1972, as the report contains information relating to any individual; and Paragraph 3 of

Part 1 of Schedule 12A of the Local Government Act 1972, as the report 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.

All officers left the meeting apart from the Chief Fire Officer, Deputy Chief Fire Officer, Director of Legal and Governance, Director of Finance and Assets and the Democratic Services Officer.

FA17 PEOPLE DIRECTORATE RESTRUCTURE

The Authority considered the report, details of which are noted in the exempt minutes.

RESOLVED –

1. That a three-month extension to the fixed-term contract for the Director of People be approved.
2. That it be noted that, after the conclusion of the consultation process and a recruitment process, the appointment of the preferred candidate to the Director of People role will be subject to approval by the Authority at its meeting in September 2026.

The Chairman closed the meeting at 13.34.

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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%

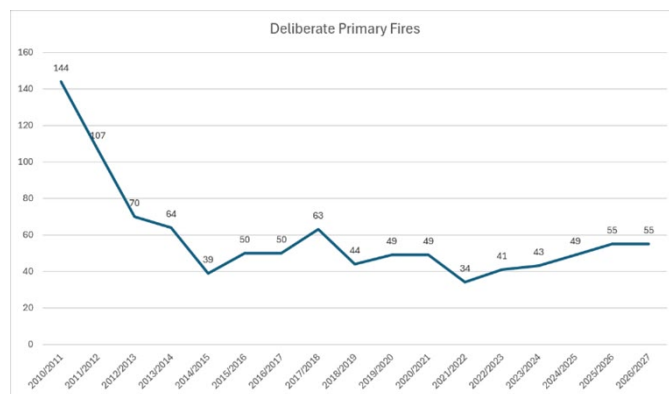
Highlighted measures:

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.

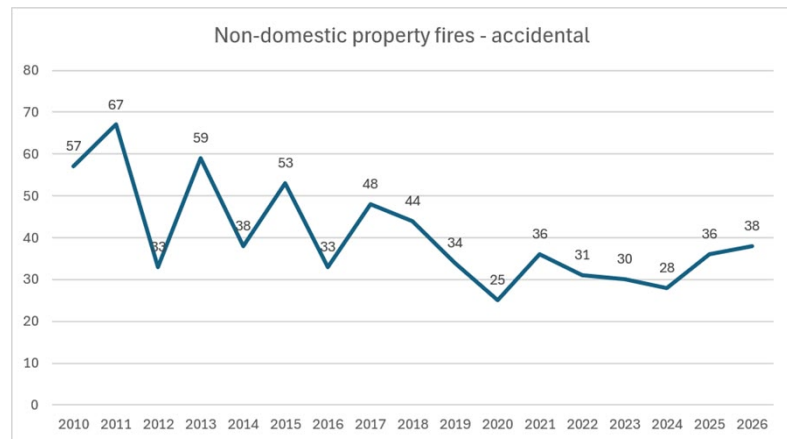
Reducing the incidents and impact of deliberate fires remains a key priority. Through continued partnership working, targeted prevention initiatives and an effective operational response, the Service aims to minimise both the occurrence of these incidents and the risks posed to communities, property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



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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 by Microsoft. This has resulted in the pack being produced in 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 June's 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).

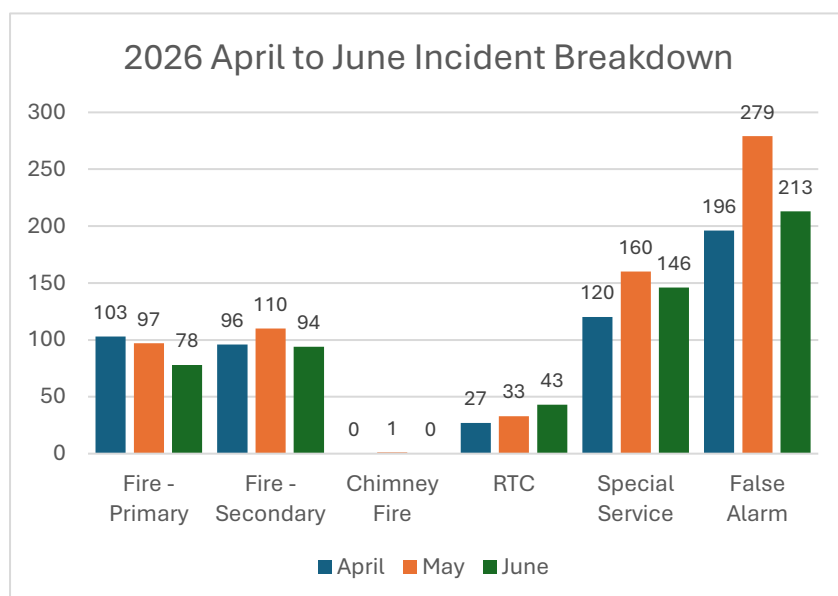
R	> 10.0% of target
A	> 2.5% of target
G	Within 2.5% of target
B	< 2.49% of target

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
Wholtime	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									
Cumulative	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

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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
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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									
Cumulatively	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									
Cumulative	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

There 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: Fire Authority, 16 September 2026

Report title: High Wycombe Fire Station Redevelopment – Business Case

Lead Member: Councillor Niknam Hussain, Lead Member for Finance and Assets, Information Security, IT

Report sponsor: Asif Hussain, Head of Finance and Assets ahussain@bucksfire.gov.uk

Author and contact: Laura Power, Property Manager lpower@bucksfire.gov.uk

Action: Decision

Recommendations:

It is recommended that the Authority:

1. approves the comprehensive refurbishment and reconfiguration of High Wycombe Fire Station as the preferred option;
2. approves a capital budget of £8 million from capital reserves;

Executive Summary

High Wycombe Fire Station is an operationally important station in a strategically valuable town-centre location. The existing building opened in 1966, and now has significant condition, suitability and infrastructure limitations.

Its current layout and building services do not adequately support modern operational requirements, contaminants control, inclusive welfare arrangements, accessibility, privacy or energy performance.

Evidence supporting intervention includes a historic condition backlog of approximately £458,000, a sustained pattern of reactive maintenance demand, deterioration to the concrete frame and building fabric, significant drainage restrictions, asbestos-containing materials and accommodation that constrains effective dirty-to-clean separation and inclusive facilities.

A structural survey completed on 10 July 2026 concluded that the principal structure remains serviceable. Subject to the recommended repairs and an effective planned maintenance regime, a comprehensive refurbishment could extend the serviceable life of the retained structure by at least 50 years. This provides a viable opportunity to retain the established operational location while avoiding the additional cost, embodied carbon and planning risks associated with full demolition and rebuilding.

Five options have been assessed:

- do the minimum and continue reactive maintenance;
- refurbishment and reconfiguration of the existing station;
- partial rebuilding on the existing site;
- full demolition and rebuilding on the existing site; and
- development of a new station at an alternative site.

Comprehensive refurbishment and reconfiguration is recommended because it offers the best overall balance of operational outcomes, affordability, deliverability, whole-life asset performance and planning risk. The preferred option is not a cosmetic refurbishment. It would include structural repairs, renewal of critical building services and fabric, contaminants-control zoning, improved drainage, inclusive rest and welfare provision, accessibility improvements, security and ICT infrastructure, and improved environmental performance.

Approval of the preferred option would remain conditional on the Stage 3 design demonstrating that all mandatory operational, contaminants-control, EDI, accessibility, environmental and structural requirements can be achieved within the retained building. If this cannot be demonstrated, the partial-rebuild option would be reappraised and presented to members before the principal construction contract is awarded.

Subject to the necessary design, planning, procurement and decant gateways, the current programme anticipates planning and detailed development from October 2026, commencement of enabling and decant activity in spring 2027, and occupation by October 2028.

Financial implications

The capital investment required for the construction and refurbishment works, including decant costs, project resourcing and contingency, is £7.994 million. A provisional amount of £8 million was included within the capital programme as part of the medium-term financial plan, subject to approval by the Fire Authority and therefore the full £8 million is requested.

The current planning total is subject to further surveys, completion of the design, confirmation of the decant arrangements, planning requirements and preparation of a Stage 3 cost plan. The existing estimate is an order-of-cost assessment rather than a tendered construction price, and the current decant estimate contains unknown elements.

The £8 million budget provides a suitable level of contingency and a defined affordability ceiling while allowing the project to progress through detailed design and risk reduction.

A do-nothing option would result in approximately £0.458 million of maintenance costs based on a 2022 condition survey. An updated survey is now due and is likely to

identify further works arising from the building's age and condition. This option would lead to increasing reactive maintenance costs and disruption, continued shortcomings in contaminant-control and staff welfare facilities and a greater likelihood of a more costly intervention being required in the future.

Risk management

A detailed project risk register has been developed and will be maintained through the Service's programme-management arrangements.

The principal risks for Authority consideration are:

- securing an operationally acceptable and affordable decant solution and maintaining effective response arrangements throughout construction;
- cost escalation, latent building conditions or incomplete scope causing the forecast to exceed the control budget;
- the Stage 3 design being unable to deliver all mandatory operational, contaminants-control, welfare, accessibility and equality requirements within the retained structure; and
- Flood Zone 3, River Wye, planning, drainage and town-centre constraints delaying or restricting the works.

These risks do not outweigh the case for progressing the project. They support the proposed staged approval approach, under which detailed design, cost, planning, decant, response and risk assurance must be completed before award of the principal construction contract. The business case currently identifies the same core risk themes and the controls intended to reduce them.

Progress and material changes should be reported through the Programme Board, Strategic Leadership Board and Member governance arrangements.

Legal Implications

The project will require:

- appropriate planning and Building Regulations approvals;
- compliant procurement in accordance with the Authority's Contract Standing Orders;
- compliance with the Construction (Design and Management) Regulations;
- appropriate asbestos-management and refurbishment-survey arrangements;
- any necessary lease, licence or land agreements for temporary accommodation; and
- environmental and drainage permissions where required.

Legal and Procurement representatives should continue to provide assurance through the project gateways and before contract award.

Privacy and security implications

Privacy impact screening will be required where the project introduces or replaces CCTV, electronic access control, ICT or other systems involving personal data.

Operationally sensitive information, including detailed plans, security arrangements, appliance access, ICT infrastructure and temporary operating arrangements, should be protected through proportionate document classification and procurement controls.

Temporary accommodation must provide security arrangements equivalent to the operational requirements of the permanent station.

Duty to collaborate

Opportunities for co-location in High Wycombe with Thames Valley Police and/or South Central Ambulance Service have been explored. However, no suitable site was found.

The project is specific to BFRS and no joint-ownership arrangement has been identified. Collaboration will nevertheless be important to delivery.

The Service will continue to engage with Buckinghamshire Council regarding planning, flood risk, drainage, potential decant land, access, town-centre regeneration and the nearby flyover. It will also use learning from other fire and rescue service estate projects and align the contaminants-control design with relevant regional and national practice.

The project must remain aligned with the Westcott programme, on call improvement programme, the Service's contaminants work and the wider estate capital programme.

Health and safety implications

Early and continuous involvement from Health and Safety will be required throughout design, construction, decant and commissioning.

The project will address:

- red, amber and green contaminants-control zoning;
- controlled PPE, BA, laundry, drying and wash-down arrangements;
- protection of clean welfare and rest areas;
- asbestos management and removal;
- segregation of operational staff, contractors and construction activity;
- safe temporary accommodation and operational readiness; and
- appropriate ventilation, drainage and decontamination controls.

Mandatory health and safety outcomes should not be removed or reduced through cost-saving or value-engineering decisions without formal governance approval.

Environmental implications

The site is adjacent to the River Wye and is located within Flood Zone 3. Early engagement with the planning authority and relevant environmental bodies will therefore be required.

The design will need to address:

- flood resilience and safe operational access;
- drainage treatment, rerouting or separator provision;
- prevention of contaminants entering the River Wye;
- construction environmental controls;
- fuel-storage and refuelling requirements;
- energy efficiency and building-performance targets;
- responsible waste management; and
- whole-life carbon implications.

Environmental and energy-performance targets will be developed and validated through the next design stage.

Equality, diversity, and inclusion implications

The project is intended to provide inclusive, dignified and accessible accommodation that supports the Service's current and future workforce.

The design will include suitable rest, changing, showering, toilet and welfare facilities, with appropriate privacy, dignity and accessibility. Critical actions identified through the Equality Impact Assessment will form mandatory design and acceptance requirements rather than discretionary enhancements.

Crew and other stakeholder engagement will continue through the design process, with post-occupancy evaluation used to assess whether the project output meet users' needs.

Consultation and communication

Engagement has taken place, and will continue to take place, with:

- station crews and representative staff groups;
- Operations and operational-response leads;
- Health and Safety and contaminants leads;
- People and EDI representatives;
- Finance, Procurement, Legal, and ICT;
- Buckinghamshire Council and relevant statutory consultees; and
- neighbouring residents and businesses where required through planning and construction.

A project communication and stakeholder-engagement plan covers design consultation, temporary operating arrangements, construction impacts, staff transition and post-occupancy review.

Background papers

- Annual Delivery Plan commitment for High Wycombe;
- MTFP report Feb 2026.

Appendix	Title	Protective Marking
1	High Wycombe Fire Station Business Case	
2	Financials	
3	Options Appraisal and PESTLE Analysis	



1. Project Context

1.1 Background of the proposed project

High Wycombe Fire Station, having opened in 1966, is an operationally significant station in the centre of High Wycombe Town, the location itself is critical to maintaining our operational response standard.

The existing building opened in 1966, and has substantial condition, suitability, and infrastructure limitations.

Its layout and building services do not fully support current expectations for operational efficiency, contaminant control, workforce welfare, accessibility, privacy, and energy performance.

In April of 2026, The Programme Board approved a project mandate to formalise the initial feasibility study for the redevelopment or renovation of High Wycombe Fire Station, following many years of maintenance and condition issues that need attention through significant capital works for the Fire Service to maintain service effectiveness, protect firefighter wellbeing, improve facilities for all staff and reduce future maintenance liabilities.

Initial feasibility studies offered three site-based solutions: refurbishment and reconfiguration; partial demolition with a modular extension; and full demolition and modular rebuild.

The Strategic Project Team delayed confirmation of the preferred solution until the structural position could be properly understood. The final structural survey (dated 10 July 2026) now offers confidence in retaining the existing site and structure and moving forward with an intensive internal reconfiguration and refurbishment.

It concludes that the station is currently serviceable and that a high-quality refurbishment, supported by effective routine maintenance, could extend the life of the existing structure by at least 50 years. The survey also confirms specific repair and enabling requirements that must be incorporated into the design.

1.2 Evidence of need

Evidence	Finding
Condition backlog	The 2022 estate condition survey evidence identified approximately £458k of maintenance and condition backlog at High Wycombe, the largest station-level increase in the estate backlog.



Evidence	Finding
Maintenance demand	Over 200 defects and maintenance requests have been recorded for the High Wycombe Station in the last two years. The issues are related to the age and structural integrity of the building, faults on appliance bay doors, washroom and welfare issues, as well as issues relating to the whole building electrical installation.
Structural deterioration	Spalled/cracked concrete, local reinforcement corrosion, masonry cracking, local floor defects, flat-roof deterioration, canopy treatment and erosion to ground level brickwork require planned intervention.
Drainage and river interface	Some drainage runs have lost up to 70% of sectional area through deposits; surface water discharges towards the River Wye without a separator, creating an environmental and contaminants-control issue.
Asbestos	Asbestos insulating boards, flash guards and a significant amount of ceiling tiles have been confirmed as containing ACMs.
Suitability	The current layout constrains clean/dirty separation, inclusive welfare and changing, accessibility, rest arrangements, storage and efficient operational circulation.

1.3 Business need

Operational resilience – The station must provide reliable accommodation, appliance access and infrastructure throughout its remaining service life. Repeated reactive failures create avoidable disruption and management effort.

Planned asset stewardship – The building is serviceable but deteriorating. Acting now allows defects to be addressed as a coordinated capital intervention rather than through piecemeal reactive work.

