

SKPI Status Overview – Quarter 2 2025/26

Key:	
Blue	Over performance against the tolerance levels
Green	Performance is within the tolerance levels
Red	Under performance against the tolerance levels

Preventable Water, Road and Fire Deaths

SKPI	Performance (actual to date)	Target (tolerance)	Direction of Travel	Q3 forecast
The number of Safe and Wells achieved by the Service	12,243	11,750	Improving	Green
The number of children engaged in prevention education activity	11,159	15,000 (Q2 tolerance n/a)	No change	Green
The number of accidental dwelling fires	717	716 (681 – 730)	No change	Green
The number of accidental fires in non-domestic premises	220	167 (151 – 175)	Declining	Red
The number of deliberate fires in derelict buildings	79	100 (80 – 110)	No change	Green
The number of false alarm calls due to fire alarm equipment in dwellings	3105	3127 (3065 – 3189)	No change	Green
The number of false alarm calls due to fire alarm equipment in non-domestic premises	706	702 (688 – 716)	No change	Green
The number of statutory consults completed in timeframes:				
a) % of target met for building regulation consults	98.33%	85%	No change	Blue
b) % of target met for planning application	98.4%	90%	No change	Blue
c) % of target met for licensing applications	94.25%	90%	No change	Green
Risk-based attendance standard	4:58	5 minutes (Cat 1 High-Risk)	Declining	Green
Risk-based attendance standard – call handling	77 seconds	80 seconds (80 - 85 seconds)	Improving	Green

Strengthened Community Engagement

SKPI	Performance (actual to do)	Target (tolerance)	Direction of Travel	Q3 forecast
Percentage of Safe and Well visits referred by our partners	45.2%	55%	No change	Red
Percentage of public and staff trust in Service communications	TBD	90% (+/- 10%)	n/a	n/a

Staff Trust

SKPI	Performance (actual to date)	Target (tolerance)	Direction of Travel	Q3 forecast
Percentage of staff with protected characteristics and their role within the Service				
a) Gender	26.9%	27.6% (+/-5%)	No change	Green
Percentage of staff with protected characteristics and their role within the Service				
b) Ethnicity	15.0%	15.5% (+/-5%)	No change	Green
Percentage of staff with protected characteristics and their role within the Service				
c) Gender Pay Gap	5%	4.5%	n/a	n/a
Percentage of staff with protected characteristics and their role within the Service				
d) Ethnicity Pay Gap	5%	3%	n/a	n/a
Percentage of staff trust in the Service	Will be reported Q4	n/a	n/a	n/a
Percentage of completed appraisals	89.66%	100% (90%)	Choose an item.	Choose an item.
Total number of injuries	89	30 (3-year average minus 5%)	n/a	n/a
Total number of RIDDOR injuries	10	6	n/a	n/a

		(3-year average minus 5%)		
Average number of working days / shifts lost due to sickness – uniformed and Fire Control staff	1.88 (Q2 figure)	1.95	Improving	Green
Average number of working days / shifts lost due to sickness – non-uniformed staff	3.44 (Q2 figure)	2.01	Declining	Red
Average number of working days / shifts lost due to sickness – all staff	2.25 (Q2 figure)	1.97	Improving	Red

Productivity

SKPI	Performance (actual to date)	Target (tolerance)	Direction of Travel	Q3 forecast
Percentage of core skills assessment compliance	92%	100% (95%)	Choose an item.	Green
Improvement in a range of productivity measures	7.7%	3% increase (averaged across all of our productivity measures)	Improving	Green

Optimal Efficiency and Innovation

SKPI	Performance (actual to date)	Target (tolerance)	Direction of Travel	Q3 forecast
Percentage achievement of current and reviewed Business Continuity Plans (BCPs)	92%	100% high priority BCPs (75%)	Improving	Green
IT Operations Metric	99.59%	99.99% (+0.01% to -0.49%)	No change	Green
Cyber Standards Compliance	91.77%	95% (+5% to -10%)	Improving	Green
Statutory Data Compliance	76.5%	95% (+5% to -10%)	Improving	Green
Set a balanced budget at the beginning of the year and spend within that budget	5.4%	3.5%	No change	Blue
Identify service changes and other efficiencies that can be delivered from 2026/27	Not Applicable	£1.6M	n/a	Green

Carbon Neutral

SKPI	Performance (actual to date)	Target (tolerance)	Direction of Travel	Q3 forecast
Total Service carbon footprint / output	Due to the switch to a Green Tariff, CO2 from purchased electricity has reduced by 100%. Full carbon footprint is calculated annually.	Not to rise above 3022 tCO2e for the year. The current usage will fluctuate Qtr on Qtr.	Improving	Blue
Service Gas usage (KWH and Carbon Tonnes)	2,175,460 kWh (Some billing data is pending; however, it's anticipated that the RAG rating will remain blue)	1,387,512.9 kWh	No change	Green
Electricity usage (KWH and Carbon Tonnes)	1,792,323 kWh (Some billing data is pending; however, it's anticipated that the performance rating will actually be red)	2,834,409.3 kWh	No change	Green

Executive Summary

Service Delivery

SKPI	SKPI Owner	Key Takeaways from performance review & high-level associated actions In this box articulate a brief high-level summary of performance with reason plus what action is being taken as a result.	Strategic Ambition Alignment
The number of Safe and Wells achieved by the Service	Martin Ward-White	<p>YTD Actual: 12, 243 (within tolerance levels) YTD Target: 11,750</p> <p>Q2 Actual: 6,386 (above upper tolerance level for the qtr) Q2 Target: 5,875</p> <p>Q2 has met the quarterly target which is the first time this has been achieved since the SKPI previously changed to a points-based system. The change mid-year 2024/25 to a minimum quantity-based target has provided greater clarity in expectations on number of Safe and Wells (SAW) to be completed by crews. This along with greater flexibility for crews to generate referrals locally have helped increase the number of referrals and visits completed. There has been a particular push in Q2 to exceed the target as historical trends show that over the Christmas period SAWs reduce. The over performance in Q2 is therefore expected to balance out over the back end of Q3 and the start of Q4.</p> <p><u>What are our Actions</u></p> <p>Crews will remain committed to generating and delivering a greater number of SAWs in line with monthly and quarterly targets whilst ensuring a proportionate spread between High, Medium and Low risk properties. For Q2 the breakdown of numbers were: H-4,081; M-1,433; L-585.</p>	Preventable Water, Road and Fire Deaths

<p>The percentage of Safe and Well visits referred by our partners</p>	<p>Emily Fernandez</p>	<p>There has been a focus in Operations on achieving the Number of Safe and Wells (SAW) target. One of the impacts has been that the target for percentage of SAWs from Partner referrals has not been achieved.</p> <p>Analysis of the number of SAWs from partner referrals shows that compared to Q1 and Q2 there were more than 1,000 additional SAW referrals from partners compared to the same period this financial year. Over the same period the percentage reduced by nearly 10%. The reduction in the percentage is therefore due to the additional number of SAWs from self-referrals or proactive initiatives rather than a reduction in SAWs from partners.</p> <table border="1" data-bbox="712 655 1751 956"> <thead> <tr> <th>Year</th> <th colspan="4">2024-25</th> <th colspan="2">2025-26</th> </tr> <tr> <th>Qu</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> <th>Q1</th> <th>Q2</th> </tr> </thead> <tbody> <tr> <td>SAWs from Partner</td> <td>2,202</td> <td>2,531</td> <td>2,954</td> <td>3,212</td> <td>2,882</td> <td>2,887</td> </tr> <tr> <td>% of total SAW</td> <td>53.0%</td> <td>54.6%</td> <td>49.3%</td> <td>52.0%</td> <td>48.2%</td> <td>43.8%</td> </tr> </tbody> </table> <p>There is a pilot in Birmingham North whereby the Prevention Team is supporting crews to evaluate the effectiveness of existing partnerships and to establish new ones. Once the approach has been tested, the plan is to roll out across the brigade before the end of the current financial year.</p> <p>Crews undertake a lot of work to generate High risk referrals that doesn't get captured as part of this SKPI. To better measure this work and evaluate the effectiveness we are planning to explore revising the SKPI to be a wider measure of Collaboration – covering the existing work with partners but also work with groups and other initiatives that could generate high risk referrals.</p>	Year	2024-25				2025-26		Qu	Q1	Q2	Q3	Q4	Q1	Q2	SAWs from Partner	2,202	2,531	2,954	3,212	2,882	2,887	% of total SAW	53.0%	54.6%	49.3%	52.0%	48.2%	43.8%	<p>Strengthened Community Engagement</p>
Year	2024-25				2025-26																										
Qu	Q1	Q2	Q3	Q4	Q1	Q2																									
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		<p>Work is underway to determine the best way of defining and recording this work with a view to proposing changes to the SKPI for 2026-27.</p> <p>What are our actions:</p> <ul style="list-style-type: none"> • High level stakeholder mapping commencing to target strategic discussions with Local Authorities, Integrated Care Boards and NHS Trusts. • New SAW referral pathway being piloted in Bham North - designed to equip crews with the tools and give them the confidence to generate local partnership referrals. • Station Risk Profiles being developed in collaboration with Strategy Team to support crews with understanding their local demographic and target vulnerable persons • Partners receiving training on the benefits of a SAW and which service users they should be targeting <ul style="list-style-type: none"> a) A partnership event is being planned for November, to raise the profile of our prevention offer, educate partners on our service, support their understanding of our reciprocal referral mechanisms and increase partners referrals of high risk vulnerable individuals into the service for a SAW. 	
<p>The number of children engaged in prevention education activity</p>	<p>Emily Fernandez</p>	<p>Q2 permanence against this SKPI is often lower due to the period covering the summer holidays. Qs 3 and 4 often even out in terms of number of children engaged in prevention activity.</p> <p>The Prevention department continually monitor the component parts of our prevention education interventions.</p> <p>What are our actions:</p>	<p>Preventable Water, Road and Fire Deaths</p>

