

Performance report - Quarter 1

Finance & Audit Committee

1 April to 30 June 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

Business continuity arrangements continue to be well embedded across the Service, with planning and risk management a critical factor to our approach. The Service continues to enact business continuity arrangements at the appropriate times and work well internally and with our local resilience partners to exercise arrangements to support future real-life events.

The Service continues to make effective use of national procurement contracts, which includes actively promoting and partaking in collaborative and joint procurements. The Service is currently participating in collaborative procurements, which include Water Aggregation, Technology Aggregation, Devon and Cornwall Police Self Drive Hire re-procurement.

The Service has maintained its ISO55001 Asset Management accreditation, following the most recent audit in May 2025 by the British Standards Institution (BSI). This assures that the Service is effectively managing its assets to optimise performance, reduce costs, mitigate risks, and ensure lifetime value of Assets. Obtaining and retaining this standard demonstrates that the Service has implemented and maintained robust asset management system.

As part of our environmental journey an independent energy audit of eight sites has been undertaken. Through this the Service has identified five stations where greener technology will be installed and further work will be undertaken in relation to heating controls and insulation. This will form the basis of our Heat Decarbonisation plan, together with monitoring the best return on investment to allow the Service to use this information/approach to roll out to other sites.

As part of the Community Risk Management Planning the Service conducts a Strategic Assessment of Risk (SAR) every two years. The new SAR will be published in September, following a consultation process with our partners.

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 considers business continuity and risk management as critical requirements of running a healthy organisation. Both are well prioritised within the Service, with current and emerging risks being monitored on a regular basis through both practises. The Service focuses on having strong and well-established business continuity arrangements, underpinned by comprehensive and proactive risk management processes. As part of this we keep abreast of global, national, and local risks through regular horizon scanning and involvement across both Local Resilience Forums, as well as through the National Fire Chief Council’s Business Continuity group. This includes using publications, such as Business Continuity Institute Horizon Scan, the National Security Risk Assessment, and HM Governments Chronic Risk Analysis. As well as helping to guide and prioritise the work across business continuity planning these publications also support the delivery of the Service’s biennial Strategic Assessment of Risk, which forms part of our strategic planning for the Service.

We maintain alignment of our Business Continuity Framework to the Business Continuity Institute’s (BCI) Good Practice Guidelines, which provides a structured and consistent approach to preparedness, response, and recovery. During quarter one the Service responded to three full business continuity incidents and activated ‘BC lite’ protocols on two occasions. These events included wildfire response, estate-related fire appliance relocations, and a significant power outage. In parallel, we participated in several multi-agency exercises, including a Marauding Terrorist Attack (MTA) at the McCarter Glen Shopping Outlet in Swindon, further strengthening our interoperability and readiness.

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 has now gone live. There will be a transition period during which the existing regulations and the new Procurement Act 2023 will apply. Procurement Team have and are completing the specialist procurement e-learning modules. Procurement policies and procedures are being reviewed, and new processes will be 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 some informal groups and networks made up of local authorities and other public sector bodies.

The Service continues to make effective 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 example 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 for this procurement. We are participating in the supplier engagement sessions as well as reviewing procurement documents.

Blue Light Commercial Group, in partnership with the Home Office, is 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.

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 Service has maintained its ISO55001 following the most recent audit in May 2025 by the British Standards Institution (BSI). Using this standard helps organisations to ensure that they are effectively managing their assets to optimise their performance, reduce costs, mitigate risks, and ensure lifetime value of Assets. Obtaining and retaining this standard demonstrates that the Service has implemented and maintained robust asset management system.

The Service's Asset Management System is used to register and track assets. Information included on the system covers description, location, maintenance responsibilities, and safety checks for over 60,000 pieces of equipment. This system is updated regularly through equipment after-use checks, inventories as well as weekly, monthly, six-monthly, and 12-monthly checks and tests. This is used across the Service as part of asset management and is assured through the ISO55001 audits. Key

performance indicators are also used by departmental management to monitor asset management. This ensures our assets are being maintained in line with the appropriate schedules.