Firefighter health and contaminant control – The estate must support a clear dirty-to-clean pathway, segregate PPE and equipment handling, decontamination, suitable ventilation, clean welfare spaces and controlled drainage.

Inclusive and accessible accommodation – Rest, changing, showering, toilet, welfare and access arrangements must support a modern and diversifying workforce with dignity and privacy.

Environmental performance – The building envelope, services and drainage need renewal to improve energy performance, reduce avoidable consumption and protect the adjacent River Wye.

Future resilience of the location – The station's central location remains strategically valuable. A managed refurbishment protects that location while the wider town regeneration and adjacent flyover position continue to develop.



1.4 Project overview

The proposed project is a comprehensive refurbishment and reconfiguration of the existing High Wycombe Fire Station. It will retain the principal structure and operational location while renewing the fabric, services and accommodation; incorporating the structural survey recommendations; and providing a modern operational, welfare and contaminants-control layout.

1.5 Objectives

- Deliver a redeveloped station that meets current operational requirements and provides flexibility to accommodate future service needs.
- Maintain operational response and resilience throughout delivery, with the response model for the station restored following occupation.
- Deliver the project within the approved budget and programme, ensuring value for money across the asset's lifecycle.
- Deliver an approved contaminants-control design with clear red/amber/green zoning and protected clean welfare and rest areas.
- Provide inclusive, accessible welfare, changing, rest, toilet, and shower facilities that uphold dignity and privacy.
- Renew critical building fabric, mechanical, electrical, drainage and operational infrastructure.
- Reduce reactive maintenance demand, improve energy performance, and control whole-life cost.
- Complete commissioning and occupation by the end of March 2029, subject to planning, decant and procurement gateways.



2. Strategic Case

The redevelopment of High Wycombe Fire Station is a strategic investment in operational response, resilience, firefighter safety, workforce inclusion, and asset sustainability. It should not be viewed solely as a building improvement scheme, but as a necessary intervention to ensure that a key operational site remains fit to support a modern, agile, and effective fire and rescue service.

High Wycombe forms part of a wider response network serving more than 800,000 people across Buckinghamshire and Milton Keynes through seventeen fire stations, twenty-four pumps and a range of specialist vehicles.

The distributed estate underpins daily response capacity and wider resilience across the service area.

Investment in a strategically located station therefore supports not only the operation of that individual site, but the reliability and resilience of the wider response system.

2.1 Alignment with the CRMP and enabling strategies

Strategic area	Contribution
Response and Resilience	Retains a strategically located operational base; improves appliance access, building reliability and continuity; provides fit-for-purpose support to crews.
Finance and Assets	Replaces repeated reactive intervention with a controlled capital programme; extends asset life; protects the value and utility of an important public asset.
Workforce	Provides safe, dignified, inclusive and accessible accommodation; supports wellbeing, recruitment, retention and a diversifying workforce.
Prevention and Protection	Provides suitable office, training and public-facing accommodation that supports wider station-based activity.
Health, safety and contaminants	Uses estate design as a control measure through zoning, decontamination routes, ventilation, clean welfare protection and controlled equipment/PPE handling.
Sustainability	Improves fabric and services, reduces energy demand, protects the River Wye and embeds a planned and preventative maintenance approach.
Digital, data and technology	Renews ICT, server, security and operational systems and provides a platform for future digital requirements.



2.2 Case for intervention now

The July 2026 structural survey provides a time-limited opportunity. The structure remains capable of long-term retention, but identified deterioration will continue if it is not addressed.

A coordinated refurbishment now can repair the concrete frame, masonry, floors, roof, canopy, tower base and drainage while the accommodation and services are reconfigured.

Deferral would increase the risk that more fabric is lost, that operational failures become more disruptive and that later investment buys less improvement.

The maintenance record reinforces this position. Records show that reactive maintenance demand is not confined to one defect: it is distributed across access, welfare, electrical and appliance-bay systems. Capital intervention allows these recurring themes to be addressed together.

2.3 Impact of not proceeding

- Continued growth in reactive maintenance disruption and costs, unplanned disruption and management effort.
- Failure to achieve the required step-change in contaminants-control zoning and clean welfare protection.
- Retention of accessibility, privacy, changing, resting and welfare barriers that do not support an inclusive workforce.
- Further deterioration of concrete, roof, drainage and other fabric, shortening the period in which refurbishment remains the best-value solution.
- Ongoing energy inefficiency and unresolved environmental risk at the River Wye interface.
- Potential need for a later, higher-cost intervention with greater planning and continuity risk.

2.4 Strategic planning and place considerations

The central location is operationally valuable but creates planning and place constraints. High Wycombe Fire Station lies within Flood Zone 3 adjacent to the River Wye. Available Buckinghamshire Strategic Flood Risk Assessment mapping indicates that Flood Zone 3b (functional floodplain) affects the River Wye corridor in the immediate site area; the precise extent across the fire station site will be confirmed through the site-specific Flood Risk Assessment and pre-application planning process. The site is also within an area affected by town-centre regeneration proposals.

The July 2026 structural survey and planning evidence identify a significant planning risk associated with full demolition and rebuild on the existing site. Fire stations required to remain operational during flooding are treated as Highly Vulnerable development for planning purposes, and a replacement station within Flood Zone 3 is not guaranteed to obtain planning permission. Refurbishment retains the established use and principal structure and is therefore the more robust planning route.



The future plans for the nearby flyover are not yet understood, the Project Team have been in close contact with the estates, planning and redevelopment teams at Buckinghamshire Council, so that construction traffic, temporary response routes and any longer-term regeneration plans are understood and associated risks mitigated. The uncertainty does not justify delaying essential station investment, but it must remain a managed external dependency.

3. Financial Case

3.1 Funding position

A total funding allocation of £8.0 million is being requested. A detailed breakdown of the funding requirement is set out in **Appendix 2**.

3.2 Affordability Controls

- The final investment decision must use an updated cost plan with explicit scope, exclusions, inflation base date, risk quantification and decant pricing.
- The 15% programme contingency is held and released by the Sponsor through formal change control; it is not delegated to the contractor.
- No principal works contract is awarded until Finance confirms funding, cashflow, VAT treatment, capitalisation and revenue consequences.
- Any material scope addition, forecast completion beyond March 2029, or forecast more than 10% above the approved budget must be reported to Programme Board and the Authority.
- Whole-life cost assessment will compare planned maintenance, utilities and residual risk, not capital cost alone.

4. Options Appraisal and Analysis

4.1 Options considered

Five options have been considered for the future of the High Wycombe Fire Station:

1. Do nothing and continue current arrangements.
 2. Refurbishment and reconfiguration of the existing building on existing site.
 3. Partial Rebuilding of the existing building on existing site.
 4. Full demolish and rebuild on existing site.
 5. New station development at an alternative site.
- *Full option appraisals and PESTLE analysis - **Appendix 3***

The options appraisal and resulting recommendation has been informed by the below:

4.2 Strategic and Operational Risk

The principal high-level risks associated with the High Wycombe project are:



- *the need to maintain effective operational response arrangements throughout any construction period; with High Wycombe response standard reinstated upon occupation.*
- *the flood area planning restrictions mean that any significant reconfiguration to the footprint of the building may not achieve planning approval, or may cause significant delay to the project;*
- *the possibility that refurbishment alone may not be capable of delivering all mandatory operational, contaminants-control, welfare, accessibility and equality requirements;*

These risks do not, at this stage, outweigh the need to progress the project. They do, however, mean that any approval should be proportionate to the level of design and cost certainty currently available.

4.3 Constraints and assumptions

Type	Statement
Constraint	Operational response must be maintained within Service-approved tolerances throughout the works.
Constraint	The existing site is physically restricted, adjacent to the River Wye and within Flood Zone 3. Available SFRA mapping indicates Flood Zone 3b functional floodplain affects the immediate river corridor; the precise extent across the site is to be confirmed through the project Flood Risk Assessment and planning process.
Constraint	Pre-procurement and operational details require appropriate internal and external controls.
Assumption	The station remains on its existing permanent site.
Assumption	Option 2 can deliver mandatory contaminants, EDI, accessibility and operational outcomes; this must be proven at RIBA Stage 3.
Assumption	A viable temporary solution can be secured in High Wycombe, supported by Marlow where operationally approved.
Assumption	The project can use compliant procurement routes and secure design/construction capacity within the programme.

4.4 Dependencies and opportunities



Dependency / Opportunity	Type	Management approach
Decant and response modelling	Gateway	We have held discussions with Buckinghamshire Council regarding suitable temporary and permanent sites. The temporary sites identified would require significant investment to accommodate a modular building, as the proposed locations are currently used as car parks. Initial site inspections have also indicated that the location and/or size of the available car parks may be insufficient to meet operational requirements. We have also held discussions with owners of privately owned land and buildings; however, these discussions have not progressed. This is primarily because temporary occupation is not anticipated until the start of 2028, and prospective lessors are generally unwilling to commit this far in advance. To mitigate both decant costs and delivery risks, we will also include within the tender a requirement for bidders to propose options for a phased solution, incorporating both partial build completion and partial operational functionality. This approach will provide greater flexibility in managing the transition and may reduce the need for, and duration of, temporary accommodation arrangements.
Planning, flood risk and Environment Agency	Gateway	Early pre-application engagement with the Local Planning Authority and Environment Agency to confirm the refurbishment route, the precise Flood Zone 3a/3b extent affecting the site, Flood Risk Assessment requirements, drainage strategy and River Wye protection measures.
Contaminants project	Design dependency	Defines zoning, behaviours, storage, wash-down, BA/PPE and drainage requirements.
Equality Impact Assessment and crew engagement	Design dependency	Confirms inclusive room schedule, privacy, accessibility and user needs.
Westcott programme	Resource dependency	Integrated resourcing, procurement sequencing and leadership attention.
On call improvement programme and wider operational change	Dependency	Significant works and temporary arrangements must align with agreed operational decisions.



Dependency / Opportunity	Type	Management approach
Council regeneration/flyover	External interface	Potential traffic, access and longer-term place opportunity.
Neighbouring land/access	Opportunity	Explore proportionate land/access agreements if they materially improve safe access or parking.



4.5 Timescales and stage gateways



Period / gateway	Milestone
September 2026	Fire Authority decision.
September - December 2026	Pre-application planning engagement and RIBA Stages 2-3 design development; surveys; EIA and contaminants input; operational brief development; initial decant and response planning.
January - June 2027	Planning submission and determination; Flood Risk Assessment and Environment Agency engagement; continued detailed design; decant validation; response modelling; updated cost plan. Planning and investment readiness review by June 2027.
July - December 2027	Detailed design completion; planning-condition development; tender preparation and procurement documentation; cost validation and market engagement.
January - March 2028	Procurement, tender evaluation, contract award and contractor mobilisation.
April - June 2028	Temporary accommodation and decant installation, testing and operational rehearsal; enabling works; ICT, security, appliance charging, BA, laundry, welfare and contaminants arrangements commissioned.
July 2028 - February 2029	Main refurbishment works, progressive commissioning and operational-readiness preparation.



Period / gateway	Milestone
March 2029	Final commissioning, staff familiarisation, occupation, defects transition and benefits baseline confirmation.
3 - 12 months after occupation	Post-occupancy, maintenance, energy, EDI and contaminants-control benefit reviews.



5. Preferred Option

5.1 Recommendation and economic case

Option 2 – Comprehensive refurbishment and reconfiguration on the existing St. Mary street site is recommended. It is the highest-scoring option (options appraisal - Appendix 3) and provides the best balance of service outcomes, deliverability, planning risk and affordability.

The structural survey completed in July 2026 affords the Service the assurance needed: the retained structure is capable of at least a further 50 years of service if the recommended works and planned maintenance are delivered.

The Service can therefore secure a long-life operational asset without paying the additional capital, carbon and planning-risk premium of a rebuild.

Option 2 is not a cosmetic refurbishment. Its approval is conditional on delivery of the mandatory contaminants-control, EDI, accessibility, operational, environmental and lifecycle outcomes in this case.

If RIBA Stage 3 design demonstrates that the retained building cannot achieve those outcomes, Option 2 must be reappraised and brought back before any principal contract is awarded.

5.2 Preferred-option outputs

- Repair and protect the concrete frame, masonry, floors, roof, canopy, training-tower base and other identified structural elements.
- Renew the building envelope and services to improve condition, thermal performance, resilience and maintainability.
- Create a clear dirty-to-clean operational route, with appropriate BA, PPE, equipment cleaning, laundry/drying, ventilation, waste and wash-down arrangements.
- Protect kitchens, mess, offices, gym and rest areas as clean zones.
- Provide inclusive and accessible rest, changing, shower, toilet and welfare arrangements with appropriate privacy and dignity.
- Install or reroute drainage and treatment so operational and construction contaminants are prevented from entering the River Wye.
- Renew ICT, security, access, operational charging and station-support infrastructure.
- Provide a planned maintenance and post-occupancy regime that protects the 50-year structural-life objective.



5.3 Benefits realisation and success criteria

Benefit	Success measure	Evidence	Review
Operational continuity	No unplanned loss of response cover attributable to the project; temporary response impact remains within approved tolerance.	Operational logs and Programme reports	During works / occupation
Asset life	All critical structural recommendations completed; planned maintenance strategy supports at least 50 further years of structural service.	Completion certificate; asset plan; five-yearly condition review	Handover / ongoing
Reactive maintenance	At least 50% reduction in building-related reactive work orders in the first full year, normalised for occupancy, compared with the 2024–26 baseline.	InfraSpeak work-order data	12 months
Contaminants control	Approved zoning and room-adjacency schedule; no uncontrolled red-to-green route; post-occupancy audit confirms agreed controls are operating.	Design sign-off; H&S audit; operational audit	Design / 3 and 12 months
EDI and accessibility	100% of critical EIA actions closed before occupation; post-occupancy survey shows at least 80% of users agree the facilities meet their needs.	EIA closure; user survey	Occupation / 6 months
Environmental protection	Drainage treatment/discharge arrangement approved and commissioned; no project-attributable pollution incident.	Commissioning records; incident data	Handover / ongoing
Energy	Stage 3 model sets an energy target; first full-year performance is reviewed against the model and corrective action agreed where variance exceeds 10%.	Smart Meter data and energy review	12–18 months
Finance and programme	Completion by March 2029 and final forecast/outturn within the £8.0m control budget.	Programme and finance reports	Monthly / completion

5.4 Project tolerances

Area	Tolerance	Escalation
Cost	Forecast must remain at or below budget.	Forecast above 10% control budget requires further approval.



Area	Tolerance	Escalation
Time	Occupation by the end of March 2029.	Forecast delay affecting the financial year, operational arrangements or decant agreement requires escalation and change control.
Scope / quality	All mandatory operational, contaminants, EDI, accessibility, statutory and structural outcomes delivered.	No tolerance to remove a mandatory outcome without Sponsor, relevant Operational lead and governance approval.
Operational performance	Response impact within Service-approved tolerance.	Any forecast breach requires a revised decant/delivery strategy before works proceed.
Risk	No uncontrolled high/red risk at contract award.	High risks require named Senior Owner, funded treatment, and explicit acceptance.

5.5 Collaboration and social value

The core station requirement is specific to BFRS, so no joint-ownership opportunity has been identified. Collaboration should nevertheless be used to reduce delivery risk: work with Buckinghamshire Council on decant land, planning, flood risk, access and regeneration; use learning from other fire and rescue service refurbishments; and align contaminants design with regional and national good practice.

The procurement will include proportionate social-value requirements, including local supply-chain opportunities, apprenticeships and skills, responsible waste management, reduction of construction traffic and emissions, and considerate engagement with neighbours.

Commitments must be measurable and must not compromise operational safety, cost or programme.



Financials

Construction Cost	£5,994,606
Project consultancy - 5%	£299,730
Decant and temporary site	£700,000
Project staffing	£100,000
Project contingency - 15%	£899,191
Detailed total project forecast	£7,993,527
TOTAL PROJECT FUNDING REQUEST	£8,000,000

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High Wycombe Options Appraisal and PESTLE Analysis

Five options have been considered for the future plan for the High Wycombe Fire Station:

1. Do nothing and continue current arrangements.
2. Refurbishment and reconfiguration of the existing building on existing site.
3. Partial rebuilding of the existing building on existing site.
4. Full demolish and modular rebuild on existing site.
5. New station development at an alternative site.

