### TYNE AND WEAR FIRE AND RESCUE AUTHORITY ANNUAL GOVERNANCE STATEMENT 2023/2024



## 1 Introduction

**1.1** This Annual Governance Statement provides an overview of how Tyne and Wear Fire and Rescue Authority's (hereby known as 'the Authority') governance arrangements operate, including how they are reviewed annually to ensure they remain fit for purpose and working effectively.

## 2 Scope of responsibility

- **2.1** The Authority is responsible for ensuring that its business is conducted in accordance with the law and proper standards. It is also responsible for ensuring that public money is safeguarded, 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.
- **2.2** In discharging this overall responsibility, the Authority and Statutory Officers are responsible for putting into place proper arrangements (known as the governance framework) for:
  - The governance of its affairs; and
  - Facilitating the effective exercise of its functions, including arrangements for the management of risk.
- **2.3** The system of internal control is a significant part of the Authority's governance 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.
- **2.4** 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 aims and objectives; and
  - Evaluate the likelihood of those risks being realised, the impact should they be realised, and to manage them efficiently, effectively and economically.

### 3 The purpose of the governance framework

- **3.1** The Authority's governance framework comprises of the culture, values, systems, and by which it is directed and controlled. This enables the Authority to monitor the achievement of the Service's strategic objectives and to consider whether those objectives have led to the delivery of appropriate services and value for money.
- **3.2** For the Authority to meet the requirements of the Accounts and Audit (England) Regulations 2015 6(1) (a) and (b); it must conduct a review of the effectiveness of the system of internal control and prepare and publish an Annual Governance Statement.
- **3.3** This statement provides detail and commentary on the design and effectiveness of the governance arrangements put in place by the Authority to ensure the above.

- **3.4** The key elements of the systems and processes that comprise the Authority's governance arrangements are summarised in this document and ensures that in conducting its business, the Authority:
  - Ensures its values and ethical standards are met;
  - Operates in a lawful, open, inclusive and honest manner;
  - Enables human, financial, environmental and other resources to be managed efficiently and effectively;
  - Has effective arrangements for the management of risk;
  - Makes sure that public money and assets are safeguarded from inappropriate use, or from loss and fraud, properly accounted for and used economically, efficiently and effectively;
  - Properly maintains records and information; and
  - Secures continuous improvement in the way that it operates.

### 4 Applying the principles of good governance at Tyne and Wear Fire and Rescue Authority

- **4.1** The Authority acknowledges its responsibility for ensuring effective governance arrangements are in place and operates a Code of Corporate Governance that is consistent with the principles of the Chartered Institute of Public Finance and Accountancy (CIPFA) and the Society of Local Authority Chief Executives (SOLACE) Delivering Good Governance in Local Government Framework 2016.
- **4.2** The Authority's Code of Corporate Governance can be accessed on Tyne and Wear Fire and Rescue Service's website.
- **4.3** In order to report publicly on the extent to which the Authority complies with its Code of Corporate Governance, including how it monitors the effectiveness of its governance arrangements.
- **4.4** This statement describes the key elements of the Authority's governance framework, which brings together legislative requirements, governance principles and management processes.
- **4.5** In this document the Authority:
  - Acknowledges its responsibility for ensuring that there is a sound system of governance in place;
  - Summarises the key elements of the governance framework and the roles of those responsible for the development and maintenance of the governance environment;
  - Describes how the Authority has monitored and evaluated the effectiveness of its governance arrangements in the year;
  - Provides details of how the Authority has responded to any issue(s) identified in last year's governance statement; and
  - Reports on key governance matters identified from this annual review and provides a commitment to addressing them.
- **4.6** The governance framework has been in place at the Authority for the year ended 31 March 2024 and up to the date of approval of the Statement of Accounts.