Procurement and Finance, along with the Assets departments, monitor the economic situation to stay on top of parts, material, and labour cost increases as well as global supply chain disruptions. This focus ensures good decision making on ordering timeframes and stock levels.

Research and development into the equipment used across the Service is undertaken and overseen by our internal Equipment Review Group, who look at the performance and options for operational equipment. Through the group recommendations are made based on new technology or performance issues with existing equipment. To ensure that the Service continues to maintain appropriate provisions for the safety of our staff and the communities we serve.

Through our monitoring arrangements, the Service can monitor energy usage across the estate. This allows us to be aware of costs of utilities at premises and performance of sites to focus priorities. This system supports the identification of patterns or abnormalities at sites which allows us to investigate and act. Overall, this gives us better control and understanding of utility usage, to aid further efficiencies and effectiveness to reduce costs.

During this quarter, the new Unimog was delivered into Service and made a priority for getting it on the run due to the risks and level of wildfires being experienced by the Service and sector. Due to the old Unimog still being able to be maintained, the Service is trialling the use and availability of the two and as part of reviewing the number of Unimog's required and locations needed.

KLOE 6 sub-diagnostic

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

As part of our environmental focus the Service's Environmental team monitors and reports on the greenhouse gas emissions and waste management. For the 2024-25 financial year, Dorset & Wiltshire Fire and Rescue Service (DWFRS) has produced 1118 tonnes of CO₂ equivalent greenhouse gas emissions (excludes fuel for fleet). This is a 12% decrease compared to the five-year average and 2% decrease compared to the previous year. The average emissions over the last five years were 1264 tonnes. The focus on the following activities helped the Service on this Net-Zero journey:

- Installation of automated meter readings for gas meters.
- Decarbonisation of Cricklade Fire Station by electrifying all heating and hot water systems, completely removing gas.
- Installation of six electric vehicle charging points and the introduction of two electric equipment support vans.
- Estate improvements as part of routine maintenance or improvements to the existing buildings (for example, LED lights, insulation, more efficient boilers, and windows).

Furthermore, our team now undertake environmental audits across the Service estate to help personnel manage sites and understand their responsibilities regarding sustainability and how their actions impact on the environment. Through this we actively promote and encourage personnel to become Green Champions and become part of our champion network in place.

Energy usage across the estate is monitored and allows the team to monitor energy usage. As well as providing the Service information to monitor usage and highlight areas for investigation, it gives us a better understanding for targeting estate refurbishment work, to reduce the carbon footprint of heating and powering of the estate.

Following an independent energy audit of eight sites, we have now identified five stations that we are going to install greener technology, as well as look into heating controls and insulation. This will form the basis of our Heat Decarbonisation plan, together with monitoring to identify the best return on investment to allow the Service to use this information/approach to roll out to other sites.

KLOE 6 sub-diagnostic

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

The Service remains fully committed to aligning with the Fire Standards Board’s Community Risk Management Plan standards throughout our Community Risk Management Plan development and delivery. The approach to this is also fully aligned with the methodology of His Majesty’s Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS). In its most recent inspection, HMICFRS noted that “the Service continues to identify risk well” and “has an effective community risk management plan.”

As part of the Community Risk Management Planning the Service conducts a Strategic Assessment of Risk (SAR) every two years. The new SAR is due to be published in September, following a consultation process with our partners. This assessment looked and assessed the risks across the national, regional, and local landscape and was developed collaboratively with the Service’s three Operational Groups and their associated fire stations. The delivery of this new SAR allowed the Service to review current strategic planning provisions within the Community Safety Plan 2024-28 and confirm the priorities within it still remain current.

The delivery of the current CSP 2024–28 is translated into the Service’s five strategies, Asset Management, Community Safety, Data, Digital & Technology, Environmental and People. Our internal Service Delivery Plan identifies which activities from the strategies are to be delivered annually and these are monitored through our performance management arrangements, which were provided with substantial assurance following the most recent audit undertaken by the South West Audit Partnership.

