Performance report - Quarter 2

Finance & Audit Committee

1 July to 30 September 2025

DORSET & WILTSHIRE
FIRE AND RESCUE

Priority: Making every penny count

KLOE (Key Lines of Enquiry) 6: How well do we use resources to manage risk?

KLOE 6 Summary
We ensure our Business Continuity Framework remains aligned with the Business Continuity Institute's (BCI) Good Practice Guidelines, providing a structured and consistent approach to preparedness, response, and recovery. In quarter 2, the Service managed nine full business continuity incidents and implemented 'BC Lite' protocols on four occasions. These events included responses to wildfires, potential public disorder, and the relocation of fire appliances due to estate-related issues. The Procurement Act 2023 came into effect in February 2025, and a transition period continues within the Service, during which both the existing regulations and the new Act are being applied. The Procurement team has completed specialist e-learning modules on the new requirements. Procurement policies and procedures are being reviewed, with new processes introduced alongside targeted training and education where necessary. Our Fleet and Equipment teams continued to provide strong performance throughout an exceptionally busy summer, which saw numerous wildfire incidents. These events placed added pressure on operational vehicles and equipment; however, the teams effectively managed the increased reactive workload, whilst continuing to deliver scheduled maintenance. We continue to develop and invest in our ICT infrastructure to ensure it remains up to date, secure, and resilient. There is an increasing emphasis on collaborative working across internal departments and with our partners. This approach enables the Service to use information, data, and technology effectively to support operational activities, underpinned by strong governance and robust security measures. The Service continually develops and invests in the ICT infrastructure to remain current, maintain the safety and security of our systems and information. increased focus on a joint working approach across both internal departments and our partners. This ensures the Service uses its information, data, and technology efficiently to support operational activity with clear governance and security arrangements.

KLOE 6 sub-diagnostic

To what extent are business continuity arrangements in place and how often are they tested?

The Service recognises that robust business continuity and proactive risk management are fundamental to organisational resilience and the delivery of critical services. These disciplines are embedded within our governance framework and are treated as strategic priorities. Current and emerging risks are systematically identified, assessed, and monitored through integrated processes aligned with national standards, including the Civil Contingencies Act 2004 and guidance from the Home Office on Integrated Risk Management Planning and the Fire Standard for Community Risk Management Plans.

Our approach is underpinned by comprehensive business continuity arrangements that conform the Business Continuity Institute's Good Practice Guidelines, ensuring consistency across the sector. To maintain situational awareness, we undertake regular horizon scanning informed by authoritative sources such as the BCI Horizon Scan Report, which highlights global and sector-specific threats including cyber-attacks, supply chain disruption, and extreme weather events. We also draw on HM Government's National Risk Register - the public-facing version of the National Security Risk Assessment - which details the most significant acute risks to UK resilience, and the Chronic Risks Analysis, which addresses long-term challenges such as climate change, technological dependency, and biosecurity threats. These documents are also considered within the Service's Strategic Assessment of Risk ensuring a consistent approach from the Service.

Our engagement extends beyond internal processes; we actively participate in Local Resilience Forums and the National Fire Chiefs Council (NFCC) Business Continuity Group, which promotes sector-wide standards and shares best practice. These collaborations, combined with insights from national publications, directly inform our biennial Strategic Assessment of Risk. This assessment is a cornerstone of our strategic planning cycle, ensuring that our risk mitigation and continuity strategies remain evidence-based, forward-looking, and aligned with national resilience objectives. We maintain alignment of our Business Continuity Framework to the BCI Good Practice Guidelines, which provides a structured and consistent approach to preparedness, response, and recovery.

We maintain alignment of our Business Continuity Framework to the BCI Good Practice Guidelines, which provides a structured and consistent approach to preparedness, response, and recovery. During quarter 2 the Service responded to nine full business continuity incidents and activated 'BC Lite' protocols on four occasions. These events included wildfire response, potential public disorder, and estate-related fire appliance relocations.

KLOE 6 sub-diagnostic

To what extent do we show sound financial management of non-pay costs, including estates, fleet and equipment through benchmarking, contract renegotiation and procurement?

The Procurement Act 2023 went live in February 2025, and a period of transition is on-going during which the existing regulations and the new Procurement Act 2023 have applied. The Procurement team have completed the specialist procurement e-learning modules. Procurement policies and procedures are being reviewed, and new processes introduced as well as training and education where required. Further guidance has been published on our website for our suppliers, including information on the registration process for the Central Digital Platform. We are also engaging with the dedicated Communities of Practice set up by the Cabinet Office, the Blue Light Commercial Group as well as participating in some informal groups and networks made up of local authorities and other public sector bodies.

The Service continues to make good use of national procurement contracts, which includes actively promoting and partaking in collaborative and joint procurements. The Service is currently participating in collaborative procurements for water aggregation, technology aggregation, Devon and Cornwall Police self-drive hire re-procurement.

We are a member of the commercial group for the procurement of a New National Framework for Personal Protective Equipment, working with Kent Fire and Rescue Service and other commercial leads. We are participating in the supplier engagement sessions and document review processes.

Blue Light Commercial Group (BLC), in partnership with the Home Office, are looking to deliver a single, national e-commercial solution which will aid fire and rescue services with contracted third party spend (e-procurement). The Procurement Manager is participating in this project on behalf of the Service. This has now been released to the market.

BLC are also looking at the ICT category across the Police and Fire and Rescue Service Sector, with a view to starting a sector lead procurement for the provision of laptops. The Procurement Manager has shared this information with the relevant Procurement Lead.

KLOE 6 sub-diagnostic

To what extent do we understand what assets we are responsible for across the Service and how do we demonstrate effective management of these assets?

The effective management of our estate, fleet, and equipment remains fundamental to the delivery of our operational services. These assets are continuously measured and monitored to assess performance, inform future planning, and ensure the Service remains efficient, resilient, and capable of delivering its key priorities.

Asset tracking and recording are managed through the Bluelight Asset Management System. The system continues to evolve to incorporate a wider range of assets. Current development work includes collaboration with the Estates Department to record all premises plant room equipment (e.g., boilers, generators), including service schedules and maintenance logs. At present, the system holds records for over 60,000 individual assets, supporting effective lifecycle management, auditability, and resource planning.

Fleet and equipment maintenance performance has remained strong throughout an exceptionally busy summer period marked by numerous wildfire incidents. These events placed additional pressure on operational vehicles and equipment; however, the teams successfully balanced increased reactive work with the delivery of scheduled maintenance.

Workshops achieved 98.6% compliance with maintenance servicing targets against a target of 90% for quarter 2, demonstrating resilience and high performance under demanding operational conditions.

The Service successfully upgraded its legacy Fleet Management System to a new cloud-based platform. This upgrade enhances data accessibility and reporting capability. Teams have completed and continue to undertake training to ensure effective use of the new platform, which will remain central to fleet management and performance monitoring going forward.