PESTLE Analysis

A PESTLE analysis considers external factors that may impact on the feasibility of the options considered.

Factor	Key considerations for High Wycombe	Implications for the options appraisal
Political	High Wycombe is identified in the Service's 2026–27 Annual Delivery Plan as a priority. The project will therefore attract Authority, member and public scrutiny regarding affordability, operational resilience and value for money.	The preferred option must be appropriate and proportionate. Options that involve higher expenditure, service disruption or land acquisition will require stronger political and financial justification.
Economic	Public-sector capital remains constrained and the project will compete with other property, fleet, equipment and operational priorities. Construction inflation, professional fees, temporary accommodation and programme delay could materially affect affordability.	Refurbishment may require less initial capital but carries a greater risk of latent-condition costs. Rebuilding may provide stronger whole-life performance but requires substantially greater upfront funding. An alternative site would also introduce land acquisition, disposal, infrastructure and relocation costs.
Social	The station must support operational readiness, firefighter welfare, contaminant control, accessibility and inclusive facilities. Staff, representative bodies, local communities and operational stakeholders may have different expectations regarding the location, design and continuity of the station. The Service has also committed to future-proof design and community engagement	All options should be assessed against EDI, welfare, accessibility and contaminants outcomes, rather than building condition alone. Temporary operational arrangements and community consultation will be particularly important for partial or full rebuilding and relocation.



Technological	The project provides an opportunity to introduce modern building services, energy monitoring, secure digital infrastructure, resilient communications, improved security systems and accommodation capable of supporting future vehicles and operational equipment.	Refurbishment may be constrained by the existing structure, layout and service routes. Partial or full rebuilding may provide greater technological flexibility, while an alternative site could be designed around future operational requirements but may require entirely new utilities and communications infrastructure.
Legal	Any significant development will need to comply with planning requirements, Building Regulations, health and safety legislation, CDM duties, accessibility requirements, procurement rules and relevant environmental controls. Flood-risk requirements may include a Flood Risk Assessment.	The legal and planning burden increases as the scale of intervention increases. Full rebuilding and an alternative site are likely to require more extensive planning, technical evidence and statutory consultation. An alternative site would also require land, title, access and covenant due diligence.
Environmental	High Wycombe is recognised as a significant surface-water Flood Risk Area, and climate change is expected to increase exposure to flooding. Development proposals must therefore address drainage, resilience, safe access and the risk of transferring flooding elsewhere. (Buckinghamshire Council)	Flood risk is a material constraint for major redevelopment of the existing site. Refurbishment may reduce demolition waste and embodied carbon, while a new build could provide improved operational energy performance.

Options Considered

Option	Description
1. Do nothing and continue current arrangements	Retain the existing station and continue to address defects and failures through reactive and planned maintenance, without a comprehensive capital intervention.
2. Refurbish and reconfigure the existing building on the existing site	Retain the viable main structure; repair the building fabric; renew services; and reconfigure the accommodation to provide the required operational, contaminants, EDI, accessibility and welfare outcomes.
3. Partially rebuild the existing building on the existing site	Demolish and rebuild those parts of the station that cannot be effectively adapted, while refurbishing and reconfiguring the retained elements of the building.



Option	Description
4. Fully demolish and rebuild on the existing site	Provide temporary operational arrangements, demolish the existing station and construct a new purpose-designed station on the current site.
5. Develop at an alternative site	Secure a suitable alternative site, construct a new purpose-designed station and transfer operations once the replacement facility is complete.

Weighted benefits appraisal

Options were assessed on a 1–5 scale, where 1 is poor and 5 is strong. Scores are weighted to reflect the Service's operational, health, workforce, asset, deliverability and affordability priorities. The scoring is a decision aid and will be revalidated if the Stage 3 design identifies a mandatory outcome that Option 1 cannot provide.

Criterion	Weight	Option 1	Option 2	Option 3	Option 4	Option 5
Operational continuity and response resilience	20%	2	4	4	3	4
Contaminants, health and safety outcomes	20%	1	4	5	5	5
EDI, welfare and accessibility	10%	1	4	5	5	5
Whole-life asset performance	15%	1	4	4	5	5
Deliverability, planning and flood risk	20%	4	4	3	2	2
Affordability and value	15%	5	5	3	2	1
Weighted score / 5	100%	2.40	4.15	3.95	3.55	3.60

Comparative SWOT appraisal

A comparative appraisal considers the strengths and weaknesses of each option.

Option	Strengths / opportunities	Weaknesses / threats	Conclusion
1	Lowest immediate spend; avoids construction disruption.	Does not deliver contaminants, EDI, accessibility or lifecycle objectives;	Reject.



Option	Strengths / opportunities	Weaknesses / threats	Conclusion
		reactive demand and deterioration continue.	
2	Lowest capital cost; retains established location and structure; supported by July survey; lower planning/flood risk; potentially 50+ year life; faster and less carbon-intensive than rebuild.	Requires careful design within retained geometry; latent-condition and interface risk; decant still required. Risk associated with proximity to the overpass remain.	Preferred, subject to mandatory design tests.
3	Greater flexibility for layout and zoning; balances retained asset and new accommodation.	Higher cost; new/old interfaces; greater planning, demolition and programme complexity; does not remove all retained-fabric risk.	Reserve option.
4	Maximum freedom to optimise layout and lifecycle; complete reset of building fabric and services.	Highest cost and disruption; longest decant; greatest embodied carbon; Flood Zone 3 planning risk could prevent replacement after demolition.	Reject at this stage.
5	Allows redesign of station and full site layout. Less restrictions associated with current site size and positioning, may allow for expanded parking and training equipment/EV charging options.	Time taken to procure an alternative site detrimental to progress, risks associated with procurement of new site, legal and planning restrictions and impact to response times if location is not available in key area.	Reject at this stage.



Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Fire Authority, 16 September 2026

Report title: His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) – Buckinghamshire Fire and Rescue Service (BFRS) Inspection Report 2025-2027

Lead Member: Councillor Llew Monger, Chairman

Report sponsor: Chief Fire Officer Louise Harrison

Author and contact: Anne-Marie Carter, Head of Service Improvement,
Acarter@bucksfire.gov.uk

Action: Noting

Recommendations:

It is recommended that:

- 1) the BFRS HMICFRS 2025-2027 inspection report (Appendix 1) be noted; and
- 2) it be noted that progress against the Areas for Improvement will be monitored by the Executive Committee via the Annual plan update.

Executive summary:

In July 2017, HMICFRS extended its remit to include inspections of England's fire and rescue service. They assess and report on the efficiency, effectiveness and people of the 44 fire and rescue services in England. [How we inspect fire and rescue services - His Majesty's Inspectorate of Constabulary and Fire & Rescue Services \(justiceinspectorates.gov.uk\)](https://www.justiceinspectorates.gov.uk/hmfrs/)

HMICFRS last inspected Buckinghamshire Fire and Rescue Service (BFRS) in May/June 2023. And in October 2023, they published our inspection report with findings on the service's effectiveness and efficiency and how well we look after our people. They followed this up with re-inspections in May 2024, September 2024 and January 2025 to specifically consider the causes of concern that were previously issued for prevention, protection and fairness and diversity. And they published their findings in July 2024, November 2024 and March 2025.

In previous rounds of inspections, HMICFRS assessed and gave graded judgments for 11 areas. For this inspection programme, they have combined the efficiency areas and reduced the overall number to ten. This is to reduce duplication and concentrate more on outcomes for communities and the workforce.

Following the inspection during February and March 2026, HMICFRS published its latest inspection report of BFRS on 14 August 2026. The report is attached as Appendix 1.

The Service received the following judgements:

Outstanding	Good	Adequate	Requires improvement	Inadequate
	Understanding fire and risk	Public safety through fire regulation		
	Preventing fire and risk	Responding to fires and emergencies		
	Best use of resources and future affordability	Responding to major incidents		
	Promoting values and culture	Ensuring fairness and diversity		
	Right people, right skills			
	Leading people effectively			

There were no Causes of concern and recommendations raised, therefore no formal action plan needs to be submitted. The Service received eight Areas for Improvement (AFI’s), four new and four existing. This is a reduction of 18 AFI’s. A comparison against previous inspections can be found in Appendix 2

There was one Innovative Practice highlighted that related to the introduction of the leadership and behaviour framework, that sets out expected behaviour for leaders

His Majesty’s Inspector of Fire and Rescue Services Roy Wilsher OBE QFSM stated on the HMICFRS website:

- “I am pleased with the performance of Buckinghamshire Fire and Rescue in keeping people safe and secure from fire and other risks.
- “The service has worked hard to make progress since our inspection in 2023 and shows clear improvement. This has been underpinned by a robust governance structure, stable and self-aware leadership, and improved data and intelligence to support decision-making at all levels.

“However, the service needs to improve further in some areas to provide a consistently good service. For example, it should gather learning from all operational incidents and complete debriefs consistently.

“Overall, I commend the service on the changes it has made and expect it to continue working to resolve the further areas for improvement we have identified.”

Source: HMICFRS ([Buckinghamshire Fire and Rescue Service praised for improvements - His Majesty's Inspectorate of Constabulary and Fire & Rescue Services](#))

What happens next

The Areas for Improvement will be managed by the Portfolio Management Office (PMO), following a four step process:

- Understand: Confirm the detailed actions and evidence needed for each of the eight areas for improvement.
- Build In: Connect the actions to our Annual Delivery Plan and existing directorate, team and station plans.
- Take ownership: Make sure each AFI and subsequent action has clear leadership, responsibility and support across the Service.

Our HMICFRS Improvement board, chaired by the CFO, will remain in place to monitor progress and impact of the AFI's.

It is proposed that the Authority be kept informed of progress in delivering against the HMICFRS AFI's via regular reporting to both the Executive Committee and full Authority via the Annual Delivery plan

Financial implications: The prioritisation of improvements to address the specific areas for improvements raised within the report may introduce additional financial implications, either through reprioritisation of other projects, or through new workstreams.

Consideration will be given to ensure associated costs, both direct and indirect, are fully understood and managed effectively.

Risk management: There remains reputational corporate risks to the organisation. The Service continues to take steps to mitigate this through having extensive internal and external audits of a number of areas of the Service, in addition to the HMICFRS inspections. The draft internal audit plan for 26/27 can be found here: [Internal Audit Plan \(Pg 127-134\)](#)

Legal implications: The current Fire and Rescue Service National Framework issued under section 21 of the Fire and Rescue Services Act 2004, to which the Authority must have regard when carrying out its functions, states as follows at paragraph 7.5:

‘Fire and rescue authorities must give due regard to reports and recommendations made by HMICFRS and – if recommendations are made – prepare, update and regularly publish an action plan detailing how the recommendations are being actioned. If the fire and rescue authority does not propose to undertake any action as a result of a recommendation, reasons for this should be given.’

It continues: ‘When forming an action plan, the fire and rescue authority could seek advice and support from other organisations, for example, the National Fire Chiefs Council and the Local Government Association’.

There are no recommendations in the HMICFRS 2025-2027 report.

Privacy and security implications: No privacy or security implications have been identified that are directly associated with this report or its appendices.

The report and its appendices are not protectively marked.

Duty to collaborate: Each fire and rescue service is inspected individually. However, the latest report includes findings relating to the Service’s ability to collaborate effectively with partners. The report states: “The service continues to make efficiency savings and understands all the benefits of its collaborations” and “It can show the intended outcomes are being achieved. As a result, we have closed this area for improvement.”

Health and safety implications: The HMICFRS report states:

“The service has good workforce well-being practices

- The service continues to have effective and well-understood health and safety policies and procedures.
- The service continues to have well-understood and effective well-being policies, which are available to staff. A significant range of well-being support is available to support both physical and mental health”

The area for improvement relating to secondary contracts will be managed by the People Directorate and supported by the Health & Safety Committee.

Environmental implications: No environmental implications have been identified that are directly associated with this report or its appendices.

Equality, diversity, and inclusion implications: The Service has been judged as ‘Adequate’ in the area relating to Ensuring fairness and diversity, along with one AFI:

‘The service should review its policies and procedures to make sure those staff with a protected characteristic aren’t disproportionately affected.’

The AFI will be managed by the People Directorate and supported by the Culture and Ethics steering group

Consultation and communication: A detailed communication plan has been built to communicate the HMICFRS report.

Background papers: HMICFRS BFRS Home Page: [Buckinghamshire - His Majesty's Inspectorate of Constabulary and Fire & Rescue Services \(justiceinspectorates.gov.uk\)](https://justiceinspectorates.gov.uk)

24 October 2023 – Extraordinary Fire Authority: His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) – Buckinghamshire Fire and Rescue Service (BFRS) Inspection Report 2023

[Extraordinary Fire Authority Meeting – 24 October 2023 - Buckinghamshire Fire & Rescue Service](#)

6 December 2023 – Fire Authority: His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) – Buckinghamshire Fire and Rescue Service (BFRS) 2023 Action Plan

[Fire Authority Meeting - 6 December 2023 - Buckinghamshire Fire & Rescue Service](#)

07 March 2025 – HMICFRS Buckinghamshire Fire and Rescue Service: Return to default phase of monitoring

[Buckinghamshire Fire and Rescue Service: Return to default phase of monitoring - His Majesty's Inspectorate of Constabulary and Fire & Rescue Services](#)

05 November 2025 - State of Fire and Rescue: The Annual Assessment of Fire and Rescue Services in England 2024–25

[State of Fire and Rescue: The Annual Assessment of Fire and Rescue Services in England 2024–25 - His Majesty's Inspectorate of Constabulary and Fire & Rescue Services](#)

The last update was presented to members on 22 July 2026 Overview & Audit Committee:

[OVERVIEW AND AUDIT COMMITTEE - 22 JULY 2026 - Buckinghamshire Fire & Rescue Service](#)

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Fire and rescue services 2025–27

Effectiveness, efficiency and people

An inspection of Buckinghamshire Fire and Rescue Service

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Overall summary

In our inspection, we assessed how well Buckinghamshire Fire and Rescue Service has performed in ten areas. We have made the following graded judgments:

Outstanding	Good	Adequate	Requires improvement	Inadequate
	Understanding fire and risk	Public safety through fire regulation		
	Preventing fire and risk	Responding to fires and emergencies		
	Best use of resources and future affordability	Responding to major incidents		
	Promoting values and culture	Ensuring fairness and diversity		
	Right people, right skills			
	Leading people effectively			

In the rest of the report, we set out our detailed findings about the areas in which the service has performed well and where it should improve.

Changes to this round of inspection

We last inspected Buckinghamshire Fire and Rescue Service in May/June 2023. And in October 2023, we published [our inspection report](#) with our findings on the service’s effectiveness and efficiency and how well it looks after its people. We followed this up with re-inspections in May 2024, September 2024 and January 2025 to specifically consider the [causes of concern](#) that were previously issued for prevention, protection and fairness and diversity. And we published our findings in [July 2024](#), [November 2024](#) and [March 2025](#).

This inspection contains our fourth assessment of the service's effectiveness and efficiency and how well it looks after its people.

In our previous rounds of inspections, we assessed and gave graded judgments for 11 areas. For this inspection programme, we have combined our efficiency areas and reduced the overall number to ten. This is to reduce duplication and concentrate more on outcomes for communities and the workforce. Although we continue to use our five-tier system of judgments, these changes mean it isn't always possible to directly compare grades awarded in this round of inspections with those in previous years.

This report sets out our inspection findings for Buckinghamshire Fire and Rescue Service.

Our inspections provide a [rounded assessment of the service](#). More information on [how we assess fire and rescue services](#) and [our graded judgments](#) is available on our website.

Terminology in this report

We inspect and report on policing in England and Wales and on fire and rescue services in England only. Our reports contain references to, among other things, 'national' definitions, priorities, policies, systems, responsibilities and processes.