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 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. 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.
- ICT Health Check 2025 scheduled for July 2025, along with the audit programme. Associated action ongoing as business as usual.
- Back-up mapping and storage review is complete.
- Multi-factor Authentication (MFA) ICT work ongoing with the majority completed.
- Multi-Function Printing Devices (MFDs) contract awarded and progressing.
- Data and information storage back-up renewal procurement underway.
- 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 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.

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 former Chief Fire Officer consistently highlighted the issue on a national level through his role as Chair of the National Fire Chiefs Council's Finance Committee. The Treasurer continues to actively engage in any opportunities to outline the local position nationally via the Home Office and the Service responds to national consultations on finances whenever any such opportunity is given.

The Service has managed to set a balanced budget for 2025-26. Additional precept flexibility of £5 was granted by central government as part of the provisional settlement but grant funding totalling £1.8m was also removed leaving the Service in a cost neutral position. The revised Medium-Term Finance Plan deficit forecasts reported to Members in February 2025 were £1.38m for 2026-27, rising to £1.76m for 2027-28. The work of the Resourcing and Savings Programme and the Member Working Group needs to continue at pace to ensure ongoing 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, the Home Office, and 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.

Early in its tenure the new government set several backstop dates for the completion of historical outstanding external audit processes, and the Authority complied with these deadlines. The Authority can now move forward 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 medium-term financial plan internal audit for 2024-25 in quarter one. Substantial assurance was given with no recommended actions. The 2025-26 audit reviewed treasury management processes and controls and was completed in July 2025. Substantial assurance was given with one low priority action.

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. Future budget deficits were outlined as part of the Medium-Term Financial Plan and the Service has needed to develop plans to reduce spending. These decisions are guided by the work of the RSP, which has a schedule of work which includes regular reviews of our financial assumptions and options for making further savings and efficiencies. This work will continue at pace into 2025-26 to ensure ongoing financial sustainability.

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 exhibit a strong health and safety performance. The trend for work-related absence due to physical injuries or ill health quarterly trend is down from 301 days to 242 days compared to the same time last year. In this quarter, seven people are contributing to these figures of which six members of staff are designated long term sick or in long term recovery and their days lost (226) are 93% of the total in quarter one. 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 reduced from six down to zero over the same quarter last year. 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 ISO45001 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 down from 301 to 242 days compared to the same time last year. In this quarter, seven people are contributing to these figures. Of the seven people, six are designated long term sick or in long term recovery and their days lost (226) are 93% of the total in quarter one.

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 decreased over the same quarter last year (six down to zero).

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.

In December 2023, the Authority's application to join South West Audit Partnership (SWAP) was approved by their Board, and Councillor Small was subsequently appointed to the SWAP Members Board at the Authority meeting in June 2024. The SWAP four-year audit strategy and the 2024-28 annual plan were developed collaboratively by SWAP, the Service, and the Chair of the Finance & Audit Committee and were approved by Members in March 2024. Four audits have been completed so far this year. These are social media, Medium Term Finance, Site Security and Data, Digital and Technology strategy.

The Service is proactively managing its information governance and information security compliance requirements. Strategic and tactical processes are aligned to 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 and effective performance management.

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 & Scrutiny Committee meetings. These took place to consider quarter one performance in May. Priorities four and five were reviewed at the Finance & Audit Committee at their meeting in July for quarter four performance.

The 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 is approved by Members and published each year 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 signed off 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 continues to have robust governance arrangements, which is supported by the most recent South West Audit Partnership's (SWAP) annual opinion, which for the second year was provided as 'Substantial Assurance.' This was due to five of the eight audits throughout the 2024-25 audit programme achieving a substantial rating and three with adequate. Furthermore, in quarter one of the 2025-26 SWAP audit programme a review of the Service's performance management framework was undertaken, with SWAP awarding substantial assurance. This provides good assurance on the strength of governance across the Service and how this aligns to that of the Authority.

To support the Service to maintain these good levels of governance we continue to ensure there are wider options for scrutiny, through a range of internal and external evaluations. These include:

- External audits.
- British Standard Institution audit and accreditation to ISO45001.
- British Standard Institution audit and accreditation to ISO 55001.
- HMICFRS inspections.
- Peer reviews – most recently for our business continuity arrangements through National Fire Chiefs Council (NFCC).