Cyclical maintenance works were completed at Charmouth and Bowerhill during the quarter. Preparatory work is underway to progress refurbishment projects at Blandford, Bridport, Devizes, and Calne.

At Salisbury, plans are in place for a full roof replacement incorporating improved insulation to enhance energy efficiency. Tenders for these projects are scheduled for release during quarter 3, with works anticipated to commence in quarter 4.

A revised PPE management process was successfully tested during the summer wildfire incidents. The Assets and Supplies teams worked closely with the specialist laundry contractor to manage significantly increased volumes of contaminated PPE. The process ensured that all items were efficiently laundered, inspected, and redistributed, maintaining operational readiness across all stations without disruption.

The Service's asset management framework continues to demonstrate strong performance, adaptability, and continuous improvement. Ongoing system developments, estate investments, and robust maintenance regimes ensure that operational capability is fully supported.

KLOE 6 sub-diagnostic

To what extent do we understand and manage our impact upon the environment?

The Service continues to make positive progress toward achieving Net Zero through our programme of sustainability initiatives.

The trial and adoption of electric vehicles (EVs) remain a key focus. Work is currently underway to determine the feasibility of integrating EVs to support operational functions. In addition, two large electric fleet maintenance vans are now in service, alongside 22 Volvo V60 Mild Hybrid vehicles. Six electric vehicle charging points have also been installed at Service sites as part of this programme.

Six stations have been identified for feasibility studies aimed at enhancing environmental performance:

- Chippenham: increase reliance on renewable energy through Solar and wind turbine integration.
- Cricklade and Melksham: Reducing heating leaks around appliance bay doors and improving the overall heating systems.
- Westbourne, Stratton, and Redhill Park: Upgrades to the heating system controls.

Environmental audits have been conducted across the Service estate to support personnel in responsibly managing their sites and understanding their role in promoting sustainability. The Service actively encourages staff to participate in the Green Champions programme, with the objective of appointing at least one Green Champion at each Service location to advocate and implement sustainable practices.

Waste management and reduction efforts continue to be refined through regular station audits. Key areas for improvement, such as waste segregation at source, have been identified. Engagement with personnel throughout the year aims to raise awareness of proper segregation practices and the importance of good housekeeping. This educational approach is designed to foster behaviour change, which is expected to have the most significant impact on waste management across the Service. This work has already yielded good results with the cost of skips falling from £27k over 12 months last year to just £5k in the first six months of this year.

Energy consumption across the estate is monitored using a Power BI Dashboard, providing real-time data for analysis. This system enables the identification of unusual consumption patterns, reporting of high-usage sites to the Estates team, and informed decision-making regarding energy efficiency improvements. Overall, this approach enhances control and insight into utility use, supports cost reduction, and facilitates targeted estate refurbishments that contribute to lowering the Service's carbon footprint.

KLOE 6 sub-diagnostic

To what extent do our plans address the risks identified in the integrated risk management plan?

The Service is committed to full compliance with the Fire Standards Board's Community Risk Management Planning (CRMP) Fire Standard, which sets out sector-wide expectations for identifying and mitigating community risk. Following recent revisions to the standard, the Service undertook a gap analysis and implemented minor adjustments to ensure continued alignment. This approach reflects our statutory obligations under the Fire and Rescue National Framework for England, which requires fire authorities to produce a CRMP that identifies foreseeable risks and demonstrates how prevention, protection, and response activities will be balanced to reduce harm.

Our methodology for CRMP development is also consistent with guidance from His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS), which emphasises evidence-based risk profiling and transparent governance. HMICFRS inspections have recognised our effectiveness in this area, noting that "the Service continues to identify risk well" and "has an effective community risk management plan." These findings align with HMICFRS's effectiveness criteria, which require services to use robust data analysis, maintain clear accountability, and demonstrate how resources are allocated to mitigate risk.

A key component of our CRMP process is the biennial Strategic Assessment of Risk (SAR), most recently published in September following consultation with partners. The SAR provides a forward-looking analysis of national, regional, and local risks using PESTLEO methodology (Political, Economic, Social, Technological, Environmental, Legal, and Organisational factors). This assessment was developed collaboratively with our three Operational Groups and associated stations, ensuring operational insight informs strategic decision-making. The SAR underpins our Community Safety Plan (CSP) 2024–28, confirming that its priorities remain relevant and aligned with emerging risk trends.

Delivery of the CSP 2024-28 utilises five strategies to deliver identified outcomes - Asset Management, Community Safety, Data, Digital & Technology, Environmental, and People. These strategies cascade into our annual Service Delivery Plan, which specifies deliverables and performance measures. Progress is monitored through a robust performance management framework, which recently received 'substantial assurance' from the South West Audit Partnership (SWAP). This independent audit confirmed that our governance, risk management, and business continuity arrangements are well embedded and compliant with best practice.

KLOE 6 sub-diagnostic

To what extent do we demonstrate effective management of Information and Communication technology?

The Service has a Digital Data & Technology strategy that helps to ensure that the Service uses its information, data, and technology efficiently to support operational activity with clear governance and security arrangements aligned to the Community Safety Plan (CSP) 2024-28.

There is continual development and investment in the ICT infrastructure to remain current, maintain the safety and security of our systems and information, with an increased focus on a joint working approach across both internal departments and our partners. This ensures the Service uses its information, data, and technology efficiently to support operational activity with clear governance and security arrangements. The department works closely with the Information Governance and Cyber Security team to deliver the Service's cyber security framework.

A capital plan is in place to ensure that projects and activities are being monitored and prioritised to meet business needs.

We continue to invest in key initiatives to support sustainability and value for money, making best use of resources for front line Services, enabling access to information that is supported by the right technology and infrastructure, based on community and business needs. Audits support assurance of effective ways of working and a progressive learning and development environment.

ICT capital and revenue programmes continually reviewed against the strategy and scheduling adapted to meet the changing needs of the Service. Some of the activities being undertaken are:

- ICT management system phase one implementation complete. This will assist in the removal of duplicate processes and the use of Notes, whilst achieving efficiencies through automation and self-service.
- SDWAN almost completed at all sites with new hardware installed and in pre-switch on state. Five pilot sites will be turned on and tested with the full out roll out by early January 2026.
- ICT Health Check 2025 completed along with the audit programme.
- Multi-factor Authentication (MFA) ICT work ongoing with the majority completed.
- Multi-Function Printing Devices (MFDs) installed.
- Data and information storage back-up renewal contract awarded and now going through install.

- Collaborating with users to define the end-user hardware requirements for the station.
- Body Worn Camera (BWC) scoping underway for new procurement for hardware and cloud-based software to align both areas and provide a longer-term, sustainable kit contract.
- WiFi refresh scoping completed and work to commence across all sites.