In some instances, 'national' means applying to England and Wales. In others, it means applying to England and Wales and Scotland or the whole of the United Kingdom.

About the data

More information on data and analysis in this report is included in the ['About the data 2025–27' section of our website](#).

HM Inspector's summary

It was a pleasure to revisit Buckinghamshire Fire and Rescue Service, and I am grateful for the positive and constructive way in which the service worked with our inspection staff.

The service is urban with significant rural communities and covers an area of 723 square miles. It serves a growing population of 870,000, which is centred around Milton Keynes, Aylesbury and High Wycombe.

Governance for this service is the responsibility of Buckinghamshire and Milton Keynes [Fire Authority](#).

Since our last inspection, the service appointed a new chief fire officer in December 2023. Since then, the senior leadership team has undergone further significant changes. The service appointed a new deputy chief fire officer in November 2024 and filled new posts of assistant chief fire officer and director of people in 2024 and 2025.

The service has seen increased overall funding since our last inspection but is still required to manage its resources within a tight budget. In the year ending 31 March 2025, the service cost £43.46 per head of population, which is less than the England average of £51.71. It has comprehensive financial and resourcing plans, aligned with its strategic priorities and sustainability strategies, which are achieving value for money for the public.

I am pleased with the performance of Buckinghamshire Fire and Rescue Service in keeping people safe and secure from fire and other risks. However, it needs to improve in some areas to provide a consistently good service. For example, it should gather learning from all operational incidents and complete debriefs for relevant incidents consistently.

We were pleased to find the service had made progress since our inspection in May–June 2023. For example, it has worked hard to address its causes of concern and [areas for improvement](#), implementing all cause of concern recommendations and addressing all but four of the areas for improvement. Its commitment to establishing a good internal governance model, which provides appropriate, timely and accurate oversight and scrutiny of its performance, has supported this improvement. Its senior leaders have accepted accountability and are now regularly assuring the service's performance.

Staff consistently said the new chief fire officer and restructuring of the senior leadership team had helped improve the service's culture since our last inspection. Communication from senior leaders about the strategic intention and service objectives is clear and well planned. Senior leaders are more visible, and they act as role models, promoting a positive culture through their behaviour. Although some staff feel this approach is yet to reach all middle and supervisory leaders, the service plans to develop all its leaders through training and development programmes in the coming year. This will help further establish and sustain its new leadership and behaviour framework.

My main findings from our assessments of the service over the past year are as follows:

- The service has developed a new [community risk management plan](#) that is based on thorough assessment of data and risk, informing the strategic objectives for its prevention, protection, response and resilience, people, finance and assets, and digital and data plans.
- The service needs to improve its assurance of operational learning and debriefing to continually and effectively provide a good incident response to the public.
- Financial and workforce plans, including the allocation of resources to prevention, protection and response, are now consistent with the risks and priorities identified in the community risk management plan.

The service shows clear improvement. This has been underpinned by a robust governance structure, stable and self-aware leadership, and improved data and [intelligence](#) to support decision-making at all levels.

There are still some changes that aren't fully established and the service will need to show evidence of these being sustained over time. These include the development of the [on-call](#) improvement programme, management of change and improvement projects, and maintaining a focus on risk and productivity in protection despite potential resourcing challenges. However, the service is aware of these issues, and leaders should remain committed to sustaining improvement and progress.

Overall, I commend the service on the changes it has made and expect it to continue working to resolve the further areas for improvement we have identified.



Roy Wilsher OBE QFSM

His Majesty's Inspector of Fire & Rescue Services

Understanding the risk of fire and other emergencies

Good

Buckinghamshire Fire and Rescue Service is good at understanding risk.

Fire and rescue services should identify and assess all foreseeable fire and rescue-related risks that could affect their communities. They should use their prevention, protection and response capabilities to prevent or mitigate these risks for the public. They should adjust these arrangements as appropriate, following robust feedback, scrutiny and oversight.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service uses data and community involvement effectively to identify risk

We were pleased to see the improvements the service had made in assessing the risks it faces. The service has assessed a suitable range of risks and threats using a thorough [community risk management planning](#) process. In its assessment of risk, it uses information it has collected from a range of internal and external sources and datasets, taking account of both local and national risk registers. For example, it has thoroughly analysed its incident response data against mapping of indices of multiple deprivation, flooding data and climate change data to consider what resources it needs to best serve the public.

In [our last inspection](#), we identified two [areas for improvement](#) related to the service's use of data and consultation with its communities:

- The service should make sure it is informed by a comprehensive understanding of current and future risk. It should use a wide range of data to build the risk profile and use operational data to test that the risk profile is up to date.
- The service, through regular engagement with its local community, needs to build a more comprehensive profile of risk in its service area.

In the development and implementation of its latest community risk management plan (CRMP), the service has consulted the public and staff several times. When considering local risk and impacts of change proposed in the plan, it received over 200 responses online and via public focus groups from the public and staff. In 2024, the service consulted with its staff and the public on how it should respond to automated fire alarms. And in 2025/26 it consulted with the public on how it provides its [on-call](#) service, receiving more than 1,000 responses. It has committed to continuing to consult on any significant changes it makes to how it provides its services.

We are satisfied the service is now taking account of a wide range of data and is regularly involving its communities to build and test a more comprehensive risk profile of its area. Therefore, we have closed these areas for improvement.

The service has developed an effective CRMP

Once it has assessed risks, the service records its findings in an easily understood CRMP. This five-year plan is called the 'Community Risk Management Plan 2025–2030'. It describes how the service intends to use its prevention, protection and response activities to mitigate or reduce the risks and threats its communities face both now and in the future.

In our last inspection, we identified the following area for improvement:

- The service should make sure that the aims and objectives of prevention, protection and response activity are clearly outlined in its [integrated risk management plan](#).

Since then, it has developed an annual plan for year one of the CRMP (2025/26). In this plan, the service summarises its annual objectives in six main areas – prevention, protection, response and resilience, people, finance and assets, and digital and data. For example, the service is using a data-led approach in both prevention and protection to target the highest-risk domestic and commercial premises for a visit, aiming to reduce risk through education and intervention. We were pleased with the progress the service has made, and we have closed this area for improvement.

The arrangements described in the CRMP also take account of the issues identified in the service's corporate risk register, which could compromise the implementation of these activities. For example, the service identifies financial sustainability, workforce stability and industrial action as high risks to the implementation of the CRMP. A dedicated risk officer and senior leaders regularly review the risks on the register, and the service has identified a range of suitable mitigation measures for each of the identified risks. For example, it has appropriate continuity plans to make sure it can continue to provide a minimum level of risk-critical functions during periods of industrial action.

The service has appropriate arrangements to monitor how it implements its CRMP objectives

Senior leaders have effective monitoring, feedback and scrutiny arrangements to make sure the aims they have set out in the CRMP for prevention, protection, response and resilience, people, finance and assets, and digital and data are being achieved.

Where the service isn't meeting its commitments to the public, senior leaders are fully aware of emerging issues and are holding leaders at all levels to account. For example, the service quickly became aware of a recurring trend in domestic false alarms. It acted quickly and saw a reduction in the following months. It is also aware it could improve its approach to mitigating road and water safety risk, including this as a main objective in its annual prevention plan 2026/27.

The service's governance arrangements provide accountability to the public

To make sure the service is accountable to members of the public and is meeting the commitments it has made to them, it is essential the service has robust oversight and governance arrangements. This provides assurance that its plans to reduce or mitigate risk are effective or are being adjusted where they aren't working.

The [fire and rescue authority](#) receives regular, meaningful updates on the arrangements the service has for prevention, protection, response and resilience, people, finance and assets, and digital and data. This helps it to hold the chief fire officer to account, set priorities for the service, reduce risk for the public and protect the health and safety of staff.

After consulting other fire and rescue services and public services to understand their internal governance arrangements, the service has designed and implemented a new internal governance structure. This involves monthly meetings of tactical delivery groups and strategic performance oversight groups. These help review a revised set of key performance indicators and projects and discuss any risk to progress against the service's objectives. The service has also developed a performance dashboard, which helps leaders across the service understand their area of the service's monthly performance.

Preventing fires and other risks

Good

Buckinghamshire Fire and Rescue Service is good at preventing fires and other risks.

Fire and rescue services must promote fire safety, which includes giving fire safety advice. To identify people at greatest risk from fire, services should work closely with other organisations in the public and voluntary sectors, including police and ambulance services. They should share [intelligence](#) and risk information with these other organisations when they identify [vulnerability](#) or exploitation.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service's prevention strategy targets high risk and is communicated well

In [our last inspection](#), we identified a [cause of concern](#) about the service's inadequate identification and prioritisation of those most at risk of fire. Since then, the service has made enough progress in this area, so we have closed this cause of concern.

The service's prevention strategy has been updated and is clearly aligned with the risks identified in its [community risk management plan](#). The service is using a data-led approach to identify those who may be at a higher risk from fire and other emergencies. It targets them for [home fire safety visits](#), education and interventions. It has developed a domestic [dwelling fire](#) methodology, which helps crews understand where to target preventative activity.

Leaders responsible for prevention have clearly communicated the strategy and main prevention aims to the workforce. As a result, prevention staff and station-based staff understand how they contribute to the prevention aims of the service individually and as a team. For example, there are clear prevention targets for staff to achieve. And the service monitors progress against these targets in monthly team meetings and through the new internal governance structures. The number of completed home fire safety visits has increased year on year since our last inspection.

The service's teams work well together and with other relevant organisations on prevention. They share relevant information when needed. The service uses information to adjust its planning assumptions and direct activity between its prevention, protection and response functions. For example, following thorough evaluation of the prevention activity completed by specialist prevention staff in high-rise buildings, the service has reallocated this work to a different group of staff. This means staff are working to target the risks they are trained to reduce.

The service targets its prevention activity at those who need it most

The service uses a risk-based approach to clearly prioritise its prevention activity towards people most at risk from fire and other emergencies. For example, it has reviewed trends in its own incident data, including data from incidents with casualties and fatalities. It has compared this with [Mosaic data](#), health and social care vulnerability data, and national insight data to make sure it understands who might be most at risk of a dwelling fire and need a home fire safety visit.

Using this information, it decides on the urgency of the home fire safety visit needed. Those referred to the service who are considered very high risk are prioritised for contact within 96 hours and are visited within 7 days. High-risk people are visited within 14 days and medium-risk people within 28 days. Low-risk people are referred to the service's online advice portal. The service has a very low number of cases awaiting a visit and understands the reasons for any delays in completing these visits.

It uses a range of information and data to target its prevention activity at vulnerable individuals and groups including those from [under-represented communities](#). In the year ending 31 March 2025, the service reported that 87.8 percent of home fire safety visits (4,434 of 5,050) had been at a household containing at least one vulnerable person. This is slightly above the national rate of 85.6 percent.

It carries out a range of interventions and campaigns, which it adapts to the level of risk in its communities. It uses social media messaging and connects to local groups to raise awareness of national and local campaigns, promoting fire and road safety.

Staff are trained to carry out home fire safety visits and school visits

Prevention and station-based staff told us they had the right skills and confidence to carry out home fire safety visits and school visits. These visits cover an appropriate range of hazards that can put vulnerable people at greater risk from fire and other emergencies.

Online and in-person training on prevention topics is helping the service sustain its improvements. Its specialist prevention staff have received training on hoarding, British Sign Language, stopping smoking and addiction. The service should continue to evaluate its prevention training as many staff described being keen to continue to learn how they can help support the most vulnerable people in their communities. This will make sure the service continues to improve its service to the public.

The service carries out proportionate quality assurance of its home fire safety visit activity. It reviewed quality assurance approaches from other fire and rescue services, as well as fire standards and the [National Fire Chiefs Council](#)'s approach before developing its own tools. It has assessed its specialist prevention staff using its revised quality assurance approach and intends to extend this to all staff completing home fire safety visits. Staff described wanting to know more about insights from the quality assurance process so they could improve their practice.

The service effectively evaluates its prevention activity

In our last inspection, we identified the following [area for improvement](#):

- The service should evaluate its prevention work so that it understands the benefits better.

Since then, the service has put in place good evaluation tools to measure how effective its activity is and make sure all sections of its communities get appropriate access to the prevention services that meet their needs. For example, evaluation of the service's provision of fire-retardant bedding and sensory impairment equipment (such as vibrating pads and strobe lights) has resulted in an improved approach. This change means the service better supports individuals who need such interventions, focusing efforts on education and referrals to smoking cessation services or the provision of alarms for people with a hearing impairment. As a result, we have closed this area for improvement.

Prevention activities take account of feedback from the public, other organisations and other parts of the service. For example, the service requests feedback from the schools where it provides educational sessions. As a result, it has improved the content of these sessions as well as the booking process.

The service uses feedback to inform its planning assumptions and change future activity to make sure it focuses on what its communities need and what works.

The service works well with other organisations to reduce the risk of fires and other emergencies

The service works with a range of other organisations to prevent fires and other emergencies. It continues to provide fire safety education to [children](#) and young people via the Safety Centre in Milton Keynes and has secured funding for the next four years.

In the year ending 31 March 2025, the service carried out 5,050 home fire safety visits. The service completed 1,029 home fire safety visits that were referrals from other agencies and 268 that led to the service making an onward referral to at least one other organisation.

We found good evidence that it routinely referred people at greatest risk to organisations that may better meet their needs. These organisations include Buckinghamshire Council, adult social care, Thames Valley Police, South Central Ambulance Service, Age UK, Hoarding UK and Trading Standards.

Arrangements are also in place to receive referrals from others. The service provides training to partners who refer vulnerable people for a home fire safety visit. This has been evaluated and shown to improve the information shared with the service by partner organisations.

The service acts appropriately on the referrals it receives. For example, it acts promptly to triage the risk associated with the referral, contacts the occupant and carries out a home fire safety visit within the timescales it has set itself.

The service routinely exchanges information with other public sector organisations about people and groups at greatest risk. It uses this information to challenge planning assumptions and target prevention activity. For example, it carries out serious incident reviews to understand if anything could have been done to prevent a fire or reduce its impact. It then shares this learning with other agencies.

The service continues to respond appropriately to safeguarding concerns

Staff we interviewed told us about occasions when they had identified [safeguarding](#) problems. They told us that they felt confident and trained to act appropriately and promptly. We reviewed cases in which staff had identified safeguarding concerns and had made a referral using the correct process. The service has dedicated staff to manage safeguarding concerns, and the out-of-hours contact process is clear.

The service has a team to tackle fire-setting behaviour

In the year ending 30 September 2025, the service attended 930 deliberate fire incidents, which has increased from 723 in the previous year. The rate of attendance at deliberate fire incidents was 105.1 per 100,000 population in the year ending 30 September 2025. This is lower than the England rate of 131.4.

The service carries out a range of suitable and effective interventions to target and educate people with different needs who show signs of fire-setting behaviour. Staff are trained to carry out interventions and provide fire-setting education. They have provided this to over 30 children in the last year.

When appropriate, the service shares information with relevant organisations to support the prosecution of arsonists. But it knows it could do this more routinely with partners, such as Thames Valley Police, to prevent arson incidents. It has included arson prevention in its prevention plan for 2026/27, and we look forward to seeing the outcome of this work.

Protecting the public through fire regulation

Adequate

Buckinghamshire Fire and Rescue Service is adequate at protecting the public through fire regulation.

Fire and rescue services should assess fire risks in certain buildings and, when necessary, require building owners to comply with fire safety legislation. Each service decides how many assessments it does each year. But services must have a locally determined, risk-based intervention programme (RBIP) for enforcing the legislation.

Area for improvement

The service should make sure it responds to statutory building consultations effectively and within the required time frames.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service's protection strategy prioritises risk and is communicated well

In [our last inspection](#), we identified a [cause of concern](#) about not providing clear direction so protection teams could prioritise work according to risk. Since then, the service has made enough progress in this area and we have closed this cause of concern.

The service's protection strategy is now clearly linked to the risks identified in its [community risk management plan](#). It has clearly defined its RBIP, identifying which premises need regular audits as they are the highest risk to the public.