### 5 Governance framework - Review of effectiveness

- **5.1** The Authority monitors its governance arrangements in practice and reviews them annually to ensure that they remain fit for purpose and working effectively. The review process:
  - Assesses how the Authority has complied with its Code of Corporate Governance.
  - Provides an opinion on the effectiveness of the Authority's governance arrangements.
  - Provides details of how continual improvement in the systems of governance will be achieved.
- **5.2** Key sources of assurance that inform this statement are drawn from:
  - Departmental self-assessments prepared by Tyne and Wear Fire and Rescue officers with responsibility for governance.
  - Statutory Officer Assurance Statements.
  - Feedback from elected members (Councillors).
  - Reports on the risk management arrangements and the corporate risk register.
  - The Head of Internal Audit's independent findings on the internal control environment.
  - The External Auditor's independent review of the effectiveness of the governance arrangements.
  - Any recommendations made by His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) or other external bodies or review agencies.

### 6 Key elements of the Authority's governance framework

### 6.1 Role of the Authority

- 6.1.1 The Authority is the publicly accountable body that oversees the service delivery of the fire service on behalf of the communities of Tyne and Wear. The Authority operates in accordance with a formal constitution, which details the governance arrangements under which it conducts its business. In practice, responsibilities and other functions are assigned to sub-committees of the Authority, or senior officers via the scheme of delegation.
- 6.1.2 The Authority is the decision-making body, which approves the constitution, fire service strategy, governance reporting and budgetary framework. Members with support from their officer colleagues are responsible for:
  - Determining the policy direction of the fire service;
  - Setting a budget to fund the delivery of that policy direction; and
  - Undertaking scrutiny to ensure that intended outcomes are being achieved efficiently, effectively and in accordance with statutory requirements.
- 6.1.3 The Authority's constitution sets out how it operates, the roles, responsibilities and relationships between the committees, how decisions are made and the procedures followed to ensure decisions are efficient, transparent, and accountable to local people. Some processes are required by law, while others are for the Authority to choose.

- 6.1.4 The Authority compromises of 17 elected members. Fire Authority meetings take place monthly from June to April, with the Annual General Meeting (AGM) occurring each June. At the AGM, the format and structure of the Authority's democratic decision-making process is reaffirmed, and approval is given to appoint a Chair, Deputy Chair and committees/sub-committee members. The composition of each committee reflects the political balance of the elected members and the terms of reference and responsibilities of the committees form part of the constitution.
- 6.1.5 The committee structure comprises of three standing committees the Governance Committee, Policy and Performance Committee and Human Resources Committee. Three further committees and a subcommittee assemble to address a particular issue and comprise of the Appointments Committee, Disciplinary Appeals Committee, Personnel Appeals Sub-Committee and an Emergency Committee.
- 6.1.6 The Authority and its committee structure monitor the effectiveness of the risk management arrangements, regularly review the governance arrangements, consider and review Internal and External Audit plans and reports and review, scrutinise and approve the Annual Statement of Accounts. The Authority and its committees receive regular feedback from senior officers on the delivery of services and the achievement of objectives and targets.

## 6.2 Role of the Governance Committee

- 6.2.1 The Governance Committee is a key component of the Authority's governance framework and independently assures the adequacy and effectiveness of the Authority's governance arrangements, risk management and the internal control environment.
- 6.2.2 The Governance Committee's remit and functions are based on the guidance set out in the CIPFA Audit Committees – Practical Guidance for Local Authorities and Police 2022 which identifies best practice in relation to roles and responsibilities.
- 6.2.3 The Committee is chaired by an independent person in accordance with best practice and comprises of a further two independent persons alongside elected members of the Authority to assure and provide external scrutiny.
- 6.2.4 The Committee meets regularly and scrutinises the Authority's financial and nonfinancial performance and is responsible for:
  - Monitoring the effectiveness of the Authority's risk management arrangements, control and governance processes to ensure internal control systems are effective and that policies and practices are compliant with statutory requirements and other regulations and guidance;
  - Ensuring governance arrangements are kept under continual review through reports prepared by officers with a responsibility for governance;
  - Making recommendations concerning relevant governance aspects of the constitution;
  - Considering Internal Audit's Annual Audit Plan and Report and the reports and opinions of the External Auditor, including the Auditor's Annual Report and other inspection agencies;
  - Monitoring the action in response to any issues raised by auditors and inspectors;
  - The Authority's ethical framework and the promotion of high standards of conduct, working closely with the Monitoring Officer to deal with complaints about Member conduct;

- Being satisfied that the Authority's assurances statements properly reflect the risk environment and identify the proportionate actions required to improve it;
- Approving the Annual Accounts (monitoring the financial position throughout each financial year, including the year-end out-turn position); and
- Making recommendations and comments to the Authority for consideration as appropriate.

