Area	Ref	Action	Accountable Lead	Start Date	Deadline (End of)	Success and Impact measures	Commentary - Jan 2024	Progress RAG End of Jan 24		Progress RAG 23/24 Q3	Progress RAG Start
Prevention	1.1.1	Implement the Prevention Risk Stratification (PRS) process based on the NFCC guidance	Group Commander Prevention & Resilience	Nov-23	Apr-24	• PRS guidance note written and published • PRS is live across all channels • All staff understand the PRS methodology	PRS guidance document (inc flow chart) and training package approved through BTB 4.1.2024 and published on Intranet on 12.1.2024. Training package developed and available on HEAT. Prevention team have received and continue receiving training. Operational response staff being introduced to Risk Stratification and a HEAT package. All territorial GCs & station based SCs received online induction. Prevention Bulletin published 29.1.24 regarding PRS guidance and training materials	On track		On track	On track
	1.1.2	Key Performance Indicators (KPIs) developed and reported to support Risk Stratification guidance	Group Commander Prevention & Resilience	Jan-24	Mar-24	• KPI's in place • Management control processes in place. • All referrals are dealt with in line with PRS guidance thresholds	Move to On track as Initial meetings/workshop taken place in January to discuss development of KPIs and management control process. Further workshop taking place 8 March.	On track		On track	Not Started
	1.2.1	Ensure all current referrals are processed and up to date	Group Commander Prevention & Resilience	Jun-23	Nov-23	• Referrals from partner agencies are being processed in line with Service expectations. • No referral backlog.	Remaining as BAU with ongoing monitoring now in place.	Complete		Complete	On track
	1.2.2	Launch Online Home Fire Safety Check form (OHFSC) developed to complement the Person-Centred Framework	Group Commander Prevention & Resilience	Nov-23	Feb-24	• New route available for the public to complete a person-centred self-assessment of fire risk. • All OHFSC are handled with the relevant treatment and timescales.	OHFSC weblink has now been delivered & Marcomms have the details/information. Confirmed a soft launch will be rolled out Mid February. External website being developed by Marcomms. In flow process being developed by Prevention GC.	On track		On track	On track
	1.2.3	Introduce a recognised way of recording and processing all prevention referrals directly into the Premises Risk Management System (PRMS) to ensure there is one database recording all prevention engagements as well as activity	Administrative Support Manager	Nov-23	Feb-24	• Referral processing guidance note written and published • Guidance note utilised to support training	This is now evidenced by the referrals guidance document (inc flow chart) and training package approved through BTB 4.1.2024 and published on the Intranet on 12.1.2024	Complete		Complete	On track
	1.2.4	Update PRMS to reflect Risk Stratification guidance	Group Commander Prevention & Resilience	Nov-23	Apr-24	• All agreed requirements have been developed, testing by all relevant users and live. • All referrals are in line with delivery expectations associated with the descriptors for levels of risk as per the Risk Stratification Guidance	All agreed requirements have been developed and currently in build with Active. By end of Jan the referral form ready to test. By end of Feb the visit form ready to test & by end of Feb updated end to end process ready to test. Testing schedule has also been developed internally in preparation for completed development.	On track		On track	Not Started
	1.2.5	Ensure all appropriate staff are adequately trained on the referral process and understand the methodology.	Group Commander Prevention & Resilience	Jan-24	Mar-24	•All staff have received appropriate training.	Moved to 'good progress on track' . This is evidenced by Admin staff receiving direct face to face training , plus a HEAT package. The Prevention team have received and receiving training Operational response staff being introduced to Risk Stratification and a HEAT package. All territorial GCs & station based SCs received online induction. All guidance & training documentation published on intranet on 12.1.2024 Prevention Bulletin published 29.1.24 regarding PRS guidance and training materials	On track		On track	Not Started
	2.1.1	Review and update current Protection strategy intended to provide clarity on how the Service will conduct its Protection business in line with legislative requirements and focussing resource on highest risk premises types.	Head of Protection, Assurance & Development	Nov-23	Dec-23	• Peer review from NFCC sector advisors • Appropriate level of stakeholder engagement in developing revised strategy • Scrutiny and acceptance of revised strategy by Fire Authority Members 6th December • Internal Publication	Protection strategy has been reviewed and updated with input from NFCC. The strategy was presented to the Fire Authority on 16 December 2024 (https://bucksfire.gov.uk/documents/2023/11/fire-authority-meeting-6-december-2023-item-12-protection-strategy-2023-2025.pdf/)	Complete		Complete	On track
