#### TYNE AND WEAR FIRE AND RESCUE AUTHORITY

Item No 5

**MEETING: GOVERNANCE COMMITTEE** 

30 JUNE 2014

**SUBJECT: ANNUAL GOVERNANCE REVIEW 2013-14** 

# JOINT REPORT OF THE CHIEF FIRE OFFICER, CLERK TO THE AUTHORITY, THE FINANCE OFFICER AND PERSONNEL ADVISOR

## 1 INTRODUCTION

1.1 The purpose of this report is to provide details of the findings of the 2013-2014 Annual Governance Review and seek approval of the Annual Governance Statement, prior to its incorporation in the Statement of Accounts.

#### 2 BACKGROUND

- 2.1 In 2001 the Society of Local Authority Chief Executive's (SOLACE) and the Chartered Institute of Public Finance and Accountancy (CIPFA) jointly published 'Corporate Governance in Local Government: A Keystone for Community Governance Framework and Guidance Note'. In line with the guidance contained in this document the Authority introduced its first local Code of Corporate Governance (the Code), approved by Members, in 2003.
- 2.2 Annual reviews of the Code have taken place to ensure that it remains up to date and effective. Minor updates to the Code have also been carried out to address any issues identified during the reviews. The Code was last updated in June 2012.
- 2.3 The Authority has a statutory duty to prepare an Annual Governance Statement, as enshrined in the Accounts and Audit (England) Regulations 2011.
- 2.4 The Fire and Rescue National Framework 2012 placed a further duty on fire and rescue authorities to produce a public facing Statement of Assurance. This was first published in 2013 incorporated in the Authority's Annual Report.
- 2.5 National guidance on good governance in public bodies has been regularly updated over the years, and the Authority's code takes account of the most recent framework, 'Delivering Good Governance in Local Government', produced in 2007 and updated in 2012 by CIPFA and SOLACE. This

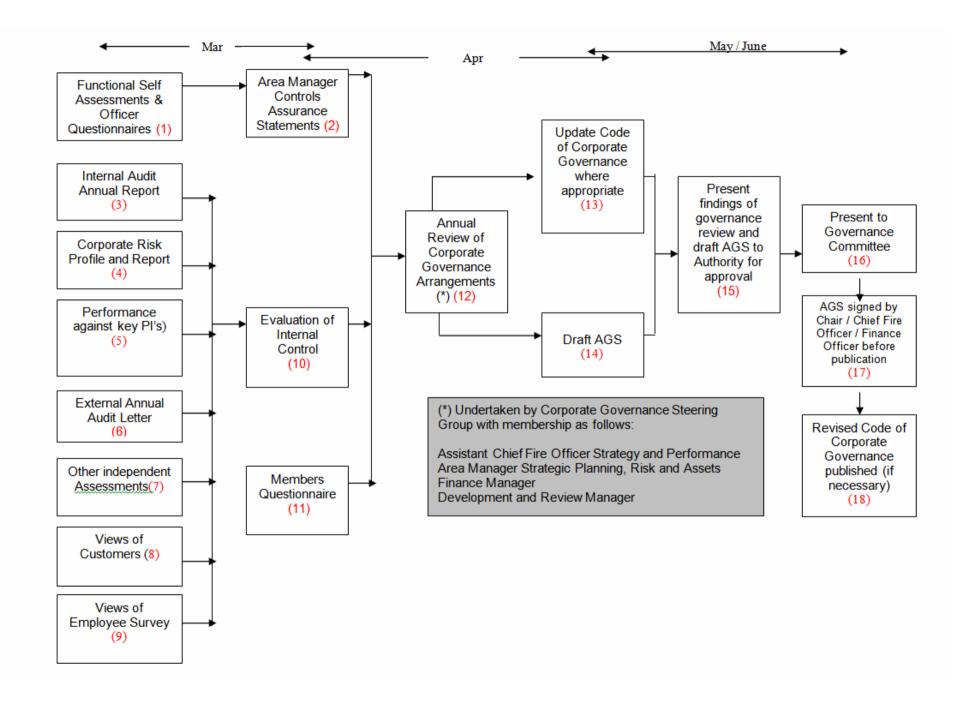
describes the principles of good governance particularly as they apply to local authorities, drawing out these authorities' role in community leadership.

- 2.6 The framework identifies four key roles of a local authority as follows:
  - To engage in effective partnerships and provide leadership for and with the community;
  - To ensure the delivery of high quality local services whether directly or in partnership or by commissioning;
  - To perform a stewardship role which protects the interests of local people and makes the best use of resources;
  - To develop citizenship and local democracy.
- 2.7 These four roles are to be borne in mind when considering the six core principles of good governance, as defined in the framework:
  - Focusing on the purpose of the authority and on outcomes for the community, and creating and implementing a vision for the local area;
  - Members and officers working together to achieve a common purpose with clearly defined functions and roles;
  - Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour;
  - Taking informed and transparent decisions which are subject to effective scrutiny, and managing risk;
  - Developing the capacity and capability of members and officers to be effective;
  - Engaging with local people and other stakeholders to ensure robust public accountability.
- 2.8 The framework recommends that governance arrangements are kept under review by:
  - Considering the extent to which the authority complies with the principles and requirements;
  - Identifying systems, processes and documentation that provide evidence of compliance;
  - Identifying the individuals and committees responsible for monitoring and reviewing the systems, processes and documentation identified;
  - Identifying the issues that have not been addressed adequately in the authority and consider how they should be addressed;
  - Identifying the individuals who would be responsible for undertaking the actions required and plan accordingly.
- 2.9 In carrying out these tasks, the Authority has followed CIPFA's detailed guidance which requires a comprehensive assurance gathering process.

## 3 2013/2014 ANNUAL GOVERNANCE METHODOLOGY

- 3.1 The review was undertaken by the Corporate Governance Steering Group whose membership is as follows:
  - Assistant Chief Fire Officer Strategy and Performance.
  - Area Manager Strategic Planning, Risk and Assets.
  - Finance Manager.
  - Development and Review Manager.
- 3.2 The review followed the agreed methodology which comprises the following stages:
  - Completion of Functional Self Assessments (covering all areas);
  - Completion of Department Head/Group Manager questionnaires;
  - Area Manager Controls Assurance Statements;
  - Completion of Members Questionnaires;
  - Detailed analysis and evidencing of internal control arrangements;
  - Preparation of an Action Plan to address any issues identified, including revision of the Local Code of Corporate Governance as required;
  - Drafting an Annual Governance Statement and Governance Review Report and presenting this to the Strategic Management Team;
  - Presenting the Annual Governance Statement and Governance Review Report to the Governance Committee;
  - Presenting the Annual Governance Statement and Governance Review Report to the Fire and Rescue Authority; and
  - Chair of Fire and Rescue Authority, Chief Fire Officer and Finance Officer to sign Annual Governance Statement.

The above stages are set out diagrammatically on the next page.



- 3.3 **Functional Self Assessments** (1) Governance and control self-assessments were completed by department heads and approved by all Area Managers. The self-assessments cover compliance with the existing Authority Code of Corporate Governance, as well as key internal control arrangements within each service, and require evidence to be cited in relation to each question, and any significant plans for improvement within their area to be recorded.
- 3.4 **Area Manager Controls Assurance Statements** (2) Each Area Manager reviewed the information and views compiled through the self-assessment process to come to an opinion on the governance arrangements and internal control environment within their areas of responsibility.
- 3.5 **Evaluation of Internal Control Arrangements** (10) The Authority's internal control arrangements were assessed in line with guidance from CIPFA's Financial Advisory Network.
- 3.6 **Views of Elected Members** (11) The views of all Elected Members were sought via a questionnaire.
- 3.7 **Annual Review** (12) The Group considered all aspects of corporate governance and supporting documentation including the existing Code of Corporate Governance to identify the areas that need to be amended to bring the Code in line with the new framework. Consequently the Group were able to form a view on the adequacy of the Authority's overall governance arrangements for incorporation in the Annual Governance Statement.

