



# Assessment and Improvement Plan

2019/20

Date: November 2019

## Improvement Plan 2019/20

1. Tyne and Wear Fire and Rescue Service (TWFRS) has a longstanding commitment to continuous improvement and as part of this, welcomes and seeks to learn from independent assessment.
2. The new programme of inspections of Fire and Rescue Services in England by Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) was implemented in 2018/19 and all 45 Fire and Rescue Services in England have now been inspected. Our inspection took place between December 2018 and February 2019. There are three pillars of inspection: effectiveness, efficiency and leadership. Fire and Rescue Services are judged in the following categories: outstanding, good, requires improvement or inadequate. TWFRS were categorised as 'good' across all pillars of inspection. A further full round of inspections will be undertaken in 2020/21.
3. This Improvement and Assessment Plan has two purposes:

**Section 1: The Assessment Plan** sets out the agreed mechanisms TWFRS will use to seek assessment of our progress. These will largely be independent although they may result from benchmarking or other exercises conducted by ourselves. This enables us to annually review the mechanisms that we will use, to ensure that our approach is proportionate. The HMICFRS inspection is included within the Assessment Plan.

**Section 2: The Improvement Plan** sets out the improvement actions, which have arisen through assessments or other, agreed routes, to allow progress against these to be regularly monitored by Members and the Executive Leadership Team (ELT). Actions as a result of Inspection will be noted in this plan.
4. The Improvement Plan contains only strategic, cross cutting improvement actions from a range of sources. It does not replace any other strategic document - it is a monitoring tool bringing improvement actions conveniently into one location.
5. It specifically does not include activities, which change the Service to align risk and available resources. These are contained within the Integrated Risk Management Plan (IRMP).
6. The Improvement Plan includes business continuity improvement but only those actions, which are classed as being more significant than a minor issue.
7. More detailed and lower level improvement actions will normally be managed through the departmental action plans of specific teams.

## Section 1: Assessment Plan

This section sets out the agreed mechanisms we will use to assess our progress. It also indicates, where appropriate, the level of improvement actions that will be included in the Improvement Plan for each mechanism. Shaded boxes indicate assessments planned for 2019/20.

Audit / Self-Assessment	Frequency and date of last assessment	Future assessments	Notes	Level of actions to be included in Improvement Plan	Costs
<p><b>Annual Audit Letters (AAL)</b></p> <p>(This is a statutory requirement)</p>	<p>Annual</p> <p>2018/19 letter received 16th August 2019 and was reported to the Fire Authority at 16th September 2019 meeting</p>	<p>Commencing Spring 2020 with final letter expected in August 2020</p>	<p>The AAL comprises of two elements: audit of Fire Authority financial statements and the Value for Money (VFM) Conclusion</p> <p>The Statement of Accounts for 2019/20 must be closed by the statutory deadline of 31st May 2020 and be audited by 31st July 2020.</p> <p><b>Oct 2019</b> The Statement of Accounts for 2018/19 was closed by the new earlier statutory deadline of 31st May 2019 and was audited by 31st July 2019. The Authority achieved an unqualified audit opinion on both the Accounts and VFM judgement.</p> <p><b>Lead officer: Strategic Finance Manager</b></p>	<p><b>All</b></p> <p><i>NB the last seven Annual Audit Letters contained no substantive improvement actions for the Authority</i></p>	<p>£23,590 for 2018/19 plus an additional fee of £3,652 for McCloud / Sergeant pension work</p> <p>£23,590 for 2019/20 in accordance with the PSAA Ltd tendering exercise.</p>
<p><b>Internal Audit</b></p> <p>(This is a statutory activity included in a local government SLA)</p>	<p>Annual risk based programme</p> <p>Closing internal audit reported to Governance Committee on 29th July 2019 meeting</p>	<p>New programme began April 2019.</p> <p>Regular reviews provided to Governance Committee.</p> <p>Next Governance Committee meeting 9th March 2020</p>	<p>Internal Audit is provided on an annual programme basis by Sunderland City Council. Internal Audit is required under good governance principles and is an integral part of internal control. The provision of this by a separate partner body provides additional independence and transparency.</p> <p>The March 2019 Governance Committee report included progress with 2018/19 audit and proposed Audit Programme for 2019/20.</p> <p><b>Oct 2019</b> During the 29th July meeting the final 2018/19 internal audit report was discussed. The audit provided sufficient assurance on internal control and no high risks were identified. The 23rd September meeting received substantial assurances on all audit</p>	<p><b>High, Significant and Medium</b></p> <p>(Low risk, and observation will be actioned through departmental plans. All actions are reported to the Governance Committee by Internal Audit).</p> <p><i>NB there were no high or significant risks in the last five years.</i></p>	<p>£36,043 for 2018/19</p> <p>£36,908 for 2019/20.</p>