Leaders responsible for protection have clearly communicated the strategy and main protection aims to the workforce. As a result, protection staff understand how they contribute to the protection aims of the service individually and as a team.

Staff across the service are involved in this activity and share information as needed. For example, operational staff are informed when a building is given a prohibition notice so they are aware should they need to respond to an incident there. Similarly, operational staff inform the protection team when they identify risks and hazards relating to protection at a building. However, the service could do more to effectively use this information to adjust planning assumptions and direct activity between its prevention, protection and response functions.

Capacity pressures can affect the protection team and reduce its effectiveness. The service is assessing how it can reallocate some low-risk protection activity to operational crews. This will free up more time for protection specialists to complete high-risk work, including building consultations, proactively making sure premises meet fire safety regulations.

The service is making sure it targets the highest risks for fire safety audits

The service's RBIP is focused on its highest-risk buildings. The service uses a data-led approach to assign each building a risk score, which determines inspection frequency. It completes a fire safety audit at very high-risk buildings every year and at high-risk buildings every three years. When we reviewed the service's audits of high-risk buildings, we found it had completed them in the time frames it had set itself.

The service reviews its RBIP regularly to make sure it keeps its focus on priority buildings. And it reports monthly on its performance to senior leaders and the [fire and rescue authority](#) for oversight.

In the year ending 31 March 2025, the service completed 571 fire safety audits against its target of 611, which equates to 2.5 audits per 100 known premises. This is above the national rate of 2.0, and is the first time the service has exceeded the national rate. According to its own performance report for the first three quarters of 2025/26, it had completed 525 fire safety audits against a target of 594. During our inspection, the service said it was on track to achieve its target for the year ending 31 March 2026 of 650 audits. It said monthly monitoring would give an early indication if it wouldn't meet this target.

In the year ending 31 March 2025, the service set itself a high-risk building audit target of 523. It didn't achieve this target as it carried out 398 high-risk building audits. This is 76.1 percent of its target achieved. The service told us this was due to other work, such as completing training and staffing changes in the protection team, reducing the capacity.

The service has enough qualified protection staff and staff in development

The service has enough qualified protection staff to meet the requirements of its RBIP and follow up on enforcement action. In the year ending 31 March 2025, the service had 14 competent staff, and a further 11 staff in development. In the same year, the service carried out 412 audits of buildings that were considered unsatisfactory and 412 enforcement activities following on from these. This shows the service has enough staff for proportionate enforcement activities.

Staff get the right training and work to appropriate accreditation. We found protection staff were trained and accredited in line with the [National Fire Chiefs Council's](#) Competency Framework for Fire Safety Regulators. The service also provides staff with regular [continuing professional development](#) and training opportunities. It quality assures completed audits and supports [peer reviewing](#) of audit work.

The service is actively responding to new legislation

The [Building Safety Act 2022](#) and the [Fire Safety \(England\) Regulations 2022](#) have been introduced to bring about better regulation and management of tall buildings.

This legislation has led to an increase in the time the service spends assuring the safety of tall buildings. It expects this demand to increase with the increased pace of [remediation work that is underway to replace flammable cladding](#).

The service has worked closely with the local authority to develop strategic and tactical groups to oversee this work. These groups agree how to proceed with the work needed to make sure these premises aren't a risk to the public and they share information on the enforcement and audit action needed.

The service is supporting the [Building Safety Regulator](#). It has allocated staff time to carry out training and complete audits of identified high-rise, high-risk buildings as part of its RBIP. It promptly escalates any concerns from these audits to the regional Building Safety Regulator team via regularly scheduled meetings. It expects these arrangements to have manageable impact on its other protection activity.

The Fire Safety (England) Regulations 2022 introduced a range of duties for the managers of tall buildings. These include a requirement to give floor plans to the fire and rescue service and inform it of any substantial faults to essential firefighting equipment, such as firefighting lifts.

We found the service had good arrangements to receive this information. When it doesn't receive the right information, it takes action. And it updates accordingly the risk information it gives its operational staff.

The service makes sure fire safety audits are completed consistently

We reviewed a range of audits the service had carried out at different buildings across its area. These included audits carried out:

- as part of the service's RBIP;
- after fires at premises where fire safety legislation applies;
- after enforcement action had been taken; or
- at high-rise, high-risk buildings.

In our review, we found the service had completed the audits to a high standard, in a consistent, systematic way and in line with its policies. The service makes relevant information from its audits available to operational teams and [control room](#) operators. Staff receive a protection bulletin, which provides updates about high-risk buildings.

The service carries out proportionate quality assurance of its protection activity

Each member of the protection team undergoes a fire safety audit quality assurance process at least twice a year. Outcomes of the process have led to training in specific topics such as working with responsible persons.

The service has good evaluation tools to measure how effective its activity is and make sure all sections of its communities get appropriate access to the protection services that meet their needs. For example, the service completes post-fire protection reviews to make sure it has addressed any fire safety concerns for the public and gathered learning.

The service uses its enforcement powers proportionately

The service consistently uses its full range of enforcement powers and, when appropriate, it prosecutes those who don't comply with fire safety regulations.

Of the buildings the service audited in the year ending 31 March 2025, it considered 72.2 percent (412 of 571) to be unsatisfactory. And it carried out 412 enforcement activities as a result. These included 4 alteration notices, 384 informal notifications, 12 enforcement notices and 12 [prohibition notices](#). It carried out no prosecutions. It completed 1 prosecution in the five years from 2020/21 to 2024/25. It adds this information to the National Fire Chiefs Council's enforcement register, helping to keep the register up to date and accurate.

In our last inspection, we identified the following [area for improvement](#):

- The service should ensure that its staff have the confidence to use the full range of enforcement powers.

Since then, the service has introduced key performance indicators, which help it monitor and understand its use of enforcement powers, training for staff from a legal provider in enforcement action and a peer review process for enforcement notices. The service has worked hard to address this area for improvement and we have now closed it.

The service works well with other enforcement agencies to ensure fire safety and protect the public

The service works closely with other enforcement agencies to regulate fire safety, and it routinely exchanges risk information with them. These agencies include other fire and rescue services, the Building Safety Regulator, local authorities, the [Care Quality Commission](#), immigration services and [safety advisory groups](#).

The service doesn't always complete building consultations in time

The service doesn't always respond to building consultations on time. In the year ending 31 March 2025, it responded to 73.2 percent of building consultations (657 of 898) within the required time frame of 15 days. This means it doesn't consistently meet its statutory responsibility to comment on fire safety arrangements at new and altered buildings.

The service is aware of this. It explained that to make sure the highest-risk buildings identified in its RBIP were audited on time when team capacity was reduced, it chose to complete these audits instead of completing building consultations within the required time frame. We acknowledge the service is reviewing different options to prevent this loss in capacity. But it should make sure it responds to statutory building consultations effectively and within the required time frame to proactively reduce the risk buildings may pose to public safety. We have identified this as an area for improvement.

The service is proactively working with businesses to ensure fire safety

The service proactively works with local businesses and other organisations to promote compliance with fire safety legislation. It has developed a business engagement framework and has a dedicated business fire safety team, which actively promotes advice and guidance via events, visits and social media. The service has 13 active [primary authority schemes](#) to support various businesses to comply with fire safety regulation.

In our last inspection, we identified the following area for improvement:

- The service should make sure that it plans its work with local businesses and large organisations to share information and expectations on how they can comply with fire safety regulations.

The service has worked to address this, and we have closed this area for improvement.

Responding to fires and other emergencies

Adequate

Buckinghamshire Fire and Rescue Service is adequate at responding to fires and other emergencies.

Fire and rescue services must be able to respond to a range of incidents such as fires, road traffic collisions and other emergencies in their areas.

Areas for improvement

The service should make sure that its [mobile data terminals](#) are reliable so firefighters can easily access up-to-date risk information.

The service should make sure that it has an effective system for sharing and applying the learning from operational incidents.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service has revised its response strategy to align it with the community risk management plan

The service has linked its response strategy to the risks identified in its [community risk management plan \(CRMP\)](#).

In [our last inspection](#), we identified the following [area for improvement](#):

- The service should assure itself that it understands what resources it reasonably requires to meet its foreseeable risk; it should make sure that all its fire engines can be sufficiently resourced, if required.

We were pleased to see the service had started to address this. It has completed a thorough analysis of its operational model to understand if it has the right resources to respond to both daily demand and infrequent events such as flooding or wildfires. It has committed to improving the availability and use of its [on-call](#) resources by changing and reshaping its operational response model throughout the term of the CRMP. It refers to this work as its on-call improvement programme. It has been clear that many of the on-call fire engines don't contribute to a faster response on a day-to-day basis and that the service maintains the ability to provide resilience during a high-impact event such as a flood or wildfire. The service has reviewed the overall number it needs for such events and has consulted with the public about how it intends to reduce and reallocate resources for better use elsewhere in the service. As a result, we have closed this area for improvement.

Leaders responsible for response have clearly communicated the strategy and main response aims to the workforce. The service also clearly reports on its response performance in its new internal governance structure and to the [fire and rescue authority](#). As a result, operational staff understand how they contribute to the response aims of the service individually and as a team.

The service locates its fire engines and operational staff, and designs its working patterns, to help it respond flexibly to fires and other emergencies with the appropriate resources. For example, it has introduced rural firefighting vehicles at strategic locations across the county and maintains water rescue resources and [urban search and rescue](#) capacity.

It is positive that the service is also monitoring how its borderless [mobilising](#) approach with the other Thames Valley fire and rescue services is working. It knows how many of the incidents in its area are being responded to by other services and which service is first to attend. This is helping it know the impact of changing and reshaping its operational response model.

The service has set out a new response standard in its CRMP

The service has set out response standards in its CRMP and aims to respond to all incidents in an average of ten minutes (not including call-handling time). The CRMP clearly outlines that the response will be faster in more urban areas and rapidly developing areas, where [wholetime](#) fire engines are located, and perhaps slower in rural areas, which are covered by on-call fire engines and staff. The service reports on exceptions that are longer than the average incident response time in its quarterly performance reports to the fire and rescue authority and closely monitors the reason for any delay.

There are no national response standards, but the Ministry of Housing, Communities and Local Government (MHCLG) does publish data on response times to [primary](#) and secondary fires. However, locally set standards may be calculated differently to the data the MHCLG produces.

MHCLG data shows that in the year ending 30 September 2025, the service's average response time (including call-handling time) to primary fires was 10 minutes and 5 seconds. This is faster than the average for services that are urban with significant rural communities, which is 10 minutes and 37 seconds. Using this measure, the service's average response time has remained very similar to that in the year ending 30 September 2024: 10 minutes and 4 seconds.

As part of the service's governance and performance monitoring, it reviews any responses to incidents that are much longer than the average response time. This helps it understand any issues affecting its response standard and report clearly to the public about them.

The service has improved the availability of its fire engines

In the year ending 31 March 2025, availability of wholetime fire engines was 98.2 percent. This is an increase from the previous year when availability was 97.2 percent. The service aims to have 12 fire engines immediately available. We were pleased to see it was now more regularly meeting this aim. The service told us that in 2025 it had an average of 13 immediately available fire engines. It understands that this is due to making sure it meets its wholetime staffing level.

The service told us that, during the same period, availability of on-call fire engines also improved by 5 percent. The service understands this increase is due to reviewing the on-call contracts and staffing availability patterns, to make sure it can resource more fire engines. Through its on-call improvement programme it intends to increase the availability of these fire engines further during the length of the CRMP.

The service needs to assure itself staff can access risk information when responding to incidents

The service routinely collects and updates information about the highest-risk people, places and threats it has identified. It ranks this information from very high risk to medium risk. It aims to visit all high and very high-risk sites every year and medium-risk sites every three years.

In the year ending 31 March 2025, the service had identified 1,563 sites that pose more risk to firefighters if an incident took place. During the same period, the service visited 672 sites to update its records and familiarise itself with the firefighting risks at the sites. This is an increase from the previous year when the service completed 561 visits.

We sampled a range of risk information in the service's central database and on mobile data terminals, including the information for firefighters responding to incidents at high-risk, high-rise buildings and the information held by [fire control](#). The information we reviewed was up to date and accurate. But we found the service didn't always complete its quality assurance process consistently. Some of the risk information records we reviewed hadn't been signed off by a qualifying manager.

In our last inspection, we identified an area for improvement related to making sure mobile data terminals were reliable. Firefighters use these to review the risk information on the way to an incident. The information helps them plan their response to the incident and consider any additional risks that might affect their approach. In this inspection we found firefighters still couldn't always easily access the information. We understand the service had resolved this issue, but a further change in the service's mobile connectivity to its mobile data terminals has resulted in access becoming difficult again. We are keeping this area for improvement open.

The service makes sure incident commanders are well trained

The service has incident commanders who are trained and regularly and properly assessed. It has detailed records for the assessments, which are completed at the [Fire Service College](#), and regularly records [continuing professional development](#) hours completed. This helps it safely, assertively and effectively manage the whole range of incidents it could face, from those that are small and routine to major and multi-agency incidents.

In 2024/25, the service needed 152 incident commanders and had 152 accredited. There were no incident commanders who were still carrying out the same work after their accreditation had expired.

As part of our inspection, we interviewed incident commanders from across the service. They were familiar with [risk assessing](#), decision-making and recording information at incidents in line with national best practice as well as the [Joint Emergency Services Interoperability Principles](#).

The service could do more to evaluate operational performance

As part of our inspection, we reviewed a range of emergency incidents and training events. These included a recent exercise, a fatal incident and a house fire. When the service had gathered feedback and debriefed an incident, it used staff trained in carrying out structured debriefs.

We were disappointed to find the service didn't consistently follow its policies to make sure that all staff were able to provide timely feedback about the command of incidents and that structured debriefs were taking place in line with identified triggers. As a result, it doesn't always update internal risk information after an incident or routinely improve its service to the public based on continual learning from incidents.

In our last inspection, we identified an area for improvement related to the service sharing and applying the learning from operational incidents effectively. Despite some improvement in tracking the learning from incidents, the operational assurance team is still following a manual process to gather feedback via email and then collate it. And we found there was no monitoring of incidents that might have met the service's criteria for an operational debrief. The service doesn't record its decisions when determining if an incident should or shouldn't have a structured debrief. We are therefore keeping this area for improvement open.

Fire control is included in service activity

We were pleased to find that the service's control staff were integrated into its command, training, exercise, debrief and assurance activity. The service also invites the control room manager to its regular operational assurance meetings.

The service is on track with implementing national operational guidance

The service is making sure its policies are in line with [national operational guidance](#). It is using the new [National Fire Chiefs Council](#) online resources to track its progress.

Responding to major and multi-agency incidents

Adequate

Buckinghamshire Fire and Rescue Service is adequate at responding to major and multi-agency incidents.

Fire and rescue services must be able to respond effectively to multi-agency and cross-border incidents. This means working with other fire and rescue services (known as intraoperability) and emergency services (known as interoperability).

Areas for improvement

The service should make sure it has an effective method to share [fire survival guidance](#) information with multiple callers and that it has a dedicated communication link in place.

The service should make sure it is well prepared to form part of a response to major and multi-agency incidents, and its procedures for responding are well tested and all staff understand them.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service continues to be prepared to respond to major and multi-agency incidents

The service has effectively anticipated and considered the reasonably foreseeable risks and threats it may face. It has listed these in both local and national risk registers as part of its [community risk management planning](#). For example, it has introduced rural firefighting vehicles into its fleet and holds tabletop exercises in preparation for the summer season. It works with [local resilience forum](#) partners to assess risk and prepare a Thames Valley risk register.

It is also familiar with the significant risks that neighbouring fire and rescue services may face, which it might reasonably be asked to respond to in an emergency. These include fires in high-rise buildings – tested by Exercise Caleo – and marauding terrorist attacks at sites such as Silverstone racetrack and the Milton Keynes Bowl. Firefighters have access to information from neighbouring services about risks within 10 km of the county boundary.

The service should assure itself of its ability to respond to major and multi-agency incidents

During this inspection, we considered how well prepared the service is to respond to foreseeable major incidents including severe weather events, such as flooding or wildfires.