## 4 FINDINGS OF THE CORPORATE GOVERNANCE STEERING GROUP

# Functional Self Assessments and Area Manager Controls Assurance Statements

- 4.1 These were examined to ensure that all documents had been completed in full and to identify any issues of significance. It was noted that all Area Managers have identified some future plans for improvement to their governance and control arrangements. The future plans for improvement were summarised and issues highlighted to identify any which were significant in terms of the Authority's overall governance and control environment.
- 4.2 One major action which has affected the Authority's performance is the implementation of the new command and control system which is being closely monitored utilising the Authority's project and contract management protocols.
- 4.3 In addition, a large proportion of the future plans for improvement related to tasks which are already ongoing, which are focused on delivery or which have already been included in existing service plans. Actions of this type are contained within our IRMP or Level 3 plans and as such have not been considered significant to the overall governance and control environment.

4.4 Newly identified actions resulting directly from the annual governance review, which have corporate significance, have been included in the Local Code of Corporate Governance as actions to be addressed.

# **Annual Internal Audit**

- 4.5 The Group considered the Internal Audit Annual Report 2012/2013, presented to the Governance Committee in June 2013, along with individual Internal Audits carried out during 2013/14. It was noted that using the cumulative knowledge and experience of the systems and controls in place, including the results of previous audit work and the work undertaken within 2012/2013, it is considered that overall throughout the Authority there continues to be an adequate internal control environment.
- 4.6 Reviews of the following areas were carried out and were considered satisfactory and substantial assurance is given:
  - Fire safety inspections.
  - Partnership arrangements.
  - Payroll and accounts payable transaction testing.
  - Management of purchasing cards.
  - Management of local financial systems.

Also audits of catering function and training and development – moderate assurance given on both of these.

- 4.7 Any improvement actions arising from internal audits are included either in the level 3 plans (annual plans) of specific teams, or for actions of Moderate risk or above, monitored directly by SMT.
- 4.8 It was noted that the external auditor, Mazars, has carried out an independent review of the effectiveness of Internal Audit by reference to the new standards for internal audit (UK Public Sector Internal Audit Standards, which apply across the whole of the public sector). This concluded that the service continues to comply with the relevant standards.

# **Corporate Risk Register**

- 4.9 The Corporate Risk Register was considered by the Group. The Corporate Risk Register is a live document regularly updated, monitored and managed by the Corporate Risk Management Group. Of the 17 corporate risks faced by the Authority, the following should be noted that the most significant (high priority) risks are:
  - Failure to effectively and safely deploy and manage operational staff and resources at incidents leading to staff and public being exposed to unnecessary risk.

- Risk that spending and/or policy decisions of one of our partners has a negative impact on our collaborative work and therefore a detrimental impact on the communities that we serve.
- Risk that a spending decision of one of our partners has a detrimental impact on the delivery of some of our services, Safetyworks, Phoenix, Princes Trust, etc.
- Risk that further budget cuts will mean that we have to make decisions that will affect the delivery of front-line services from 2013/14.
- Inability to continue diversification of the workforce year on year results in the Authority not realising the benefits in terms of service delivery and community engagement and missed targets.
- Industrial unrest nationally and/or locally with regard to conditions of service (including on-going organisational change management programmes) results in industrial action and impacts on service delivery.
- 4.10 At the last Corporate Risk Management Group meeting it was agreed to archive three risks and one emerging risk was added to the profile, this concerned the planned national move from the Airwave system across the three emergency services to the Emergency Services Mobile Communications Programme (ESMCP). There are a number of tight deadlines that need to be met to ensure that the transition is completed on time, and this is likely to become a significant project for the organisation in the coming years.
- 4.11 The Chief Fire Officer has developed an action plan to manage and mitigate each risk. Where appropriate these actions have been included in the annual operating plans of the appropriate departments for action as necessary.

## **Performance Management**

- 4.12 The Group considered the Authority's performance management framework and actual performance against key indicators. It was noted that performance has continued to improve during the year.
- 4.13 The Authority's performance management framework was considered with the main issues being:
  - Continue to improve performance through a range of improvement activities and evaluation to target specific risks;
  - Continue to improve understanding of performance and risk through partnership working to develop realistic targets and strengthen accountability at a local level.
- 4.14 Plans are in place to address all of the above issues and none are considered significant in terms of the Authority's overall governance and control arrangements.

# **External Auditor Opinion**

- 4.15 The Group also considered the Annual Audit Letter and Audit Completion Report prepared by the Authority's external auditors, Mazars, covering 2012/2013, which gives independent assurance of financial control and Value for Money (including financial resilience and the overall efficiency and effectiveness of the Authority).
- 4.16 Mazars issued an unqualified conclusion on both financial arrangements and Value for Money, and identified no significant weaknesses in the Authority's arrangements for internal control. Their report included comments that:
  - The Authority managed its financial position well. Budget setting was robust and close monitoring ensured delivery of spending within revenue and capital budget limits.
  - The Authority is financially resilient. The Medium Term Financial Strategy sets out how the Authority proposes to deal with the difficult economic climate and the cuts in funding. The Authority has considered the impact of the retention of business rates and localisation of council tax support, and is monitoring these areas closely.
  - Careful financial management has enabled the Authority to build up a good level of earmarked reserves that are set aside for specific plans and projects.
- 4.17 It is considered that the Annual Audit Letter gives reassurance that the Authority's overall governance and control arrangements are satisfactory.

#### Other External Assessments

- 4.18 The Group examined the results of other external assessments over the past year. These include:
  - Investors in People Gold Standard maintained.
  - ROSPA Gold accreditation for the eighth consecutive year.
  - CIPD Diversity and Inclusion in the Workplace Award.
  - Accreditation to International Standard ISO22301 for Business Continuity across all areas of the Service.
  - Equality North East Awards for LBGT Network and Disability Network Group.
  - LGBT North East Award for 'Building Inclusive Workplaces'.
  - Achievement of 8th place in the Stonewall Top 100 Employers Workplace Equality Index. This is the first time a fire and rescue service has entered to the top ten.
  - Shortlisted for the Diverse Company Award in the National Diversity Awards.

4.19 Although these assessments are not directly concerned with governance and internal control, they do require systematic arrangements to be in place for the criteria they are assessing, and as such the Group considered that they provide additional assurance as to the control environment in the Authority.

#### Views of customers

4.20 An on-going 'After the Incident Survey' is carried out, the latest results of which recorded a score of 100%overall user satisfaction with regard to the services provided at domestic incidents. This survey also recorded a score of 96%overall user satisfaction for services provided at non-domestic incidents. Satisfaction surveys on fire safety audits and our Home Safety Checks are also carried out.

# **Views of Employees**

- 4.21 A survey of the views of employees is undertaken in relation to a range of issues on a biennial basis. The latest employee survey undertaken indicated that:
  - The majority of staff (84%) are satisfied with their current role, are treated fairly at work and are encouraged to take responsibility.
  - 88% of staff think the Authority provides value for money, 47% thinks the Authority minimise bureaucracy and 61% believe it has a 'blame free' culture.
  - 66% of staff have regular team meetings where they are given the opportunity to speak and find out what is happening in their department.
     33% of staff feel that communications have improved since the previous survey.
- 4.22 SMT are advised that the above results relate to a survey undertaken during September/October 2012. It is planned to repeat this survey in 2014/2015.

#### **Information Governance**

4.23 As a result of the most recent information governance audit six actions were agreed, of which five have been fully implemented. A data handling audit was undertaken in 2012 resulting in four improvement actions, two of which have now been completed.

#### **Members Questionnaires**

4.24 A questionnaire issued to Members asked whether they felt that statements made in the existing Code of Corporate Governance were being met. All of the respondents agreed that the statements in the Code were being met.

# **Meeting the Requirements of the National Framework**

- 4.25 As mentioned in para 2.4 the Fire and Rescue National Framework 2012's requirement for the publication of a statement of assurance was satisfied through its inclusion in the Annual Report, which has been reformatted to become the Annual Report and Statement of Assurance.
- 4.26 Within this report is a section that demonstrates how the Authority meets all of requirements of the Fire and Rescue National Framework. This is reproduced in the diagram on the next two pages.