Audit / Self-Assessment	Frequency and date of last assessment	Future assessments	Notes	Level of actions to be included in Improvement Plan	Costs
			<p>work completed so far in 2019/20.</p> <p><b>Lead officer: CFO in conjunction with the Strategic Finance Manager</b></p>		
<p><b>Annual Governance Review (internal)</b></p> <p>(This is a statutory requirement)</p>	<p>Annual</p> <p>Last report completed May 2019</p>	<p>Next report due May 2020</p>	<p>The Authority has a statutory duty to prepare an Annual Governance Statement. To prepare for this, a governance review is carried out using CIPFA good practice criteria. This must be included in the Statement of Accounts each year.</p> <p>The review is scrutinised by the Governance Committee and External Audit and subsequently approved by Authority</p> <p>The Authority continues to adopt the updated CIPFA principles in compiling its Annual Governance Statement, with the next annual report due in May 2020.</p> <p><b>Oct 2019</b> Self assessments will be sent to Department Heads in December 2019. Area Managers will complete assurance statements in January 2020.</p> <p><b>Lead officer: AM Strategy and Performance</b></p>	<p><b>Key actions agreed by Authority , based on review</b></p>	<p>No cost</p>
<p><b>HMICFRS Inspection</b></p> <p>(This is a statutory requirement)</p>	<p>December 2018 - February 2019</p>	<p>2020 date to be confirmed</p>	<p>First inspection completed Autumn / Winter 2018/19. This resulted in TWFRAs being categorised as 'good' across all areas.</p> <p>An improvement action plan is in place to ensure areas for improvement are progressed, to assist in our continuous improvement journey.</p> <p><b>Lead officer: AM Strategy and Performance</b></p>	<p><b>Key actions agreed by Authority based on review report</b></p>	<p>No cost</p>
<p><b>Investors in People (IiP)</b></p>	<p>Full Assessment Triennial</p>	<p>Full assessment 2020</p>	<p>Voluntary process promoting and rewarding good practice in people management.</p>	<p><b>Key actions agreed by Authority based on review report</b></p>	<p>Up to £11.5k fee per IiP assessment</p>