KLOE 7: How well are we securing an affordable way of managing the risk of fire and other risks now and in the future?

KLOE 7 Summary

Financial management and governance remain strong, and the Service is consistently rated highly in audit and inspection processes. The Service remains concerned about the medium to longer-term financial sustainability of the Authority and is actively looking at options to address this.

The Service continues to engage with all relevant stakeholders to influence the debate on financial sustainability for fire and rescue services and, to maintain increased council tax flexibility. The Treasurer continues to actively engage in any opportunities to outline the local position nationally via the Ministry of Housing, Communities and Local Government (MHCLG) and the Service responds to national consultations on finances whenever any such opportunity is given.

The Service managed to set a balanced budget for 2025-26. Additional precept flexibility of £5 was granted by central Government as part of the settlement but grant funding totalling £1.8m was also removed leaving the Service in a cost neutral position. The Medium-Term Finance Plan deficit forecasts reported to Members as part of the budget setting process in February 2025 were £1.38m for 2026-27, rising to £1.76m for 2027-28. The updated position will be confirmed in quarter three, with a multi-year settlement from central Government expected. The work of the Resourcing and Savings Programme and the Member Working Group needs to continue at pace to ensure options are available to ensure financial sustainability is delivered.

KLOE 7 sub-diagnostic

To what extent do we understand and take action to mitigate our main or significant financial risks?

For some time now, we have been engaging with local Members of Parliament, Ministry of Housing, Communities and Local Government (MHCLG) and the National Fire Chiefs Council to influence the debate on financial sustainability for fire and rescue services and lobby for council tax flexibility. This has included briefing sessions for local MPs and letters from the Chair and Chief Fire Officer to relevant government ministers. A meeting was held in October 2025 with the new Fire Minister to highlight our position and the risks faced.

Early in its tenure the government set several backstop dates for the completion of historical outstanding external audit processes, and the Authority complied with these deadlines. The Authority has progressed with its audit work for 2024-25, which

has a backstop date of 27 February 2026. Bishop Fleming presented their audit plan to Finance and Audit Committee in July 2025 and expect to complete the process in December 2025.

The SWAP internal auditors completed the scheduled treasury management processes and controls audit in July 2025. Substantial assurance was given with one low priority action, which has been completed.

KLOE 7 sub-diagnostic

To what extent do we have a track record for achieving savings and avoiding any residual future budget gaps?

Members approve the Service budget and Medium-Term Finance Plan annually each February. The 2025-26 settlement from central Government provided the option of £5 council tax flexibility but also the removal of grant funding totalling £1.8m, which left the Service in a cost neutral position. A balanced budget for 2025-26 was presented and approved by Members at Fire Authority in February 2025. The provisional finance settlement for 2026-27 will be issued by central Government in December 2025.

It is likely that this will be a multi-year settlement which will provide clarity over the medium-term and a greater opportunity for the Service to plan the actions required to deliver financial sustainability. These decisions will be guided by the work of the Resource and Savings Programme (RSP), which has a schedule of work which includes regular reviews of our financial assumptions and options for making further savings and efficiencies.

KLOE 7 sub-diagnostic

To what extent is our use of reserves sustainable and promoting new ways of working?

The Service continually monitors its plans for reserves usage to ensure sufficient levels are maintained to support financial sustainability. The reserves plan and general balances risk assessment are approved annually by Members at the Authority each February for the approaching financial year. Levels of reserves and general balances are then reviewed and published as part of the annual Statements of Accounts process. The Finance & Audit Committee is updated quarterly on the current reserves position as part of the wider financial position update. The usage of reserves is subject to a stringent process aligned to key priorities and supporting strategic projects.

KLOE 12: How effective is the Occupational Health and Safety management system in the Service?

KLOE 12 Summary
The Service continues to maintain a strong and well-managed Health and Safety system, with good levels of compliance and active oversight through the ISO 45001 management framework. Work-related absence due to physical injuries or ill health is up from 228 to 319 days compared with the same time last year. Thirteen people contributed to these figures, with six designated long-term sick or in long-term recovery, and their days lost (249) accounting for 78% of the total in quarter two. Reportable incidents to the Health and Safety Executive (HSE) under RIDDOR have increased from zero to six over the same quarter last year, with five in the 'over seven days' category and one recorded as a 'dangerous occurrence' involving BA equipment. All incidents have been reviewed, with appropriate actions taken. There are no strategic issues to raise with Members.

KLOE 12 sub-diagnostic
How well structured and embedded is the Health & Safety policy, practices and culture to ensure a safe and legally compliant Service?
The risk-based BSI internal audit plan has been produced and is targeted at various health and safety procedures aligned to Health and Safety legislation. These are also aligned to some of the requirements within the clauses in ISO 45001 standard. Audit outcomes may identify some non-conformities which can be used to demonstrate continual improvement within the standard. All improvement actions are closely monitored by the central team and at the Health and Safety Committee. On average, three audits are required to be completed each quarter from the BSI trained auditor pool. To ensure sufficient capacity, additional auditor training is being planned for October 2025. A balanced audit plan has been communicated to auditors for financial year 2025-26 to enable workloads to be managed and capacity identified so that audits are undertaken in the relevant timescales. This enables audits to undergo a quality assurance process before the final audit reports being presented to the appropriate Service team or committee.

The work-related absence due to "physical" injuries or ill health quarterly trend is up 40% (228 up to 319) compared to the same time last year. In this quarter, 13 people (incidents) are contributing to these figures. Of the 13 people six are designated long term sick or in long term recovery and their days lost (249) are 78% of the total in quarter 1.

The number of reportable incidents to the Health and Safety Executive (HSE) under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) has increased over the same quarter last year (zero up to six). Five were reported within the 'over seven days' category and one within the 'dangerous occurrence' category for a Breathing Apparatus (BA) malfunction.

The Service always strives for continual improvement; it has an overall high level of compliance and is accredited to the ISO 45001 Occupational Health and Safety Management system standard. There are no strategic issues to raise with Members.

KLOE 13: Are effective governance and decision-making arrangements in place?