Requirement	How this is met
Produce an IRMP that identifies and assesses all foreseeable risk  The Plan must demonstrate how prevention, protection and response will be used to mitigate the impact of risk  Work with communities to identify and protect them from risk  IRMP should set out the management strategy and risk based programme for enforcing the Regulatory Reform order  Make provision to respond to incidents and reflect this in IRMPs  (Accountability) IRMP must be accessible, available, reflect consultation, cover a three year time span and be reviewed and	<ul> <li>Strategic Community Safety Plan and IRMP</li> <li>Community Risk Profile</li> <li>Policies and procedures to implement Plan, including targeting</li> <li>Specific IRMP reviews including evidence base and consultation</li> <li>Detailed risk data used in decision making e.g. FSEC, Workload Modelling, MOSAIC</li> <li>Community Engagement strategy</li> <li>Monitoring of performance by Performance Action Group and Policy and Performance Committee to ensure risk is being</li> </ul>
revised as often as necessary; reflect up to date risk analysis and evaluation of community outcomes  Have effective business continuity arrangements	<ul> <li>mitigated</li> <li>BS25999 accreditation 2013</li> <li>ISO22301 accreditation 2014</li> </ul>
Collaborate with other FRAs, other emergency services and LRFs to deliver interoperability	<ul> <li>Mutual aid agreements</li> <li>Local Resilience Forum structures, roles, plans, procedures, exercising records etc.</li> <li>Common systems for Command and Control with Northumberland FRA</li> </ul>
Engage with the Fire and Rescue Strategic Resilience Board (SRB) to support discussions and decision making on national resilience	<ul> <li>Policies and procedures relating to local and national risks</li> <li>Engagement in Chief Fire Officers Association (CFOA) groups relating to resilience</li> </ul>
Risk assessments must include analysis of any gaps between existing capability and that needed for national resilience, and	

Requirement	How this is met
these must be highlighted to the SRB	
(Assurance) Work collectively and with Strategic Resilience Board to provide assurance that risks are assessed, gaps identified and that resilience capabilities are fit for purpose, and any new capabilities are procured, maintained and managed in the most cost effective manner	<ul> <li>As above plus independent assessment via National Resilience Advisory Team (NRAT) audits</li> <li>External audit of financial systems and value for money</li> </ul>
Work in partnership with their communities and a wide range of partners locally and nationally	<ul> <li>Strategic Community Safety Plan and IRMP</li> <li>Policies and procedures to implement Plan, including targeting</li> <li>Delivery coterminous with Council boundaries</li> <li>Engagement in statutory and non-statutory partnerships (Partnerships Register, reports and structures of partnership bodies)</li> </ul>
(Scrutiny) FRAs must hold the Chief Fire Officer to account and have arrangements in place to ensure their decisions are open to scrutiny	<ul> <li>Corporate Governance Framework</li> <li>Standing Orders</li> <li>Annual review of Governance</li> <li>Authority minutes</li> </ul>
FRAs must make their communities aware of how they can access data and information on performance	<ul> <li>Annual Report and Statement of Assurance</li> <li>Quarterly performance reports</li> <li>Compliance with the data transparency code as exemplified on website</li> <li>Policies and procedures relating to data</li> </ul>
Prepare an annual statement of assurance covering financial, governance and operational matters showing due regard for	<ul> <li>Annual Report and Statement of Assurance</li> <li>Documents signposted from it including Statement of Accounts,</li> </ul>

Requirement	How this is met
IRMP and Fire and Rescue National Framework	Annual Governance Statement, reports of internal and external auditors

#### 5 UPDATES TO THE CODE OF CORPORATE GOVERNANCE

5.1 The Code of Corporate Governance has been updated, and the CGSG agreed that it reflected the current SOLACE/CIPFA framework and guidance, "Delivering Good Governance in Local Government 2012". The Code is attached at Appendix A for consideration and approval by Members.

#### 6 ANNUAL GOVERNANCE STATEMENT

6.1 The Annual Governance Statement has been drafted taking into account the findings of the annual governance review. The review has found that only minor improvements are needed to the control environment in a small number of areas. The Annual Governance Statement is attached at Appendix B for consideration and approval by Members.

#### 7 REVIEW OF PROCESS FOR GOVERNANCE REVIEW

7.1 The current process for reviewing corporate governance arrangements has been in place for a number of years. A review is being carried out on the process and it is likely that this will be streamlined from 2014/15 to bring it in line with the Sunderland City Council model which was updated in 2012.

#### 8 CONCLUSION

- 8.1 The Authority has robust and effective governance and internal control arrangements in place. The views elicited during the review from Members and all senior managers across the Authority demonstrate that the principles of good governance are embedded, and independent assurance has been provided on all areas required, as well as some areas not specifically required.
- 8.2 The review has not identified any weaknesses that would need to be highlighted in the Authority's Annual Governance Statement.
- 8.3 A small number of actions have been identified to further develop governance and control arrangements, as detailed in the action plan attached at Appendix C.

# 9 RISK MANAGEMENT

9.1 The annual governance review provides a comprehensive assessment of the organisation's systems of control as referred to in paragraph 3. The Authority's Corporate Risk Profile is used to inform this assessment.

#### 10 FINANCIAL IMPLICATIONS

10.1 All financial implications by virtue of this review are contained within existing budgetary headings.

# 11 EQUALITY AND FAIRNESS IMPLICATIONS

11.1 There are no equality and fairness implications in respect of this report.

# 12 HEALTH AND SAFETY IMPLICATIONS

12.1 There are no health and safety implications in respect of this report.

# 13 RECOMMENDATIONS

- 13.1 The Committee is requested to:
  - a) Consider and comment upon the revised Code of Corporate Governance;
  - b) Consider and comment upon the Annual Governance Statement;
  - c) Receive further reports as appropriate.

# Tyne and Wear Fire and Rescue Authority

# Local Code of Corporate Governance



# **Local Code of Corporate Governance**

## INTRODUCTION

Tyne and Wear Fire and Rescue Authority (the Authority) has a corporate governance framework in place which is aimed at ensuring that we are doing the right things, in the right way, for the right people, in a timely, inclusive, open, honest and accountable manner. The corporate governance framework comprises the systems, processes, cultures and values through which we direct and controls our functions, and through which we account to, engage with and, where appropriate lead our communities.

The Authority's corporate governance framework is based upon guidance jointly issued by the Society of Local Authority Chief Executives (SOLACE) and the Chartered Institute of Public Finance and Accountancy (CIPFA) and recommended as best practice.

The framework is based upon the following six core principles:

- Focusing on the purpose of the Authority and on outcomes for the community and creating and implementing a vision for the local area;
- Members and officers working together to achieve a common purpose with clearly defined functions and roles;
- Promoting values for the Authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour;
- Taking informed and transparent decisions which are subject to effective scrutiny and managing risk;
- Developing the capacity and capability of members and officers to be effective;
- Engaging with local people and other stakeholders to ensure robust public accountability.

Each of these six core principles have supporting principles with associated requirements and the following table sets out how the Authority aims to meet these requirements.

#### **Annual Governance Review**

The Authority conducts an annual review of the effectiveness of the corporate governance framework including the system of internal control.

A Corporate Governance Steering Group (CGSG) has been established to lead this review. Membership of the CGSG is as follows:

- Assistant Chief Fire Officer Strategy and Performance
- Area Manager Strategic Planning, Risk and Assets
- Finance Manager
- Development and Review Manager

A report on the findings and recommendations arising from the review is presented to the Authority and Governance Committee.

Core Principle 1 - Focusing on the purpose of the Authority and on outcomes for the community and creating and implementing a vision for the local area - We are active members of community area for and in addition our Strategic Community Safety Plan 2013 – 2018 sets out explicitly our planned key actions and performance targets for *creating the safest community*.