Audit / Self-Assessment	Frequency and date of last assessment	Future assessments	Notes	Level of actions to be included in Improvement Plan	Costs
(Non-statutory activity)	24 Month Review completed April/May 2019  Reaccreditation due March 2020 (subject to ELT approval)		<b>Apr/May 2019</b> 24 month review confirmed and the Service continues to be recognised as an liP Gold Organisation.  Re-assessment conducted March 2018. The Service retained its Gold status of the liP accreditation.  <b>Lead officer: Strategic HR Manager</b>		every 3 years plus £1800 annual fee for interim years.
<b>Your Views Count Employee Survey</b>  (Non-statutory activity)	Annually – last survey took place Nov 2017	Autumn 2019	This survey provides an ongoing account of staff satisfaction and is be completed annually and a report provided to ELT.  Survey last undertaken in November 2017, analysis, and forward plan approved by ELT in February 2018.  <b>Oct 2019</b> The annual survey 2018 was deliberately not conducted as the HMICFRS inspection conducted their own staff survey, which provided a measure of progress (the survey closed 15 February 2019).  The staff survey in November 2019 will be based on the 2017 survey questions.  <b>Lead officer: AM Strategy and Performance</b>	<b>Key actions agreed by ELT based on survey findings annually.</b>	Cost accommodated within existing budget.
<b>Equality Peer Review (also known as the Fire &amp; Rescue Service Equality Framework)</b> (Non-statutory activity)	Triennial  Last completed June 2016	To be removed from the plan as this review now forms part of the HMICFRS	<b>Oct 2019</b> To be removed from this plan as incorporated within HMICFRS.  <b>Lead officer: Strategic HR Manager</b>	<b>Key actions agreed by Authority based on review report</b>	Incorporated within HMICFRS.

Audit / Self-Assessment	Frequency and date of last assessment	Future assessments	Notes	Level of actions to be included in Improvement Plan	Costs
<p><b>Faculty of Occupational Medicines accreditation</b></p> <p>(Non-statutory activity)</p>	<p>Not currently accredited</p>	<p>Seeking accreditation during 2019/20</p>	<p>Voluntary accreditation scheme (SEQOHS- (Safe Effective Quality Occupational Health Service) for occupational health providers.</p> <p>Gap analysis has been undertaken and we are working towards attaining the accreditation this year.</p> <p>The expectation is to provide the evidence to SEQOHS and have the assessment completed and accreditation gained within 12 months.</p> <p><b>Oct 2019</b> Policies and procedures are being revised before evidence is submitted before end March 2020.</p> <p><b>Lead officer: Strategic HR Manager</b></p>	<p><b>Any key actions agreed by Authority based on review report.</b></p> <p><b>Other actions contained in departmental action plan of occupational health team</b></p>	<p>Annual Fees: Registration £1,000</p> <p>Assessment additional £1,000</p>
<p><b>The Royal Society for the Prevention of Accidents – (RoSPA Award)</b></p> <p>(Non-statutory activity)</p>	<p>Periodic Gold award in 2018</p>	<p>Next assessment due 2020</p>	<p>Voluntary activity supported by RoSPA to promote better health in the workplace</p> <p><b>Oct 2019</b> In June 2019, the Service submitted an 8500 word submission, which referenced 92 separate pieces of evidence and a range of accident, ill health and enforcement data.</p> <p>In July 2019, the Service was awarded a prestigious RoSPA Gold Achievement Award, in recognition of practices and achievements for health and safety.</p> <p><b>Lead officer: AM Strategy and Performance</b></p>	<p><b>Key actions agreed by Authority based on assessment</b></p>	<p>Annual Fee: RoSPA Award £455.00</p> <p>RoSPA Membership Fee £435.00</p> <p>Total: £890.00</p>
<p><b>Cyber Essentials (or Cyber Essentials Plus)</b></p> <p>(Non-statutory activity)</p>	<p>Accreditation gained in August 2018 and annual assessments required to maintain accreditation</p>	<p>November 2019 and August 2020</p>	<p>Cyber Essentials certification is awarded based on a verified self-assessment to validate good practice towards Cyber security for the organisation.</p> <p>The Service achieved certification for the first time in August 2018. Re-Certification to maintain the award is an annual task.</p>	<p><b>Key actions agreed by Authority based on assessment</b></p>	<p>£300+ VAT annually</p>