Together, these mechanisms form a comprehensive and credible assurance framework that underpins the development of the annual Statement of Assurance.

Each year, as part of regulatory requirements, the Authority are required to produce a Statement of Assurance. This is undertaken during the Authority meeting in September annually. During quarter one the Service delivers the work in preparation for this and this year's will be provided to Members ready for their September meeting. Our current and older Statement of Assurance documents can be found on the Services website.

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. There are strategic and tactical processes that broadly align to the principles of British Standards Institute 27001 and are detailed in the supporting documentation associated with the Statement of Assurance.

In quarter one we received 41 Freedom of Information requests, 48 required a response in this quarter and all were responded to within 20 working days. The average response time was ten working days. One internal review was received, and the original response was not upheld. No themes were identified this quarter.

During this quarter we received eight subject access requests under the Data Protection Act, nine were due a response in the period and we responded to all within the correct timeframes.

Five complaints were due to be responded to this quarter, and all were resolved within 20 working days, 60% were not upheld and none were referred to senior management. There were no trends identified.

Pleasingly we received 31 compliments in quarter 1, 10 relating to our attendance at incidents and 6 following a safe and well visit.

Six security incidents were reported during the quarter. These were related to data handling and human error and resulted in no data breaches.

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 and is nearing the completion on the work to ensure third party cloud services have multi-factor authentication in place. The use of mobile data terminals on the fire ground needs further consideration at a national level 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 mandatory data protection and cyber security training has been rolled out in quarter one for all staff to complete.

In addition to our legal compliance responsibilities, we are ensuring that data management is at the forefront of business processes and system development. Investment in technology and improved data management processes which join up prevention, protection and response is enabling high quality, automated and evidence-based standards for data supporting improved decision-making and effective performance management.

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 one, long-term sickness remains the largest contributing factor to the absence figures for all staff groups. Musculo-skeletal is the highest causation for wholetime and on-call staff followed by mental health. Mental health is the highest causation for corporate staff and the highest causation in fire control.

The Service has a corporate target to a reduction in the average sickness levels compared to the average during the last five years. The target (which includes wholetime, corporate and Fire Control) for quarter one was 2.09 shifts lost per person with the actual figure being 1.7 shifts lost person showing a continued positive downwards trajectory.

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.

Our processes are regularly reviewed to ensure they remain fit for purpose in a financially challenging internal and external operating environment. Membership of our personal private healthcare scheme through salary deduction continues to increase

month on month and demonstrates a demand for the different services it offers, reflective of the challenges faced through the NHS, of which these continue. We remain conscious of the pressures faced by the NHS, the main treatment provider, and are working closely with our Occupational Health provider, our personal private healthcare provider and other external agencies on initiatives that can support our staff with the aim to return to work quicker.

In quarter 1, 95% of staff passed their fitness test and ten individuals are supported with fitness improvement plans which includes advice and guidance on nutrition and weight management. 18 individuals are also recorded as being on limited duties. In addition, 18 staff were supported with a stress action plan and 25 return to work interviews were recorded as overdue.

During quarter 1 a number of key health messages, such as world health day and managing stress in the digital age, masculinity, mental health and the workplace, digital accessibility and workplace mental health were published. There are also several wellbeing advice resources available including toolkits produced by Public Health England. 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 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 one, long-term sickness is the largest contributing factor to the absence figures for all staff groups. Musculo-skeletal is the highest causation for wholtime and on-call staff followed by mental health. Mental health is also the highest causation for corporate staff and the highest causation in Fire Control. Absence levels were lower than the same quarter last year for most staff groups which contributes to a continued positive downwards trajectory.

The Service has a corporate target to a reduction in the average sickness levels compared to the average during the last five years. The average target (including wholtime, corporate and Fire Control) for quarter one was 2.09 shifts lost per person with

the actual figure being 1.7 shifts lost person. In quarter 1, 18 staff were supported with a stress action plan and 25 return to work interviews were recorded as overdue. Two Stage One Absence Review Boards were held, and two referrals made to the Independent Qualified Medical Practitioners (IQMP).