Aspects of Corporate Governance to be Achieved by Authority to Reflect Best Practice	Practical measures the Authority has taken to reflect compliance	Documents/ Processes in Place to Support Compliance
Exercising strategic leadership by developing and clearly communicating the Authority's purpose and vision and its intended outcome for citizens and services users	Further promote our purpose and vision	Strategic Community Safety Plan/Integrated Risk Management Plan District Plans Departmental Level 3 plans
	<ul> <li>Review on a regular basis the Authority's vision for the local area and its impact on the Authority's governance arrangements</li> </ul>	Annual review of Corporate Governance Audit reviews Other independent reviews
	<ul> <li>Ensure that partnerships are underpinned by a common vision that is understood and agreed by all parties</li> </ul>	Partnership Agreements Partnerships Procedure
	<ul> <li>Publish an annual report and statement of assurance on a timely basis to communicate the Authority's activities, achievements, financial position and performance</li> </ul>	Annual Report and Statement of Assurance Annual Statement of Accounts
	Evaluate and review partnerships	Evaluation Library (intranet)

Core Principle 1 - Focusing on the purpose of the Authority and on outcomes for the community and creating and implementing a vision for the local area - We are active members of community area for and in addition our Strategic Community Safety Plan 2013 – 2018 sets out explicitly our planned key actions and performance targets for *creating the safest community*.

Ensuring that users receive a high quality of service whether directly, or in partnership, or by commissioning	Consider how the quality of service for users is to be measured and make sure that the information needed to review service quality effectively and regularly is available	Strategic Community Safety Plan/Integrated Risk Management Plan 'After the Incident' Survey Consultation plans Evaluation of performance against Local Indicators
	<ul> <li>A project evaluation toolkit has been introduced to assess quality of service provision</li> </ul>	Project Evaluation Toolkit and Library
	Effective arrangements to identify and deal with failure in service delivery are in place	Operational Assurance Team Standard Operating Procedures Monitoring Officer

Core Principle 1 - Focusing on the purpose of the Authority and on outcomes for the community and creating and implementing a vision for the local area - We are active members of community area for and in addition our Strategic Community Safety Plan 2013 – 2018 sets out explicitly our planned key actions and performance targets for *creating the safest community*.

3Ensuring that the Authority makes the best use of resources and that tax	<ul> <li>Value for money is measured and the results considered prior to making decisions.</li> </ul>	Strategic Community Safety Plan/IRMP
payers and service users receive excellent value for money	Information needed to review value for money and performance effectively is available to managers and the Authority. The Authority also measures the environmental impact of policies, plans and decisions.	Medium Term Financial Strategy Value for Money Framework Annual Audits Quarterly performance reports Annual Report and Statement of Assurance Statement of Accounts Authority reports SMT reports Environmental Strategy ICT Strategy Procurement Strategy Evaluation Toolkit and Library

Aspects of Corporate Governance to be Achieved by Authority to Reflect Best Practice	Practical measures the Authority has taken to reflect compliance	Documents/ Processes in Place to Support Compliance
Ensuring effective leadership throughout the Authority and being clear about executive and non-executive functions and of the roles and responsibilities of the scrutiny function	The Authority does not require an executive committee however a clear statement of the respective roles and responsibilities of the scrutiny function is set out including its approach towards putting this into practice.	Standing Orders and Financial Regulations
Turiculori	A clear statement of the respective roles and responsibilities of Authority members, members generally and of senior officers is set out.	Standing Orders and Financial Regulations Delegation Scheme Codes of Conduct Job descriptions Role maps
Ensuring that a constructive working relationship exists between Authority members and officers and that the responsibilities of members and officers are carried out to a high standard	A scheme of delegation and reserve powers within the constitution, including a formal schedule of those matters specifically reserved for collective decision of the Authority taking account of relevant legislation has been agreed and is monitored and updated when required.	Standing Orders and Financial Regulations Delegation Scheme

•	The Chief Fire Officer is responsible and accountable to the Authority for all aspects of operational management.	Delegation Scheme
•	Protocols have been developed to ensure that the Chairman and Chief Fire Officer negotiate their respective roles early in the relationship and that a shared understanding of roles and objectives is maintained	Role map Job description Performance Management Standing Orders and Financial Regulations Code of Conduct for Members Code of Conduct for Officers
•	A senior officer is responsible to the Authority for ensuring that appropriate advice is given on all financial matters, for keeping proper financial records and accounts, and for maintaining an effective system of internal financial control	<ul> <li>The Finance Officer is the Authority's Section 151 Officer. The Constitution sets out the functions of Section 151</li> <li>Officer as follows:</li> <li>Ensuring lawfulness and financial prudence of decision making</li> <li>Administration of financial affairs</li> <li>Contributing to corporate management</li> <li>Supporting the Standards Committee</li> <li>Providing advice</li> <li>Giving financial information</li> </ul>

A different senior officer is responsible to the Authority for ensuring that agreed procedures are followed and that all applicable statutes, regulations are complied with.	The Deputy Clerk is the Authority's Monitoring Officer. The Constitution sets out functions of Monitoring Officer as follows:  • Maintaining the Constitution  • Ensuring lawfulness and fairness of decision making  • Receiving reports  • Conducting investigations  • Proper officer for access to information  • Advising whether executive decisions are within the budget and policy framework  • Providing advice

3. Ensuring relationships between the Authority, its partners and the public are clear so that each knows what to expect of the other	<ul> <li>Protocols have been developed to ensure effective communication between members and officers in their respective roles</li> </ul>	Monitoring Officer Protocol Member and Employee Codes of Conduct
	<ul> <li>A Pay Policy has been agreed which sets out the terms and conditions for remuneration of officers including an effective structure for managing the review process. In addition, Members allowances are reviewed by an effective remuneration panel as appropriate.</li> </ul>	Members Allowances Scheme National Joint Council for Local Government Services National Agreement on Pay and Conditions of Service Human Resources Committee Pay Policy
	Effective mechanisms exist to monitor service delivery	Strategic Community Safety Plan/Integrated Risk Management Plan District Plans Communication Strategy Consultation plans Value for Money Framework Budget Framework
		Performance reports
		Annual Report and Statement of Assurance

When working in partnership members are clear about their roles and responsibilities both individually and collectively in relation to the partnership and to the Authority.	Partnership Agreements
<ul> <li>When working in partnership:</li> <li>there is clarity about the legal status of the partnership</li> <li>representatives or organisations both understand and make clear to all other partners the extent of their authority to bind their organisation to partner decisions.</li> </ul>	Data Sharing Protocols  Partnership Procedure
<ul> <li>The Authority's vision, strategic plans, priorities and targets are developed through robust mechanisms, and in consultation with the local community and other key stakeholders, and that they are clearly articulated and disseminated</li> </ul>	Strategic Community Safety Plan/Integrated Risk Management Plan Performance management systems District Plans Communication Strategy Consultation plans

Core Principle 3: Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour - All Authority Members and staff are required to act in accordance with codes of conduct and high standards are promoted across the Authority and with its partners.

Aspects of Corporate Governance to be Achieved by Authority to Reflect Best Practice	Practical measures the Authority has taken to reflect compliance	Documents/Processes in Place to Support Compliance
Ensuring Authority members and officers exercise leadership by	The Authority leadership sets a tone for the	Core Values
behaving in ways that exemplify high standards of conduct and effective governance	organisation by creating a climate of openness, support and respect.	Members' Code of Conduct Employees' Code of Conduct Performance Management Framework
	Standards of conduct and personal behaviour expected of members and staff, work between	Employee Personal Development Programme
	members and staff and between the Authority, its partners and the community are defined and communicated through codes of conduct and protocols	Members' Code of Conduct Employees' Code of Conduct (incorporating anti fraud and corruption and whistle blowing protocols) Protocol on Member/ Employee Relations
	<ul> <li>Arrangements are in place to ensure that members and employees of the Authority are not influenced by prejudice, bias or conflicts of interest in dealing with different stakeholders. The Authority has in place</li> </ul>	Members' Code of Conduct Employees' Code of Conduct Financial Regulations Standing Orders

Core Principle 3: Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour - All Authority Members and staff are required to act in accordance with codes of conduct and high standards are promoted across the Authority and with its partners.