Audit / Self-Assessment	Frequency and date of last assessment	Future assessments	Notes	Level of actions to be included in Improvement Plan	Costs
			<p>As the standard changes slightly from year to year this may involve some minor alterations to our infrastructure, which should ensure we exceed the standard and are again awarded the Cyber Essentials certification. The Service is currently in the process of refining submission for 2019 with a view to submitting in November 2019.</p> <p><b>Sept 2018</b> Accreditation confirmed in August 2018.</p> <p><b>Lead officer: AM Strategy and Performance</b></p>		
<p><b>Stonewall Workplace Equality Index</b></p> <p>(Non-statutory activity)</p>	<p>Once a year</p> <p>2018 Completed, achieved 84<sup>th</sup> place.</p>	<p>September 2019 for submission</p>	<p>The index is a benchmarking tool to measure progress on LGBT inclusion within the workplace. This includes a self-assessment on 10 areas of employment policy and practice and the completion of a staff survey.</p> <p><b>Sept 2019</b> The 2019 self-assessment was submitted in September 2019. Results are due early January 2020. Annual membership fee has increased from £2000 to £2500.</p> <p><b>Lead Officer: Strategic HR Manager</b></p>	<p><b>Key actions agreed by Authority based on assessment</b></p>	<p>£2500 annual membership</p>
<p><b>North East Better Health at Work</b></p> <p>(Non-statutory activity)</p>	<p>Annually</p> <p>July 2019</p>	<p>July 2020</p>	<p>The Better Health at Work Award recognises the efforts of employers in the North East and Cumbria in addressing health issues within the workplace. There are four levels to the Award – Bronze, Silver, Gold and Continuing Excellence.</p> <p><b>Oct 2019</b> Silver Award achieved in July 2019. Currently working towards the Gold Award.</p> <p><b>Lead Officer: Strategic HR Manager</b></p>	<p><b>Key actions agreed by Authority based on assessment</b></p>	<p>No cost</p>

## Section 2: Improvement Plan

This section sets out the key improvement actions based on assessments as set out above. The Plan is updated every three months, monitored every six months by ELT and forms part of the annual review of corporate governance. *Due to the removal of completed actions, to ensure references are available the numbering of actions may not be consecutive.*

Source	Area for improvement	Specific action	Lead officer	Target completion	Progress
<b>HMICFRS Inspection</b>  (This is a statutory requirement)	Effectiveness  Efficiency  Leadership	An action plan is in place to detailing areas for improvement to assist in our continuous improvement journey.  Each improvement action is supported by a Sponsor (Principal Officer), Lead Officer (Member of ELT) and Specialist Officer (Member of SLT)	CFO  ACO OD  ACO CS	April 2019- April 2021	<p><b>Oct 2019</b> Progress is managed via ELT and SLT. The Senior Management Group (SMG) meet on a quarterly basis to review progress and evidence, and this is quality assured by the Inspection Support Team.</p> <p>The Inspection Improvement Plan is a working document and available to members on request.</p>
<b>Investors in people Indicator 1</b>	Leading and Inspiring People	There is scope to further develop measures, which demonstrate that levels of trust and confidence in leaders and managers are improving.	ACO OD	May 2018	<p><b>Oct 2019</b> Regular CFO updates providing short topical messages e.g. HMICFRS preparation and outcomes and ‘thank you’ messages.</p> <ul style="list-style-type: none"> <li>• Application of learning from the Lead programme and the opportunity to build on the newly developed working relationships within SMG as they tackled the inspection process collaboratively.</li> <li>• HMICFRS report specifically referenced the following:                             <ul style="list-style-type: none"> <li>○ ‘most staff praise the services culture, leadership and values’</li> <li>○ ‘Staff awareness of leadership bond was found to be good’</li> <li>○ ‘leadership team had become more visible, approachable and honest’</li> </ul> </li> <li>• Roll out of Performance Development Review (PDR) and the SMG are leading on the new approach.</li> <li>• Effective Performance Conversation workshops for managers advocating the new adult learning approach. Workshops involve ELT members as part of the debrief.</li> </ul>