KLOE 13 Summary
The governance arrangements for the Authority and Service continue to be well embedded and work well. These arrangements have been assured through independent audit provisions, with good levels of assurance being awarded.
The Service maintains a strong governance framework, reinforced by independent assurance from the South West Audit Partnership (SWAP). In June 2024 Councillor Small, Chair of the Finance and Audit Committee was appointed to the SWAP Members Board. For the second consecutive year, SWAP's annual opinion rated our arrangements as 'Substantial Assurance'. This outcome reflects the results of the 2024–25 audit programme, where five of eight audits achieved a substantial rating and the remaining three were assessed as adequate.
The Service is proactively managing its information governance and information security compliance requirements. Strategic and tactical processes are aligned to regulatory requirements and the principles of British Standards Institute 27001. Cyber security arrangements are operating well and continually monitored. The Service is in a positive position against the national Cyber Assessment Framework led by the Home Office. Annual Information and Communication Technology testing is conducted externally giving additional assurance of the robust arrangements in place and provides opportunity to improve on our arrangements. Work is nearing completion to ensure suppliers meet multi factor authentication requirements on third party systems so that we can progress our re-accreditation for Cyber Essentials which we hope to achieve early 2026.
Outside of our legal requirements, effective data management is at the forefront of business processes and system development. Investment in technology and improved data management processes across prevention, protection and response is enabling high quality, automated and evidence-based standards for data, supporting improved decision-making, effective performance management, accessibility and transparency.

KLOE 13 sub-diagnostic

How well does the Fire and Rescue Authority have oversight and scrutiny to ensure that the Service is appropriately effective and efficient in ensuring the safety of communities from fire and other risks?

The Authority has five key priorities and performance against these are overseen and scrutinised by Members on a quarterly basis. Priorities one, two and three are reviewed at the four Local Performance and Scrutiny Committee meetings. These took place to consider quarter 1 performance in August using a new LPS dashboard. Priorities four and five were reviewed at the Finance & Audit Committee at their meeting in July for quarter 1 performance and September for quarter 2.

The LPS dashboards, performance reports and presentations at these meetings provide details on the effectiveness and efficiency of the Service, as well as looking at how the Service is supporting, developing, and ensuring the health and wellbeing of its people. The annual report was approved by Members and published in September. This is further supported with a Statement of Assurance providing assurance of the previous year's governance, finance, and operational matters. The internal audit annual report from SWAP awarded the Service an overall grade of 'substantial assurance' following delivery of the 2024-25 audit programme as reported in the Finance and Audit meeting in July 2025.

The Authority oversees and scrutinises the development and delivery of the CSP, which includes the Service undertaking consultation. The CSP was reviewed following public consultation to take account of feedback and approved by Members in June 2024. A presentation of overall performance against each priority is provided to the Authority at six and 12-month intervals.

KLOE 13 sub-diagnostic

How effective and efficient are our governance arrangements?

The Service maintains a strong governance framework, reinforced by independent assurance from the South West Audit Partnership (SWAP). For the second consecutive year, SWAP's annual opinion rated our arrangements as 'Substantial Assurance'. This outcome reflects the results of the 2024–25 audit programme, where five of eight audits achieved a substantial rating and the remaining three were assessed as adequate. In addition, during quarter 1 of the 2025–26 programme, SWAP reviewed our performance management framework and again awarded substantial assurance, confirming the robustness of our governance and its alignment with the Authority's standards.

To sustain these high levels of assurance, we embed multiple layers of scrutiny through both internal and external evaluations. These include:

- External audits conducted by independent bodies.
- British Standards Institution (BSI) audits and certifications to ISO 45001 (Occupational Health & Safety) and ISO 55001 (Asset Management).
- Formal inspections by His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS).
- Peer reviews, such as the recent NFCC-led review of our business continuity arrangements.

Our governance approach is also guided by the seven principles set out in the CIPFA/SOLACE (Chartered Institute of Public Finance and Accountancy and Society of Local Authority Chief Executives) 'Delivering Good Governance in Local Government Framework'. Each principle is assessed annually in October, with gaps identified and addressed, and evidence documented where compliance is achieved. This structured review ensures continuous improvement and transparency.

Collectively, these mechanisms form a comprehensive assurance system that underpins the development of our annual Statement of Assurance. Current and previous Statements of Assurance are publicly available on the Service's website, supporting openness and accountability.

KLOE 13 sub-diagnostic

How effective and efficient are we at managing data?

Members can be assured that the Service is proactively managing its information and security compliance requirements. Strategic and tactical processes are detailed in the supporting documentation associated with the Statement of Assurance.

Our legislative information governance compliance remains positive in relation to the Freedom of Information Act and the Data Protection Act. In quarter 2 we received 55 Freedom of Information requests and 91% were responded to within 20 working days. The average response time was 14 working days. No themes were identified this quarter. We received eight subject access requests, nine were due a response in the period and we responded to all within the correct timeframes.

Five security incidents were reported during the quarter and two resulted in a data breach but these were not deemed reportable to the Information Commissioners Office. Three of these incidents related to data handling, with two of these due to emails being sent to the wrong person. These incidents provide us the opportunity to review ways of working, so that we can learn and improve our processes.

The Service continues to monitor progress against its Cyber Action Plan as a mitigation against the strategic Cyber risk. The work to ensure third party cloud services have multi-factor authentication in place is still awaiting compliance from one supplier but there is assurance that this is being prioritised. The use of mobile data terminals on the fire ground needs further consideration at a national level in order for services to comply with the Cyber Essentials and once direction and a solution has been agreed, our application for Cyber Essentials will be submitted. This is likely to be early 2026 and, in the meantime, measures are in place to continue to monitor this risk.

In compliance with the requirements of the National Fire Chiefs Council's Cyber Assessment Framework a cyber exercise has been conducted this quarter based on the National Cyber Security Centre (NCSC) Exercise in a box, facilitated by an external company as arranged by the Home Office. Once the report has been received, any learning from this will be actioned.

The annual ICT health check took place in July 2025 which highlighted 40 high and medium risks. These are being addressed through a mitigation plan and progress is monitored monthly.

Completion of the mandatory data protection and cyber security training is at 86%.

In addition to our legal compliance responsibilities, we are ensuring that data management is at the forefront of business processes and system development. We have a balanced approach in place that considers risk and resource, but continue to increase our effectiveness in managing data as technology evolves to support to enable high quality, automated and evidence-based decision-making and effective performance management.

Robust data retention policies are in place and the use of automated data validation and data quality checks of our key datasets, ensures robust data is used within DWFRS and submitted to Government.

Priority: Supporting and developing our people

KLOE 8: How well do we understand the wellbeing needs of our workforce and act to improve workforce wellbeing?

KLOE 8 Summary

In quarter 2, long-term sickness absence remained the largest contributing factor to the absence figures for all staff groups, excluding Fire Control. Musculo-skeletal is the highest causation for wholetime and on-call staff followed by mental health. Mental health is also the highest causation for Corporate staff, with gastrointestinal being the highest causation in Fire Control. Absence levels for On-call and Fire Control were lower than the same quarter last year but a slight increase for Wholetime and Corporate.

The Service has a corporate target to reduce the average sickness levels compared to the average during the last five years. The average target (including Wholetime, Corporate and Fire Control) for quarter 2 was 4.36 shifts lost per person with the actual figure being 4.03 shifts lost person meaning we are on track to achieve this target with the trend line continuing on a downwards trajectory. However, this should be considered against the backdrop of two retirements this quarter which would also have contributed to this reduction.