Ensuring that organisational values are put into practice and are effective  2. Ensuring that organisational values are put into practice and are effective	appropriate processes to ensure that they continue to operate in practice	Declarations of Gifts and Interests
	Shared values including leadership values both for the Authority and staff reflecting public expectations have been developed. These have been communicated with members, staff, the community and partners.	Members' Code of Conduct Employees' Code of Conduct Core Values Vision Leadership and Development Programme
	Arrangements are in place to ensure that procedures and operations are designed in conformity with appropriate ethical standards, and monitor their continuing effectiveness in practice.	Members' Code of Conduct Employees' Code of Conduct
	• An effective standards committee is in place.	Standing Orders sets out role and functions of Standards Committee
	Shared values act as a guide for decision making and as a basis for developing positive and trusting relationships within the Authority	Members' Code of Conduct Employees' Code of Conduct Integrated Personal Development System

Core Principle 3: Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour - All Authority Members and staff are required to act in accordance with codes of conduct and high standards are promoted across the Authority and with its partners.

	Governance Audit
In pursuing the vision of a partnership, a set of values has been agreed against which decision making and actions can be judged. Such values must be demonstrated by partners' behaviour both individually and collectively	Partnership Procedure

Aspects of Corporate Governance to be Achieved by Authority to Reflect Best Practice	Practical measures the Authority has taken to reflect compliance	Documents/Processes in Place to Support Compliance
Being rigorous and transparent about how decisions are taken and listening and acting on the outcome of constructive scrutiny	An effective scrutiny function which encourages constructive challenge and enhances the Authority's performance overall and of any organisation for which it is responsible in place	A range of scrutiny committees are in place including: Policy and Performance Committee Human Resources Committee Governance Committee
	Open and effective mechanisms for documenting evidence for decisions and recording the criteria, rationale and considerations on which decisions are based have been implemented.	Standing Orders and Financial Regulations Committee and Authority Management and Information System
	Arrangements are in place to safeguard members and employees against conflicts of interest and to ensure that they continue to operate in practice.	Members' Code of Conduct Employees' Code of Conduct (incorporating anti fraud and corruption and whistle blowing protocols) Code of Corporate Governance
	An effective audit committee which is independent is	Register of Gifts and Interests

Aspects of Corporate Governance to be Achieved by Authority to Reflect Best Practice	Practical measures the Authority has taken to reflect compliance	Documents/Processes in Place to Support Compliance
	being maintained.	Anti-Fraud and Corruption Policy Governance Committee Independent Chair Independent Member Development for all Members
	Effective transparent and accessible arrangements for dealing with complaints have been implemented.	Compliments, Comments and Complaints Procedure Monitoring Officer role
2. Having good quality information, advice and support to ensure that services are delivered effectively and are what the community wants/needs	Those making decisions, whether for the Authority or a partnership, are provided with information that is fit for the purpose – relevant, timely and gives clear explanations of technical issues and their implications	Evidence based Authority reports  Member Induction, Learning and Development Programme Standing Orders and Financial Regulations Delegation Scheme Results of consultation exercises
	Professional advice on matters that have legal or financial implications is available and recorded well in	Role of Finance Officer and Deputy Clerk

Aspects of Corporate Governance to be Achieved by Authority to Reflect Best Practice	Practical measures the Authority has taken to reflect compliance	Documents/Processes in Place to Support Compliance
	advance of decision making and used appropriately.	
3. Ensuring that an effective risk management system is in place	Risk management is embedded into the culture of the organisation, with members and managers at all levels recognising that risk management is part of their job	Risk Management Policy Statement and Strategy Risk Management Framework Risk Management Learning and Development for Members and Officers Internal Audit and Risk Management Protocol Standing Orders and Financial Regulations
	<ul> <li>Arrangements are in place for whistle blowing to which staff and all those contracting with the Authority have access</li> </ul>	Employees' Code of Conduct (incorporating anti fraud and corruption and whistle blowing protocols) Whistle blowing arrangements for the public Compliments and Complaints Policy and Procedures

Aspects of Corporate Governance to be Achieved by Authority to Reflect Best Practice	Practical measures the Authority has taken to reflect compliance	Documents/Processes in Place to Support Compliance
4. Using their legal powers to the full benefit of the citizens and communities in their area   Output  Description:	<ul> <li>The Authority actively recognises the limits of lawful activity placed on it by, for example the ultra vires doctrine but also strives to utilise powers to the full benefit of our communities.</li> <li>The Authority recognises the limits of lawful action and observes both the specific requirements of legislation and the general responsibilities placed on the Authority by public law.</li> <li>The Authority observe all specific legislative requirements placed upon it, as well as the requirements of general law, and in particular to integrate the key principles of good administrative law – rationality, legality and natural justice into their procedures and decision making processes.</li> </ul>	Standing Orders and Financial Regulations Monitoring Officer Protocol Audit and Inspection Letter Finance Officer role Deputy Clerk role

# Core Principle 5: Developing the capacity and capability of members and officers to be effective -

The Authority recognises the importance of having highly skilled and motivated Members and staff to deliver its priorities and to sustain public confidence in its services. The Authority is committed to the development of Members and staff skills, knowledge and performance through programmes of induction, training and development.

Aspects of Corporate Governance to be Achieved by Authority to Reflect Best Practice	Practical measures the Authority has taken to reflect compliance	Documents/Processes in Place to Support Compliance
Making sure that members and officers have the skills, knowledge, experience and resources they need to perform well in their roles	We provide induction and training programmes tailored to individual needs and opportunities for members and officers to update their knowledge on a regular basis.	Member and Officer Induction Programme Integrated Personal Development System Member Learning and Development Programme Workforce Development Plan Investors in People accreditation Stonewall Workplace Equality Index
	We ensure that the statutory officers have the skills, resources and support necessary to perform effectively in their roles and that these roles are properly understood throughout the organization.	Delegation Scheme Roles and responsibilities defined Finance Officer and Deputy Clerk advisors to the Authority

# Core Principle 5: Developing the capacity and capability of members and officers to be effective -

The Authority recognises the importance of having highly skilled and motivated Members and staff to deliver its priorities and to sustain public confidence in its services. The Authority is committed to the development of Members and staff skills, knowledge and performance through programmes of induction, training and development.

2.Developing the capability of people with governance responsibilities and evaluating their performance, as individuals and as a group	Skills required by members and officers are regularly assessed and the Authority is committed to develop those skills to enable roles to be carried out effectively.	Member and Officer Induction Programme Integrated Personal Development System Member Learning and Development Programme Workforce Development Plan
3. Encouraging new talent for membership of the Authority so that best use can be made of individuals' skills and resources in balancing continuity and renewal	The Authority actively develops skills on a continuing basis to improve performance including the ability to scrutinise and challenge and to recognise when outside expert advice is needed ensuring that effective arrangements are in place for reviewing the performance of the Service as a whole and of individual members and agreeing an action plan which aims to address any training or development needs.	Investors in People Gold award and 'Champion' status Member Learning and Development Programme Leadership Programme Stonewall Workplace Equality Index Equality Strategy Excellent status in Equality Framework for Fire and Rescue Services

Core Principle 6: Engaging with local people and other stakeholders to ensure robust public accountability - The Authority has a consultation framework aimed at ensuring the community is given the opportunity to be involved in, and influence, policy-making, service delivery and evaluation in order to continually improve services.

Aspects of Corporate Governance to be Achieved by Authority to Reflect Best Practice	Practical measures the Authority has taken to reflect compliance	Documents/Processes in Place to Support Compliance
Exercising leadership through a robust scrutiny function which effectively engages local people and all local institutional stakeholders, including partnerships, and develops constructive accountability relationships	<ul> <li>The Authority makes clear its role and responsibilities to Members, staff and the community.</li> <li>Stakeholders to whom we are accountable are considered and the effectiveness of the relationships assessed with appropriate changes made</li> <li>An annual report on all activities including scrutiny functions is published.</li> <li>External challenge is regularly sought and acted upon</li> </ul>	Strategic Community Safety Plan/Integrated Risk Management Plan  Strategic Partnerships User surveys Consultation Plan  Annual Report and Statement of Assurance Annual Governance Statement Freedom of Information Publication Scheme External assessment reports
2.Taking an active and planned approach to dialogue with and accountability to the public to ensure effective and appropriate service delivery whether directly by the Authority, in partnership or by commissioning	<ul> <li>Clear channels of communication are in place with all sections of the community and other stakeholders including monitoring arrangements to ensure that they operate effectively.</li> <li>Meetings are held in public unless there are good reasons for confidentiality.</li> </ul>	Communications Strategy IRMP consultation 'After the Incident' Survey Other user surveys Members of the public may attend all meetings subject to the exceptions set out in the

Core Principle 6: Engaging with local people and other stakeholders to ensure robust public accountability - The Authority has a consultation framework aimed at ensuring the community is given the opportunity to be involved in, and influence, policy-making, service delivery and evaluation in order to continually improve services.