Source	Area for improvement	Specific action	Lead officer	Target completion	Progress
					<ul style="list-style-type: none"> <li>Oct 2018 SMG visits are complete and the findings have been compiled for review. The Leadership Bond will continue to be rolled out across the Service.</li> </ul> <p>April 2018 SMG have agreed a schedule of Employee Survey visits across Watches/teams to share results and highlight the way forward to action survey feedback. Topic of trust discussed as part of an ELT strategic planning event in Dec 17. Leadership and Management development activity through Engage 2018/2019 will focus on this topic.</p> <p>February 2018 Employee survey analysis undertaken and due to ELT in February 2018 October 2017 A new employee engagement survey has been designed to enable us to infer this type of information from the workforce. The survey and new action planning process (which will facilitate ownership for outcomes, action, and the communication of progress against these) will commence.</p> <p>Leadership Bond Behaviours 360 tool has been developed and undergoing testing. The roll out date is yet to be agreed.</p>
<b>Investors in people Indicator 5</b>	Recognising and Rewarding High Performance	Informal recognition from managers is sometimes infrequent or half-hearted: all managers should be encouraged to consider the impact of the words they use when engaging with staff.	ACO OD	Formal Recognition ongoing 2019  Informal Recognition complete 2018.	<p><b>Oct 2019</b> Roll out of the new PDR which the SMG are piloting</p> <ul style="list-style-type: none"> <li>Effective Performance Conversation workshops for managers, which include discussion and guidance on good practice for giving feedback.</li> <li>I3 profiling tool and 1-2-1 coaching with SMG and middle managers (over 70 coaching sessions held to date) to help develop a deeper level of self-awareness. A better level of self-awareness helps managers to make more considered choices and decisions in their actions and</li> </ul>

Source	Area for improvement	Specific action	Lead officer	Target completion	Progress
				<p><b>Complete</b></p> <p><b>Complete</b></p>	<p>language. The tool has helped managers to understand how they will react in any given situation, and how their instinctive approach can either help or hinder actions and messages. With awareness raised of areas to be more aware of and exploration of who they can partner with to address this should impact on this particular action.</p> <p><b>Oct 2018</b> updates include:</p> <ul style="list-style-type: none"> <li>• The Employee survey feedback sessions have been completed.</li> <li>• Each SLT member has been allocated a Station to develop engagement</li> <li>• The PDR pilot is in the planning stages. April 2018 Reward and Recognition paper to be presented to ELT in May 2018.</li> </ul> <p>1 - PDR re-design encourages managers to recognise work well done as well as how to feedback on areas for improvement. One of the main areas the service is addressing using the Achieve Management Development Programme, is to help current and aspiring managers to understand their role as a people manager. The programme has been developed to cover a set of core managerial skills as well as expressing clear expectations of the role of a manager. These expectations include giving and receiving feedback as well as the value of recognition. This is covered in the opening module (You and Your Development) and is reinforced throughout the remaining modules, as a tool and approach to getting the best from your people.</p> <p>2 - Coaching as a Management Style module of Achieve also supports and encourages the value of recognising staff efforts, using a coaching approach and model.</p>

Source	Area for improvement	Specific action	Lead officer	Target completion	Progress
				<p><b>Complete</b></p> <p><b>Complete</b></p> <p><b>Complete</b></p>	<p>3 - Strengthening Personal Resilience Module as part of the Lead programme also introduced the 3 'r's of effective feedback, as a key component of building resilience in others, through recognition of effort and providing effective feedback.</p> <p>As part of the 'Lead Programme' the high performing module focused on the value of recognition and feedback to support team learning and higher performance. This drew on exposure from the RAF.</p> <p>4 - Seek out good practice. Meetings with YHN, Home Group, NEAS</p> <p>5 - revisit as part of the Staff survey in October 2017.</p>
<b>Innovation Hub Pilot</b>	Efficiency and Effectiveness	To introduce an idea generation process	ACO OD	April 2019	<p><b>Oct 2019</b> Work is on hold due to staff turnover of vacancies in this area.</p> <p>Oct 2018 The first planning session was completed with Blue Watch in Sierra on the 24/10/2018. Further work will be conducted to progress ideas with idea owners through consultation with stakeholders.</p>