		<ul style="list-style-type: none"> • Continue to monitor our core service indicators. • Work with Ops admin to target our educational initiatives to pupils in schools with >60% pupil premium. • Forecast our education interventions based on existing bookings made. • Devise a plan where forecasted numbers are not aligned to target. 	
<p>The number of accidental dwelling fires</p>	<p>Martin Ward-White</p>	<p>Q2 Narrative</p> <p>Performance for Q2 is 339, -0.9% or 3 below the quarterly target set at 342. Looking across the year to date, the actuals are 717 against a target of 716 (+1).</p> <p>Most incidents are attributable to cooking or electrical issues. These causes form part of the areas covered by the SAW offer the Service makes to high and medium risk dwellings.</p> <p>Apart from August, the two other months in Q2 was within target. All but Birmingham South have performed within the tolerance for Q2. Whilst July and August Birmingham South was outside of the target, September has seen this command over perform against the target. In Q1, Birmingham South was within tolerance which may suggest that the rise in incidents for July and August has been a temporary issue for the command.</p> <p>What are our Actions</p> <p>We will continue to monitor Birmingham South to see if the rise in Accidental Dwelling Fires (ADF) was confined to July and August in Q2 and not part of a more sustained increase in ADFs for the command. If not we will look to</p>	<p>Preventable Water, Road and Fire Deaths</p>

		<p>increase the number of SAWs carried out in the areas we can identify as seeing an increase (Sparkbrook, Sheldon and Weoley & Selly Oak wards).</p>						
<p>The number of accidental fires in non-domestic premises</p>	<p>Gemma McSweeney</p>	<p>3-year average YTD is 181, quarter 2 performance is 106 incidents against a quarterly target of 88.</p> <p>In Q2 all commands are in exception except for Black Country South Command.</p> <p>Highest contributing area is Birmingham North Command.</p> <div data-bbox="712 592 1630 1062" style="border: 1px solid #ccc; padding: 5px; margin: 10px 0;"> <p>Accidental Non-Domestic Fires - up to end of September</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="background-color: #800000; color: white; padding: 5px;">Birmingham North 29</td> <td style="background-color: #800000; color: white; padding: 5px;">Black Country North 20</td> <td rowspan="2" style="background-color: #800000; color: white; padding: 5px;">Coventry... 14</td> </tr> <tr> <td style="background-color: #800000; color: white; padding: 5px;">Birmingham South 26</td> <td style="background-color: #008000; color: white; padding: 5px;">Black Country South 17</td> </tr> </table> </div> <p><u>What are our Actions</u></p> <p>Total safe and Strongs that have been carried out by Operations</p> <p>Q1: 120 accepted, 30 declined = 156</p> <p>Q2: 245 accepted, 45 declined = 290.</p>	Birmingham North 29	Black Country North 20	Coventry... 14	Birmingham South 26	Black Country South 17	<p>Preventable Water, Road and Fire Deaths</p>
Birmingham North 29	Black Country North 20	Coventry... 14						
Birmingham South 26	Black Country South 17							

		<p>We have reviewed our audit strategy which has now introduced a target number of audits to be carried out in commercial properties. Themes of these property types will be monitored and will feature as part of Protections Education and Engagement plan.</p> <p>Fire Safety have a process whereby any accidental non-domestic property goes onto a fire safety task list. This list is triaged with a number of outcomes that can be proposed, for example: audit is required, refer to internal dept, refer to external agencies, advice given or no action required. The monitoring of these outcomes will be strengthened to give indications of the actions taken by Protection to feature in reporting. This will provide assurances that where an intervention (Engagement, Education or Enforcement) has been carried out, we will be able to report our actions as a result of the fire. This will also be a mechanism for safe and strong and auditing targeting.</p> <p>We have increased the number of Fire Safety Advisors as we have been working under establishment through Q1 and Q2 whilst we transition through a change of terms and conditions and where our Fire Safety Advisors have naturally progressed into Fire Safety Inspector roles. This will increase Protections capacity to directly target nondomestic properties and fire safety concerns for Q3.</p> <p>Additionally, the revised Auditing Strategy enables FSIs to deliver a number of their activities at premises based on local intelligence/incidents.</p> <p>Since the revision of our audit strategy, we have seen an increase in our audit numbers which brings us on track to be in line with national average by the next reporting quarter.</p>	
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The number of deliberate fires in derelict buildings	Martin Ward-White	<p>Q2 Narrative</p> <p>The number of incidents for Q2 remains within target at 43 against the target of 48. Year to date is 79 against the YTD target of 100 (-21% below YTD Target).</p> <p>Work has continued from Q1 with local authorities to apply legislative options to compulsory purchase land or enforce public protection legislation available to local authority. As a service we have increased our support for local authorities in obtaining these orders through the provision of data and risk information where we see trends in a geographical area that can be linked to derelict properties. This involves placing a duty on site owners to secure premises or the local authority issuing compulsory purchase orders should the site owners not engage.</p> <p>Examples include:</p> <ul style="list-style-type: none"> - Bill House, Handsworth (Community Protection Order) - Moat Street, Walsall Council (Compulsory Purchase Order) - Villiers Street, Walsall Council (Compulsory Purchase Order) 	Preventable Water, Road and Fire Deaths
The number of false alarm calls due to fire alarm equipment in dwellings	Gemma McSweeney	<p>This SKPI remains a continued area of focus within Protection and is currently being managed to prevent exception. Strategic actions have been implemented to target high offenders such as enhanced targeting of high offenders. Each quarter, Responsible Persons (RPs) of the top five offending premises receive formal correspondence from the Head of Protection outlining their legal responsibilities under the Fire Safety Order and the operational and financial impacts of repeated false alarms on WMFS.</p> <p>High Offenders</p>	Preventable Water, Road and Fire Deaths

		<p>Brierley Hill – Crews identified spike worked with Fire Safety Advisors (FSAs). Fire Safety Inspector (FSI) conducted audit in August, continued monitoring of False Alarm Equipment (FAE’s)</p> <p>Bloxwich – Crews have attended, residents reluctant to engage with crews. FSI requested for audit. FSAs continuous monitoring.</p> <p>Bloxwich – Crews have engaged with residents. Audit requested by FSIs. FSAs continuous monitoring.</p> <p>Ladywood – Unusual spike in activations. Engage with management agent to identify activations. Cause has been identified and management working with Tall Buildings Team. FSAs to monitor.</p> <p>Aston – Ongoing battle for management agent, previous interaction by crews bought down FAEs. Increase of FAEs again, FSAs working with management agent to reduce FAEs. Continuous monitoring.</p> <p>Coventry – Spike in FAEs due to faults, since building has been decanted. LOR has been reduced and working with management.</p> <p>What are our Actions</p> <p>As part of the ongoing Automatic Fire Alarm review, we are quality assuring incidents to ensure that a proportionate mobilisation aligned to policy is happening.</p> <p>This is performed on a monthly basis and aims to understanding any impact to Operations (PRL’s) in relation to Business Support Vehicle (BSV) availability. Additionally continued liaison with Alarm Receiving Centres and Housing Providers to build stakeholder awareness around potential future changes that WMFS may implement to risk based mobilising policies.</p>	
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<p>The number of false alarm calls due to fire alarm equipment in non-domestic premises</p>	<p>Gemma McSweeney</p>	<p>High Offenders</p> <p>Smethwick – High number of FAEs due to accidental break glass actuations. Crews have worked with management who have fitted battery squealers to problematic call points, improved signage and given staff training. There will be continuous monitoring by FSAs.</p> <p>Ward End – Slight increase in FAEs, although within tolerance. Bucket has been reopened and engagement with Fire Safety Manager and FSA. Continuous monitoring.</p> <p>Fallings Park – Increase in FAEs for various reasons although within tolerance. Bucket has been reopened to monitor.</p> <p>What are our Actions</p> <p>As part of the ongoing AFA review, we will monitor incidents to assure proportionate mobilisation and alignment to current policy. This will be performed on a monthly basis and will also aim to proactively support understanding of impact to Operations in relation to BSV availability.</p>	<p>Preventable Water, Road and Fire Deaths</p>
<p>The number of statutory consults completed in timeframes:</p> <p>a) % of target met for building regulation consults</p>	<p>Gemma McSweeney</p>	<p>98.33% for all Building Reg applications within the time frame of 15 days. (991 Hours)</p> <p>Exceeding the target and tolerance set. 8 building reg applications have been completed but the deadline not met for the quarter.</p> <p>Due to individuals starting the Fire Engineering degree away at university and an increase in Building Safety Regulator (BSR) gateway 2 Applications.</p> <p>Backfilled staffing to provide resilience. Continue to monitor the allocation of staff on courses, the impact and the balance.</p>	<p>Preventable Water, Road and Fire Deaths</p>

b) % of target met for planning application		<p>98.49% for all planning applications within time frame of 21 days. (384 Hours)</p> <p>Exceeding the target and tolerance set. 3 planning applications have been completed but the deadline not met for the quarter.</p> <p>Due to individuals starting the Fire Engineering degree away at university and an increase in BSR gateway 2 Applications.</p> <p>Backfilled staffing to provide resilience. Continue to monitor the allocation of staff on courses, the impact and the balance.</p>	Preventable Water, Road and Fire Deaths
c) % of target met for licensing applications		<p>New Applications – 91.4% deadline met.</p> <p>Variants Applications – 94% deadline met.</p> <p>Oher Applications – 100% deadline met.</p>	Preventable Water, Road and Fire Deaths
Risk-based attendance standard	Martin Ward-White	<p>The risk-based attendance standard has returned to within target following it being over by 5 seconds in Q1. The Q2 figure was 4 min 51 sec, 9 seconds below the 5-minute target. The main reason in Q2 for attendance times exceeding the 5-minute target is due to resources travelling to incidents on other station areas. For Q2 we have seen a 1 second drop in our reaction times, down from 55 for Q1 to 54 in Q2. We have also seen an improved picture with respect to sickness and stability in Voluntary Additional Shifts (VAS), with operational sickness reducing in Q2 and new VAS business rules seeing a 60% reduction in VAS cancellations which improves staffing.</p> <p><u>What are our Actions</u></p> <p>The SKPI will continue to be monitored. Whilst road variables may be beyond our control, we continue to look to improve sickness and restricted duty cases which contribute to fleet availability.</p>	Preventable Water, Road and Fire Deaths

Risk-based attendance standard – call handling	Ella Warden	<p>80 Second target achieved for four consecutive quarters, with consistent performance in all three months of Q2 25/26.</p> <p>Evidence of consolidation around the 77/76 second position, with a flattening curve. Evidence of a sustainable achievement.</p> <p>It is anticipated we may see an increase in call handling time over the next quarter due to the command-and-control training, meaning a lot of cross-watch working.</p>	Preventable Water, Road and Fire
Percentage achievement of current and reviewed Business Continuity Plans (BCPs)	Ella Warden	<p>Q2 25/26 - Target 86% - Current – 92%</p> <p>There are three areas currently under review:</p> <ul style="list-style-type: none"> • Fatalities and Serious Injury within WMFS (previously called Crisis Management Plan) - expected completion end of Oct 2025 • Industrial Action (expected end 2025) • Pandemic (expected completion end of Nov 25 following testing within Exercise Pegasus) 	Optimal Efficiency and Innovation
Improvement in a range of productivity measures	Martin Ward-White	<p>There has been a 7.7% improvement in productive of crews which has largely come in Q2 from the increase in number of SAWs and Safe & Strongs (S&S) and the work that goes on around this generating the referral. Productivity across the service remains difficult to measure in the absence of metrics provided by departments outside the SKPI and core indicator recording.</p> <p><u>What are our Actions</u></p> <p>There is an ask on all departments to consider productivity measurements as part of their delivery plans for 2025/26. This will be with the view to generating a greater number of productivity measures where the activity in a department directly or indirectly contributes to operational output.</p>	Productivity