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. Sickness procedures are robust, and a range of support mechanisms such as counselling and physiotherapy are in place to support staff.

Personal Private Healthcare Membership & Governance: Membership of our personal private healthcare scheme through salary deduction continues to increase month on month. In quarter one, nine new staff joined the personal private Benenden, with a total increase of 14 including dependants. We are conscious of the NHS, the main treatment provider, pressures and working closely with our Occupational Health provider, the private healthcare facilitator and other external agencies on initiatives that can support our staff with the aim to return to work quicker.

Mental Health & Emotional Support: Staff counselling remains accessible by all staff. 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 & Health Support: In quarter 1, 95% of staff passed their fitness test and ten individuals are supported with fitness improvement plans which includes advice and guidance on nutrition and weight management. This is a 2% improvement on the same quarter last year.

Limited Duties Oversight: Our limited duties procedure is being reviewed to ensure it enables the Service to support staff returning to work whilst managing organisational need. In quarter 1, 18 individuals are recorded as being on limited duties. All staff on limited duties are reviewed by the Health & Wellbeing Team to ensure procedures are followed and any exemptions (three in quarter 1) are properly authorised.

Wellbeing Information: During quarter one several key health messages, such as world health day and managing stress in the digital age, masculinity, mental health and the workplace, digital accessibility and workplace mental health were published. There are also several wellbeing advice resources available including toolkits produced by Public Health England. All our health and wellbeing resources are publicised through our 'Safe To' programme which updated regularly to ensure staff are signposted to this support.

Overall, the Service have a well-considered and strong grasp on the wellbeing of our workforce with robust systems in place to monitor needs, provide support and adapt, as necessary.

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 are 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 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 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 one being 24.31% 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.

While corporate roles saw strong female representation (12 of 18), operational roles remain male-dominated with just three of 31 people successful in our wholetime recruitment campaign identifying as female.

In quarter one, there were 25 leavers, 13 on-call, six Wholetime, six Corporate, zero Fire Control. Of these leaver five were female.

Most people who left were age 25–35 or close to retirement (46–55). The top three reasons for leaving were retirement, obtained employment elsewhere, personal work commitments. Most of the leavers were men which reflects the current workforce composition. There are no signs that women are leaving at higher rates. Similarly, there are no trends to suggest that any retention issues for those who are part of underrepresented groups.

More than half of leavers were on-call staff. Leaver's discussion feedback is being reviewed to explore patterns. The Service is looking at new ways to support on-call teams as part of the on-call review.

Our Safe To portal promotes Equality Diversity & Inclusion by giving improved accessibility to health and wellbeing, reporting lines, tools to challenge and leadership initiatives. At the end of quarter one staff have visited the home pages for these resources was visited 352 times, demonstrating the usefulness of this resource.

Other mechanisms for staff to raise concerns is through our Guardians – with one person making contact and our anonymous reporting line FRS Speak out with no contact through this route in quarter one.

The Service is committed to White Ribbon; a charity aimed at tackling misogyny and violence against women and girls through male allyship. In quarter one we had 65 Ambassadors and Champions in total, comprising of 42 male ambassadors and 23 female champions.

There were four new disciplinary cases and four new bullying & harassment cases, as well as one formal grievance, one appeal, two management inquiries and three employment tribunal claims. A total of 13 cases were carried forward from 2024-25 into quarter one; and a total of 15 cases were closed in quarter 1 (including one appeal, six discipline, six bullying and harassment and two management inquiries). Post case reviews for all closed cases are being arranged or have been held to capture lessons learned, potential procedural changes and organisational improvements.

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, co-chaired by the Chief Fire Officer (CFO) and independent advisor, Sunita Gambin. During quarter one, there were no new episodes of the Culture Conversations podcast.

There were two 'On-Call Question Time' sessions this quarter.