## Completed Assessment Actions

Audit / Self-Assessment	Frequency and date of last assessment	Future assessments	Notes	Level of actions to be included in Improvement Plan	Costs
<p><b>PSN Compliance</b></p> <p>(Non-statutory activity)</p>	<p>Frequency TBC. Audit not due until commencement of ESMCP.</p>	<p>Awaiting specific ESMCP timescales.</p>	<p>There is no active progression towards PSN, only towards ESN which is wholly encompassed within ESMCP.</p> <p>There are ongoing discussions with IT Strategy as to whether the corporate network should be upgraded to PSN and its costs implication.</p> <p><b>ELT agreed to close Nov 2017.</b></p> <p><b><i>Lead officer: AM Service Delivery &amp; AM Strategy and Performance</i></b></p>	<p><b>Key actions agreed by Authority based on assessment</b></p>	<p>All costs likely to be within ESMCP costs. Ongoing revenue cost is as of yet unknown, and to be scoped out during ESMCP.</p> <p>Frequency TBC</p>

## Completed Improvement Actions

Source	Area for improvement	Specific action	Lead officer	Target completion	Progress
Operational Assessment 2014	14. Leadership, Governance and Corporate Capacity	14a Decide on the strategic direction of wider partnership with the Health and Wellbeing agenda, including how to improve access to vulnerable people data to further enhance targeting of resources.	CFO	October 2017	Being addressed as part of Management and Organisation reviews. A delegation has been approved for a temporary SM for 6 months to support the delivery of “fire as a health asset” agenda across all five local authority areas, through the delivery of safe and well checks. An update paper will be tabled at ELT July/ August 2017. <b>Oct 2017 – Action complete.</b> Health activity incorporated into the collaboration IRMP review.
Operational Assessment 2014	16. Health and Safety	16a Consider the introduction of senior accident investigators, and/or a regional approach to providing this level of investigative skill and knowledge.	ACO OD / ACO CS	November 2017	<b>Oct 2017 – Action to close</b> - After reviewing proposals there is no requirement for such a cohort, as we have the skill set within the Service. A paper that covers elements of investigation is going to ELT in February 2018 called the ‘Work related death protocol’.
Internal Audit 2014	8. Strengthen Strengthen Payroll/HR procedures	7a Where attendance records include variations to pay relating to the person authorising the form, they should be countersigned.	AM HR L&OD		The Process is in place following recommendation from audits. Complete
		7b Complete review/amendment of Admin procedure 1-43 to reflect that AMs do not authorise overtime.			Procedure amended (July 2015). Complete
		7c Authorised signatory list should be reviewed to ensure it is appropriate and reflects current operations and staff.			The list is reviewed regularly by the Payroll team in line with audit requirements. Complete
Annual Governance Review 2013	11. Ensure effective Corporate Governance of the Authority <i>Particularly in light of legislative change</i>	11f Review Members’ learning programme	AM HR L&OD	October 2015	Complete
Annual Governance Review 2014					
Annual Governance Review 2014		11g Review and update the Whistleblowing and Fraud and Corruption policies to ensure compliance with new guidance		December 2014	Complete