## 6.3 Role of Statutory Officers

- 6.3.1 The Authority must appoint statutory officers who are required to help assure that the Authority conducts its affairs appropriately.
- 6.3.2 The **Head of Paid Service** (Chief Fire Officer/Chief Executive) has overall responsibility for the management and operational activities of the fire service and:
  - Provides professional advice to the Authority and its committees; and
  - Ensures a system for recording and reporting Authority decisions, together with the Monitoring Officer.
- 6.3.3 There was a change of post holder of the Head of Paid Services during 2023/2024 whereby the new Chief Fire Officer/Chief Executive took up their role in October 2023.
- 6.3.4 The **Chief Finance Officer** (Finance Director/Section 151 Officer) has responsibility for all financial matters specifically the financial management of the Authority and:
  - Ensures that there are sound systems of financial control that help prevent fraud and error and that the Authority achieves value for money;
  - Ensures an effective internal audit service is provided;
  - Ensures the financial position of the Authority is monitored throughout the year and consideration is given to financial implications when taking decisions and that financial processes are complied with;
  - Advises senior managers and elected members on all financial matters in line with CIPFA's statement on the Role of the Chief Financial Officer in Local Government 2016. The Authority's financial management arrangements conform to the governance requirements of the CIPFA statement; and
  - The post holder is professionally qualified with many years' experience within local authority finance.
- 6.3.5 The **Monitoring Officer** (Assistant Director of Law and Governance at Sunderland City Council) has responsibility for:
  - Ensuring compliance with established policies, procedures, laws and regulations, and the lawfulness and fairness of decision-making.
  - Reporting on matters they believe are, or are likely to be, illegal or amount to maladministration;
  - Matters relating to the conduct of elected members and Principal Officers; and
  - The operation of the Authority's constitution and advising whether decisions taken are in accordance with the constitution.
- 6.3.6 The **Senior Information Risk Owner (SIRO)** (Assistant Chief Fire Officer) is accountable for information risk across the Authority and is supported by the Data Protection Officer (DPO), Information Governance Advisor and Information Asset Owners.

6.3.7 The responsibility for good information risk management sits with all levels of the Authority and the management of information risk is carried out in accordance with its Information Management Framework.

### 6.4 Role of Management

6.4.1 Tyne and Wear Fire and Rescue Service operates two tiers of senior management and this structure plays an important role in maintaining the Authority's governance framework.

### Executive Leadership Team

- 6.4.2 The Executive Leadership Team currently comprises of the Chief Fire Officer/Chief Executive, Deputy Chief Fire Officer, Assistant Chief Fire Officer, three Area Managers and three Directors.
- 6.4.3 The Executive Leadership Team are responsible for:
  - Implementing policy and budgetary frameworks and providing advice to the Authority and its committees on the development of future policy, procedure and budgetary matters;
  - Overseeing the delivery of the Service's Corporate Strategy and implementation of policy;
  - Overseeing the implementation of audit recommendations or other recommendations to improve weaknesses in controls in a timely manner; and
  - Providing clear direction to the Senior Leadership Team.

## The Senior Leadership Team

- 6.4.4 The Senior Leadership Team comprises of Group Managers and Department Heads who are responsible for:
  - Developing and implementing the governance, risk and control framework;
  - Contributing to the effective corporate management and governance of the Service; and
  - Ensuring audit and other recommendations to improve weaknesses in controls are actioned in a timely manner.

## 6.5 Role of Internal Audit

- 6.5.1 Internal Audit provides independent assurance and opinion on the adequacy and effectiveness of the Authority's risk management and control framework and is responsible for monitoring the quality and effectiveness of systems and internal controls.
- 6.5.2 The Authority has a Service Level Agreement (SLA) with Sunderland City Council to provide an independent Internal Audit function. Internal Audit undertakes its work in accordance with the CIPFA Code of Practice for Internal Audit and the Public Sector Internal Audit Standards 2017.
- 6.5.1 Internal Audit delivers an annual audit plan of risk-based audit activity which is driven by an assessment of the current risks in conjunction and discussion with the Chief Fire Officer and the Finance Director (S151 Officer).