There were two open seats taken up at Strategic Leadership Team (SLT) meetings in April and May. As well as the Service Delivery Team (SDT) meetings, in May and June. We held five of the seven Managers Briefing Days this quarter. These focused on the new CFO's priorities and commitments and the changes to the structure to support the delivery of these; a communication audit for managers to feed in their views and the views of their teams; as well as updates on strategic projects. The feedback from these have been positive in their style, format and content.

Our annual Staff Survey was analysed during this quarter and results are due to be published earlier in quarter two. There were over 570 responses to the survey, a response rate of 43%. The comments made by staff are being addressed through the CFOs commitments and changes to the organisation.

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 one the focus of project communication plans across the organisation, has been on the Training Centre project and the RSP programme, as well as the P4s and wading project.

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.

Recruitment and Workforce Composition: Diversity data for new starters is analysed quarterly. There were 18 corporate and six on-call new starters in quarter one. Of the 18 corporate new starters, 12 were female and six were male. Of the six on-call new starters, one was female and five were male. All 24 new starters were White British. All six on-call new starters were heterosexual.

Of the 18 corporate new starters, 15 declared they were heterosexual, one identified themselves as Gay/Lesbian, one disclosed they were bisexual, and one individual declined to share their sexual orientation. None of the on-call new starters declared a disability and one of the 18 corporate new starters declared a disability.

All the new starters across both staff groups were either Christian (25%), declared they had no religion (67%) or declined to share their religion (8%). Half of the on-call new starters were aged between 36 and 45 and the remaining three were aged between 17 and 35. The corporate new starters were spread across all age bands.

The Service is also actively working to improve fairness and transparency in how staff are recruited, retained, and supported to progress. The Service has a strong commitment to diversity and whilst progress is being made, especially in workforce representation, further efforts and initiatives are planned to reach groups currently underrepresented.

Positive Action and staff engagement: The Positive Action Steering Group and recruitment review meetings continue to examine and adapt processes to improve diversity. Staff surveys (“How is it being one of us?”) and support networks provide valuable feedback to help improve staff experience and create a sense of belonging. Inclusion events, and the newly created Human Library help raise awareness and foster connection across staff groups.

External Engagement: Specialised job boards (for example: LGBTjobs and BMEjobs) are used and we seek to ensure attendance at key careers fayres. Community engagement activities also help promote the Service to underrepresented groups and our visibility as an inclusive employer is being expanded through partnerships like Race Equality Matters.

Retention: There were 25 leavers in quarter one, five females and twenty males. Six from wholetime, 13 from on-call, six from corporate and zero from Fire Control, there are no significant trends by staff group.

The top three primary reasons for leaving for all staff were:

- Retirements with seven leavers (28%) selecting this reason.
- Obtained Employment Elsewhere with six leavers (24%) selecting this reason.
- Personal Work Commitments with five leavers (20%) selecting this reason.

Of 25 leavers this quarter, 22 required leavers discussions (88%). To date we have yet to receive three leavers’ discussions back.

Progression Support: Tailored development programmes (for example: Developing Diverse Leaders (DDL) and Women in the Fire Service (WFS) initiatives) provide clear support for career growth. Four of six DDL programme delegates achieved promotion, showing a measurable impact.

Workforce and Succession Planning: Our succession planning is being strengthened, with leadership programmes and mentoring to help keep mid-career staff engaged. Retirement profiles are regularly monitored in support are being reviewed to support smoother transitions and knowledge handover.

Supporting staff: Our Safe To portal promotes Equality Diversity & Inclusion by giving improved accessibility to health and wellbeing, reporting lines, tools to challenge and leadership initiatives. At the end of quarter one staff have visited the home pages for these resources was visited 352 times, demonstrating the usefulness of this resource. The breakdown by each area as follows:

- Safe To Be: 849 times over the lifetime of the page (717 at end of previous quarter)
- Safe To Speak: 994 times over the lifetime of the page (891 at end of previous quarter)
- Safe To Challenge: 509 times over the lifetime of the page (443 at end of previous quarter)
- Safe To Lead: 335 times over the lifetime of the page (284 at end of previous quarter)

Other mechanisms for staff to raise concerns is through our Guardians – with one person making contact and our anonymous reporting line FRS Speak out with no contact through this route in quarter 1.