We found the service had well-developed policies and procedures for safely managing these incident types. Staff at most levels understand them, and some training and exercises have taken place to test them. The service has a dedicated area on its intranet to provide staff with information about major and multi-agency incidents. Its operational assurance team creates an annual plan for major incident exercises and carries out each debrief within six weeks.

In the year ending 31 March 2025, the service completed 11 multi-agency training exercises. The number of multi-agency training exercises per 1,000 full-time equivalent firefighters is 29.3, which is lower than the England rate of 54.5.

The service is working with other emergency responders to make local communities more resilient. In [our last inspection](#), we identified the following [area for improvement](#):

- The service should make sure that it consistently gives relevant information to the public to help keep them safe during and after all incidents.

Since then, it has developed its out-of-hours communications response to make sure the public are well informed in the event of an incident. As a result, we have closed this area for improvement.

We also identified an area for improvement in our last inspection related to sharing fire survival guidance information with multiple callers and putting a dedicated communication link in place. The service has taken some action to address this issue, working with [Thames Valley Fire Control](#) and the other Thames Valley fire and rescue services. However, there still isn't a single communication link between control, the bridgehead (the position where firefighters are carrying out firefighting operations) and the incident command unit.

We acknowledge an electronic means of communication between control and the scene of an incident has been developed and tested. We also acknowledge a different electronic means of sharing fire survival guidance information at the scene of an incident has been developed. But this method still needs manual updates and could lead to miscommunication of information. In addition, not all staff have received updated training on the new procedure. Staff referred to still using physical evacuation boards instead of the electronic system. As a result, we are keeping the area for improvement open.

The service hasn't declared a major incident in the last two years. We reviewed the service's exercises for a wildfire and a death in service.

The service has carried out some realistic training and exercises to test its policies and procedures for safely managing high-rise building fires, marauding terrorist attacks and extreme weather events, which might need a multi-agency or major incident response. But these didn't include all staff groups that would be expected to respond to incidents of this nature. We heard from many station staff that they hadn't been involved in a multi-agency exercise in the last 12 to 18 months, or in some cases not in the last three years. We have identified this as an area for improvement.

The service continues to work well with other fire and rescue services

The service supports other fire and rescue services when they are responding to emergency incidents. For example, staff at stations that border the other Thames Valley fire and rescue services described organising exercises across the border. And the service uses its tactical advisors to respond to incidents across its borders. It has successfully deployed resources to other services including its [national resilience assets](#) such as an [urban search and rescue](#) unit and rescue boats.

It has drafted plans for a joint response in the event of industrial action, which means the Thames Valley services would be able to provide a minimum level of service. It is intraoperable with these services and can form part of a multi-agency response.

The service follows Joint Emergency Services Interoperability Principles

The incident commanders we interviewed had been trained in and were familiar with [Joint Emergency Services Interoperability Principles \(JESIP\)](#).

The service could give us some evidence it consistently follows these principles. Having recently taken part in a JESIP assurance review, the service was able to show it has strengths in training and staff competence.

But the service isn't taking the opportunity to carry out robust debriefs after multi-agency incidents, as described in the section '[The service could do more to evaluate operational performance](#)'. This means it may not be identifying any problems it has with applying JESIP. This could compromise the service's ability to respond effectively with other emergency services when major incidents do occur.

The service carries out some cross-border exercises, but doesn't include all staff

The service carries out some cross-border exercises with neighbouring fire and rescue services. In the year ending 31 March 2025, the service completed ten training exercises with neighbouring services. The number of training exercises with neighbouring services per 1,000 full-time equivalent firefighters is 26.7, which is higher than the England rate of 24.5. In our workforce survey, 94 percent of respondents who had operational roles (145 of 154) agreed the service carried out operational exercises effectively with neighbouring services. This helps the services work together effectively to keep the public safe.

But the service doesn't plan these exercises to include all staff, taking account of its resourcing demand, and doesn't include the risks of foreseeable major incidents where the service could be needed to give support or ask for help from neighbouring services. For example, some staff couldn't recall having completed a cross-border exercise in the last year to 18 months. We also found the service used only some learning from these exercises to inform risk information and service plans.

The service works well with other Thames Valley organisations

The service has good arrangements to respond to emergencies with agencies that make up the Thames Valley local resilience forum. These arrangements include providing regular training in initiating tactical and strategic command groups during a major or multi-agency incident.

The service is a valued member of the forum and chairs the warn and inform group. Staff also regularly attend the continuous improvement group, business continuity group, chemical, biological, radiological, nuclear group, risk group; technical communications group, and training and exercising group. The service takes part in regular training events with other members of the forum and uses the learning to develop planning assumptions about responding to major and multi-agency incidents. It uses its operational learning and assurance meetings to discuss the feedback from forum exercises.

The service continues to adopt national operational learning

The service makes sure it knows about [national operational learning](#) updates from other fire and rescue services and [joint organisational learning](#) from other organisations, such as the police and ambulance services. It uses this learning to inform the planning assumptions it makes with other organisations. It also contributes to this learning. For example, it recently submitted a national operational learning update about an electrical supply at a house fire.

Making best use of resources to provide an efficient and affordable service

Good

Buckinghamshire Fire and Rescue Service is good at making the best use of its resources to manage risk and to make sure it is efficient and affordable.

Fire and rescue services should manage their resources properly and appropriately, aligning them with their risks and statutory responsibilities. Services should make best possible use of resources to achieve the best results for the public.

Services should continuously look for ways to improve their effectiveness and efficiency. This includes transforming how they work and improving their value for money. They should have robust spending plans that reflect future financial challenges and efficiency opportunities, and they should invest in better services for the public.

Area for improvement

The service should assure itself that IT projects are well managed.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service's governance and scrutiny arrangements are leading to improvements

The Buckinghamshire and Milton Keynes [Fire Authority](#) oversees the service. Its governance role includes setting the strategic direction of the service and providing scrutiny to monitor the service's performance and make sure its strategic aims are achieved. The service has worked hard to improve its internal governance arrangements. We were pleased to see they were leading to improvements in both the effectiveness of its service and how efficiently it operates.

The service has effective strategic oversight arrangements to manage financial and resourcing risks, performance and improvement plans. It has effective processes, controls and internal governance arrangements to manage strategic risks. Internal governance groups meet monthly to review progress against [community risk management plan \(CRMP\)](#) objectives, key performance indicators and risk registers. These groups report to a monthly strategic CRMP performance board or programme board, and a strategic leadership board. They report to the [fire and rescue authority](#) quarterly.

Since 2023, the service has also completed several internal audits to provide assurance to the leadership team and the fire and rescue authority that its controls and systems are effective. These audits have included the following:

- financial assurance reviews covering the medium-term financial plan, core financial controls, and contract and critical supplier management; and
- reviews of partnership working, community risk management planning and workforce planning.

The service reports accurate and suitably detailed financial, risk and performance information to the fire and rescue authority. The service's committee chairs have been selected based on their previous experience and skill set to enable effective scrutiny. Fire and rescue authority members attend workshops and receive training from the service to support them in their oversight and scrutiny roles. We found the authority was provided with additional scrutiny papers on request such as those needed to understand the sustained performance of the protection department.

The [scheme of delegation](#) clearly sets out responsibilities for the service's senior leaders. There are effective internal governance arrangements to hold senior leaders to account for the corporate management of the service. A strategic improvement board, health and safety committee, and culture and ethics steering group reinforce this new internal governance structure and encourage continuous improvement in day-to-day work.

The service allocates its resources according to risk

In [our last inspection](#), we identified the following [area for improvement](#):

- The service needs to show a clear rationale for the resources allocated between prevention, protection and response activities. This should reflect, and be consistent with, the risks and priorities it sets out in its next [integrated risk management plan](#).

We were pleased to find the service had made improvements since then. Its financial and workforce plans, including allocating resources to prevention, protection and response, are consistent with the risks and priorities it has identified in its CRMP. As a result, we have closed this area for improvement.

The service has evaluated its mix of crewing and duty systems. It has analysed its operational cover and can show it deploys its fire engines and operational staff to manage risk efficiently. It has increased the [wholetime](#) firefighter staffing level since our last inspection, which helps it provide the immediately available fire engines it states it needs to effectively manage daily demand. It has maintained its 12 immediately available fire engines each month during 2024/25.

The service is taking steps to maintain availability of its [on-call](#) crews. It has revised on-call contracts and reviewed the resources it can feasibly maintain. During the early months of 2026, it consulted on an on-call improvement programme, to address the issue of underused on-call fire engines and stations. It intends to implement further aspects of this programme throughout the length of the CRMP.

The service is using its resources appropriately to mitigate the issues identified in the corporate risk register that affect implementation of its CRMP. An increased number of staff in the prevention department and administration function is making sure those at risk from a fire are prioritised for a [home fire safety visit](#).

The service has sustainable plans to resource its protection function if protection grant funding is reduced or withdrawn. It has invested in training resources, courses and staff development through funding apprenticeships.

The service still uses a form of voluntary overtime called 'bank shifts' to manage periods of absence and staffing levels. It monitors use of this closely and aims to reduce its reliance on it, now that the service is providing its full level of wholetime firefighters.

The service understands its future financial risks and plans well for these

In 2025/26, the service's net revenue budget was £42.3 million. The net revenue budget for 2024/25 was adjusted for inflation from £39.5 million to £41.6 million. This means the budget increased by 1.7 percent between 2024/25 and 2025/26 in real terms. The budget was funded by £28.5 million from council tax, £7.6 million from business rates and £6.2 million from revenue support and other grants. The service's total funding was £42.3 million, which is £47.80 per head of its population. This is within the typical range compared to all services in England.

The service has a sound understanding of future financial challenges. It planned for the outcome of the Government's Fair Funding Review by using an external company to model different funding scenarios and the potential impact on the service. And the service describes in its CRMP the risk that insufficient funding would pose to the service's ability to provide its core services.

It plans to mitigate its main financial risks. For example, it has identified its four main financial risks as funding reductions, inflationary cost pressures, pension cost increases and estate costs. Through its use of [zero-based budgeting](#) it identifies savings and reallocates funding to support its strategic priorities. And it plans to use revenue budget savings to fund its capital reserves, reducing future borrowing needs.

Its planning assumptions are relatively robust and realistic. They take account of the wider external environment and some scenario planning for future spending reductions. It has carried out a sensitivity analysis, which has helped it consider the implications of different levels of funding and spending pressures, such as pay awards and inflation, on its financial forecast.

The service builds its plans on sound scenarios. This helps make sure it is sustainable and underpinned by financial controls that reduce the risk of misusing public money.

The service's capital programme is set at £19 million, covering 2025/26 to 2027/28. It includes a new training centre, redevelopment of High Wycombe Fire Station, and replacement fire engines and specialist vehicles such as those with a turntable ladder for working at height.

Capital financing costs are 0.5 percent of the net revenue budget. They are set to decrease by 0.1 percent by 2027/28 under existing capital plans.

By 2027/28, the service has forecasted debt and reserves to be 10.1 percent and 7 percent, respectively, of the net revenue budget. This compares to forecasted levels of 10.8 percent and 17 percent, respectively, for 2025/26. This shows that the service expects debt levels to remain broadly the same and reserves to decrease over the period of its medium-term financial plan.

The service has a sensible and sustainable plan for using its reserves. This plan is regularly reviewed to reflect the priorities of the CRMP and their use against the capital plan adjusted year to year.

Senior leaders take accountability for performance management and assure it

We were pleased to find the service had made improvements since our last inspection. Its arrangements for managing performance clearly link resource use to its CRMP and its strategic priorities. Its quarterly performance reports to the fire and rescue authority are clear and include commentary about what the service should be providing in line with its CRMP. Where a performance measure isn't being met, the reports include detail and reasons why not. Senior leaders are accountable for the performance of their areas and staff.

The service has made changes to improve staff productivity and to make sure resources are used efficiently and effectively and provide value for money. It has increased the number of home fire safety visits and fire safety audits it completes. It has also reduced its attendance to false alarms, helping crews to focus this saved time on prevention and protection activities.

The service has an effective, risk-based system to manage its response to fire false alarms. These are incidents where the service attends a location but on arrival discovers that no resources are needed to resolve the incident or that no incident occurred. In our last inspection, we identified the following area for improvement:

- The service should review its response to false alarms to ensure that protection and operational resources are used effectively.

Since then, the service has reviewed its policies, consulted with the public on a change of approach and implemented the change. In the year ending 30 September 2025, 33.1 percent of incidents attended in Buckinghamshire were fire false alarms. In the year ending 30 September 2024 42 percent of incidents attended had been fire false alarms. The rate of attendance at incidents that were fire false alarms was 2.7 per 1,000 population. This is lower than the England rate of 4.3. As a result, we have closed this area for improvement.

The service is more assured that its workforce is productive

The service understands how it uses its wholetime firefighters. It collects data on how they spend their time across day and night shifts. It makes the most of its capacity.

Staff showed an understanding of how their individual performance contributed to station plans and performance, department plans and CRMP objectives.

In our last inspection, we identified the following area for improvement:

- The service should have effective measures in place to assure itself that its workforce is productive, that its time is used as efficiently and effectively as possible and in a more joined-up way to meet the priorities in its integrated risk management plan.

Since then, we found the service has been taking steps to make sure its workforce was as productive as possible. This included putting in place new ways of working. For example, it has improved the use of electronic station-based calendars to manage staff time. These monitor staff contribution to activities including school education visits, familiarisation visits to sites of high risk and community engagement work. As a result, we have closed this area for improvement.

The service continues to make efficiency savings and understands all the benefits of its collaborations

In 2024/25, the service's expenditure was £38.45 million, which is £43.46 per head of its population. This is within the typical range compared to all services in England.

There are regular reviews to consider all the service's expenditure, including its non-pay costs. This scrutiny makes sure the service gets value for money.

It consistently achieves the savings identified in its financial and efficiency plans. It made all its planned £878,000 savings between 2022/23 and 2024/25. Examples of savings achieved include vacating previously leased buildings and sharing the cost of buildings with other emergency services.

The service is taking steps to make sure it achieves efficiency gains through sound financial management and best working practices. It is doing this in important areas such as estate, fleet and procurement. It has reviewed its procurement processes and assessed itself against the [Fire Standards Board procurement and commercial fire standard](#). The service told us it was compliant with the standard. Through sound contract management the service achieved an overall reduction in the annual cost of software licences, which could have increased significantly otherwise.

In our last inspection, we identified the following area for improvement:

- The service should make sure that it effectively monitors, reviews and evaluates the benefits and outcomes of any collaboration activity.

Since then, it has improved how it monitors and reviews the benefits and results of its contract arrangements and collaborations. It has completed work with the other Thames Valley fire and rescue services to better understand the outcomes of its collaborative work. It can show the intended outcomes are being achieved. As a result, we have closed this area for improvement.

The service knows from its project management [peer review](#) that it could improve how it records all the benefits from its internal improvement projects. We look forward to seeing how the service does this by the time of our next inspection.

Through its approach to value for money, the service has identified and achieved efficiencies that have improved its services to the public.

The service continues to improve its fleet and estate

The service's capital programme and estate and fleet strategies have clear links to its CRMP. The service has identified how it can invest in the estate during the term of this CRMP and contribute to its workforce strategy objectives, such as developing a local training facility and redeveloping High Wycombe Fire Station.

Both strategies exploit opportunities to improve effectiveness and efficiency. The service has considered the impact some of the estate facilities might have on helping to diversify its workforce. It is gradually improving station changing facilities. And it has plans to review its fleet, which will also help it track what is needed for maintenance.

The service regularly reviews these strategies so it can properly assess the effect any changes in estate and fleet provision, or future innovation, have on risk.

It consistently carries out estate and fleet projects on time and within budget and manages risks appropriately. Recent station updates have focused on the need to improve and provide adequate facilities for female and male staff.

The service uses technology to improve productivity but needs to improve how it manages IT projects

The service considers how changes in technology and future innovation may affect risk. In our last inspection, we identified the following area for improvement:

- The service should assure itself that its IT systems are resilient, reliable, accurate and accessible.