	2.1.2	Introduce risk-based interventions programme to underpin revised strategy	Group Commander Protection	Nov-23	Dec-23	• Risk-based inspection methodology identified and clearly articulated • Based on methodology, identify planned audit schedule for very high / high risk premise types • Internal Publication	Risk based intervention programme has been developed and presented to the Fire Authority alongside the Protection strategy. This is now fully embedded with the staff who have been briefed on the methodology. The Protection team will continue to be engaged and integral to any future activity.	Complete		Complete	On track

	Ref	Action	Owner	Start	End	Success Criteria	Update	Status 1	Status 2	Status 3
Protection	2.1.3	Ensure the Protection strategy 2025-30 is embedded and fully aligned with the Community Risk Management Plan (CRMP) 2025-30	Head of Protection, Assurance & Development	Feb-24	Oct-24	• Evidence-led approach to management of protection resources • Extensive internal / external consultation • Due consideration to integration / alignment with Prevention and Response strategies	Has been included in CRMP 2025-30 plan	**Not Started**	**Not Started**	**Not Started**
	2.2.1	Embed the revised Protection strategy and Risk-Based Interventions Programme (RBIP) guidance As directed within the revised strategy, teams will now be focussing on planned and demand-led activity on high risk / low compliance property types	Group Commander Protection	Nov-23	Apr-24	• Good stakeholder engagement when developing the strategy and RBIP guidance and during transition • Direction and performance management to ensure a smooth transition in terms of ways of working • KPI's monitored to assure embeddedness • Very high/High risk premises schedule delivered	Audit numbers for Q3 significantly up on previous 2 quarters, but still some way to go. As well as changing ways of working / performance management, some systems / process improvements identified in other actions will support successful outcome.	**On track**	**On track**	**On track**
	2.2.2	Introduce new Protection KPI's captured at team and person level - Planned audit numbers against RBIP. - Monitor audit outcomes (compliance) against audit numbers to assure that the RBIP is targeting the right premises.	Group Commander Protection	Nov-23	Apr-24	• KPI's presented to Performance Monitoring Board quarterly • 1000 audits annually • Proportionate number of audits resulting in non-satisfactory outcomes	As above, work in progress and will be monitored and scrutinised. Positive direction of travel and assurance provided by current % non-satisfactory outcomes.	**Risk to progress**	**Risk to progress**	**On track**
	2.2.3	Introduce four apprentice Business Safety Advisor roles utilising Protection grant funding to support - Enable more qualified Protection staff to focus on high risk / low compliance	Group Commander Protection	Nov-23	Apr-24	• New roles resulting in greater levels of co-ordinated and targeted support to local businesses • Less time spent by qualified officers doing low risk activity.	1 x Apprentice deemed appointable. However, need to go back to advert to increase. will be advertised again February.	**Risk to progress**	**Risk to progress**	**On track**
	2.3.1	Ensure schedule for planned audits is easily accessible to staff who require it	Group Commander Protection	Nov-23	Dec-23	• Identified very-high risk and high risk audits are provided to teams	Schedule for planned audits is fully implemented and available to all Protection staff. This is utilised to pick their audits according to risk.	**Complete**	**Complete**	**On track**
	2.3.2	Premises Risk Management System (PRMS) – training input to ensure standardisation / consistency in data input and extraction	Group Commander Protection	Dec-23	Apr-24	• Training input received by relevant Protection staff • Consistency monitored by Station Commanders	Standardisation exercise complete and consistency of input in place. Some queries over system outputs to resolve. Action to remain open and on track to allow QA process to support ongoing consistency of application.	**On track**	**On track**	**No started**
	2.3.3	PRMS system – make provision for standard Protection outcome letters to improve efficiency and consistency	Group Commander Protection	Jan-24	Apr-24	• Standard letters available for use • Training provided as appropriate to support implementation	Standard letters intended to be in place / on the system by April.	**On track**	**Not Started**	**Not Started**
	2.3.4	Review provision of admin support to Protection teams to ensure efficiency	Head of Protection, Assurance & Development	Dec-23	Apr-24	• Administrative requirements identified • Qualified Protection staff enabled to focus more time on planned activity	Admin support – some areas identified and single input area for the PRMS system in place to support protection staff.	**On track**	**On track**	**Not Started**