Service Support

SKPI	SKPI Owner	Key Takeaways from performance review & high-level associated actions In this box articulate a brief high-level summary of performance with reason plus what action is being taken as a result.	Strategic Ambition Alignment
Percentage of public and staff trust in Service communications	Mark Hamilton-Russell	<p>In order to receive updates on a regular basis, on 9.9.25 we started to ask a new set of communications-focused questions during Station Peer Assessment (SPA) sessions to provide regular data. Data to date is based on responses from a sampling approach to surveying staff (34), but the process will help to gauge staff feeling pending the next all-staff survey.</p> <p>Due to current small sample numbers, we are unable to provide a true reading for this quarter. It is anticipated that we will have sufficient data to provide a reading for quarter four.</p>	Strengthened Community Engagement
IT Operations Metric	Kash Singh	IT Operations continues to remain within tolerance; we expect this to improve further once we have concluded our command-and-control project.	Optimal Efficiency and Innovation
Cyber Standards Compliance	Kash Singh	Ongoing efforts to ensure the full workforce are trained continue, we continue to make good progress towards the first of our cyber standards, which will reduce our related corporate risk.	Optimal Efficiency and Innovation
Statutory Data Compliance	Kash Singh	<p>There has been positive movement of 6.5%, currently we are operating at 76.5% compliance.</p> <p>We expect that this trend will continue over the next reporting period bringing this metric back into tolerance.</p> <p>We have increased the resourcing this this area and implemented a new system and real time dashboard to ensure that that this metric can be closely monitored and remains in tolerance.</p>	Optimal Efficiency and Innovation

Set a balanced budget at the beginning of the year and spend within that budget	Iain Newman	<p>Based on P6 monitoring, the forecast General Reserve at 31st March 2026 as a percentage of the forecast budget for 2026/27 (based on the Medium Term Financial Strategy (MTFS) approved in February 2025) is 5.4%.</p> <p>For the average fire and rescue authority as at 31st March 2025, the General Reserve as a percentage of 2024/25 net revenue expenditure was 6%.</p> <p>These measures should be fully aligned for 2026/27 SKPIs.</p>	Optimal Efficiency and Innovation
Identify service changes and other efficiencies that can be delivered from 2026/27	Iain Newman	<p>Early debt repayment on 31st July 2025 will generate full year savings of approximately £0.2m per year on net interest costs. Review of capital financing has identified reduced Minimum Revenue Provision of £0.4m per year. Devolved Departments targeted to identify net savings options of £0.8m per year. The actual level of savings required will be determined when the Provisional Local Government Finance Settlement is received in December. Savings proposals to Fire Authority will be considered by Senior Leadership Team on 18th December.</p>	Optimal Efficiency and Innovation
Total Service carbon footprint / output	Mark Hamilton-Russell	<p>WMFS now sources its electricity from a supplier that provides green energy. This transition ensures that all electricity consumed by the service is carbon-neutral, aligning WMFS with national net-zero targets and significantly reducing its carbon footprint.</p> <p>1. Strategic Impact Carbon Neutrality: All electricity used is now sourced from a clean, green tariff</p> <p>2. Mitigation Plan To build on this achievement, WMFS will implement a phased mitigation strategy aimed at reducing overall energy consumption and enhancing efficiency:</p>	Align to a Carbon Neutral - target by 2036 Net Zero target by 2041

		<p>a. Phase 1 (Q3/4 2025): Ongoing audit of energy usage across all sites to identify high-consumption areas and inefficiencies.</p> <p>b. Phase 2: Ongoing rollout of smart metering and automated energy management systems. This will improve on actual live data.</p> <p>c. Phase 3 (Q1–Q3 2026): Ongoing upgrade of lighting with passive infrared (PIR) systems to low-energy alternatives, based on the Estates Improvement Programme; staff training on energy-conscious practices.</p> <p>WMFS gas supplier is Total Gas through Crown Commercial Services (CCS) and has been for the past few years. The contract is due for review in Feb 2027 which could support a more favourable tariff, the adding of smart meters will also support actual usages as the info above.</p>	
<p>Service gas usage (KWH and Carbon Tonnes)</p>	<p>Mark Hamilton-Russell</p>	<p>Currently below target level. Q2 target 981,444.9kWh – actual consumption (July and August) 500,535 kWh. Some billing data is still pending; however, it is anticipated that we will remain below target.</p> <p>The actual usage of both Gas and Electric needs further analysis based on the whole estate vs the total target and based on the year on year % reduction of output.</p>	<p>Align to a Carbon Neutral - target by 2036 Net Zero target by 2041</p>
<p>Electricity usage (KWH)</p>	<p>Mark Hamilton-Russell</p>	<p>Currently below target level. Q2 target 909,603 kWh – actual consumption (July and August) 703,798 kWh. Some billing data is still pending; it is therefore anticipated that we will exceed our Q2 target.</p> <p>The actual usage of both Gas and Electric needs further analysis based on the whole estate vs the total target and based on the year on year % reduction of output.</p>	<p>Align to a Carbon Neutral - target by 2036 Net Zero target by 2041</p>

People

SKPI	SKPI Owner	Key Takeaways from performance review & high-level associated actions In this box articulate a brief high-level summary of performance with reason plus what action is being taken as a result.	Strategic Ambition Alignment
Percentage of staff with protected characteristics and their role within the Service	Kelly Harding	<p>In Q2 2025/26, workforce diversity performance remained within tolerance levels, maintaining a green rating across both gender and ethnicity measures. Female representation stands at 26.9% against a target of 27.6%, reflecting stability compared to previous quarters. The workforce includes 502 women overall, with higher representation among non-uniformed (57%) and fire control staff (88%), but continued underrepresentation among uniformed employees (14%). To address this, targeted positive action continues through firefighter recruitment activities such as taster days, meet and greet sessions, and awareness initiatives. The launch of the “Ignite Programme”, a female-only pre-recruitment pathway, alongside the “Fire-Start Fitness Programme”, will provide structured, inclusive support to help women engage confidently with the recruitment process. Despite balanced inflows and outflows of female staff (net change 0), the overall direction of travel remains static, indicating that sustained efforts are needed to drive further improvement.</p> <p>Ethnicity representation also remains on target, with 15% of the workforce identifying as being from underrepresented backgrounds, against a 15.5% target. This includes 18% of non-uniformed, 15% of uniformed, and 3% of fire control staff. Recruitment data shows that 16% of new firefighter recruits this year were from underrepresented communities, though ten leavers have resulted in a slight net reduction. Positive action initiatives continue to focus on community engagement and partnership development, including outreach through gyms, swimming clubs, and other diverse community spaces. Looking ahead, the Service will maintain its proactive recruitment and inclusion programmes, strengthen community partnerships, and deepen analysis of</p>	Staff Trust

		retention patterns to ensure lasting progress. Overall, while performance is stable and within target thresholds, both gender and ethnicity data highlight the need for continued, focused action to translate engagement and recruitment initiatives into measurable long-term representation gains.	
Percentage of staff trust in the Service	Kelly Harding	This data will be provided at Q4, with a proposal to measure this moving forward to be discussed with SLT in preparation for 2026/27.	Staff Trust
Percentage of completed appraisals	Marc Hudson	<p>Appraisals have been re-introduced this year following the introduction of Oracle into the service. Appraisals have replaced the former Personal Development Reviews (PDRs), which were mainly focussed on Operations. Positive progress has been made throughout 2025 to embed Appraisals into business as usual with 89.66% of all staff having had an appraisal. It is however, that there is still some way to go to ensure that all staff (100%) throughout the service have a completed appraisal.</p> <p>Appraisals are hugely important as they will be the first stage in our talent management process and will be instrumental in identifying and supporting development and progression throughout the service, including encouraging those from under-represented groups within the service to explore progression through meaningful conversation with their Line Manager.</p> <p>The People Development team are currently undertaking a review of the appraisal system following the first year in operation to better understand what works well for the end users and what areas of the system can be changed to provide a more user friendly, more simplified approach to appraisals, whilst still capturing the details of the appraisal conversations.</p> <p>January 2026 the service will reset expectation for all staff to undertake a fresh appraisal with a 6month review period set for June 2026. It is envisaged that</p>	Staff Trust

		<p>with the updates to the system and with the end user feedback and commitment from the Senior Leadership Team, the service will increase the levels of appraisals to the targeted level of 100% of all staff. As the expectation will be set to renew appraisals in January 2026, I anticipate that the appraisal data will be similar in the next quarter as it is in this quarter.</p>	
<p>Percentage of core skills assessment compliance</p>	<p>Marc Hudson</p>	<p>Incident Command forms part of the new operational training and development model, with changes made to Incident Command development mid-2024. As a result of the changes and the central management of performance (like what will be the case with the other core skills) the data for Incident Command is currently 98.68% an improvement on previous years.</p> <p>The service has now rolled out the new centrally coordinated training and assessment model which is based on a 2-year cycle of training, development and assessment for all core skills.</p> <p>In conjunction with this was the introduction of the revised competency expectation, providing a more robust assurance picture to the authority of our staff's operational core skills competency.</p> <p>As the new training and competency model went live on the 1st April 2025, it won't be until 1st April 2027 that all operational personnel have cycled through all the core skills disciplines.</p> <p>The introduction of the new model has meant that some operational personnel will likely fall out of their 2-year competency for Breathing Apparatus as the new model embeds and rolls through the full 2-year cycle.</p> <p>To mitigate the risk of this specifically with Breathing Apparatus, a mitigation plan has been developed between the Operational Training & Development department and Operations – this mitigation plan will ensure that all of our</p>	<p>Productivity</p>