In quarter 2, 23 staff were supported with a Wellbeing Support Plan (previously known as a stress action plan). 20 were from previous quarters and three new plans were set in place in quarter 2.

Sickness absence continues to be professionally and closely managed through our dedicated Health and Wellbeing Team who work closely with Line Managers and Human Resources People Partners, with strategic oversight at the Strategic Case review.

Our sickness procedures are robust, and we offer a range of support mechanisms such as counselling and physiotherapy to support staff.

In quarter 2, 93% of staff passed their fitness test and eighteen individuals are supported with fitness improvement plans which includes advice and guidance on nutrition and weight management. There has been an increase of fitness improvement programmes and work is being undertake to identify any themes/patterns.

In quarter 2, 35 members of staff were on limited duties, with an average time period of under 90 days. There has been a shift in the service position regarding limited duties, mindful of increased NHS waiting times. The change in focus is to establish whether individuals can undertake meaningful work that contributes to the service delivery and priorities, in which case an exception form will be completed from the outset. This revised approach will be evaluated in six months enabling any long-term change to be reflected in the Attendance Management Procedure.

During quarter 2 a number of key health messages have been promoted including:

- The journey of reproductive health.
- Why protecting your skin matters and mindful walking.
- Your vision matters.

KLOE 8 sub-diagnostic

How well do we understand the wellbeing needs of our workforce and act to improve workforce wellbeing?

The Service has a strong focus and understanding of the wellbeing needs of our workforce and has continued to take positive steps to support staff with their physical, psychological and operational wellbeing.

Absence Management: In quarter 2, long-term sickness absence remained the largest contributing factor to the absence figures for all staff groups, excluding Fire Control. Musculo-skeletal is the highest causation for Wholetime and On-call staff followed by mental health. Mental health is also the highest causation for Corporate staff, with gastrointestinal being the highest causation in Fire Control. Absence levels for On-call and Fire Control were lower than the same quarter last year but a slight increase for wholetime and corporate. There is a cautionary note regarding the comparison, as the NFCC have taken over national reporting, they no longer want DWFRS to send over figures as full time equivalent (FTE) shifts lost and want this as actual shifts lost. The reporting has been updated to match the new requirements. This will affect corporate figures where we have varying shift patterns, for example, if someone normally works a shorter day than the standard FTE day and is off sick, they will show a whole shift lost now rather than a fraction of a shift.

The Service has a corporate target to reduce the average sickness levels compared to the average during the last five years. The average target (including Wholetime, Corporate and Fire Control) for quarter 2 was 4.36 shifts lost per person with the actual figure being 4.03 shifts lost person meaning we are on track to achieve this target. In quarter 2, 23 staff were supported with a Wellbeing Support Plan (previously known as a stress action plan). 20 were from previous quarters and three new plans were set in place in quarter 2. There were 32 return to work discussions recorded as overdue. One Stage One Absence Review Board was held, and there were no new referrals made to the Independent Qualified Medical Practitioners (IQMP). We have two ongoing with the IQMP from previous quarters.

Sickness absence continues to be professionally managed through our dedicated Health and Wellbeing team who work closely with Line Managers and Human Resources People Partners, with strategic oversight at the Strategic Case review and Monthly People Meeting. Sickness procedures are robust and a range of support mechanisms such as counselling and physiotherapy are in place to support staff, with continued promotion of any new initiatives that may be able to support our staff and the Service.

Benenden Health: Membership of our Benenden Health (through salary deduction) continues to increase month on month. In quarter 2, seven DWFRS new staff joined, with a total increase of eight including dependants. We are conscious of the NHS, the main treatment provider, pressures and working closely with our Occupational Health provider and other external agencies on initiatives that may support our staff with the aim to return to work quicker. Although, we are seeing impacts on members of staff, the sickness data could lead to an indication of an improving picture particularly related to on-call where a reduction of 1.37 reduction was seen. We have had two long term sickness members of staff retire which would account for this reduction.

Staff counselling: This remains accessible to all staff and dependants. Counselling services were provided to 35 staff members and 13 family members. Trauma risk in management (TRiM) support was active but did not result in formal interventions this quarter. Safe to Be is updated regularly with all support for mental health both internally and externally.

Fitness: In quarter 2, 93% of staff passed their fitness test and eighteen individuals are supported with fitness improvement plans which includes advice and guidance on nutrition and weight management. There is no change percentage wise from the same quarter last year, however there is an increase of fitness improvement programmes and work is being undertake to identify any themes/patterns.

Limited Duties: There has been a shift in the service position regarding limited duties. Whilst the ideal is to support staff to return within a 90-day timeframe, the focus is now on assessing whether individuals can return and undertake meaningful work that contributes to the service delivery and priorities, in which case an exception form can be completed from the outset. This working practice will run from quarter 2 until quarter 4 at which time the Attendance Management Procedure will be reviewed in full (including supporting document limited duties). Although our existing limited duties data for quarter 2 shows 35 members of staff on limited duties, with an average time period of under 90 days.

Wellbeing Information: During quarter 2 a number of key health messages has been promoted including:

- The journey of reproductive health.
- Why protecting your skin matters and mindful walking.
- Your vision matters.

All of our health and wellbeing resources are publicised through our 'Safe To' programme which updated regularly to ensure staff are signposted to this support.

KLOE 9: How well trained and skilled are staff?

KLOE 9 Summary
The Operational Training Programme sets out the skills and competencies required for staff to maintain competence in role. The plan is further enhanced by a mix of digital learning and virtual courses. This blended learning model supports diverse learning preferences, enriching the training experience and ensuring staff remain proficient in their core competencies while adapting to evolving challenges.
Our competency recording system provides robust oversight of staff development and enable staff to be booked onto relevant operational training courses, prior to their competence expiration date.
Operational competence and assurance are also demonstrated and maintained through effective performance at real incidents, simulations, exercises, drills, and centrally organised training programmes.
The Training Development and Standards team continually develop and review guidance, strategic actions, course content and training materials arising out of the evolving national standards to ensure alignment. As a result, the Service is in a positive position embedding National Operational Guidance (NOG) across the Service. Following business case approval, the team also deliver Control NOG on behalf to the Networked Fire Services Partnership (NFSP).

KLOE 9 sub-diagnostic

How well do we understand the skills and capabilities of our workforce?

All operational staff are expected to maintain the necessary skills and competencies for their roles. For station-based personnel, performance and development are tracked through the How's My Team Doing (HMTD) Dashboards. The competency framework and associated training materials are regularly evaluated against national standards to ensure alignment. Operational competence and assurance is demonstrated and maintained through effective performance at real incidents, simulations, exercises, drills, and centrally organised training programs. This ongoing evaluation process ensures that all team members remain skilled, capable and competent in their roles.