	2.4.1	Introduce a Protection Quality Assurance (QA) process	Group Commander Protection	Oct-23	Apr-24	• (QA) process documented, consulted and agreed through governance • Relevant staff are trained on the QA process • QA activity recorded and reported	QA Guidance now published following BTB sign off. Will remain on track rather than closed until such point an audit / deep dive done to assure embeddedness as per intentions of guidance document. First round of QA to be undertaken in Q4, with view to closing action / BAU for 24/25	**On track**	**On track**	**On track**
	2.4.2	Review suite of Protection procedures and guidance to ensure it is aligned with best practice and supports staff in relation to consistent application	Group Commander Protection	Dec-23	Apr-24	• Published revised procedures and guidance • Training / input (as required) delivered to Protection staff	Policy / training role remains vacant, but going out to advert. Alternative / preferable option is to engage associate to do bespoke piece of work, which should allow for April deadline to be met. Commissioning underway, but in light of planned start date being Dec 2023, RAG status updated to amber. Work underway in respect of policy. GM to commission external support to meet deadline.	**Risk to progress**	**On track**	**Not started**
	3.1.1	Develop a role to include dedicated EDI support to ensure the delivery of EDI objectives	Head of Human Resources	Jan-23	Apr-24	•Dedicated staff member in place/ recruited	Job Descriptions collected from other FRS, and Bucks Council. Await budget sign off from Fire Authority 14 February 2024 to proceed	**Risk to progress**	**Risk to progress**	**Risk to progress**
	3.1.2	Review current EDI training across all levels including management and look at options to implement additional regular, measurable, bitesize session(s) on EDI	Station Commander HR Projects	Nov-23	Apr-24	• EDI online training has a completion rate of 90%+ supported by regular reporting, to ensure managers can follow up on non-completion • Staff at all levels can demonstrate a good understanding of EDI and how this needs to be reflected in the way we work and deliver services.	Data for Mandatory online learning completion collection for Q3 email reminder sent by SC Training Assurance in January 2024. Follow up EDI related email planned for February 2024	**On track**	**On track**	**On track**

Ref	Action	Owner	Start	End	Measure	Update	Status	Status	Status
3.1.3	Rollout 360 feedback process to all middle managers, which includes a section on how they promote EDI	Organisational Development Manager	Dec-23	Dec-24	• All relevant staff have completed 360 feedback including the manager appraisal session and workbook and the outcomes feed into development plans and appraisal process	360 feedback questions designed around NFCC Leadership framework. The process has been rolled out to Senior Management team and next level of Leadership group. Development & Assessment Pathway programme to be launched this year and embed feedback from 360 into individuals development plans	**On track**	**On track**	**Not started**
3.1.4	Utilise EDI data to better inform station plans to facilitate targeted community engagement activity adding specific action(s) related to EDI	Station Commander HR Projects	Jan-24	Mar-24	• Service delivery area plans include EDI related data and actions	Initial meeting took place on 22 January - Update following this meeting, the Data Intelligence Team have confirmed that the refreshed data sets(following the release of new census data) will be completed by early March. Meeting booked with territorial Group Commanders 27 February to discuss how we use the data to fully engage with our under represented communities and record these activities within the Service Delivery Action Plans	**On track**	**Not Started**	**Not Started**
3.1.5	Review and relaunch of our values/code of ethics to support a positive workplace culture	Station Commander HR Projects	Jan-24	Oct-24	• All staff understand what each value means for/to them and can share how it supports the communities we serve	Mandate approved at Business Transformation Board (BTB) in November 2023. January SMT Away day agenda item focused on Vision, Mission and values. Leadership day in January focused on values. SMT refined vision, mission and values at SMT planning day. Project Initiation document being drafted for submission to BTB in March 2024	**On track**	**Not Started**	**Not Started**
3.1.6	Work with our staff networks to gain their input, to develop policies, projects and initiatives.	TBC	Jul-24	Dec-24	• A representative from these groups is included in the development of procedures before consultation. • Increased staff engagement and inclusion	Linked to staff networks action 3.2.3	**Not Started**	**Not Started**	**Not Started**
3.2.1	Launch and review "Speak Up" campaign	HR Advisory & Development Manager	Oct-23	Feb-24	• All staff aware of Speak Up facility • Ongoing process in place to review take up/usage	Comms have included a digital launch; banners, wallpaper, corporate email signatures and articles promoting the speak up line and we stand for (integrity, respect and inclusion); merchandise and posters to all sites; launch of White Ribbon campaign	**On track**	**On track**	**On track**