		<p>staff will have a valid 'hot wear' assessment for Breathing Apparatus in line with the guidance within the National Operational Guidance (N.O.G) document throughout the embedding period of the new training model.</p> <p>It is anticipated that by the next quarterly reporting, Breathing Apparatus competence will be within tolerance level of 95%+.</p>	
Total number of injuries	Marc Hudson	<p>The service takes its responsibilities around Health and Safety extremely seriously and has a series of Health & Safety related meetings which escalate issues from a local level to brigade wide. West Midlands Fire Service also chairs the regional group which in turn feed into the National NFCC Health & Safety meeting.</p> <p>There has been a significant increase in injuries throughout this quarter comparative to the 3 yearly averages. Analysis of the data is conducted to look for trends, but the service very much encourages the reporting of accidents, injuries and near misses and view this as part of a healthy Health & Safety culture. This is reinforced within the training as described below and may be contributing to the increased number of injuries being reported.</p> <p>Accident and Injuries including RIDDOR reportable are monitored for trends and discussed at the brigade quarterly performance meeting. All accidents will be investigated to varying degrees and information fed into the brigade committee – through quarterly performance.</p> <p>Struck By/Struck Against is continuing to become an emerging theme, additional analysis is being undertaken and will be discussed at the Brigade wide health and safety meeting, it is also worth noting that this has been discussed at the Regional Health and Safety committee where a theme appears to be emerging. This will be monitored and further information provided.</p>	Staff Trust

		<p>A review of data spanning a wider data set than the previous 12 months will now be commissioned to extract any trends over a longer period to support organisational learning.</p> <p>The service has also invested in an additional post to roll-out H&S training across the service, commencing with managers (supervisory and above) with a view that further Health & Safety training will be rolled out for all individuals.</p> <p>There is also a programme of workplace audit inspections across all Fire Stations but is now being rolled out across all workplaces with training locations completed, with Transport, Engineering and Workshops next to be audited.</p> <p>To supplement this programme of audit, the service participates in a regional peer audit programme which focuses on specific themes such as Breathing Apparatus or Personal Protective Equipment as examples.</p>	
Total number of RIDDOR injuries	Marc Hudson	<p>The service takes its responsibilities around Health and Safety extremely seriously and has a series of Health & Safety related meetings which escalate issues from a local level to brigade wide. West Midlands Fire Service also chairs the regional group which in turn feed into the National NFCC Health & Safety meeting.</p> <p>Accident and Injuries including RIDDOR reportable are monitored for trends and discussed at the brigade quarterly performance meeting.</p> <p>There has been 5 RIDDOR reports for Q2, which is the same as Q1 but less than the 7 RIDDOR reports the same period last year (Q2 2024).</p> <p>All accidents will be investigated to varying degrees and information fed into the brigade committee – through quarterly performance with any learning</p>	Staff Trust

		<p>being shared wider through the Organisational Learning and Intelligence team who feed into the Brigade Health & Safety meetings.</p> <p>It should be noted as a consideration that the current 2days, 2 nights, 4 days off shift pattern may inadvertently impact the number of RIDDOR reportable incidents due to people booking fit to work on their first day back at work on the 8th Day. Further analysis of this will be conducted and reported back at future meetings.</p> <p>In addition to the above and like injuries, a deeper dive of the data spanning a wider data set will now be conducted for the purposed of trend analysis and organisational learning.</p>	
Average number of working days / shifts lost due to sickness – uniformed and Fire Control staff	Kelly Harding	<p>Performance in Q2 25/26 shows continued positive progress, with an actual figure of 1.88 against a target of 1.95, remaining comfortably within tolerance levels (green). This reflects a sustained downward trend compared to the previous year’s higher figures (2.07 in Q2 24/25 and 2.28 in Q3 24/25), demonstrating the effectiveness of ongoing interventions. The improvement is largely attributed to the outcomes of the attendance management audit, which strengthened policy compliance and case management practices. Additionally, the introduction of new business rules around return-to-work (RTW) processes appears to have enhanced the level of support provided to staff, contributing to the reduction in sickness rates. The forecast for the next quarter remains green, indicating confidence in maintaining current performance levels.</p>	Staff Trust
Average number of working days / shifts lost due to sickness – non-uniformed staff	Kelly Harding	<p>In Q2 25/26, performance continues to fall below expectations, with an actual sickness rate of 3.44 against a target of 2.01, resulting in a red rating for underperformance against tolerance levels. This represents a continuing negative trend compared to previous quarters, where sickness rates have consistently exceeded targets — for example, 2.70 vs 1.49 in Q1 25/26, and</p>	Staff Trust

		<p>2.08 vs 1.41 in Q4 24/25. The persistently high sickness levels, particularly among non-uniform staff, indicate ongoing challenges in absence management and data reliability. In response, an audit is scheduled for November, mirroring the approach taken in operational areas, to strengthen accountability and ensure consistent application of sickness management policies. Additionally, a working group will be established to address data integrity issues and support improved monitoring and reporting. The overall outlook for the next quarter remains red, highlighting the need for continued managerial focus and strengthened policy enforcement to achieve sustained improvement.</p>	
<p>Average number of working days / shifts lost due to sickness – all staff</p>	<p>Kelly Harding</p>	<p>In Q2 2025/26, sickness rates of 2.25 underperforming against the quarterly target of 1.97 and rated red for performance. This represents a slight deterioration compared with Q1 2025/26 (Actual: 2.11) and a continuation of a rising trend since Q2 2024/25 (Actual: 2.09). This can be attributed primarily to the increase of non-uniformed staff sickness, with reporting inconsistencies between UKG and Oracle systems complicating trend identification. Specifically, at audit, 311 uniformed and 901 non-uniformed sickness days were identified without corresponding absence reasons, limiting managerial insight into causal factors.</p> <p>When benchmarked against other UK Fire and Rescue Services, WMFRS performs better than the national average of 2.43 shifts lost per person (Range: 0.58 days in West Sussex to 3.84 days in Northumberland), ranking 11th out of 38 services and the 2nd best performing Metropolitan Brigade (with only South Yorkshire having less sickness (0.61), indicating that while performance is below internal expectations, it remains comparatively strong sector-wide. It is anticipated that the forthcoming non-operational audit in</p>	<p>Staff Trust</p>

		November will improve data accuracy and support more targeted interventions to address sickness trends.	
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SKPI Detailed Analysis

Key:	
Blue	Over performance against the tolerance levels
Green	Performance is within the tolerance levels
Red	Under performance against the tolerance levels

Service Delivery

<i>The number of Safe and Wells achieved by the Service</i>			
Q2 25/26 Target: 5875 Actual to date: 6386 Rating: Over performance against the tolerance levels (blue)			Next quarter forecast Green
Q2 24/25 4524	Q3 24/25 5775*	Q4 24/25 6053	Q1 25/26 A: 5848 T: 5875
Commentary: For the 2 nd quarter in a row the SAW target has been achieved, with Q2 exceeding it by 511 SAW. This is due to greater localised actions from crews to generate referrals outside of partnerships but within the vulnerability matrix developed by Prevention. This has been proving successful given they are hitting the proportion of High, Medium and Low Risk referrals expected (H-4070, M-1432, L-585). This action will continue into Q3 where we hope to hit the number of SAWs completed target.			

*Please note that the way in which the SKPI was recorded changed in Q3 2024/25, moving from a points based system to one of quantity.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Improving

Added by: Alex Shapland

Date: 16/10/24

Percentage of Safe and Well visits referred by our partners

Q2 25/26 Target: 55% Actual to date: 43.8% Rating: Under performance against the tolerance levels (red)	Next quarter forecast Red
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Q2 24/25 54.6%	Q3 24/25 49.3%	Q4 24/25 52.0%	Q1 25/26 48.2%
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Commentary:

There has been a focus in Operations on achieving the Number of SAWs target. One of the impacts has been that the target for percentage of SAWs from Partner referrals has not been achieved.

Analysis of the number of SAWs from partner referrals shows that compared to Q1 and Q2 2024-25 there were more than 1,000 additional SAWs from partners completed in the same period this financial year. Over the same period the percentage reduced by nearly 10%. The reduction in the percentage is therefore due to the additional number of SAWs from self referrals or proactive initiatives rather than a reduction in SAW referrals from partners.

Year	2024-25				2025-26	
Qu	Q1	Q2	Q3	Q4	Q1	Q2
SAWs from Partner	2,202	2531	2954	3212	2882	2887
% of total SAW	53.0%	54.6%	49.3%	52.0%	48.2%	43.8%

There is a pilot in Birmingham North Command whereby the Prevention Team is supporting crews to evaluate the effectiveness of existing partnerships and to establish new ones. Once the approach is proven to work the plan is to roll it out across the brigade before the end of the current financial year.

Crews undertake a lot of work to generate High risk referrals that doesn't get captured as part of this SKPI. To better measure this work and evaluate the effectiveness we are planning to revise the SKPI to be a wider measure of Collaboration – covering the existing work with partners, but also work with groups and other initiatives that could generate high risk referrals. Work is underway to determine the best way of defining and recording this work with a view to proposing changes to the SKPI for 2026-27.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change

Added by: Pete Wilson

Date: 13/10/2025

<i>The number of children engaged in prevention education activity</i>			
Q2 25/26 Target: Q2 = 7,500, YTD = 15,000 Actual to date: Q2 = 2148 YTD = 11,159 Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25 n/a	Q3 24/25 n/a	Q4 24/25 n/a	Q1 25/26 A: 9011 T: 7500
Commentary:			

<p>This new Performance Indicator has been introduced this year. The Annual Target is 30,000 children.</p> <p>The majority of activity that contributes to this target takes place in schools. Q2 covers the Summer Holiday period when in-school delivery is not possible. Given that activity is overwhelmingly focussed during Q1, Q3 and Q4 the performance is rated as green as we remain on track to achieve the annual target.</p> <p>The annual target of 30,000 children is profiled as 15,000 Primary School children receiving SPARKs delivered by Crews and 15,000 children receiving input from Prevention Team at Safeside and in school settings. Year to Date the split is 5,615 SPARKs and 5,544 Prevention Team.</p> <p>It is proposed that in future years the profile of activity to achieve this PI is spread as follows: Q1 33%, Q2 0%, Q3 33%, Q4 33%</p>	
<p>Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change</p>	
<p>Added by: Pete Wilson</p>	<p>Date: 13/10/2025</p>

<p><i>The number of accidental dwelling fires</i></p>			
<p>Q2 25/26 Target: 339 Actual to date: 342 Rating: Performance is within the tolerance levels (green)</p>			<p>Next quarter forecast Green</p>
<p>Q2 24/25 YTD T: 721 A: 669 -7.2%</p>	<p>Q3 24/25 YTD T: 1045 A: 1035 -1.0%</p>	<p>Q4 24/25 YTD T: 1378 A: 1413 +2.5%</p>	<p>Q1 25/26 YTD T: 374 A: 366 -2.1%</p>
<p>Commentary:</p>			

Performance for the quarter is 338, 1.1% below target, which was set at the 3 year average of 342. Looking across the year to date, the actual to target is much closer, 717 against a target of 716 being +1.