- 6.5.2 The Internal Audit Plan sets out the work scheduled for the next financial year. Progress of the audit plan is reported regularly to the Governance Committee, with an end of year assessment and report which informs the Annual Governance Statement.
- 6.5.3 At the conclusion of each audit, a draft report and, if necessary, a proposed action plan is forwarded to the appropriate manager. Once agreement has been reached, a final report (including any agreed action plan) is forwarded to the Chief Fire Officer/Chief Executive and the Finance Director (S151 Officer).
- 6.5.4 All audit recommendations are monitored and progress is reported to the Governance Committee.
- 6.5.5 An Annual Report is prepared for the Governance Committee to give assurance to elected members regarding the Authority's system of internal control.

#### 6.6 Role of External Audit

- 6.6.1 The Authority's current External Auditors are Mazars, a limited liability partnership appointed by Public Sector Audit Appointments Limited for this purpose.
- 6.6.2 External Auditors audit the financial statement and provide an audit option on whether the financial statements of the Authority give a true and fair view of the financial position of 31 March and of the income and expenditure for the year then ended.
- 6.6.3 External Auditors also consider whether the Authority has put in place proper arrangements to secure economy, efficiency and effectiveness in its use of resources and provides a detailed assessment of these arrangements.
- 6.6.4 The Annual Audit Report provides independent assurance of the Authority's financial control and value for money arrangements (including detailed analysis and comments on the financial resilience and the overall efficiency and effectiveness of the Authority's arrangements it has in place).

### 6.7 Role of Risk Management

- 6.7.1 A robust risk management framework is an integral part of the fire service's operational delivery and decision-making process. The Risk Management Policy and Procedure provides visibility and assurance that there is a robust approach to managing risk.
- 6.7.2 Directorate and strategic risk registers are maintained with appropriate action plans to mitigate and manage identified risks. The corporate risk register is reviewed by the Executive Leadership Team as appropriate. Directorate risk registers are reviewed within team meetings, including by the Senior Leadership Team.
- 6.7.3 To ensure risk is considered when decisions are made, all reports presented to elected members include a risk assessment of the action or implications within the report. The reports also include assessments of financial, equality and fairness and health and safety implications. Risk assessments are also in place as part of the fire service's project and programme management processes.

### 7 How the Authority meets the principles of good governance

**7.1** The good governance principles are set out below and through their application, the Authority can continue to provide strong internal controls to support the attainment of its strategic objectives.

# 7.2 Principle A: Behaving with integrity, demonstrating a strong commitment to ethical values, and respecting the rule of law.

- 7.2.1 The Authority's constitution acts as a framework to support decision-making and ensure all legal, financial and statutory requirements are met and are supported by standing orders, financial regulations and a scheme of delegation. The scheme of delegation sets out how different types of decisions are made, including who has the responsibility for making them and what procedures should be followed.
- 7.2.2 Under the supervision of the Monitoring Officer the Authority adheres to the legislative requirements and integrates the key principles of good administrative law rationality, legality and natural justice in their procedures and decision-making processes.
- 7.2.3 The Authority is transparent about how decisions are made and recorded and ensures appropriate legal, financial and other professional advice is considered as part of the decision-making process. Value for money is measured and the results are considered prior to making decisions.
- 7.2.4 The Authority operates two Codes of Conduct and Ethics, one for elected members, and a second for employees. These codes maintain appropriate standards of conduct. New Authority members and employees receive a copy of their respective Code of Conduct and Ethics as part of their induction process.
- 7.2.5 The Code of Conduct and Ethics for elected members is monitored by the Monitoring Officer and overseen by the Governance Committee. The Code of Conduct and Ethics for employees is monitored by the fire service's Human Resources Department. Any allegation of wrongdoing is thoroughly investigated in accordance with the disciplinary policies and procedures.
- 7.2.6 Mandatory training is required for employees about health and safety, anti-fraud and corruption, information governance and equality, diversity and inclusion. Compliance rates are monitored and reported to management.
- 7.2.7 During 2023/2024, national news coverage about the fire and rescue service's culture highlighted some areas of concern and the Authority commissioned a culture review to understand how to create the best work environment for its employees. The culture review involved two independent organisations facilitating employee engagement through a survey, workshops and focus groups. The information provided was collated into a cultural audit report and shared with the Authority and employees.
- 7.2.8 The Authority has arrangements to maintain a register of elected members' personal and business interests and a register of gifts and hospitality. Records are held by the Monitoring Officer on behalf of the Authority. The Human Resources department records these details for employees on behalf of the Chief Fire Officer/Chief Executive.