3.2.2	Develop mechanisms to reduce the mystery of the Service's governance processes	Head of Technology, Transformation & PMO	Nov-23	Jan-24	• "Extra Chair" take up is 50% • A summary of internal governance meetings is published on the intranet within 2 weeks of the meeting taking place	"Extra Chair" communication sent out. Strong take up for Leadership days. Templates created for internal governance meeting intranet pages that will be rolled out in February 2024	**Risk to progress**	**On track**	**On track**
3.2.3	Explore further options to establish staff networks for underrepresent groups, including exploring options to join with external networks (other FRS's and national networks)	Area Commander Response & Resilience	Nov-23	Jun-24	• Established networks which feed into the EDI group. • Increase in the number of staff networks from underrepresented groups. (internal or external).	Attendance at regional staff network group, and Black and LGBT networks. Women's network meetings planned. Attendance at AFSA south east region meetings and addressing inequalities group where best practice is shared. Neurodiversity working group set up, meetings planned to work on actions to celebrate Neurodiversity week. Neurodiversity support network to be launched after the celebration week	**On track**	**On track**	**On track**
3.2.4	Move to an annual staff survey supported by embedding the feedback loop. Utilise pulse surveys to support assessment of progress against specific actions.	Head of Technology, Transformation & PMO	Nov-23	Aug-24	•Maintain completion rate at 70+ percent •Increase "the Service will take action from the survey" score •Instigate action where the outcomes/scores are low	Supplier appointed, for a 3 year contract, to deliver an annual survey supported by 'pulse' surveys where needed. Linking the survey questions to the Vision and Values project to ensure alignment. Work underway to launch survey in April 2024.	**On track**	**On track**	**On track**
3.2.5	Investigate and implement reporting at senior level on whistleblowing/ Speak Up/ grievance/ disciplines/investigations to monitor, identify and take action on potential themes	HR Advisory & Development Manager	Jan-24	Mar-24	• Increased visibility of issues being raised and the Service's lessons learnt through regular reporting internally and externally on activity • Additional activity to reduce reoccurrence of themes as and when identified	The Discipline and Grievance procedures have been updated to improve processes, for example the Commissioning Manager now take ownership of recommendations made within investigation reports and for ensuring they are implemented on conclusion of the process by the relevant delegated owner. Recommendations will be scrutinised, and appropriate action taken. Detailed records of recommendations and actions are maintained within Human Resources. The Whistleblowing procedure has been updated The Anti-Bullying and Harassment procedure has been updated, to include reference to the Speak Up campaign Regular reporting takes place to the relevant senior manager and on a quarterly basis an update provided to the Heads of Departments on themes / areas for improvement. The numbers are small, so confidentiality is paramount. Any themes identified are escalated. Meeting with CFO, DCFO, Head of HR and HR Manager to discuss cases and process	**On track**	**Not started**	**Not started**
3.2.6	Ensure all line managers have regular structured contact with all their staff	Organisational Development Manager	Apr-24	Mar-25	• The development pathway programme includes training/ education on being a people manager. • Increased percentage of staff who have a 121 every month	Incorporated into the Development and Assessment Pathway Programme	**Not Started**	**Not Started**	**Not Started**

3.3.1	Relaunch the Equality Monitoring campaign encouraging individuals to input their own equality data on the HR system in a safe and secure environment, supported by ongoing communications.	Head of Human Resources	Jan-24	Jul-24	• A continuous increase of equality data being inputted. • Increased messaging about the benefits of a diverse workforce and the reasons for declaration.	Plan for review written. Spoke to PM ref linking with Positive engagement article. Time mapped in weekly to work on actions. Quarterly reporting form Data team in place. Spoke to Marcomms ref Comms plan and next steps	**On track**	**Not Started**	**Not Started**
3.3.2	To review recruitment and promotion processes to ensure they include and promote the importance of staff providing their equality data.	Head of Human Resources	Feb-24	Apr-24	• Increase of equality data. • Staff know how to enter their equality data.	As 3.3.1	**Not Started**	**Not Started**	**Not Started**
3.3.3	To embed a process to monitor EDI data completions with a quarterly update to the Leadership team to identify if particular teams require additional support to understand why completion is of benefit.	Head of Human Resources	Apr-24	Jun-24	• Ability to identify areas of the service that require additional support/training. • Better understanding of the diversity of the workforce through ongoing data tracking.	As 3.3.1	**Not Started**	**Not Started**	**Not Started**