The Operational Training Programme is further enhanced by a mix of digital learning and virtual courses. This blended learning model caters to diverse learning preferences, enriching the training experience and ensuring staff remain proficient in their core competencies while adapting to evolving challenges.

Skill maintenance is planned via a training planner that is executed at the local level, and local management tailor it to the specific needs of each station. This approach ensures training remains practical, relevant, and directly responds to the requirements of the National Occupational Standards.

Additionally, a Cross-Directorate group oversees the development, implementation, and monitoring of the Annual Training Action Plan to address organisational priorities. The Service conducts regular strategic reviews to identify future goals, with actionable steps delivered through targeted learning and development initiatives. Emerging risks and new skill requirements are assessed and incorporated into the competency framework to keep pace with changing operational demands.

Our competency tracking system is deeply integrated within the organisation, providing robust oversight of staff development. Line Managers routinely review competency levels to ensure team members are assigned to suitable operational training courses, aligning their capabilities with the organisation's objectives.

The Training Development and Standards team regularly develop and review guidance, strategic actions, course content and training materials arising out of the evolving national standards to ensure alignment. As a result the Service is in a positive position embedding National Operational Guidance (NOG) across the Service. Following business case approval, the team also deliver Control NOG on behalf to the Networked Fire Services Partnership (NFSP).

KLOE 10: How well do we ensure fairness and diversity?

KLOE 10 Summary

The Service's recruitment processes are transparent and reviewed to ensure there are no unintentional barriers to recruitment. A wide range of initiatives are in place to support our work to increase the diversity of our workforce. The Service continues to use social media as a key part of our positive action work. Community profile information is available to crews, so that the Service can target, support and strengthen community engagement activities.

The diversity of our workforce is monitored on a quarterly basis and our corporate target, to improve the diversity of our workforce as a whole compared to the last five years, continues to make positive progress with our actual workforce diversity in quarter two being 24.6% against a target of 22.9%. Whilst this is positive progress, attracting a more diverse range of applicants, particularly for operational roles, remains a key focus for the Service.

There were 50 new starters in quarter 2, not including 11 members of existing staff who were taking on an additional role as a Fire Safety Intervention Officer. There were 35 leavers this quarter, 17 on-call, ten Wholetime, eight Corporate, and zero Fire Control. Of these leavers five were female. The leavers fell mainly within the 46-55 age group (26%) followed closely by 25-35 age group (23%). 25% of leavers were aged over 55. Of those leavers 28 identified as males and seven identified as female, six of whom were from the On-call staff group. The top three primary reasons for leaving for all staff were retirements at 28.5%, end of temporary contract followed at 17% with personal/work commitments at 14%.

Detailed equality analysis is undertaken on our leavers profile with no specific trends identified but continued levels of under-representation in the gender and ethnicity of our operational roles.

As part of our positive action a number of initiatives have taken place in quarter 2, including:

- Promote messages in support of groups feeling marginalised or concerns during current social tensions, whilst remaining politically neutral.
- Power of inclusion event.
- Community newsletters.
- Keeping in touch with those in our recruitment pools.

- Staff networks event celebrating International Men's Day 2025 and International Women's Day 2026.
- A conference raising awareness about the women we live and work with and their hormones.
- Planning for Staff Networks Day in May 2026.
- Planning for our Personal Safety Workshop in December.
- Developing Diverse Leaders evaluation.
- Female only Incident Command exercise.

Our Safe To portal promotes Equality Diversity & Inclusion by giving improved accessibility to health and wellbeing, reporting lines, tools to challenge and leadership initiatives.

The Service is committed to White Ribbon; a charity aimed at tackling misogyny and violence against women and girls through male allyship. In quarter two we had 65 Ambassadors and Champions in total, comprising of 46 male ambassadors and 27 female champions.

There were five disciplinary cases concluded in this quarter. Of the five cases closed, one went to a Stage Three Hearing, undertaken as a desktop hearing due to resignation, the outcome of this was dismissal.

There were 14 new cases in quarter 2, 11 were disciplinary, two were bullying and harassment and one was a formal grievance. No new Employment Tribunal claims were submitted in this quarter.

A strategic oversight committee is in place who meets fortnightly to review performance management cases.

KLOE 10 sub-diagnostic

How well do leaders seek feedback and challenge from all parts of the workforce?

The Culture Development Committee is now well established and held one meeting during this quarter, chaired by the Chief Fire Officer (CFO) and Sunita Gamblin QPM. This meeting featured Nazir Afzal OBE as a guest speaker and prompted wide discussion among attendees from across the organisation. The meeting was opened out to entire organisation in an open seat

capacity with over 38 open seats which included a whole watch too. During quarter 2, there were no new episodes of the Culture Conversations podcast.

There were no 'On-Call Question Time' sessions this quarter.

There were no open seats taken up at SLT meetings in quarter 2. There have been three open seats taken up at one SDT meeting in September. There were no Bitesize Leaders sessions held during quarter 1, however the programme of Managers Briefing Days began, with five sessions held in July. These focused on the new CFO's priorities and commitments, a communication audit and updates on the new organisational structure and strategic projects across the Service.

During this quarter our first mini–culture survey was launched. It is encouraging staff to respond to questions around inappropriate behaviours witnessed at work and how we're improving policies and procedures to support staff. Responses closed early November, and these will be analysed during quarter 3 before the annual staff survey is launched again.

We continue to engage with unions monthly via face-to-face meetings attended by the Director of People and Assistant Chief Fire Officer - Response.

During quarter 2 the CFO continued with three CFO blogs receiving over 700 individual staff views between them. We hope these will encourage staff to engage in meaningful conversations and build stronger connections with the CFO and his work.

We have continued to support the delivery of project communication plans across the Service during this quarter, working with Strategic Planning to ensure these are delivered and evaluated. As such, the focus has been on the comms delivery and consultation planning for the Resource and Savings Programme.

Feedback from outside of the organisation is also important to ensure we use this as an opportunity to learn and improve the delivery of our Service. Ten complaints were received in quarter 2. 11 complaints were due to be responded to this quarter and all were resolved within 20 working days, 82% were not upheld and two were referred to SLT for stage two review. There were no trends identified no significant learning actions as a result of these. Pleasingly we received 39 compliments in quarter 2.

KLOE 10 sub-diagnostic

How well do we identify and address potential disproportionality in recruitment, retention, and progression?

The Service continues to actively identify and address disproportionality across its workforce through targeted action, data monitoring, and developing inclusive practice.

Two working groups have been setup to review the Wholetime recruitment process to consider different approaches to the sifting and online tests as well as reviewing the practical job relating tests to ensure they are still appropriate for future processes and support a diverse applicant base. The focus is maintaining minimum standards but also supporting an approach to positive action and no having a detrimental impact on applicants from underrepresented groups.