Since then, it has introduced smartphones to all fire engines and made sure the hardware at stations is up to date. It has made improvements to its systems to make sure they are being used to record information accurately. As a result, we have closed this area for improvement.

In our last inspection, we identified the following area for improvement:

- The service needs to assure itself that it is maximising opportunities to improve workforce productivity and develop future capacity through use of innovation, including the use of appropriate and up-to-date technology.

In this inspection, we found the service aimed to exploit opportunities to improve efficiency and effectiveness presented by changes in technology. For example, it has invested in an IT trainer to help staff understand how they can use software available to them to manage their workloads more effectively. As a result, we have closed this area for improvement.

But the service doesn't consistently carry out IT projects on time and within budget and doesn't manage risks appropriately. A project to update the system used to record site-specific risk information has been ongoing since 2018, without being fully implemented. There have been several changes in the project lead and difficulties resolving specific issues in the project. Besides this, the IT team technical experts aren't always involved in the scope, planning and implementation stages of significant IT projects. We have identified this as an area for improvement.

The service has increased its capacity and capability to manage change

The service has put in place the capacity and capability it needs to achieve sustainable change. It has invested in new roles. These include an assistant chief fire officer to support improvement in its service provision and a director of people to support change in the workforce and in the capacity of departments such as prevention and protection.

In our last inspection, we identified the following area for improvement:

- The service should make sure it has the right skills and capacity to successfully manage change across the organisation.

In this inspection, we found the service managed change through effective projects and programmes. It had a clear internal structure with appropriate governance arrangements to make sure progress against projects and programmes was monitored, scrutinised and challenged. It has also invested in project management roles and a performance management dashboard to help monitor the outputs of change projects across the service. As a result, we have closed this area for improvement.

Promoting, embedding and improving values and culture

Good

Buckinghamshire Fire and Rescue Service is good at promoting, embedding and improving values and culture.

Fire and rescue services should have positive and inclusive cultures, which are maintained and improved through feedback from staff, scrutiny by leaders and oversight by the [fire and rescue authority](#). Workforce well-being, both physical and mental, should be a priority, and unacceptable behaviour should always be challenged and managed appropriately.

Area for improvement

The service should monitor secondary contracts to make sure staff don't work excessive hours.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service has a positive culture and staff understand and demonstrate the behaviours and values

The service has well-defined values, which staff understand. We found staff at all levels of the service showed behaviour that reflects service values. This includes senior and middle leaders, who take accountability for their actions and performance. However, senior leaders are aware some middle and supervisory leaders still need to complete the new leadership training and develop their skills in managing performance and communicating effectively. This will make sure this positive culture extends to all parts of the service.

We were encouraged by the cultural improvements the service had made. It has reviewed and renewed its values and behaviours since [our last inspection](#) and has aligned them well with the [Core Code of Ethics](#). Staff understand the values and behaviours, and they are integrated within policies and procedures, such as the recruitment, probation and promotion processes. They are displayed across the service's headquarters and intranet, and staff have received online training in values, behaviours and equality, diversity and inclusion.

In our workforce survey, 91 percent of respondents (197 of 216) agreed their manager consistently modelled and maintained the service's values.

The service continues to be compliant with [safeguarding](#) legislation by completing appropriate background checks for all existing members of staff. In the year ending 31 March 2025, 94.5 percent of existing employees who needed a background check had one.

The service is also reducing the risk of abuse, harm and neglect for both the public and staff by completing background checks on new recruits and, if appropriate, existing staff who are applying for new roles. In the year ending 31 March 2025, 98 percent of new recruits who needed a background check had one.

The service is monitoring the impact of cultural changes on its workforce

The service has robust systems to take feedback from a range of activity, scrutinise it and understand the impact on staff and the public. Activity includes public complaints, staff grievances and disciplinary action. We found good examples of the service adjusting policies and procedures as a direct result of the scrutiny that had taken place.

The fire and rescue authority receives regular, meaningful updates about people-related issues. This helps it to hold the chief fire officer to account, set priorities for the service, reduce risk for the public and protect the health and safety of staff.

A new people delivery group and a culture and ethics steering group are helping the service to monitor and shape the actions for an improved culture. Staff reported the service as having improved in this area since our last inspection. They are proud to work for the service and now understand how their work contributes to [community risk management plan](#) objectives, making the working environment more positive.

The service is open to feedback from staff and communicates transparently

The service has effective arrangements to communicate with staff and representative bodies, such as trade unions, and to take account of their legitimate concerns. It has a range of formal and informal arrangements. These include annual surveys of all staff, an anonymous reporting line, robust whistleblowing, discipline and grievance procedures, and regular meetings with staff representative groups through a joint consultation forum. The service also provides an opportunity for staff and representative bodies to attend meetings of the internal governance groups.

Recently, staff networks have been established to support staff in raising concerns and promoting action. These include a women's network and a disability network.

The service has worked hard to be clear about the [on-call](#) improvement programme intentions and potential outcomes. This programme is intended to remove underused fire engines and fire stations from the service's fleet and estate, helping to improve on-call availability and resource allocation. Most staff we spoke to were happy with the approach the service had taken to communicate the plans.

In our workforce survey, 65 percent of respondents (141 of 216) agreed they felt confident in the processes for providing feedback to all levels of leadership. Some staff told us a few leaders could still be more open to feedback. The service is rolling out management training to all leaders over the coming year, and we look forward to seeing the result of this training.

Individual members of staff, representative bodies and staff network groups we spoke to gave examples of where they had raised legitimate concerns with leaders. They felt more confident to raise concerns due to the introduction of leadership forums and the anonymous reporting line. The service has been active in resolving concerns raised.

In our workforce survey, 82 percent of respondents (178 of 216) agreed they felt safe to challenge unacceptable behaviour. The service handles discipline and grievance cases in a timely and appropriate way.

In our workforce survey, 50 percent of respondents (108 of 216) agreed they were confident their feedback would be acted on. For example, prevention staff mentioned to leaders that a regular meeting would help them feel more connected to the service. Within a few weeks this meeting was scheduled and held.

Staff are confident to challenge unacceptable behaviour and are confident the service acts appropriately when behaviour isn't in line with policy

There is a positive working culture throughout the service, and staff feel empowered and willing to challenge unacceptable behaviour when they come across it. The service has reviewed and improved its discipline and grievance policy, to make sure staff could understand the process.

Staff have a good understanding of what bullying, [harassment](#) and discrimination are and their negative effects on colleagues and the culture of the organisation.

In our workforce survey, 10 percent of respondents (22 of 216) told us they had felt bullied or harassed by members of their service in the past 12 months. And 11 percent of respondents (24 of 216) told us they had felt discriminated against by members of their service during the same period.

We were pleased to find the discipline and grievance cases we reviewed were all progressed in a timely manner. We asked the service to tell us about grievances related to [conduct matters](#) only (and not to include, for example, those against organisational policy).

In the year ending 31 March 2025, the average length of time a grievance case had been open was 56 days. This is less than the England average of 93 days. The longest time a case had been open was 86 days, which is less than the England average of 202 days.

In the same period, the average length of time a discipline case had been open was 27 days. This is less than the England average of 111 days. The longest time a case had been open was 68 days, which is less than the England average of 307 days.

As at 31 March 2025, the service had no live grievances. During 2024/25, it reported 23 disciplinary cases. Of these disciplinary cases, 3 were [gross misconduct](#) cases.

The service follows its policies and procedures. The cases we reviewed were managed by the right people at each step of the process. This led to well-justified decisions with clear reasons.

The service offers good support to staff who are the subject of disciplinary action as well as those who raise concerns or grievances or who are victims of bullying or harassment.

The staff we talked to had confidence that if they raised a [misconduct](#) concern with their line manager, it would be dealt with in an appropriate and confidential manner.

Managers have the confidence and training to deal with grievance and discipline issues and feel able to do so. Some managers did describe wanting to have more [continuing professional development](#) in this area to help them learn from other cases.

The service can show it is adapting its processes and sharing with staff the learning it has gained from dealing with grievance and discipline cases. It has commissioned the support of external legal services to help it review its practices and understand how it can develop them. We look forward to seeing the outcome of this work.

The service has good workforce well-being practices

The service continues to have effective and well-understood health and safety policies and procedures. It has introduced rigorous cleaning procedures to ensure personal protective equipment is decontaminated following fire incidents. It continues to carry out fitness testing every six months and supports staff to improve if they fail.

These policies and procedures are readily available, and leaders at all levels promote them effectively to all staff. Some staff described discussing their well-being with line managers during one-to-ones.

In our workforce survey, 93 percent of respondents (200 of 216) agreed they knew how to access support for their mental health through their service. There are three levels of support offered to those involved in a discipline or grievance case:

- a referral to the welfare officer;
- the employee assistance programme; and
- a dedicated point of contact in human resources.

The service also assesses the welfare of an individual before issuing a suspension, to consider their mental health and well-being.

The service continues to have well-understood and effective well-being policies, which are available to staff. A significant range of well-being support is available to support both physical and mental health. For example, staff can access an in-house welfare officer, mental health champions, the employee assistance programme, incident trauma debriefs, regular medical assessments and physical therapy referrals.

The service is proactive in building resilience among staff, and we found examples of where it had intervened to support an individual's needs.

There are good provisions in place to promote staff well-being. The service's intranet hosts well-being information and information related to national campaigns, such as healthy eating or stopping smoking. And the welfare team works with the service's physical trainers to promote good musculoskeletal health.

In our workforce survey, 69 percent of respondents (148 of 216) agreed service leaders treated their well-being as a priority. Staff reported they understood and had confidence in the well-being support processes available.

As at 31 March 2025, 16.2 percent of [wholetime](#) firefighters had registered secondary employment, and 14.9 percent were on a dual contract with the service. In our last inspection, we identified the following [area for improvement](#):

- The service should proactively monitor working hours (including overtime) to improve staff well-being.

Since then, the service has introduced effective policies to monitor 'bank shifts' (a form of voluntary overtime) worked by staff. This makes sure they don't work excessive hours. As a result, we have closed this area for improvement.

But the service doesn't sufficiently monitor staff who have secondary employment or dual contracts to make sure they don't work excessive hours. There are local arrangements to monitor their working hours but some staff were unsure of the policy on taking enough rest between shifts. In our last inspection, we identified this as an area for improvement, and we are keeping this area for improvement open.

Training and developing the right people with the right skills

Good

Buckinghamshire Fire and Rescue Service is good at training and developing the right people with the right skills.

Fire and rescue services should have a workforce plan in place that is linked to their [community risk management plan](#). The workforce plan should set out current and future skills requirements and address capability gaps. This should be supplemented by a culture of continuous improvement, including appropriate learning and development throughout the service. And the service should make sure that barriers to the development and progression of all staff groups have been identified and removed.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service has developed a good approach to workforce planning

The service has good workforce planning in place. This makes sure skills and capabilities align with what it needs to effectively carry out its community risk management plan. For example, it has now recruited enough firefighters to meet its [wholetime](#) staffing need of 300 firefighters. Its forward review anticipates when it might fall below this figure, and the service schedules recruitment ahead of time.

Workforce and succession planning is subject to consistent scrutiny in the form of regular meetings to discuss requirements. During the monthly people delivery group meeting, the service reviews workforce data, including expected retirement profiles, recruitment requirements, competence trackers, talent management processes and personal development review completion rates. This approach means the service can identify gaps in workforce capabilities and resilience. It also means it can make sound and financially sustainable decisions about current and future needs.

In [our last inspection](#), we identified the following [area for improvement](#):

- The service should review its succession planning to make sure that it has effective arrangements in place to manage staff turnover while continuing to provide its core service to the public.

Since then, the service has worked hard to address this and we have now closed the area for improvement.

The service has the right mix of workforce skills and capabilities

Most staff told us they could access the training they needed to be effective in their roles. In our workforce survey, 84 percent of respondents (181 of 216) agreed their service gave them the necessary training to carry out their roles. The service has invested in the training department to increase its capacity for training and assessment in core competencies, such as breathing apparatus and driving.

The service monitors staff competence via electronic records. It regularly updates its understanding of staff skills and risk-critical safety capabilities by completing reassessments or validation courses via the [Fire Service College](#).

Training isn't just focused on operational skills. It also includes management skills. The service's training plans make sure staff can maintain competence and capability effectively. The service identifies – in its monthly training updates to the people delivery group – the completion rates for mandatory training, such as health and safety, equality, diversity and inclusion, and data protection. Managers are told about any staff not meeting these requirements.

In our workforce survey, 85 percent of respondents (183 of 216) agreed they could access relevant learning and development opportunities. For example, communication staff have been able to access bespoke courses to meet the needs of their developing roles. Prevention staff have been able to access teaching and learning qualifications to help them provide training. And protection staff are given opportunities to complete the relevant learning to meet the requirements of the [National Fire Chiefs Council](#)'s core competency framework.

We have now closed the area for improvement that we identified in our last inspection, related to making sure that all staff are appropriately trained to fulfil their roles.

The service has developed a culture of learning and improving

The service promotes a culture of continuous improvement throughout the organisation, and it encourages staff to learn and develop. For example, it has connected its personal development review process to talent management and training needs as well as opening its development centres to all staff.

We were pleased to find the service had a range of easily accessible learning and development resources. These included online and in-person courses in topics such as [safeguarding](#) and neurodiversity. They allow staff to do their jobs effectively.

The service has identified parts of its training and development provision that some staff have found difficult to access or use. We were pleased to find the service had taken proactive steps to remove these barriers. It has evaluated new courses, including its Thrive leadership and development programme, and learned from feedback to improve them.

Ensuring fairness and diversity

Adequate

Buckinghamshire Fire and Rescue Service is adequate at ensuring fairness and diversity.

Recruiting, retaining and developing a diverse and representative workforce gives fire and rescue services huge benefits. These include greater access to talent and different ways of thinking. It also helps them better understand and work with local communities. Each service should make sure that staff throughout the organisation firmly understand and show a commitment to equality, diversity and inclusion (EDI). This includes successfully taking steps to remove inequality and making progress to improve EDI at all levels of the service. It should proactively encourage feedback from staff and respond to it and make sure any action it takes is meaningful.

Area for improvement

The service should review its policies and procedures to make sure those staff with a [protected characteristic](#) aren't disproportionately affected.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service is improving its processes to recruit a more diverse range of talented staff

As part of this inspection, we reviewed a range of recent recruitment campaigns for firefighters and senior leaders.

We found the service had an open, fair and honest recruitment process for existing staff or those wishing to work for it. There is an effective system to understand and remove the risk of [disproportionality](#) in recruitment processes. For example, applications are blind sifted, and interview panel members are trained in safer recruitment, disability confidence and interview skills and are selected from a range of diverse roles across the service to remove any potential [bias](#).

Reasonable adjustments were fairly considered in all the processes we reviewed. And the service identified some of the barriers candidates had experienced during the recruitment process, such as women and ethnic minority applicants leaving the process at the physical assessment stage. It offers women-only 'have a go' days and physical conditioning sessions to help candidates with these protected characteristics prepare.

The service has put considerable effort into developing its recruitment policies so they are fair and applicants can understand them. It uses diversity data to help target some of its recruitment activity at women and ethnic minority communities in its area, developing an outreach action plan as part of every recruitment round.

Its recruitment processes are comprehensive and cover opportunities in all roles. The service sometimes advertises recruitment opportunities internally and externally. This has recently encouraged applicants from diverse backgrounds, including those applying for middle and senior leadership roles. However, its policies don't suggest it should consider this routinely. This means some roles may only be advertised internally, reducing the opportunity for the service to diversify its workforce.

The service has made some improvements to increasing staff diversity at all levels of the organisation. It has recently removed any unnecessary and unfair criteria in adverts for leadership roles to attract a wider range of individuals. It also provides both internal and external candidates with staff development pathway information to be clear about the expected levels of leadership for a role.

In 2024/25, 8 out of 54 new joiners (where ethnicity is known) were from an ethnic minority background. Overall, the proportion of firefighters in the service from an ethnic minority background increased from 6.5 percent (25 people) as at 31 March 2024 to 7.4 percent (30 people) as at 31 March 2025.