The Service is committed to White Ribbon; a charity aimed at tackling misogyny and violence against women and girls through male allyship. In quarter one we had 65 Ambassadors and Champions in total, comprising of 42 male ambassadors and 23 female champions.

Discipline and Grievances: There were four new disciplinary cases and four new bullying and harassment cases, as well as 1 formal grievance, one appeal, two management inquiries and three employment tribunal claims. A total of 13 cases were carried forward from 2024-25 into quarter 1; and a total of 15 cases were closed in quarter 1 (including one appeal, six discipline, six bullying and harassment and two management inquiries). Post case reviews for all closed cases are being arranged or have been held to capture lessons learned, potential procedural changes and organisational improvements.

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 was one corporate induction held this quarter with ten attendees. At the end of this quarter, there are four individuals who have not yet attended the Corporate Induction within the mandatory timescale and these cases have been escalated, as necessary.

In quarter 1, three probations have been met, none have been extended, and no staff contracts have been terminated during their probation period. There are seven final probation reviews 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 1 is 90%.

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. A newly developed Management in Lifesaving course was delivered this quarter, raising the competence, confidence, and capability of all our managers from across the Service.

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.

No Bitesize Leaders forum sessions took place in quarter 1 due to Manager Briefing Days. 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 1, 26 staff were undertaking apprenticeships across the Service.

The Service have several coaches qualified at the Institute of Leadership & Management level three and level five. Revised arrangements for our coaching and mentoring schemes are under development with the intention to use the apprenticeship levy to train key staff to a level three coaching standard. The Service also uses the NFCC Coaching (and mentoring) portal, which

relates to the Woman in the Fire Service, thus ensuring a diverse range of coaches and support are available for staff across the Fire Service sector.

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 one corporate induction session was held in May with ten attendees. At the end of this quarter, there are four individuals who have not attended Corporate Induction within the mandatory timescales. Three of them are booked in for July. The other individual has no more annual leave left to attend this year, and this has been escalated to management and Human Resources People Partners (HRPP).

Following the corporate induction, a survey regarding the effectiveness of the process is sent out. There were nine responses to the feedback survey (90% response rate) and all respondents confirmed the induction met (88.89%) or exceeded (11.11%) their expectations. Respondents were positive about the event, highlighting the opportunity to meet members of the service, including the CFO, and praising the engaging, interactive sessions. They also appreciated learning about the various career pathways available within the fire service.

Probation: One way that we evaluate how successful the induction period has been for a new starter is data from probation reviews. In quarter 1, three probations have been met, none have been extended, and no staff contracts have been terminated during their probation period. Seven final probation forms are outstanding at the end of the quarter.

1:1 Reviews: The overall completion rate for quarter 1 is 90%:

- 354 reviews were completed for wholetime staff this year (89%)
- 475 reviews were completed for on-call staff this year (94.5%)

- 28 reviews were completed for fire control staff this year (89.3%)
- 277 reviews were completed for corporate staff this year (83.8%)

Due to the reviews being conducted in the rolling year, no trend is evident as to when reviews are completed. For station-based staff outstanding 1:1 reviews are monitored on How's My Team Doing (HMTD), People Partners also chase completion of this information.

KLOE 11 sub-diagnostic

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

Leadership and Development: All development pathway workbooks have been digitalised. These will be reviewed and updated when additional resources are soon to be put in place. 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.

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. This course is newly developed Management in Lifesaving course, raising the capability of all our managers from across the Service.

Bitesize Leaders Forum: No Bitesize Leader Forum sessions took place in quarter one due to the Manager Briefing Days.

Apprenticeships: The Service's apprenticeships cover a wide range of areas including Leadership Development, Finance, Human Resources and Facilities Management. 26 staff are currently undertaking apprenticeships across the Service.

Coaching: The Service have several coaches qualified at the Institute of Leadership & Management level three and level five. Revised arrangements for our coaching and mentoring schemes are under development with the intention to use the apprenticeship levy to train key staff to a level three coaching standard. 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. A structured rota group training programme is in place for Flexible Duty Officers.