	Standing Orders
<ul> <li>Arrangements are in place to enable the Authority to engage with all sections of the community effectively. These arrangements recognise that different sections of the community have different priorities and establish explicit processes for dealing with these competing demands.</li> </ul>	Consultation Strategy Focus Groups Community Safety Advocates 'After the Incident' Survey User surveys Community engagement Plan Freedom of Information Publication Scheme
<ul> <li>A clear policy on the types of issues it will meaningfully consult on or engage with the public and service which includes a feedback mechanism for those consultees to demonstrate what has changed as a result has been established.</li> </ul>	Consultation Policy User surveys Community Engagement Plan Freedom of Information Publication Scheme
<ul> <li>An Annual Report and Statement of Assurance is published on an annual basis giving information on the Authority's vision, strategy, plans and financial statements as well as information about its outcomes, achievements and the satisfaction of service users in the previous period</li> </ul>	Annual Report and Statement of Assurance Annual Statement of Accounts Strategic Community Safety Plan/Integrated Risk Management Plan

Core Principle 6: Engaging with local people and other stakeholders to ensure robust public accountability - The Authority has a consultation framework aimed at ensuring the community is given the opportunity to be involved in, and influence, policy-making, service delivery and evaluation in order to continually improve services.

	The Authority ensures that it is open and accessible to the community, service users and its staff and that it has made a commitment to openness and transparency in all its dealings, including partnerships subject only to the need to preserve confidentiality in those specific circumstances where it is proper and appropriate to do so	Standing Orders and Financial Regulations Community Fire Stations Partnership Agreements Partnership Procedure Data Sharing Protocols Community Engagement Plan Freedom of Information Publication Scheme
	All outwardly facing projects we deliver are evaluated by asking local people and stakeholders	Evaluation Toolkit and Library
3. Making best use of human resources by taking an active and planned approach to meet	A clear policy on how staff and their representatives are consulted and involved in decision making has been implemented	Joint Consultative Committee Investors in People Representative Body Protocol
responsibility to staff	We clearly publish results of consultation and evaluation involving staff	Evaluation Toolkit and Library

# **Code of Corporate Governance**

# **Glossary of Terms**

# **Authority Risk Management Group**

A group of senior officers of the Authority tasked with ensuring that the major strategic risks of the Authority are properly identified, managed and minimised.

### **Consultation Plan**

This is a plan to obtain the views of stakeholders on the efficiency, effectiveness and economy of services and use these results to inform the process of continuous improvement.

# **Delegation Scheme**

An agreed document setting out the various powers delegated by the Authority to appropriate committees, members and officers.

# **Freedom of Information Publication Scheme**

This provides details of the classes of information published by the Authority, how the public can access it and whether a charge is levied for accessing the information.

# **Financial Regulations**

This details the rules of procedure governing the way in which management of the Authority's financial affairs will be conducted.

# **Investors in People**

Investors in People is a national award which recognises the commitment of an organisation to developing its people in order to achieve its corporate objectives and to improve performance.

## **Monitoring Officer**

The Monitoring Officer has the responsibility for advising on the legality of the Authority's actions. The Authority has appointed the Head of Legal and Democratic Services, City of Sunderland, as the appropriate officer.

## **Members Code of Conduct**

Agreed Code set out in the Standing Orders governing how Members must conduct themselves whilst carrying out Authority business or acting as a representative of the Authority.

# **Officers Code of Conduct**

Agreed Code detailing the standards of conduct expected of all employees whilst carrying out their work for the Authority.

# **Equality Strategy**

The document that details the Authority's plans to achieve race, gender and disability equality at work and our commitment to support a diverse workforce serving a diverse community.

# **Standing Orders**

Rules of procedure governing the way in which the Authority operates, how decisions are made and the procedures which must be followed to ensure all our interactions (including procurement) are efficient, transparent and accountable to the community we serve.

Strategic Community Safety Plan and Integrated Risk Management Plan A risk based document setting out in detail for the Authority the plans, policies, resource allocations and performance targets for the next five years.

### **Governance Committee**

A Committee of the Authority set up to promote and maintain high standards of conduct by Members.

# **Section 151 Responsibilities**

Under Section 151 of the Local Government Act 1972, the authority must appoint one of its Officers as responsible for the proper financial administration of its affairs. The Authority has appointed the Finance Officer, City of Sunderland, as the appropriate Officer.

# **Whistle Blowing Policy**

A policy adopted by the Authority setting out how employees and the public can report matters of concern to the appropriate Officers within the Authority on a confidential basis.

# TYNE AND WEAR FIRE AND RESCUE AUTHORITY ANNUAL GOVERNANCE STATEMENT 2013/2014

# 1 SCOPE OF RESPONSIBILITY

- 1.1 Tyne and Wear Fire and Rescue Authority (the Authority) is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. The Authority also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.
- 1.2 In discharging this overall responsibility, the Authority is responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, which includes arrangements for the management of risk.
- 1.3 The Authority has had a Code of Corporate Governance in place since 2003, revised during 2013/14. The Authority has approved and adopted a code of corporate governance, which is consistent with the principles of the CIPFA/SOLACE Framework *Delivering Good Governance in Local Government*. The revised Code is available on the Authority's website (<a href="www.twfire.gov.uk">www.twfire.gov.uk</a>) or can be obtained from the Fire and Rescue Service Headquarters.
- 1.4 This Statement explains how the Authority has complied with the code and also meets the requirements of regulation 4(2) of the Accounts and Audit (England) Regulations 2011 in relation to the publication of a statement of internal control.

### 2 THE PURPOSE OF THE GOVERNANCE FRAMEWORK

- 2.1 The governance framework primarily includes systems and processes and culture and values by which the Authority directs and controls its activities and engages with the community. It enables the Authority to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost-effective services.
- 2.2 The system of internal control is a significant part of that framework and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of the Authority's policies, aims and

objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

2.3 The governance framework has been in place at the Authority for the year ended 31 March 2014 and up to the date of approval of the Annual Report and Statement of Assurance and Statement of Accounts.

### 3 THE GOVERNANCE FRAMEWORK

- 3.1 There is a clear vision of the Authority's purpose and intended outcomes for service users that is clearly communicated, both within the organisation and to external stakeholders:
  - The Strategic Community Safety Plan draws together a shared vision, principles for action and priorities (strategic objectives). For each strategic objective, key targets have been identified. The Plan sets out explicitly the key actions and performance targets for the future, and these are clearly linked with departmental/district service plans and resources. The Plan outlines the Authority's roles and responsibilities, the context in which it operates, what the strategic priorities and improvement objectives are, how the Authority will realise its vision, what its performance improvement and monitoring arrangements are, performance indicators and a financial overview. The financial overview section provides background commentary to the issues the Authority has considered in setting the budget and in preparing the Medium Term Financial Strategy.
  - The Strategic Community Safety Plan incorporates our Integrated Risk Management Plan (IRMP) actions which recognises the risks within the Authority boundaries that are identified in the Community Risk Profile and need to be addressed, and ensures that the available resources are targeted at these risks.
  - Communication of objectives to staff and stakeholders takes place through the following means:
    - Distribution of the Strategic Community Safety Plan on the Authority's website and intranet;
    - Consultation with staff, public and stakeholders on IRMP proposals;
    - The issue of an Annual Report and Statement of Assurance setting out the Authority's priorities, how the Authority spent money on achieving these during the last financial year, and how successful the Authority has been;
    - Through the Authority's Investors in People processes;
    - Posters throughout the Authority's premises;