Most incidents are attributable to cooking or electrical issues, with smoking as the third most common cause. There is evidence of Safe and Well visits being carried out both pro-actively and post incident and this activity has increased in Q2 vs Q1. The use of social media to highlight risks, leaflet drops and engagement through schools and community groups is evident from the returns. Targetted campaigns on cooking and electrical safety further reduce incidents.

There is some mention of lithium ion batteries/e-mobility devices, which should be monitored in future months/quarters as a potential emerging trend.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change

Added by: Matt Stanton

Date: 15/10/2025

The number of accidental fires in non-domestic premises

Q2 25/26 Target: 88 Actual to date: 106 Rating: Under performance against the tolerance levels (red)	Next quarter forecast Red
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Q2 24/25 YTD T: 184 A: 168 -8.7%	Q3 24/25 YTD T: 264 A: 238 -9.8%	Q4 24/25 YTD T: 350 A: 336 -4.0%	Q1 25/26 YTD T: 80 A: 111 +27.9%
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Commentary:

Performance

106 incidents during Q2 reflects an increase of +19.3% (+18 incidents) against the target of 88. The 3-year average for Q2 is 95 incidents. 220 YTD incidents is +31.7% (+53 incidents) against YTD target of 167. Performance for Q2 and YTD is above target and above the upper tolerance levels.

When compared with the culminative 3yr average of 181, the current trajectory is anticipated to return a below tolerance performance (red) during Q3. This is based on Q1 reporting 34 incidents above target and subsequently leading to an out of tolerance position for the financial year.

Q2

Cooking appliances were the most recorded source of ignition (17.1%), and entertainment venues were the most affected property type (26.7%). Faults in equipment or appliances (such as electrical faults) accounted for over a third of accidental fires at non-domestic premises (43.9%).

Year to date

Electricity supply is the most recorded source of ignition (16.9%) followed by cooking appliances, and retail premises are the most affected (25.6%), with faults in system (electrical) or appliances also the most common cause (42.9%).

Highest offender is Birmingham North Command during July (14 of 42); however, over the whole period and all command areas, September returned the lowest number of incidents (31). Retail Shops property type makes up nearly a quarter of all incidents (22%), with faults in system (electrical) the main cause of incidents.

What are our Actions

Total Safe & Strong completed (Q1: 120 accepted 30 declined 156) (Q2: 245 accepted, 45 declined = 290).

Continue to support Operations in their targeted delivery of the Safe & Strong activity, providing businesses and related non-domestic premises with information on how they can proactively reduce the likelihood of fires by improving Fire Safety Management. Additionally, the revised Auditing Strategy enables Fire Safety Inspectors to deliver 10% of their activities at premises based on local intelligence/incidents.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Declining

Added by: Matt Young Darren Marshall

Date: 13/10/2025

<i>The number of deliberate fires in derelict buildings</i>			
Q2 25/26 Target: 48 Actual to date: 43 Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25 n/a	Q3 24/25 n/a	Q4 24/25 17	Q1 25/26 T: 53 A: 34
Commentary: Q2 has seen 43 incidents against a target of 48 representing 10.4% below target. The performance of this SKPI is within the tolerance level target that is set. There has been significant work with local authorities to obtain compulsory purchase orders and protection orders for public sites. The derelict fire action plan continues to be used, including work with partners to highlight new buildings and improve security at derelict buildings. Year to date performance is 79 against a target of 100. This reflects over-performance against the tolerance levels. Ongoing actions: Coventry & Solihull Command have developed a teams site for notificaion to partners of problem sites, this is being developed to be shared and implemented across the 5 Command areas.			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change			
Added by: Matt Stanton		Date: 16/10/2025	

<i>The number of false alarm calls due to fire alarm equipment in dwellings</i>			
Q2 25/26 Target: 1666 Actual to date: 1663 Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25 YTD T: 2669 A: 3226 +20.9%	Q3 24/25 YTD T: 4067 A: 4870 +19.7%	Q4 24/25 YTD T: 5353 A: 6206 +15.9%	Q1 25/26 T: 1461 A: 1390
Commentary: Performance 1663 incidents during Q2 reflects YTD of 3085, maintaining a tolerance of -1.3% (which is -42 difference against target of 3127 incidents). When compared with the culminative 3yr average of 2944, the trajectory (-4.57% against target) enables the consideration of achieving a culminative end of year total that is within tolerance.			
High Offenders Brierley Hill – Crews identified spike at premises, worked with Fire Safety Advisors (FSA). Fire Safety Inspector (FSI) conducted audit in August, continued monitoring of False Alarm Equipment’s (FAE). Bloxwich – Crews have attended a residential premises, residents reluctant to engage with crews. FSI requested for audit. FSAs continuous monitoring. Crews have engaged with residents. Audit requested by FSIs. FSAs continuous monitoring. Ladywood – Unusual spike in activations. Engage with management agent to identify activations. Cause has been identified and management working with Tall Buildings Team. FSAs to monitor.			

Aston – Ongoing battle for management agent, previous interaction by crews bought down FAEs. Increase of FAEs again, FSAs working with management agent to reduce FAEs. Continuous monitoring.

Coventry – Spike in FAEs due to faults, since building has been decanted. Level of Response has been reduced and working with management.

What are our Actions

As part of the ongoing AFA review, we will monitor incidents to assure proportionate mobilisation and alignment to current policy. This will be performed on a monthly basis and will also aim to proactively support understanding of impact to Operations in relation to Business Support Vehicle (BSV) availability. Additionally continued liaison with Alarm Receiving Centres and Housing Providers to build stakeholder awareness around any potential future changes that WMFS may apply to risk based mobilising policies. Next quarter is anticipated to return a within tolerance (green) outcome based on mitigation plans in place, which include writing to Responsible Persons that are considered as High Offenders (4 or more Unwanted Fire Signals within the reporting period).

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change

Added by: Matt Young Darren Marshall

Date:13/10/25

The number of false alarm calls due to fire alarm equipment non-domestic premises

Q2 25/26 Target: 370 Actual to date: 378 Rating: Performance is within the tolerance levels (green)	Next quarter forecast Green
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Q2 24/25 YTD T: 647 A: 669 +3.4%	Q3 24/25 YTD T: 1010 A: 1071 +6.0%	Q4 24/25 YTD T: 1436 A: 1309 +9.7%	Q1 25/26 T: 332 A: 352
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Commentary:

Performance

378 incidents during Q2 reflects YTD of 719, maintaining a tolerance of +2.4% (which is +17 incidents against target). When compared with the 3yr average of 682 (+5.42%), the trajectory enables the consideration of achieving a culminative end of year total that is within tolerance. Next quarter is anticipated to return a within tolerance (green) outcome based on mitigation plans in place, which include writing to High Offenders.

High Offenders

Smethwick – High number of FAEs due to accidental break glass actuations. Crews have worked with management who have fitted battery squealers to problematic call points, improved signage and given staff training. There will be continuous monitoring by FSAs.

Ward End – Slight increase in FAEs, although within tolerance. Bucket has been reopened and engagement with Fire Safety Manager and FSA. Continuous monitoring.

Fallings Park – Increase in FAEs for various reasons, although within tolerance. Bucket has been reopened to monitor.

What are our Actions	
As part of the ongoing AFA review, we will monitor incidents to assure proportionate mobilisation and alignment to current policy. This will be performed on a monthly basis and will also aim to proactively support understanding of any impact to Operations in relation to BSV availability.	
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change	
Added by: Matt Young Darren Marshall	Date: 13 th Oct 2025

<i>The number of statutory consults completed in timeframes</i>			
A) Percentage of target met for building regulations			
Q2 25/26 Target: 85% Actual to date: 98.33% Rating: Over performance against the tolerance levels (blue)			Next quarter forecast Blue
Q2 24/25 94.70% 302 applications received 16 deadline not met	Q3 24/25 92.35% 379 received 29 deadline not met	Q4 24/25 98.92% 464 received 5 deadline not met	Q1 25/26 T: 85% A: 99.13%
98.33% for all Building Reg applications completed within the time frame of 15 days. (991 Hours) 560 applications received. 8 completed deadline not met. Exceeding the target and tolerance set.			

<p>Due to individuals starting the Fire Engineering degree away at university and an increase in Building Safety Regulator (BSR) gateway 2 Applications. Backfilled staffing to provide resilience. Continue to monitor the allocation of staff on courses, the impact and the balance.</p>	
<p>Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change</p>	
<p>Added by: Darren Marshall Matt Young</p>	<p>Date: 13/10/25</p>

<p><i>The number of statutory consults completed in timeframes</i></p> <p>B) Percentage of target met for planning applications</p>			
<p>Q2 25/26 Target: 90% Actual to date: 98.49% Rating: Over performance against the tolerance levels (blue)</p>			<p>Next quarter forecast Blue</p>
<p>Q2 24/25 94.70% 302 applications received 16 deadline not met</p>	<p>Q3 24/25 93.89% 262 applications received 16 deadline not met</p>	<p>Q4 24/25 97.01% 268 applications received 8 deadline not met</p>	<p>Q1 25/26 T: 90% A: 98.02%</p>
<p>Commentary:</p> <p>98.49% for all planning applications completed within the time frame of 21 days. (384) Hours) 207 applications received. 3 completed deadline not met.</p> <p>Exceeding the target and tolerance set.</p>			

Due to individuals starting the Fire Engineering degree away at university and an increase in BSR gateway 2 Applications. Backfilled staffing to provide resilience. Continue to monitor the allocation of staff on courses, the impact and the balance.	
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change	
Added by: Darren Marshall Matt Young	Date: 13/10/25

<i>The number of statutory consults completed in timeframes</i>			
C) Percentage of target met for licensing applications			
Q2 25/26 Target: 90% Actual to date: 94.25% Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25 96.79% New Applications - 96.6% Variations – 96.4% Other – 100%	Q3 24/25 94.81% New Applications - 95.2% Variations – 93.5% Other – 100%	Q4 24/25 89.36% New Applications – 87.8% Variations – 89.3% Other – 94.1%	Q4 24/25 T: 90% A: 92.72%
Commentary: Within Tolerance. New Applications – 91.4% completed deadline met. Variants Applications – 94% completed deadline met. Oher Applications – 100% completed deadline met.			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change			
Added by: Darren Marshall Matt Young		Date: 13/10/25	