3.3.4	A quarterly review of equality data by the EDI group to ensure we have an understanding of the workforce demographics and needs. Appropriate action taken where necessary.	Head of Human Resources	Apr-24	Jun-24	• Increase in the availability of data which will allow the organisation to make more informed decisions that will have a positive impact.	As 3.3.1	**Not started**	**Not started**	**Not started**
3.4.1	Develop a programme of works to ensure all workplace facilities (both on premises and at incidents) meet the needs of current and future staffing demographics.	Area Commander Response & Resilience	Nov-23	Mar-25	• Review of premises facilities • Programme in place to improve identified gaps • Welfare facilities in place at incidents • Adequate facilities in place for all protected characteristics	Property Station standards visits planned to engage and review with employees on station requirements. Following this a gap analysis will be drawn up and actions and timescales agreed. Motorised main door in place at HQ and Blue Light Hub, multi faith / quiet room in place at Aylesbury and Broughton. Newport Pagnell facilities improvements - female dormitory due for completion at the end of March.	**On track**	**On track**	**On track**
3.4.2	Introduce a sustained "Have a Go" operational programme for identified underrepresented groups, including a plan for positive action, offering a range of targeted activities across the county.	Station Commander HR Projects	Dec-23	Nov-24	•Annual programme in place including at least six "Have a Go" events held for underrepresented groups per year. •A clear plan in place to deliver and maintain positive action.	A Positive engagement Have a Go session was held at SHQ on 12 January for a small group (13)of under represented candidates from the current Wholetime campaign and included an On Call applicant. This enabled us to understand the barriers they experience better, and look at ways of supporting them prior to the selection tests. 16 physical training and focus workshops have been programmed in prior to the role related tests. Further workshops will follow on interview and presentation techniques, the programme is also being rolled out to those from under represented groups who are attending the on-call Have a go events. Further work is required on a programme of Have a go to be held throughout the year, and prior to and during recruitment campaigns	**On track**	**Not started**	**Not started**
3.4.3	Map out and review recruitment process end to end to understand impact on different underrepresented groups, including the applicants' feedback at various stages of the application.	Station Commander HR Projects	Jan-24	Jun-24	• Recruitment processes are adapted. • Increased uptake from underrepresented applicants. • Data collected from applicants will be used to inform process changes.	This action will commence after the current recruitment campaign has been completed. Learns form previous campaigns will be reviewed. Areas of focus, barriers for applicants and essential joining criteria will be mapped out and scrutinised to ensure equality of access. Barriers during selection processes will be reviewed and changes made accordingly.	**On track**	**Not Started**	**Not Started**
3.4.4	Identify and report on areas of underrepresentation within the Service, identifying groups we would benefit from attracting across all levels,	HR Operations Manager	Jan-24	Oct-24	•Relevant and up-to-date data which can be used to inform recruitment actions	HR are planning to break down information ready to analyse and report on, our internal data and how it compares to our community, so we can decide which groups to attract and work on how to do so. For example, the average population demographics (As reported in the 2021 Census): Female – (428,451) 51% of the overall population within Buckinghamshire & Milton Keynes Buckinghamshire Fire & Rescue Service demographics: Of 126 Support Services staff, 58% Female Of 360 operational members of staff, 6.5% Female	**On track**	**Not Started**	**Not Started**
3.4.5	Ensure recruitment resources are utilised to ensure more applications from diverse/underrepresented people from our local communities.	HR Operations Manager	Jan-24	Oct-24	• Engagement/recruitment activities such as career fairs are prioritised to those that meet our target audiences • More applications from diverse/underrepresented applicants	HR attend different recruitment fairs/events and have others planned to target audiences with the outcome of receiving more applications from under represented groups. We are approached to attend a lot of events across the County, decisions are made based on the value and engagement we believe we will get from them. A plan for the events is mapped out and the HR team work with stakeholders from across the service to ensure we get the most from them. The merchandise and equipment and personnel who attend is reviewed regularly to ensure it has the optimum impact.	**On track**	**Not Started**	**Not Started**