- Listening events and staff presentations;
- 3.2 Arrangements are in place to review the Authority's vision and its implications for the Authority's governance arrangements:
  - The Strategic Community Safety Plan, the Integrated Risk Management Plan and all priorities are regularly reviewed to provide a long-term focus for the Authority.
  - Through reviews by external bodies the Authority constantly seeks ways
    of securing continuous improvement. The Authority has professional and
    objective relationships with these external bodies.
  - There are comprehensive annual reviews of the local Code of Corporate Governance to ensure that it is up to date and effective.
- 3.3 Arrangements exist for measuring the quality of services for users, for ensuring they are delivered in accordance with the Authority's objectives and for ensuring that they represent the best use of resources:
  - There are clear and effective performance management arrangements including personal development plans for all staff, which address financial responsibilities and include equality objectives.
  - There is regular reporting of performance against key targets and priorities to the Authority's Strategic Management Team, the Governance Committee and the Policy and Performance Committee.
  - Services are delivered by suitably qualified/trained/experienced staff and all posts have detailed job profiles/descriptions and person specifications.
  - External auditors deliver an opinion annually on whether the Authority is providing value for money.
- 3.4 The roles and responsibilities of all officers and staff are clearly defined and documented, with clear delegation arrangements and protocols for effective communication:
  - Standing Orders and Financial Regulations are in place and these set out how the Authority operates and how decisions are made, including a clear Delegation Scheme.
  - The Standing Orders and Delegation Scheme indicates responsibilities for functions and sets out how decisions are made.

- A system of scrutiny is in place whereby the Governance Committee
  provides independent scrutiny of the Authority's financial and non-financial
  performance to the extent that it affects the Authority's exposure to risk
  and weakens the control environment; and the Policy and Performance
  Committee scrutinises performance information in respect of the
  Authority's duty to secure best value and to consider policy initiatives in
  respect of emerging issues.
- 3.5 Codes of Conduct defining the standards of behaviour for Members and staff are in place, conform with appropriate ethical standards, and are communicated and embedded across the organisation:
  - The following are in place:
    - Members' Codes of Conduct;
    - Employees' Code of Conduct;
    - · Registers of Interests, Gifts and Hospitality;
    - Monitoring Officer Protocols.
- 3.6 Standing orders, standing financial instructions, a scheme of delegation and supporting procedure notes/manuals, which are reviewed and updated as appropriate, clearly define how decisions are taken and the processes and controls required to manage risks:
  - The Head of Financial Resources at Sunderland City Council is the designated Finance Officer in accordance with Section 151 of the Local Government Act 1972 ensuring lawfulness and financial prudence of decision-making, and is responsible for the proper administration of the Authority's financial affairs.
  - The Deputy Clerk is the Authority's Monitoring Officer who has maintained an up-to-date version of the Standing Orders and has endeavoured to ensure lawfulness and fairness of decision making.
  - The Authority has in place up to date financial procedure rules and procurement rules which are subject to regular review.
  - Written procedures are in place covering financial and administrative matters, as well as HR policies and procedures. These include:
    - Codes of Conduct (incorporating anti fraud and whistle blowing protocols);
    - Health and Safety Policy;
    - Compliments, Comments and Complaints Policy;
    - Corporate Risk Management Strategy;
    - Procurement Codes of Practice;
    - Partnerships procedure;

- Treasury Management Strategy based upon CIPFA's Treasury Management Codes;
- Functional budget management schemes.
- There are robust and well embedded risk management processes in place, including:
  - Risk Management Strategy and Policy Statement;
  - Corporate Risk Profile;
  - Integrated Risk Management Plan;
  - Nominated Risk Manager;
  - Corporate Risk Management Group;
  - Partnerships Risk Register;
  - Member Risk Champion;
- There are comprehensive budgeting systems in place and a robust system of budgetary control, including formal quarterly and annual financial reports, which indicate financial performance against forecasts.
- The Authority has achieved accreditation to ISO22301 and Business Continuity Plans are in place which are subject to ongoing review, development and testing.
- There are clearly defined capital expenditure guidelines and capital appraisal procedures in place.
- Appropriate project management disciplines are utilised.
- The Authority participates in the National Fraud Initiative and subsequent investigations.
- 3.7 The core functions of an audit committee, as identified in CIPFA's *Audit Committees Practical Guidance for Local Authorities*, are undertaken by members.

The Authority has a Governance Committee which, as well as approving the Authority's Statement of Accounts, undertakes an assurance and advisory role to:

- consider the effectiveness of the Authority's corporate governance arrangements, risk management arrangements, the control environment and associated anti-fraud and anti-corruption arrangements and seek assurance that action is being taken on risk-related issues identified by auditors and inspectors;
- be satisfied that the Authority's assurance statements, including the Statement of Internal Control, properly reflect the risk environment and any actions required to improve it;

- receive and consider (but not direct) internal audit's strategy, plan and monitor performance;
- receive and consider the external audit plan;
- review a summary of internal audits, the main issues arising, and seek assurance that action has been taken where necessary;
- receive and consider the annual report of internal audit;
- consider the reports of external audit agencies, including the Annual Audit Letter;
- ensure that there are effective relationships between external and internal audit, inspection agencies and other relevant bodies, and that the value of the audit process is actively promoted;
- review the external auditor's opinions and reports to members, and monitor management action in response to the issues raised by external audit; and
- make recommendations or comments to the Authority as appropriate.
- 3.8 Arrangements exist to ensure compliance with relevant laws and regulations, internal policies and procedures, and that expenditure is lawful. All reports are considered for legal issues before submission to members:
  - The Deputy Clerk is the Authority's designated Monitoring Officer and a protocol is in place with all Principal Officers, to safeguard the legality of all Authority activities.
  - The Authority maintains an Internal Audit Service, provided by Sunderland City Council. An independent annual review of its effectiveness is undertaken which concluded that it operated in accordance with professional standards. Internal audit work is planned on the basis of risk.
- 3.9 Arrangements for whistle-blowing and for receiving and investigating complaints from the public are in place and are well publicised:
  - The Authority is committed to establishing and maintaining effective reporting arrangements to ensure that, where an individual, whether an employee of the Authority, a Member, or any member of the public, has serious concerns regarding the conduct of any aspect of the Authority's business, they can do so through a variety of avenues, promptly and in a straight forward way.

- The framework in place to ensure the aims of this Policy are met are set out in the Whistle Blowing arrangements which are included in the Employees' Code of Conduct. Members of the public currently raise issues through the Compliments, Comments and Complaints procedure and there is also a whistle blowing policy and procedure for members of the public.
- Monitoring records held by the Deputy Clerk on behalf of Members, and the Chief Fire Officer on behalf of staff and members of the public reveal that the whistle blowing arrangements are being used, and that the Authority is responding appropriately. The whistle blowing arrangements have assisted with the maintenance of a strong regime of internal control.

# 3.10 Arrangements exist for identifying the development needs of members and Principal officers in relation to their strategic roles:

- The Authority has a Members Learning and Development Programme in place which sets out a clear commitment to Members to provide a range of learning and development opportunities which will improve their knowledge, skills and abilities in their individual or collective roles in meeting Authority strategic objectives. In addition Members have access to their nominating authority learning and development policies, plans and procedures.
- The Elected Member Learning and Development Programme aims:
  - To provide comprehensive Member development;
  - To ensure that all newly elected Members are properly inducted into the Authority;
  - To ensure that all emerging needs for both individuals and across the board are identified and addressed:
  - To ensure that resources available for Member development are effectively used.
- The Authority has a Human Resource Strategy to enable and support the organisation in managing the performance of all of its employees through effective policies, procedures and working practices and is key to ensuring that the organisation meets the needs of the community. This includes assessing ability against requirements of the role, annual performance review focusing on strengths and highlighting areas of weakness, job related training, and ongoing evaluation and includes the extent to which an employee understands and supports the values of the Authority.
- 3.11 Clear channels of communication have been established with all sections of the community and other stakeholders, ensuring accountability and encouraging open consultation:

- The Authority has a Consultation Strategy which aims to ensure that consultation activity is effectively co-ordinated across the Authority and with partner agencies, impacts on service delivery, and is delivered to a high standard.
- The strategy is complemented by the Community Engagement Strategy which outlines the Authority's approach to engaging with the community, in particular minority and vulnerable sectors of society.
- 3.12 Governance arrangements with respect to partnerships and other group working incorporate good practice as identified by the Audit Commission's report on the governance of partnerships, and are reflected in the Authority's overall governance arrangements:
  - The Authority has published a Partnerships Procedure which includes a template for Partnership Agreements and a Partnership Toolkit. The procedure is designed to provide a corporate framework for all staff involved in considering new partnership working, and to assist Members and officers to review existing arrangements.
  - A Register of Partnerships is maintained. The deliverables of all prospective and existing partnerships is closely measured using a standard framework.
  - A review of all partnerships is presented to the Strategic Management Team on an annual basis.