<i>Risk-based Attendance Standard</i>			
Q2 25/26 Target: 4:51 Actual to date: 5:00 Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25 4min 48sec	Q3 24/25 4min 51sec	Q4 24/25 4min 49sec	Q1 25/26 T: 5 minutes A: 5 mins 5 secs
Commentary: The 5 minute attendance standard moved out of exception on 3 rd September and has remained within tolerance levels, resulting in a Q2 performance of 4:51. The year to date is 4:58 and will continue to be monitored throughout Q3 and beyond. Operations continue to report on this monthly and there has been focus on reaction and response times to identify improvements locally. Contributing factors continue to be time in attendance at incidents, which has increased from Q1 by 0.2% to 7.7%. Standby moves are also up from Q1 to 1.2%. This, coupled with increased call volume by approximately 2000 for Fire Control, who experienced call volume increases of 21% in Q1 means we are busier, and the nearest available appliance may already be at another incident, requiring a longer travel time for the next available appliance. Q2 reports Other Station area – 103 instances, as the highest recorded contributor to delays in attendance captured through incident workbooks. The main reason in Q2 for attendance times exceeding the 5-minute target is due to resources travelling to incidents on other station areas. For Q2 we have seen a 1 second drop in our reaction times, down from 55 for Q1 to 54 in Q2. We have also seen an improved			

picture with respect to sickness and stability in Voluntary Additional Shifts (VAS), with operational sickness reducing in Q2 and new VAS business rules seeing a 60% reduction in VAS cancellations which improves staffing.

Compounding this, appliances OTR is up year on year, dropping by 0.1 from Q1 to 70.7%:

July: +118% on 24/25

August: +52% on 24/25

September: -14% on 24/25

While trending downwards, it's recommended that mitigation is considered for Q3 ahead of December, which year on year presents a spike in appliances unavailable and could have a critical impact on meeting the 5 minute attendance standard.

Direction of travel across 3 years shows the KPI is in decline:

22/23 -54.4% in target

23/24 - 52.5% in target

24/25 - 54.2% in target

25/26 - 51% in target

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Declining

Added by: Matt Stanton

Date: 16/10/2025

<i>Risk-based attendance standard – call handling</i>			
Q2 25/26 Target: 80 Actual to date: 76.6 Rating: Over performance against the tolerance levels (blue)			Next quarter forecast Green
Q3 24/25 79	Q4 24/25 76	Q1 25/26 76	Q2 25/26 77
Commentary: The median call handling for the reporting period (Q2 24/25 to Q2 25/26) was 78 seconds. This is 2 seconds below the services 80 seconds standard. The previous year saw a performance of 87 seconds. 80 Second target achieved for four consecutive quarters, with consistent performance in all three months of Q2 25/26. Evidence of consolidation around the 77/76 second position, with a flattening curve. Evidence of a sustainable achievement. It is anticipated we may see an increase in call handling time over the next quarter due to the command-and-control training, meaning a lot of cross-watch working.			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Improving			
Added by: Doug Jones		Date: 15/10/25	

<i>Percentage of achievement of current and reviewed Business Continuity Plans (BCP)</i>			
Q2 25/26 Target: 85% Actual to date: 92% Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25 N/A - unable to locate figures	Q3 24/25 N/A - unable to locate figures	Q4 24/25 87%	Q1 25/26 T: 85% A: 92%
Commentary: West Midlands Fire Service currently maintains 60 Business Continuity Plans (BCP) broken down into 5 areas of business: <ul style="list-style-type: none"> • WMFS – Regulation including COMAH • WMFS – other by subject matter • Transport Engineering Workshops (TEW) • Stations, Functional Department and Fire Control • Digital & Data Areas of Note: Exercise Pegasus (National Tier exercise) is taking place throughout September and October 2025 with an end date of 5 th November 2025 – this exercise is testing the Fatalities and Serious Injury and Pandemic BCP's and once complete these BCP's can be finalised and published. Out of Date BCP's (explanation below): <ul style="list-style-type: none"> • Under Review - Fatalities and Serious Injury within WMFS (previously called Crisis Management Plan) - expected completion end of Oct 2025 • Industrial Action (expected end 2025) • Under Review - Pandemic (expected completion end of Nov 25 following testing within Exercise Pegasus) 			

Industrial Action

This BCP still remains on hold while Government minimum service level (MSL) consultations continue to take place, which was further delayed by a change in government, but the legislation has since been removed. Proposals have been presented to scrutiny committee and work continues to develop a more permanent solution; this will then allow the BCP to be updated.

Pandemic

Review was started at the end of Dec 24 and as of August 2025 a final draft has been produced. Initial engagement with the clinical governance manager took place and EP updated to reach this draft version. This version is currently being tested as part of the National Tier Exercise Pegasus (Sept – Oct) and a finalised version will be published after this exercise.

Fatalities & Serious Injury within WMFS Plan (previously known as Crisis Management Plan)

Review commenced in September 2024, following learning from recent organisational intelligence, the plan has been updated to reflect the different situations that could occur within the workplace and feedback from Head of People following external recommendations. Alongside the Pandemic BCP, this plan may play a part within Exercise Pegasus and will therefore be tested, and if required updated, following this exercise.

Once tested, the final Draft plan will be shared with SLT for consultation before being shared with wider stakeholders for final consultation (although stakeholders have been contributing throughout the review).

Alongside this the Funeral Framework is being reviewed by Corporate Comms and must be complete before the BCP can be finalised. Upon agreement from all stakeholders the plan will then be sent for approval and publishing.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Improving

Added by:

Lucie Tattersll & Daniel Evans

Date:

15th October 2025

<i>Improvement in a range of productivity measures</i>			
Q2 25/26 Target: Actual to date: +7.7% - 185% Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25 N/A	Q3 24/25 N/A	Q4 24/25 +20%	Q1 25/26 T: +2% A: +5%
<p>Commentary:</p> <p>Productivity still remains difficult to measure with consistency. This SKPI would benefit from clear metrics which are measured to provide consistency and value in the reporting. As a result, work is ongoing to examine how the reporting against this indicator can continue to be improved. Currently, responsibility for the indicator sits with Operations, however productivity is much wider in scope, reaching across all areas of the Service. Therefore, consideration is being given to whether it continues to be appropriate for ownership of the indicator to sit within operations, or whether it be better for this indicator to be collated by another Service area with broader consideration of the metrics which inform the return.</p> <p>Productivity will be the subject of a review by the Scrutiny Committee in Q4 2025/26, in addition to internal review.</p> <p>Q2 improvements include: SAW -+9.3% Safe & Strong - +185.8% activity increase (Q1: 156, Q2: 446) Attendance at incidents - +0.1%, remains higher year to year at 7.7%</p>			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Improving			
Added by: Matt Stanton		Date: 16/10/2025	

Service Support

<i>Percentage of public and staff trust in Service communications</i>			
Q2 25/26 Target: 90% (+/- 10%) Actual to date: TBD Rating: Choose an item.			Next quarter forecast Choose an item.
Q2 24/25 n/a	Q3 24/25 n/a	Q4 24/25 n/a	Q1 25/26 Target (staff & public): 90% Actual to date (staff): 80% Actual to date (public): 97%
Commentary: We are currently planning an all staff (annual) survey to take place in quarter 1 2026/27, which will provide data for this SKPI. In order to receive updates on a regular basis, on 9.9.25 we started to ask a new set of communications-focused questions during Station Peer Assessment (SPA) sessions to provide regular data. Data to date is based on responses from a sampling approach to surveying staff (34), but the process will help to gauge staff feeling pending the next all-staff survey.			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Choose an item.			
Added by: Neil Spencer		Date: 17.10.25	

<i>IT Operations Metric</i>			
Q2 25/26 Target: 99.99% (+0.01% to -0.49%) Actual to date: 99.59% Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25	Q3 24/25	Q4 24/25	Q1 24/25 T: 99.99% (+0.01% to -0.49%) A: 99.76%
Commentary: We continue to perform within tolerance; the variance in performance is due to the high number of planned downtime activities we are completing to keep our legacy Command & Control operational.			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change			
Added by: Simon Bentley		Date: 17 th October 2025	

<i>Cyber Standards Compliance</i>			
Q2 25/26 Target: 95% (+5% to -10%) Actual to date: 91.77% Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25	Q3 24/25	Q4 24/25	Q1 25/26 T: 95% A: 90.17%
Commentary: We continue to try and achieve 100% compliance with our cyber training currently we are supporting remaining individuals through this training. We are progressing our compliance with our first cyber standard and expect to have this in place in the next 2 quarters which will have a further positive impact on this SKPI and reduce Corporate Risk.			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Improving			
Added by: Simon Bentley		Date: 17 th October 2025	

Statutory Data Compliance

Q2 25/26 Target: 95% (-10% +5%) Actual to date: 76.5% Rating: Under performance against the tolerance levels (red)			Next quarter forecast Green
Q2 24/25 N/A	Q3 24/25 N/A	Q4 24/25 N/A	Q1 25/26 T: 95% A: 70%

Commentary:

SKPI Measure: 76.5%

- Freedom Of Information (FOI) Compliance with Statutory Targets: 78%
- Data Subject Access Request (DSAR) Compliance with Statutory Targets: 75%

Additional LPI's monitored:

- Management of Information (MOI) Training Uptake: 47%
- Data Protection breaches: 13 (5 Medium, 8 Low) - Primary Root Cause: Human Error (77%)
- Data Protection Impact Assessments (DPIA) undertaken: 6 Total

The SKPIs have improved on the previous reporting period and year to date up from 70% to 77%. Recent added resource now means we are confident that we have the right level of skill and resource to return to full compliance based on current workloads. This is in line with the previous predictions of returning to tolerance by Q3.

We are also on a transformative journey to automate manual systems wherever we can, this will deliver further efficiencies and now provides enhanced reporting.