Recruitment and Progression:

Corporate: There were 40 corporate new starters in quarter 2; 11 were existing members of staff taking on an additional role as a Fire Safety Intervention Officer. Year to date, of the 58 new starters who commenced employment since 1 April 2025:

- The highest percentage (29%) were aged 46-55, slightly higher than our existing age profile. 28% were aged 25-35.
- 55% identified as female and 45% identified as male.
- 95% identified as White British and 1.67% identified as Black or Black-British, with the remaining identifying as any other White background.
- 88% identified as heterosexual at 88%.
- 59% declared no religious beliefs; 29% identified as Christian; 1.5% identified as Muslim with the remainder (10.5%) opting to not disclose any religious beliefs.
- 3.5% disclosed they had a disability.

Although the dataset is small and shows slight improvement on last year, disability remains the most significant area of underrepresentation, with continued gaps also evident in older (56–65) and younger (17–24) age groups, BAME representation, and Christian representation relative to the local population

On-call: There were 19 on-call new starters in quarter 2. Year to date, of the 25 new starters who commenced employment since 1 April 2025:

- 48% were aged 25-35, 28% who were aged 17-24.
- 8% were female and 92% were male.
- All were White-British.
- 96% identified as heterosexual with 4% opting not to disclose their sexual orientation.
- 64% declared no religious beliefs, 24% identified as Christian, 4% identified as Buddhist. 8% opted not to disclose their religious beliefs.
- One (4%) of the 25 On-call new starters disclosed they had a disability.

This shows little change from the previous year, with gender, ethnicity and disability remaining the most significant area of underrepresentation particularly in operational roles.

There were two WDS new starters (both male) in quarter 2 and no new starters in Fire Control.

While overall numbers remain small, this quarter has seen a slight increase in applicants reporting that they found the role via the neurodiversity job board. Recruitment events continue to be attended which as well as attracting new people, it is also used to engage with employers to promote the benefits of supporting their staff to become on-call firefighters.

While FREE days continue the team is exploring ways to encourage stations to collaborate on these events, as they are currently very labour-intensive for such low turnout. While none of the attendees in the one event in quarter 2 appeared to belong to an under-represented group, ethnicity and disability status were not collected. These fields have now been added to the registration form for future events, enabling more accurate diversity monitoring.

Leavers Information: There were 35 Leavers in quarter 2 which the largest coming from On-call (48.5%), followed by Wholetime (28.5%) and then Corporate (23%). No leavers were from Fire Control. Those leavers fell mainly within the 46-55 age group (26%) followed closely by 25-35 age group (23%). 25% of leavers were aged over 55. Of those leavers the highest percentage were males (80%) with 20% being female. Of the females 86% were from On-call.

The top three primary reasons for leaving for all staff were retirements (28.5%), end of temporary contract (17%) and personal/work commitments at 14%.

66% of leavers were eligible for a leaver discussion, the low level of leavers discussions is due to a high number of fixed term contracts coming to an end and individuals still being employed with the service (as on-call).

On the leavers discussion forms there are two free text questions. Analysis of the responses to these questions has identified no particular trends. Any contentious issues are taken up with the line manager by the People Partner.

ED&I
Attraction and Recruitment: Online information sessions have been rolled out as a pilot for on call and an alternative option is being explored by way of an information pack. Work is continuing with comms and recruitment regarding FREE days attraction, communications aligned with control room awareness week, in preparation for fire control recruitment. They are also exploring a "Day in the life of Control" video, embedding inclusivity to support positive action.

Positive Action: Our positive action work continues and includes:
- How we can promote messages in support of groups feeling marginalised or concerns during current social tensions, whilst remaining politically neutral.
- The neurodiversity network to consider a new attractions and benefits video, removing statutory obligations like leave and sick pay.
- Sending newsletters to those in our Wholetime pool to keep them engaged and in touch with the Service.

Retention: To support with the retention of underrepresented staff groups, the following work continues via various teams and staff networks:
- Planning for International Men's Day 2025 and International Women's Day 2026.
- A conference raising awareness about the women we live and work with and their hormones.
- Planning for Staff Networks Day in May 2026.
- Planning for our Personal Safety Workshop in December.

The Power of Inclusion, tool place on 17 September at Five Rivers. It included a series of panels with different themes including the ethics of AI, what misogynistic behaviour looks like and positive challenging, and what allyship looks like to the panel. The event was recorded and will be communicated and added to Human Library.

Resources continue to be added to CONNECT (and communicated) covering allyship, positive action steering group the work of the positive action steering group. Work also continues on strengthening support for Network Leads and attendance for on call or part time staff.

Progression: Three delegates attended the Women's Development Programme with Women in the Fire Service in quarter 2. The EDI Manager continues to monitor feedback and evaluate this programme for value and effectiveness.

Our "Developing Diverse Leaders" programme completed in quarter 1. Three of our six delegates are Minority Ethnic, two are Operational Women, two are Control Women and we have one corporate female. The EDI Manager is completing an evaluation of the programme and results can be expected in quarter 3. Four of the six delegates have already secured temporary or permanent promotion since the programme.

The L&OD team continue to explore a female only Incident Command exercise for operational women. This is pending an Ops Women's Group Survey and subject to resource.

Four staff are on a level five coaching apprenticeship and eight level three apprenticeship in September and October. Opportunities will be offered to coach staff shortly and procedure will be re-written.

A new Station Manager role induction day took place on 1 October, going forwards this will be a two-day course.

Other activities: Community engagement activities continue across the service to learn from underrepresented groups and promote the service as an employer of choice. 100 engagements were undertaken by Response in quarter 2. Work is ongoing to strengthen the reporting and organisational learning from these.

A Community Newsletter is published three times a year to maintain relationships with community leads and reach groups of people who are seldomly heard. Due to capacity in the team, the newsletter scheduled for quarter 2 was paused. This will rollover to quarter 3.

This quarter 57 new People Impact Assessments were received, of which 11 required a Stage Two with the support of relevant network leads and our scrutiny panel.

Feedback from the six and 12-month "How is it being one of us?" surveys are monitored regularly to identify opportunities for improvement and any themes of potential disproportionality for underrepresented groups. Further work is underway to ensure that feedback is considered and actioned by relevant teams.

The majority of our workforce are male and we recognise that these colleagues are perfectly placed to help address the international and national agenda to end Violence Against Women and Girls (VAWG). To support this agenda and the women who are underrepresented in our organisation we are a White Ribbon accredited organisation. A committee oversees raising awareness to tackle misogyny and VAWG. We currently have 73 Ambassadors and Champions in total, comprising of 46 male ambassadors and 27 female champions which is an increase of 12% from last quarter.