#### 4 REVIEW OF EFFECTIVENESS

- 4.1 The Authority has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of the effectiveness is informed by feedback from Members and the work of all senior managers within the authority who have responsibility for the development and maintenance of the governance environment, the Internal Audit Annual Report, and also by comments made by the external auditors and other review agencies and inspectorates.
- 4.2 The process that has been applied in maintaining and reviewing the effectiveness of the system of internal control includes the following:
  - The role of the Authority:
    - Elected Members have participated in the annual review of the Authority's Corporate Governance arrangements;
    - The Chair of the Authority, the Chief Fire Officer and the Finance Officer have overseen the review and signed the Annual Governance Statement.
  - The role of the Strategic Management Team:

- The findings of the Annual Governance Review have been reported to the Strategic Management Team for their consideration and approval of the Annual Governance Statement.
- The role of the Governance Committee:
- The findings of the Annual Governance Review have been reported to the Governance Committee. Under their Terms of Reference the Governance Committee has satisfied themselves that the Authority's assurance statements, including the Annual Governance Statement, properly reflect the risk environment and any actions required to improve it.
- A system of scrutiny is in place whereby the Governance Committee
  provides independent scrutiny of the Authority's financial and non-financial
  performance to the extent that it affects the Authority's exposure to risk
  and weakens the control environment; and the Policy and Performance
  Committee scrutinises performance information in respect of the
  Authority's duty to secure best value and to consider policy initiatives in
  respect of emerging issues
- A Standards Committee is also in place in accordance with the Localism Act 2011. The role of this Committee is to:
  - promote and maintain high standards of conduct by the members of the Authority;
  - assist the members of the Authority to observe the Members' Code of Conduct;
  - advise the Authority on the adoption or revision of the Members' Code of Conduct; monitor the operation of the Members' Code of Conduct;
  - advise, train or arrange to train members of the Authority on matters relating to the Members' Code of Conduct;
  - grant dispensations to Members from requirements relating to interests set out in the Members' Code of Conduct so far as not delegated to the Monitoring Officer;
  - deal with written allegations that a member of the Authority (or former member) has failed, or may have failed, to comply with the Members' Code of Conduct;
  - adopt and amend procedures to be followed for investigations and local determination of complaints;

- consider reports of the Monitoring Officer and of the Local Government Ombudsman where they concern the conduct of members of the Authority; and
- support the Monitoring Officer in his/her role.
- 4.3 All Area Managers have participated in the annual governance review through carrying out self-assessments relating to their areas of responsibility and have provided Controls Assurance Statements relating to their area of responsibility, having considered the detailed self-assessments.
- 4.4 Internal audit planning processes include consultation with the Principal Officers, reviews of the Strategic Community Safety Plan, Integrated Risk Management Plan and the Corporate Risk Profile. Audit work is risk based and includes risks in relation to the achievement of service objectives, and Internal Audit Services carries out regular systematic auditing of key financial and non-financial systems. The external auditor, Mazars, has carried out an independent review of the effectiveness of Internal Audit by reference to the new standards for internal audit (UK Public Sector Internal Audit Standards, which apply across the whole of the public sector). This concluded that the service continues to comply with the relevant standards
- 4.5 The Authority is subject to external audit which was completed by the Audit Commission in 2011/2012; responsibility for this has since passed to Mazars, a private company appointed by the Audit Commission for this purpose. The Annual Audit Letter gives independent assurance of financial control and Value for Money (including financial resilience and the overall efficiency and effectiveness of the Authority).
- 4.6 In the latest Annual Audit Letter Mazars issued an unqualified conclusion on both financial arrangements and Value for Money, and identified no significant weaknesses in the Authority's arrangements for internal control. Their report included comments that:
  - The Authority managed its financial position well. Budget setting was robust and close monitoring ensured delivery of spending within revenue and capital budget limits.
  - The Authority is financially resilient. The Medium Term Financial Strategy sets out how the Authority proposes to deal with the difficult economic climate and the cuts in funding. The Authority has considered the impact of the retention of business rates and localisation of council tax support, and is monitoring these areas closely.
  - Careful financial management has enabled the Authority to build up a
    good level of earmarked reserves that are set aside for specific plans and
    projects. The latest Value for Money profiles produced by the Audit
    Commission show that the General Fund Balance was relatively low, and
    that earmarked reserves are the highest for all fire authorities, reflecting
    the Authority's managed plans for future spending.

- 4.6 It is considered that the Annual Audit Letter give reassurance that the Authority's overall governance and control arrangements are satisfactory. The outcome of the review of effectiveness was that no significant issues were identified.
- 4.7 Findings of external bodies/audits are collated, acted upon and monitored by the Strategic Management Team.

# 5 ASSURANCE STATEMENTS

- 5.1 The Strategic Management Team, the Authority and the Governance Committee have advised us of the findings of the review of the effectiveness of the governance framework, and an action plan has been agreed for the continuous improvement of the Authority's Corporate Governance and Internal Control Arrangements.
- 5.2 We propose over the coming year to take steps to implement the action plan to further enhance the Authority's governance arrangements. We are satisfied that these steps will address the need for improvements that were identified in the review of effectiveness and will monitor their implementation and operation as part of the next annual review.

Tom Wright
Chair of the Authority

Tom Capeling Chief Fire Officer Sonia Tognarelli Finance Officer

30<sup>th</sup> June 2014

# **Tyne and Wear Fire and Rescue Authority**

# 2013/2014 Annual Review of Corporate Governance and Internal Control Arrangements

# Action Plan 2013/2014

Ref.	Corporate Improvement Objectives	Update	Responsible Officer
10	<ul> <li>Provide refresher training to managers regarding scrutiny activities</li> </ul>	Rescheduled to Autumn 2014 and included within training on governance	ACO Strategy and Performance
11	Update Quality assurance of HSC process	Complete	AM Community Safety
14	Review the Procurement Strategy	Complete	Finance and Procurement  Manager
15	<ul> <li>Review the standing orders and financial regulations to take account of organisational changes</li> </ul>	Underway with slight delay- will be presented to Authority during 2014	AM Strategic Planning, Risks and Assets
16	<ul> <li>Enhance the operational inspection process and quality assurance programme for Stations</li> </ul>	Complete	AM Service Delivery
17	Provide all relevant staff with a reminder of partnership approval process and update the Partnership Register	Slipped to August 2014	AM Community Safety
18	Prepare the Authority's first Statement of Assurance to comply with National Fire and Rescue Framework 2012	Complete	AM Strategic Planning, Risks and Assets

19	Review Audit arrangements in response to the Local Audit and Accountability Bill 2013	Complete	AM Strategic Planning, Risks and Assets
20	Undertake Operational Assessment and Peer Review	September 2014 (rescheduled from March 2014)	Strategic Management Team
21	Achieve ISO accreditation for Business Continuity (Leadership and Governance)	Complete April 2014	AM Strategic Planning, Risks and Assets

Actions 10, 15, 17 and 20 carried forward to 2014-15

# **Action Plan 2014/2015**

Four further actions have been added for 2014-15

Ref.	Corporate Improvement Objectives	Update	Responsible Officer
22	Carry out Your Views Count survey	October 2014	AM Strategic Planning, Risks
			and Assets
23	Review the members' learning programme	October 2014	AM:HR
24	Further roll out the Risk Management and Assurance Database to	As per schedule throughout	AM Strategic Planning, Risks
	cover more areas of the organisation's activities	2014-15	and Assets
25	Review and update the Whistleblowing and Fraud and Corruption	December 2014	AM Strategic Planning, Risks
	policies to ensure compliance with new guidance		and Assets