With planned updates to policy we will improve our training offering, compliance and reduce human error contributing to data breaches.	
It should be noted that the trend of increased complexity and requests continues in line with continued public scrutiny of the authority.	
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Improving	
Added by: Martina Doolan	Date: 17 th October 2025

<i>Set a balanced budget at the beginning of the year and spend within that budget</i>			
Q2 25/26 Target: 3.5% Actual to date: 0.6% Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25	Q3 24/25	Q4 24/25	Q1 25/26 T: 3.5% A: 0.3%
Commentary: 2025/26 balanced budget set per the Fire Authority Report 17/2/25. P5 forecast £885k underspent = 0.6% of the total budget			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change			
Added by: Rebecca Yates		Date: 10/10/25	

<i>Identify service changes and other efficiencies that can be delivered from 2026/27</i>			
Q2 25/26 Target: N/A see below, target cannot be met until at least Dec 25 when provisional settlement is available Actual to date: N/A Rating: Choose an item.			Next quarter forecast Green
Q2 24/25	Q3 24/25	Q4 24/25	Q1 25/26 N/A
Commentary: Strategy day 2 on 30/9/25 included a presentation to SLT by the Interim Head of Finance & Procurement on the 2026/27 budget process. Savings targets on devolved budgets were set for each service area and a pro forma was shared to capture savings and growth for 2026/27. During October and November the Finance Team will support budget holders and SLT members identifying and costing savings and growth and completing the pro forma. Strategy day 3 on 11/11/25 will check progress on pro forma completion and resolve any obstacles. Strategy day 4 on 18/12/25 will require SLT to decide on which savings and growth items will form part of the 2026/27 budget once the provisional Finance settlement is available.			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): N/A			
Added by: Rebecca Yates		Date: 10/10/25	

<i>Total Service carbon footprint / output</i>			
Q2 25/26 Target: Not to rise above 3022 tonnes a year Actual to date: Calculated annually Rating: Over performance against the tolerance levels (blue)			Next quarter forecast Blue
Q2 24/25	Q3 24/25	Q4 24/25	Q1 25/26 T: 92 tonnes A: 305 tCO ₂ e
Commentary: Total Service Carbon Footprint is based on scopes 1 and 2 only and aims for carbon neutrality by 2036, rather than Net Zero (scopes 1,2 and 3) by 2041. <ul style="list-style-type: none"> • Scope 1 data includes natural gas, fuel oil, refrigerants, company fleet (diesel/petrol), pallet burning and Oriented Strand Board (OSB) burning • Scope 2 data includes purchased electricity <p>A full carbon footprint report is produced annually, due to the large quantity of data to be reviewed. Gas and electricity data is able to be downloaded on a regular basis, so that trends can be identified. Gas usage in Q2 (based on July and August – see below report) showed a drop in consumption of 90,211.2 kWh which equates to a saving of 16.5 tCO₂e. Electricity consumption has increased, however the switch to a net zero tariff means the tCO₂e for electricity has reduced by 100%.</p> <p>On 23rd September 18 members of staff (predominantly from Black Country North) attended Carbon Literacy training and the impacts from this will be measured in Q3 and Q4, where hopefully a reduction in gas and electricity consumption will be noted following changes in behaviour, due to increased awareness of the impacts of climate change.</p>			

<p>WMFS was successful in achieving stage 1 funding through the Buildings Retrofit Pilot from the WMCA, to undertake retrofit assessments at Hay Mills and Sheldon. Following the completion of this assessment, we will apply for stage 2 funding, to undertake the proposed works, to improve efficiencies and reduce carbon.</p>			
<p>Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Improving</p>			
<p>Added by: Liz Hopkins</p>		<p>Date: 15/10/2025</p>	
<p><i>Service gas usage (KWH and Carbon Tonnes)</i></p>			
<p>Q2 25/26 Target: 981,445 kWh Actual to date: 500,535 kWh Rating: No performance rating assigned</p>			<p>Next quarter forecast Green</p>
<p>Q2 24/25</p>	<p>Q3 24/25</p>	<p>Q4 24/25</p>	<p>Q1 25/26 T: 2,094,382 A: 1,674,925</p>
<p>Commentary:</p> <p>Gas consumption for Q2 currently stands at 500,535 kWh, however this only reflects the consumption for July and August and not the full quarter. Consumption figures are currently extracted from bills, and the figures for September are yet to be received. As a result, no performance rating has been applied to this SKPI due to incomplete data for the quarter. Smart meters and energy billing is not within the Service’s control and reliant upon the energy provider, which we continue to liase with on an ongoing basis.</p> <p>A new powerBI dashboard is in the process of being set up by the data team, which includes a live data stream from Total Energies and will enable us to increase the accuracy of our data reporting. It is anticiapted that once a complete set fo data for the quarter has been received, the final performance rating will be rated blue, reflecting over performace against the tolerance levels, based on the following</p>			

- July’s consumption of 249,228 kWh was under the target of 299,276.2 kWh by 50,048.2 kWh
- August’s consumption of 251,307 kWh was under the target of 291,470 kWh by 40,163 kWh

The heating was switched on following a drop in overnight temperatures, on Monday 6th October, however this increase in consumption will not be reflected until Q3 and it is anticipated that September’s consumption will also be either on target or under, due to the mild weather.

Q2 2024/25 had a consumption of 1,035,009 kWh and Q2 2023/24 had a consumption of 544,110 kWh (note: recurring data discrepancy from the provider resulting in low reading). Internal reporting procedures are being reviewed, so that data discrepancies can be identified sooner.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change

Added by: Liz Hopkins

Date: 14/10/2025

Electricity usage (KWH)

Q2 25/26

Target: 909,603 kWh

Actual to date: 703,798 kWh

Rating: No performance rating assigned

Next quarter forecast

Green

Q2 24/25	Q3 24/25	Q4 24/25	Q1 25/26 T: 1,042,086 A: 1,088,525
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Commentary:

Electricity consumption for Q2 currently stands at 703,798 kWh, however this only reflects the consumption for July and August and not the full quarter. Consumption figures are currently extracted from bills, and the bills for September are yet to be received. As a result, no performance rating has been applied to this SKPI due to incomplete data for the quarter. Smart meters and energy billing is not within the Service’s control and reliant upon the energy provider, which we continue to liaise with on an ongoing basis

A new powerBI dashboard is in the process of being set up by the data team, which includes a live data stream from EDF and will enable us to increase the accuracy of our data reporting. It is anticipated that once a complete set of data for the quarter has been received, the final performance rating will be red, reflecting under performance against the tolerance levels, based on the following -

- July’s target of 297,607.9 kWh was exceeded by 49,330 kWh
- August’s target of 291,470 kWh was exceeded by 65,389 kWh

Q1 (25/26) also saw an underperformance, as target consumption was exceeded by 46,439 kWh, so the trend so far this year is for an increase in our anticipated consumption.

Q2 2024/25 had a consumption of 1,036,464.7 kWh and Q2 2023/24 had a consumption of 387,841.8 kWh (note: recurring data discrepancy from the provider resulting in low reading). Internal reporting procedures are being reviewed, so that data discrepancies can be identified sooner.

Electricity consumption will increase in 2026/2027 with the hope of increasing our EV fleet, however the potential carbon increase this could bring will be negated by our green energy electricity tariff.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change

Added by: Liz Hopkins

Date: 14/10/2025

People

Percentage of staff with protected characteristics and their role within the Service

a) Gender

Q2 25/26

Target: 27.6% (+/-5%)

Actual: 26.9%

Next quarter forecast

Green

Rating: Performance is within the tolerance levels (green)			
Q2 24/25 Target: 27.4% Actual: 26.5%	Q3 24/25 Target: 27.4% Actual: 26.4%	Q4 24/25 Target: 28.4% Actual: 26.7%	Q1 25/26 Target: 27.3% Actual: 26.9%
<p>Commentary:</p> <p>When considering the whole workforce, 502 (26.9%) are female. 252 (57%) of non-uniformed, 185 (14%) of uniformed, and 65 (88%) of fire control staff are female. Due to underrepresentation of female uniformed staff, positive action continues to be focused on firefighter recruitment. Activities include taster days, meet and greet sessions, alongside ongoing support and awareness for women. The 'Ignite Programme' (female only programme) is being launched. This will be a standalone programme providing a structured, supportive, and practical pre-recruitment and / or parallel programme that enables women to engage confidently with the firefighter recruitment process. In addition, the 'Fire-start fitness programme' will support female candidates by providing guidance through a bespoke, inclusive training plan.</p> <p>There are 185 female uniformed staff. 16% (6) of the 38 firefighter recruits this year have been female. Five female Uniformed employees have left the Service this year (1 Retirement, 1 Resignation, 1 Employee transfer (FRS), 1 Career Break, 1 Dismissal) and one female uniformed staff has re-deployed to green book. Net change = 0</p>			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change			
Added by: Kelly Harding		Date: 24.10.2025	

Percentage of staff with protected characteristics and their role within the Service

b) Ethnicity

Q2 25/26

Target: 15.5% (+/-5%)

Actual: 15.0%

Rating: Performance is within the tolerance levels (green)

Next quarter forecast

Green

Q2 24/25

Target: 15.4%

Actual: 14.9%

Q3 24/25

Target: 15.2%

Actual: 14.7%

Q4 24/25

Target: 15.6%

Actual: 14.9%

Q1 25/26

Target: 15.0%

Actual: 14.8%

Commentary:

When considering the whole of the workforce 279 (15%) of staff are from an underrepresented background. 78 (18%) of non-uniformed, 199 (15%) of uniformed, and 2 (3%) of fire control staff are from an underrepresented background. Firefighter recruitment consists of a rolling programme of activity and a suite of positive action interventions are utilised on an ongoing basis. These include taster days, and meet and greet sessions, as well working alongside high-footfall gyms in our most diverse areas, and establishing a standing partnership with swimming clubs. Fire Control recruitment is campaign-based therefore positive action activity is instigated in a timely manner, in the build up to a recruitment campaign.

16% (6) of the 38 firefighter recruits were from Underrepresented communities. 10 uniformed employees from Underrepresented groups have left the service this year. Net change = -4.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): No change

Added by: Kelly Harding

Date:24.10.2025

Percentage of staff with protected characteristics and their role within the Service

c) Gender Pay Gap

Target: 4.5%

Actual to date: 5%

Rating: Performance is within the tolerance levels (green)

Next quarter forecast

n/a

Q2 24/25

Q3 24/25

Q4 24/25

Q1 25/26

Commentary:

The mean gender pay gap is 5.0% showing an improvement from last year's figure of 5.5%. The gender pay gap for Uniformed staff is 5.3%, while the Non-Uniformed pay gap remains high at 12.1%.

We are taking action through a series of focused initiative designed to create a more equitable workplace for everyone, namely

- Transparent pay frameworks – our green book pay and grading review, including the introduction of sound job evaluation frameworks will ensure that we have a clear, fair, and consistent approach to pay decisions
- Leadership and progression programmes to support underrepresented talent to move into supervisory roles.

Reported on an annual basis.