Source	Area for improvement	Specific action	Lead officer	Target completion	Progress
Employee Survey December 2014	12. Staff Engagement and Communication	12a Improvement actions identified will be addressed in the Staff Engagement and Communication Strategy	AM Strategy and Performance	April 2016	Complete
Corporate Governance and Internal Control Arrangements Action Plan 2015/16	13. Internal Control	13a Review the Officer Delegation Scheme	CFO / Authority Chair	April 2016	Complete
Operational Assessment 2014	14. Leadership, Governance and Corporate Capacity	14b Consider the benefits of formalising the Authority's involvement in longer term corporate planning at an earlier stage.	Chair / Vice Chair	January 2016	FA Members involved in Strategic Planning Process and development of IRMP actions/ideas. Complete.
		14c Consider formalising the role and responsibilities of a Chief Fire Officer position to better reflect existing Member-Officer arrangements and relationships operating in other Fire and Rescue Authorities.	Chair / Vice Chair	January 2016	Being addressed as part of Management and Organisation reviews. Complete.
		14e Review the provision of FDOs and better utilise the capacity of Day Duty station managers	ACO CS	April 2017	Being addressed as part of Management and Organisation reviews. Complete – New FDO rota implemented as part of OMR with SMs now an integral element.
		14d Review the first and second call command arrangements to better reflect Gold (strategic) and Silver (tactical) resourcing.	CFO	January 2017	Addressed as part of Management and Organisation reviews. Complete.
Operational Assessment 2014	15. Community Risk Management and Prevention	15a Explore greater use of volunteers as part of the longer term community safety strategy.	AM CS / AM SD	December 2015	Completed
External Audit 2016	Voluntary Severance Scheme	The Voluntary Severance Scheme is to be updated to clarify specifically what has been delegated to the Chief Fire Officer	CFO / ACO OD	Implemented October 2016	We agree that in the interest of openness and transparency, Members should be made aware of the full costs when they receive future requests to approve early retirements,

Source	Area for improvement	Specific action	Lead officer	Target completion	Progress
		<p>and what requires Authority approval.</p> <p>The Scheme of Delegation for the Chief Fire Officer should be updated to include specific approval for delegations agreed under the Voluntary Severance Scheme.</p> <p>When the Authority considers early retirements in the future, which include an element where a decision has been taken under delegated powers by the Chief Fire Officer, the report should include full costs and where necessary, the justification / rationale for any additional payments, so that a decision can be taken in the knowledge of all relevant information.</p>			<p>including the reasons for any payments. The Voluntary Severance Scheme will be updated through Authority to clarify specifically what has been delegated to the Chief Fire Officer which in turn will update the Scheme of Delegation.</p>
Operational Assessment 2014	15. Community Risk Management and Prevention	15b Continue to explore ways of improving data sharing protocols to enhance the targeting of the most vulnerable in community.	AM CS / AM SD / AM Strategy and Performance	November 2017	<p>Information sharing protocol and Information sharing agreements have been developed and partner consultation is taking place.</p> <p>Sept 2018 - Completed</p> <p>April 2018 - the data sharing group has had its second meeting and is progressing. The target completion date will need to be extended however. TWFRS procurement of O365 should assist with the group.</p> <p>Oct 2017- Action complete, with further work to be reflected in departmental plans The North East Data Sharing Group has been set up with the initial meeting taking place on the 3<sup>rd</sup> Oct. The group is chaired by GM Risk and is hosted by the D&amp;I team who identified the need to have consistent and appropriate data sharing agreements across local authorities and police.</p>

Source	Area for improvement	Specific action	Lead officer	Target completion	Progress
Annual Governance Review	<p>11. Ensure effective Corporate Governance of the Authority</p> <p><i>Particularly in light of legislative change</i></p>	11c Review the Standing orders and financial regulations to take account of organisational changes	ACO OD Strategic Finance Manager and Deputy Monitoring Officer	<p>August 2017</p> <p>February 2018</p>	<p>Oct 2018 - Completed as confirmed by Dennis Napier.</p> <p>April 2018 - In progress. Revised draft documents received from Sunderland Legal Services</p> <p>Feb 2018 - Ongoing</p> <p>Oct 2017 - SLA Review with Sunderland Council to include Section 151 officer and PCC roles. These will be considered by Sunderland Legal and the SLA with be updated to reflect the changes.</p> <p>Sunderland CC currently considering changes to requirement for PCC representation on full Authority and changes to finance officer role.</p>