There were five cases concluded in this quarter. Of the five cases closed, one went to a Stage Three Hearing, undertaken as a desktop hearing due to resignation, the outcome of this was dismissal.

The remaining four cases were:
- One dismissal appeal (not upheld).
- One investigation concluding in local management action.
- One investigation concluding in no further action.
- One grievance (partially upheld).

There were 14 new cases in quarter 2
- 11 Disciplinary.
- Two bullying and harassment.
- One formal grievance.

Of the new 11 disciplinary cases, all required the appointment of an Investigating Officer (IO). All IO's were appointed within five days of the case being opened, this has been made easier with the introduction of the Compliance & Investigation Team in September 2025.

No new Employment Tribunal claims were submitted in this quarter.

A strategic oversight committee is in place who meets fortnightly to review performance management cases.

KLOE 11: How well do we develop leadership and capability?

KLOE 11 Summary

The Service have a range of programmes, initiatives, and activities in place to develop and support our leadership capability. There were two corporate inductions held this quarter with a total of 37 attendees. Those who have not attended within the mandatory timescale have been identified and these cases have been escalated, as necessary.

Year to date, since 1 April 2025, 19 probations have been met, none have been extended, and no staff contracts have been terminated during their probation period. 22 final probation forms are outstanding at the end of the quarter.

The 1:1 review process ensures that a discussion and appraisal take place at least once a year and focuses on wellbeing, performance, and development. One-to-one reviews are recorded over a rolling 12-month period and completion rates are monitored. The overall completion rate for quarter 2 is 85.7%.

Leadership in Lifesaving courses have been scheduled to take place on a quarterly basis and are now made available to all staff to attend to support with our focus on developing future leaders and to deliver actions from the culture delivery plan. Following delivery of the newly developed Management in Lifesaving course in quarter 1, positive feedback has been received and minor improvements made ahead of the next delivery in quarter 3.

All development pathway workbooks have been digitalised. Development pathways are integrated within Learning and Organisational Development activities, and the development framework encompasses Trainer Assessor, Management in Lifesaving, Leadership in Lifesaving with apprenticeships and educational opportunities available to staff.

A Bitesize Leaders programme has been developed for 2025-26 but has the flexibility to accommodate any changes arising out of emerging issues/hot topics.

The Service's apprenticeships cover a wide range of areas including Leadership Development, Finance, Human Resources and Facilities Management. In quarter 2, we had 33 staff members undertaking apprenticeships. 22 of these were corporate members of staff and 11 were operational members of staff.

Our coaching and mentoring schemes are under further development with key staff receiving level five training via the apprenticeship scheme, with further students being trained to a level three coaching standard. This process will support the Service in meeting its cultural goals as coaches will support leader development, improve performance, and behaviour change. Applying an internal coaching approach reduces reliance on external providers, builds trust across teams, and helps embed continuous learning and accountability throughout the organisation.

Supervisory Managers undertake their initial incident command training using the facilities at the Fire Service College, which enables them to be assessed at a range of incidents. A structured rota group training programme is in place for Flexible Duty Officers.

KLOE 11 sub-diagnostic

How well do we manage and develop the individual performance of our staff?

Corporate Induction

This quarter there were two corporate induction sessions held. The first, in July, had 14 attendees and the second, in September, had 23 attendees (37 attendees in total this quarter).

During this quarter, 18 individuals attended the Corporate Induction after the mandatory timeframe. 12 of these were Wholetime Firefighters who started with the Service in May and could not attend Corporate Induction until September due to their training schedule, they have all been added to the next available date.

Following the corporate induction, a survey regarding the effectiveness of the process is sent out. All attendees across both sessions completed the feedback survey (100% response rate). In most cases the Corporate Induction either met or exceeded expectations with participants valuing the interactive elements, opportunities to ask questions of experienced staff, and informative insight into the Service and available support.

Some feedback suggested that sessions could be more actively interactive, as spending extended periods in front of a screen was tiring and attention spans waned at times. Feedback from those attendees who had completed the Wholetime recruits

course suggested that some of the content was repetitive. We have considered this feedback, recognised areas of overlap, and are already proactively planning to approach things differently for the next cohort.

One way that we evaluate how successful the induction period has been for a new starter is data from probation reviews. Year to date, since 1 April 2025, 19 probations have been met, none have been extended, and no staff contracts have been terminated during their probation period. 22 final probation forms are outstanding at the end of the quarter.

1:1's

As target completion rate for all staff groups was 100% we have not achieved this for any staff group, the overall completion rate is 85.7%. Due to the reviews being carried out in the rolling year, no particular trend analysis is evident as to when reviews are completed. Outstanding reviews are sent to the People Partners to follow up with the relevant line manager.

KLOE 11 sub-diagnostic

To what extent are the career pathways of all staff effectively managed?

All development pathway workbooks have now been digitalised and will be reviewed and refreshed once the additional resources are in place. These pathways are fully embedded within the wider Learning and Organisational Development programme, which includes the Trainer Assessor, Management in Lifesaving, and Leadership in Lifesaving frameworks, alongside apprenticeship and educational opportunities for staff.

Leadership in Lifesaving courses are scheduled quarterly and are open to all staff. They form a key part of our approach to developing future leaders and delivering the commitments within our Culture Delivery Plan. The newly introduced Management in Lifesaving course further strengthens leadership capability across all levels of the Service.

Bitesize Leaders Forum: Continue to provide a platform to develop middle management teams and align the activities of their teams towards organisational goals and priorities.

Apprenticeships: The Service's apprenticeships cover a wide range of areas including Leadership Development, Finance, Human Resources and Facilities Management. In quarter 2, we had 33 staff members undertaking apprenticeships. 22 of these were corporate members of staff and 11 were operational members of staff.

Coaching: The Service have several coaches qualified at the Institute of Leadership & Management level three and level five. Our coaching and mentoring schemes are under further development with key staff receiving level five training via the apprenticeship scheme, with further students being trained to a level three coaching standard. This process will support the Service in meeting its cultural goals as coaches will support leader development, improve performance, and I turn steer behaviour change. Applying an internal coaching approach reduces reliance on external providers, builds trust across teams, and helps embed continuous learning and accountability throughout the organisation.

The Service also uses the National Fire Chiefs Council (NFCC) Coaching (and mentoring) portal where staff can register as a coach but also access coaching support. The Woman in the Fire Service is part of the NFCC coaching portal which ensures a diverse range of coaches and support are available for staff across the Fire Service sector.

Incident Command: Supervisory Managers undertake their initial incident command training using the facilities at the Fire Service College, which enables them to be assessed at a range of incidents. Acquisition training for new station managers was delivered over this quarter. The training, aligned to Skills for Justice and National Operational Guidance provided the necessary skills to support tactical decision making at incidents. A structured rota group training programme is in place for Flexible Duty Officers.