Added by:

Kelly Harding

Date:

24.10.225

Percentage of staff with protected characteristics and their role within the Service

d) Ethnicity Pay Gap

Target: 3%

Actual to date: 5%

Rating: Performance is within the tolerance levels (green)

Next quarter forecast

Q2 24/25

Q3 24/25

Q4 24/25

Q1 25/26

Commentary:

The mean ethnic pay gap has increased and is now 5% compared to 3.5% last year. Uniformed staff have a higher ethnic pay gap (6.7%) than Non-Uniformed (2.1%). A number of higher paid employees from underrepresented groups have left the service in the last 12 months.

As with gender (and other protected characteristics), we are taking action through a series of focused initiative designed to create a more equitable workplace for everyone, namely

- Transparent pay frameworks – our green book pay and grading review, including the introduction of sound job evaluation frameworks will ensure that we have a clear, fair, and consistent approach to pay decisions
- Leadership and progression programmes to support underrepresented talent to move into supervisory roles.
- Reviewing our attraction and progression process to assure ourselves that there is no bias impacting on recruitment and progression decisions

Reported on an annual basis.

Added by:

Kelly Harding

Date:

24.10.2025

<i>Percentage of staff trust in the Service</i>			
Q2 25/26 Target: Actual to date: N/A Rating: Choose an item.			Next quarter forecast Choose an item.
Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25
Commentary: This data will be provided at Q4, with a proposal to measure this moving forward to be discussed with SLT in preparation for 2026/27.			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Choose an item.			
Added by:		Date:	

<i>Percentage of completed appraisals</i>			
Q2 25/26 Target: 100% (90%) Actual to date: 89.66%% Rating: Under performance against the tolerance levels (red)			Next quarter forecast Choose an item.
Q2 24/25 n/a	Q3 24/25 n/a	Q4 24/25 n/a	Q1 25/26 T: 100% A: 77%
Commentary:			

Progress has been made throughout 2025 to embed Appraisals into business as usual, with some way to go to ensure that all staff throughout the service have a completed appraisal. Appraisal data has been and will continue to periodically feature in Service Assurance Board to ensure that Line Managers across the service are having these vital conversations, including capturing new starters within the organisation.

As this is the first year of embedding this appraisal process, a review is currently being done to ensure that the process of appraisal can be streamlined and lessons learnt can be embedded, this will include identifying any barriers to people completing the appraisal process.

End of Quarter performance

Operations: 96% complete
 Fire Control: 93% complete
 Department: 80% complete

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Choose an item.

Added by: Marc Hudson

Date: 22nd October 2025

Percentage of core skills assessment compliance

Q2 25/26

Target: 95% for Incident Command and Breathing Apparatus

Actual to date: 92% (average of IC and BA)

- Breathing Apparatus 86%
- Incident Command across all levels 98.68%

Rating: Under performance against the tolerance levels (red)

Next quarter forecast
 Green

Q2 24/25

Q3 24/25

Q4 24/25

Q1 25/26

Commentary:

Incident Command

- Incident Command Level 1 95.7% (Crew & Watch Commander)
- Incident Command Level 2 99% (Station and Group Commander)
- Incident Command Level 3 100% (Area Commander)
- Incident Command Level 4 100% (Brigade Manager)

Breathing Apparatus

- **Breathing Apparatus 86%**

Breathing Apparatus (BA) ‘hot wear’ competency forms part of the revised training model which was implemented following the scrutiny review of training. The new model and revised competency requirements will take 2 years to fully embed and therefore in the interim a mitigation plan has been introduced which will increase the level of BA competency back into tolerance levels. This will ensure that all operational staff will be compliant with the requirements contained within National Operational Guidance.

The next quarters forecasted position will be back in tolerance.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Choose an item.

Added by: Marc Hudson

Date: 22nd October 2025

Total number of injuries

Q2 25/26

Target: 30

Actual to date: 48

Rating: Under performance against the tolerance levels (red)

Next quarter forecast

n/a

Q2 24/25

29

Q3 24/25

38

Q4 24/25

38

Q1 25/26

T: 30

A: 41

Commentary:

There have been 48 injury reports for quarter 2 (89 injuries YTD, against a target of 60). This is an increase in injury reports against the 3-year average for this period with the following data for Q2 in previous years 2024 – 29, 2023 – 32, 2022 – 42.

By activity:

- 15 occurred at incidents
- 13 during routine activities
- 15 during operational training
- 5 were non-operational

By type, they are categorised as:

- injury no accident (9)
- slips and trips (8)
- cuts (6)
- struck against / struck by (10)
- exposure to noise (3)
- exposure to heat (3)
- exposure to substance (3)
- manual handling (2)
- foreign body in eye (2)
- medical (2)

Struck against / struck by continues to be a trend of the service; however, when looking into the data for this data set, there appears to be no obvious trend.

Struck against:

Building – 1, Door – 1, Floor – 2, Metal - 1

Struck by:

Cable – 1, Holmatro – 1, Hose – 1, Padlock – 1, Tree – 1, Vehicle – 1

Mitigation:

A communication plan is currently being developed to ensure that trends in data are communicated wide across the service. Local committee meetings will also communicate the outcome to their respective stations / departments.

A review of data spanning a wider data set than the previous 12 months will now be commissioned in an attempt to understand any trends that are not currently being picked up.

The service encourages its staff in reporting accidents, injuries and near hits and sees this very much as a healthy H&S culture, this is reinforced within the new training programme and may be contributing to the rise in reporting.

Service position:

The service has a number of Health and Safety committee meetings that meet on a monthly basis across operations and departments which feed into a brigade wide monthly meeting chaired by the ACFO of People, Vice Chaired by Head of Development, on a quarterly basis the meeting agenda solely focuses on H&S performance data, which provides the opportunity to discuss accidents, injuries, RIDDORs, Near Misses etc with the opportunity to put mitigation in place if trends are identified.

The service has also taken the decision to invest in an additional post to roll-out Health and Safety training across the service, initially managers (supervisory upwards) will receive the input, with a view that this will be rolled out wider when the managers programme has been completed.

The service has a programme of auditing all fire stations and has more recently started to audit non-fire station locations such as training locations, with transport engineering and workshops to be completed next in line. In addition to this, the service also partakes in the regional audit programme, whereby regional partners come into the service to peer assess our performance and practices against agreed themes.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Choose an item.

Added by: Marc Hudson

Date: 22/10/2025

<i>Total number of RIDDOR injuries</i>			
Q2 25/26 Target: 3 Actual to date: 5 Rating: Under performance against the tolerance levels (red)			Next quarter forecast n/a
Q2 24/25 7	Q3 24/25 6	Q4 24/25 4	Q1 25/26 T: 3 A: 5
Commentary: There have been 5 RIDDOR reports for quarter 2, This is the same as quarter 1 but less than the 7 RIDDOR reports reported for Q2 in 2024. The following is a breakdown of the RIDDOR reportable incidents: <ul style="list-style-type: none"> Operational incident, a burn to the arm using a beater, over 7-day category. Operational incident, a rolled ankle whilst undertaking a 360 assessment in dark conditions, over 7-day category Operational training; an injury from kneeling in the fire house on a metal object, over 7-day category Operational training, a knee injury wading in water during mod 2 training at Cardiff, over 7-day category Operational training, here was one injury on a fire station during a training activity; the injured party was struck by a charging cable which became unsecure., over 7-day category. It should be noted that the current 2 days, 2 nights, 4 days off shift pattern may inadvertantly impact the number of RIDDOR reportable incidents due to people booking fit to work on their first day back to work on the 8 th day. Further analysis of this will be conducted and reported back at future meetings. Accident investigations have taken place with learning being followed up.			

Service position:

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The service has a programme of auditing all fire stations and has more recently started to audit non-fire station locations such as training locations, with transport engineering and workshops to be completed next in line. In addition to this, the service also partakes in the regional audit programme, whereby regional partners come into the service to peer assess our performance and practices against agreed themes.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Choose an item.

Added by: John Ashton

Date: 22/10/2025

<i>Average number of working days / shifts lost due to sickness – uniformed and Fire Control staff</i>			
Q2 25/26 Target: 1.95 Actual to date: 1.88 Rating: Performance is within the tolerance levels (green)			Next quarter forecast Green
Q2 24/25 Target: 1.74 Actual: 2.07	Q3 24/25 Target: 1.84 Actual: 2.28	Q4 24/25 Target: 1.91 Actual: 1.98	Q1 25/26 Target: 2.01 Actual: 1.93
Commentary: This has reduced following extensive work regarding an attendance management audit. This would likely be a contributing factor to the reduction of sickness in uniformed staff in terms of ensuring management of cases at the relevant stage in policy. New business rules regarding Return to Work may have increased support for individuals also.			
Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Improving			
Added by: Josef Campbell		Date: 16/10/2025	

Average number of working days / shifts lost due to sickness – non-uniformed staff

Q2 25/26

Target: 2.01

Actual to date: 3.44

Rating: Under performance against the tolerance levels (red)

Next quarter forecast

Red

Q2 24/25

Target: 1.88

Actual: 2.13

Q3 24/25

Target: 2.06

Actual: 2.76

Q4 24/25

Target: 1.41

Actual: 2.08

Q1 25/26

Target: 1.49

Actual: 2.70

Commentary:

Sickness has increased for non uniform staff. We are scheduling an audit similar to that in operations for non operational staff throughout November. We foresee that this increased scrutiny will place a greater emphasis on sickness for managers in terms of managing in line with policy. There are however still reliability issues with data (see narrative below) which we are hoping to resolve through a working group which will support this.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Declining

Added by:

Date:

Average number of working days / shifts lost due to sickness – all staff

Q2 25/26

Target: 1.97

Actual to date: 2.25

Rating: Under performance against the tolerance levels (red)

Next quarter forecast

Red

Q2 24/25

Target: 1.77

Actual: 2.09

Q3 24/25

Target: 1.89

Actual: 2.39

Q4 24/25

Target: 1.80

Actual: 2.00

Q1 25/26

Target: 1.89

Actual: 2.11

Commentary:

This KPI has increased due to the increase in non uniform sickness. At present it is difficult to ascertain trends and figures, as at the time of this audit WFP ran a report which identified 311 uniformed sickness days, and 901 non uniform sickness days which were on UKG and not Oracle. Due to this no absence reason was able to be input by the line manager to identify trends.

We are aspirational that this will reduce following the non operational audit taking place through November.

Direction of Travel based on 3-year average (YTD) – (only required to be completed for Q2 and Q4): Improving

Added by: Josef Campbell

Date: 16/10/2025