As at 31 March 2025, 8.6 percent (46) of the service's staff were from an ethnic minority background compared to 22.7 percent in the local population and 6.4 percent throughout all fire and rescue services in England. This is an increase since [our last inspection](#) year on year, from 37 people in 2022/23, to 41 people in 2023/24, to 46 in 2024/25. However, for 2024/25, 6.8 percent of staff hadn't stated their ethnicity.

At the same date, 19.6 percent of the service's staff were women compared to an average of 20.8 percent throughout all fire and rescue services. The proportion of [wholetime](#) women firefighters increased from 6.2 percent (19 women) as at 31 March 2024 to 7.6 percent (24 women) as at 31 March 2025. Over the same period the proportion of [on-call](#) women firefighters increased from 6.7 percent (7 women) to 10 percent (12 women).

The service has improved retention and development of staff

We found positive examples of where the service had identified and addressed barriers that disproportionately prevented individuals from particular groups from progressing. It has opened its development centres to all managers, both support staff and operational staff, which had traditionally been reserved for operational staff only.

The service monitors staff turnover in its monthly people delivery group meeting. It carries out exit interviews for staff leaving or moving within the organisation to understand if there were any factors that could have been a barrier to them progressing. The service provided good examples of addressing learning gathered from these interviews and reported it has seen a reduction in staff turnover.

Staff have individual goals and objectives set through regular performance assessments. The service has now included an EDI-related objective in personal development packs to promote service-wide understanding of EDI. Staff complete regular checks on these personal development goals with their managers. Most staff said they felt confident in the performance and development arrangements in place.

The service's promotion and progression processes are comprehensive and cover opportunities in all roles. It has identified that staff with neurodivergent conditions may need additional support to progress. It has introduced neurodiversity training to help managers provide this support.

EDI practice is becoming more evident across the service

The service prioritises EDI. It makes sure it can offer the right services to its communities and support staff with protected characteristics. For example, it has invested in an EDI officer who can make sure the new EDI framework is being acted on. The service has improved equality impact assessment and started to train key staff in its use.

During this inspection, we reviewed a range of policies that affect different parts of the service including the [safeguarding](#), fitness testing, and recruitment and selection procedures.

Although the service has a process to assess [equality impact](#), it doesn't properly assess the impact on each protected characteristic or act on it. Only one of the three procedures we reviewed included an action plan to follow up and mitigate equality impacts. We have identified this as an [area for improvement](#).

The service has developed several ways to work with staff on issues relating to EDI that affect them. These include methods to build all-staff awareness of fairness and diversity and targeted initiatives to identify matters that affect different staff groups. The service has successfully consulted with staff via newly developed staff networks on the provision of uniform and equipment, specifically what women need to meet their differing needs, such as access to hairdryers and better-fitting uniform.

In our workforce survey, 85 percent of respondents (184 of 216) agreed they felt comfortable being themselves at work.

The service has acted to address matters staff have raised. Staff have received these actions positively. Representative bodies and staff associations reported that the service worked with them well on EDI issues through the joint consultation forum.

Leading people effectively

Good

Buckinghamshire Fire and Rescue Service is good at leading its people.

To be effective, fire and rescue services should identify and develop leaders throughout the organisation. Leaders should be able to translate and communicate the objectives of the service's [community risk management plan \(CRMP\)](#) to all staff and the public in a meaningful way. They should communicate openly, build trust, challenge unacceptable behaviour and use every contact with staff to maintain and improve a positive culture.

Innovative practice

A leadership and behaviour framework sets out expected behaviour for leaders

The service has developed a clear and robust leadership and behaviour framework, which is aligned to the service's values and sets out standards of expected behaviour for all leadership levels.

Throughout our inspection, staff referred to the framework as fundamental to:

- addressing poor performance;
- challenging unacceptable behaviour; and
- helping managers become accountable leaders.

It is supporting the service in making improvements in many areas, such as prevention and protection, while being a clear guide for all staff to understand what is expected of them.

We found senior leaders showed clear commitment to upholding the leadership behaviour expected of them.

We set out our detailed findings below. These are the basis for our judgment of the service's performance in this area.

Main findings

The service's leaders work with and communicate well with staff

Senior leaders are effectively communicating the aims and objectives in the CRMP to staff at all levels. They are doing this in a variety of ways, which promotes open, two-way communication. In addition to the new internal governance structure, senior leaders are using senior leadership days, middle manager forums, station visits, and all-staff video logs and blogs to share information about the direction in which the service is heading. We found this approach was supported by leaders at all levels, most of whom make sure staff understand the aims and objectives.

As a result, staff have a high level of trust in their leaders. In our workforce survey, 68 percent of respondents (146 of 216) agreed senior leaders clearly communicated the service's objectives. The service plans its communications for strategic changes, such as the [on-call](#) improvement programme. Most staff we spoke to were aware of the steps the service was taking to implement this CRMP objective.

The staff we spoke to also understood how they contributed to the aims of the CRMP individually and as a team.

The service has fair processes to identify and develop leaders

In [our last inspection](#), we identified the following three [areas for improvement](#):

- The service should put in place a system to actively manage staff careers, with the aim of diversifying the pool of future and current leaders.
- The service should put in place an open and fair process to identify, develop and support high-potential staff and aspiring leaders.
- The service should assure itself that it has an effective process in place for succession planning, including senior leadership roles.

In this inspection we found the service had well-understood arrangements to identify talented leaders. It had effective succession-planning processes in place, which it monitors monthly. These allow it to effectively manage the career pathways of its staff, including roles that need specialist skills.

We also found the service had a high-potential development scheme, which identifies staff through the assessment development centres for progression if they score above a certain percentage. All staff can access the development pathway and leadership programme, which is assessed against the new leadership and behaviour framework. However, some staff don't clearly understand or trust career development pathways. And the service isn't proactively removing all barriers to accessing leadership development opportunities.

Although the service has put considerable effort into developing its promotion and progression processes so they are fair, it still needs to do more to make sure staff consider them to be fair. In our workforce survey, 60 percent of respondents (130 of 216) agreed the promotion process in the service was fair. Staff described some of the additional exams during the promotion process as unnecessary and off-putting to some staff who wished to develop. The service has recognised this and supports staff to develop their knowledge for the exams. They are reviewing the impact of the inclusion of the exams on staff and the process.

The service manages selection processes consistently. It now uses a promotion panel to determine the outcome of its promotion processes. And it uses temporary promotions appropriately to fill short-term resourcing gaps. As at 31 March 2025, 4 percent of the workforce were on temporary promotion. The average length of temporary promotions was 195 days, which is lower than the England average of 245 days.

As a result of the hard work the service has put into succession planning across the service and developing and diversifying the workforce, we have closed these areas for improvement.

The service is equipping leaders with the skills and knowledge to lead

We found the service had leaders in place who were well equipped to lead.

The service has a good process in place for leaders to manage performance and development. Staff have specific and individual objectives or have had their performance assessed in the past year. In our workforce survey, 72 percent of respondents (156 of 216) agreed the service's performance management systems allowed them to achieve their potential.

Leaders at all levels have – or are due to receive – appropriate training, which helps them confidently manage a range of challenges. The service has introduced a clear and robust leadership and behaviour framework, which is aligned to its values and sets out standards of expected behaviour for all leadership levels.

The service has introduced coaching and mentoring programmes, which are developing leaders. Leaders are exposed to different management scenarios that match and stretch their skills. This means the service has leaders who are confident to step up to the next level of management when opportunities arise.

There is a good process to manage staff performance

Most leaders are equipped to confidently manage staff performance and deal with any poor performance or behavioural issues. The service is providing training in performance management through the newly developed Thrive leadership and development programme to all managers during 2026/27.

There is a good performance management system, which allows leaders to effectively develop and assess the individual performance of all staff members. Staff can complete a comprehensive annual personal development review and half-year review with their line managers.

As at 31 March 2025, personal development reviews had been completed by:

- 77.8 percent of [wholetime](#) firefighters;
- 38 percent of on-call firefighters; and
- 37.3 percent of support staff.

The service's own performance report, published in January 2026, identified that 99 percent of staff had received their 2025/26 objectives and 85 percent had then had their half-year review by December 2025.

Most staff said they felt confident in the performance and development arrangements.

Senior leaders and most middle leaders promote a positive culture

Most leaders at all levels act as role models. For example, senior leaders demonstrate the service's revised values and act in accordance with the leadership and behaviour framework, holding others to account. They are aware that some middle and supervisory leaders still need to complete the new leadership training and develop their skills in managing performance and communicating effectively.

In our last inspection, we identified the following area for improvement:

- The service should assure itself that senior managers are visible and demonstrate service values through their behaviours.

In this inspection, in our workforce survey, 67 percent of respondents (144 of 216) agreed leaders at all levels promoted a positive culture. Staff described senior leaders as having a leading role in developing the service's positive evidence-based and performance-led culture since our last inspection. Senior leaders are visible and approachable, acting promptly on feedback where they can. As a result, we have closed this area for improvement.

Most leaders are maintaining and constantly developing the positive culture we found throughout the organisation. They have done this through clear communications and making changes that support the priorities of the CRMP, such as the introduction of a new internal governance structure. Senior leaders are listening to feedback and making sure all leaders are held to account for their own and their team's performance.

Most leaders are active in challenging [misconduct](#), including bullying, [harassment](#) and discrimination. And staff trust them to take their concerns seriously.

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HMICFRS 2025-27 BFRS Summary

Grading Summary

Year	Outstanding	Good	Adequate	Requires Improvement	Inadequate
2025-27	-	6	4	-	-
2023-25	-	-	1	9	1
2021-23	-	2	N/A	9	-

Notes: Adequate grading was introduced in 2023-25

The 2 questions in efficiency were merged in 2025-27

Grading by area

Assessment Area	2025-27	2023-25	2021-23
<i>Understanding fire and other risk</i>	Good	Requires Improvement	Requires Improvement
<i>Preventing fire and other risk</i>	Good	Requires Improvement	Requires Improvement
<i>Protecting the public through fire regulation</i>	Adequate	Inadequate	Requires Improvement
<i>Responding to fires and other emergencies</i>	Adequate	Requires Improvement	Good
<i>Responding to major and multi-agency incidents</i>	Adequate	Adequate	Good
<i>Making best of resource to provide an efficient and affordable service</i>	Good	Requires Improvement x2	Requires Improvement x2
<i>Promoting, embedding improving values and culture</i>	Good	Requires Improvement	Requires Improvement
<i>Training and developing the right people with the right skills</i>	Good	Requires Improvement	Requires Improvement
<i>Ensuring fairness and diversity</i>	Adequate	Requires Improvement	Requires Improvement
<i>Leading people effectively</i>	Good	Requires Improvement	Requires Improvement

Outcomes Summary

Year	Cause of concern	Recommendations	Areas for Improvement	Innovative Practice
2025-27	0	0	8	1
2023-25	3	10	26	0
2021-23	2	8	22	0

2025-27 AFI's

Assessment Area	No of AFI's 2023-25	No of AFI's 2025-27	AFI Detail	New/ Existing
<i>Understanding fire and other risk</i>	3	0	-	-
<i>Preventing fire and other risk</i>	1 COC 2 Rec's 1 AFI	0	-	-
<i>Protecting the public through fire regulation</i>	1 COC 4 Rec's 3 AFI	1	The service should make sure it responds to statutory building consultations effectively and within the required time frames	New
<i>Responding to fires and other emergencies</i>	4	2	The service should make sure that its mobile data terminals are reliable so firefighters can easily access up-to-date risk information The service should make sure that it has an effective system for sharing and applying the learning from operational incidents	Existing Existing
<i>Responding to major and multi-agency incidents</i>	1	2	The service should make sure it has an effective method to share fire survival guidance information with multiple callers and that it has a dedicated communication link in place The service should make sure it is well-prepared to form part of a response to major and multi-agency incidents and its procedures for responding are well tested and all staff understand them	Existing New
<i>Making best of resource to provide an efficient and affordable service</i>	6	1	The service should assure itself that IT projects are well managed	New
<i>Promoting, embedding improving values and culture</i>	3	1	The service should monitor secondary contract to make sure staff don't work excessive hours	Existing
<i>Training and developing the right people with the right skills</i>	2	0	-	-
<i>Ensuring fairness and diversity</i>	1 COC 4 Rec's	1	The service should review its policies and procedures to make sure those staff with a protected characteristic aren't disproportionately affected	New
<i>Leading people effectively</i>	3	0	INNOVATIVE PRACTICE: Introduction of the Leadership and Behaviour Framework	-



Buckinghamshire
Fire & Rescue Service



Armed Forces Covenant

Update

Presented By Lee Carson September 2026

Armed Forces Covenant and BFRS Gold Award

What is the Covenant?

The Armed Forces Covenant is a promise by the UK government, local authorities, businesses and society to ensure that members of the armed forces community—serving personnel, veterans and their families—are treated fairly and with respect, allowing special consideration in some cases, such as healthcare, education and housing.

Gold Award Recognition

BFRS holds the Gold Award under the Defence Employer Recognition Scheme, showcasing exemplary support for Armed Forces personnel and families.

Gold Award – Advocate for Defence Employers must:

1. Actively advocate for the Armed Forces community internally and externally
2. Demonstrate substantial, sustained support for Reservists and veterans
3. Ensure the Armed Forces community is positively supported in recruitment and retention
4. Influence and encourage other employers to support Defence



Armed Forces Covenant and BFRS Gold Award

National Transition Engagement

BFRS actively participates in national transition fairs connecting Service leavers with civilian employers and recruitment opportunities.

Silverstone 2026,
500 exhibitors
2000+ attendees



Armed Forces Covenant and BFRS Gold Award

Regional and Local Collaboration

BFRS contributes to regional forums supporting best practices and reinforcing Armed Forces Covenant commitments locally.

- Buckinghamshire CC Civilian & Military Partnership Board
- Milton Keynes Military Partnership Board

Volunteering as Armed Forces Champions

Staff can volunteer as Armed Forces Champions to promote awareness and support veterans during events and visits



2026 Flag raising at the CMK Council offices



Armed Forces Covenant and BFRS Gold Award

Sector-Wide Network Membership

BFRS is a key member of the National Network of Armed Forces in Fire Services, sharing expertise and aligning support standards.



Supporting Women
Who Served:
Female Veterans Toolkit



Armed Forces Covenant and BFRS Gold Award

Participation in Remembrance Events

Engaging in remembrance events like parades and local commemorations demonstrates respect and strengthens public image.



Armed Forces Covenant and BFRS Gold Award



West Ashland hosts walk-ins on the third Wednesday, Marlow on the last Thursday, both from 10:00 to 13:00 monthly.

- January 2025- January 2026 over 800 attendees across the 2 venues.
- Success stories with real support and help
- Relationships built and strengthened.
- Facilities provided such as private rooms for confidential clinical engagement in a calm, trusted setting for veterans and their families.
- Specialist partners like Royal British Legion deliver direct support, ensuring comprehensive veteran care.



Armed Forces Covenant and BFRS Gold Award

To show their appreciation for his commitment over the last 5 years to the walk-in event at Marlow Fire Station.

The Veterans charity Walking with the Wounded presented Station Commander Adam Moore (Ex Army) with a certificate.

Adam has regularly opened the station bays and provided teas and bacon rolls for their attendees every month and continues to do so.

This is another great example of our staff supporting the covenant.
The Marlow walk ins are the last Thursday every month with reps from Walking with the Wounded and Op Valour.



Armed Forces Covenant and BFRS Gold Award

Internal Commitment

BFRS maintains visibility through staff engagement, training, and policies supporting reservists and veterans within the organisation.



Kestrel View Sun 29 March

- Last Sunday of the month
- Bacon butties, refreshments
- Woodwork, animal care
- Small groups



Armed Forces Covenant and BFRS Gold Award

Sales Pitch What do I need from FA?

Advocacy- Promote, display, recommend the covenant and what we do through your individual networks





Buckinghamshire
Fire & Rescue Service
Making a difference together

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