- 7.2.9 When working in partnership elected members and employees are clear about their roles and responsibilities, both individually and collectively, in relation to the partnership and to the Authority/fire service. There is clarity about the legal status of the partnership and representatives understand and make clear to partners the extent of their authority to bind their organisation to partner decisions ethically.
- 7.2.10 Procurement and financial regulations are used to protect processes that could be influenced by unethical behaviour. A full procurement process is adhered to which ensures ethical standards are upheld. The procurement team has achieved Chartered Institute of Procurement and Supply (CIPS) Corporate Ethical Procurement and Supply status, a statement of the Authority's commitment to ethical sourcing and supplier management.
- 7.2.11 A Counter Fraud Framework manages the risk of fraud and corruption across the Authority and takes preventative steps, outlines the detection arrangements and provides a clear route for investigation and prosecution, where fraudulent and/or corrupt activities or behaviour have been identified.
- 7.2.12 A Whistleblowing (confidential reporting) Policy and Procedure is in operation and all reports received are investigated thoroughly. Confidential, anonymous reporting can also be made via Safecall. Records are kept of whistleblowing incidents and the outcomes of investigations arising. Statistics are reported to the Corporate Governance Board quarterly. These arrangements have assisted with the maintenance of a strong regime of internal control.

### 7.3 Principle B: Ensuring openness and comprehensive stakeholder engagement.

- 7.3.1 The Authority seeks to be open and act in the public's interest. Authority and committee meetings are open for the public to attend. The Authority's AGM took place on 26 June 2023.
- 7.3.2 The Authority ensures that all major decisions are captured, documented and published within committee papers and minutes which are published on Sunderland City Council's website (the Authority's secretariat). Confidential reports are only used when necessary and legally allowed. Significant decisions are also reported on the Tyne and Wear Fire and Rescue Service's website.
- 7.3.3 The Authority operates a Freedom of Information Publication Scheme. This publication scheme commits the Authority to make information available to the public as part of its normal business activities.
- 7.3.4 The Authority publishes data in accordance with the Local Government Transparency Code 2015 which ensures that up to date information relating to the structure, activities, finances, plans, policies, performance and governance of the Authority and the fire service is published, increasing democratic accountability.
- 7.3.5 The Reserves Policy is published providing transparency to stakeholders about the purpose and level of the reserves held by the Authority. Regular performance information, strategic documents including the Strategy 2025, the audited Statement of Accounts, the Annual Governance Statement and External Auditor's reports are publically published on the Tyne and Wear Fire and Rescue Service's website.
- 7.3.6 The Authority operates consultation and engagement mechanisms to consult with employees and the public, these are detailed in the Strategic Framework for

Communications, Engagement and Consultation. During 2023/2024, the Authority consulted on the Community Risk Management Plan 2024-2027. The Authority carries out a statutory business rate and council tax consultation each year.

- 7.3.7 Employee engagement is carried out by a range of methods, including Executive Leadership Team listening events and all staff engagement sessions. Employees are encouraged to contribute to feedback via team and department meetings, and through their line management structure.
- 7.3.8 Proactive engagement with representative bodies, the Fire Brigades Union, GMB, and Unison. These relationships are managed through the Joint Consultative Forum, which considers issues associated with employee relations and policy development. This forum complements the daily arrangements that support effective industrial relations management.
- 7.3.9 A Compliments and Complaints Policy and Procedure allows the Authority to respond effectively to any compliment or complaint in a timely manner. Submissions are monitored and reported quarterly to the Corporate Governance Board and an annual report is presented to the Governance Committee.
- 7.3.10 The operation of a partnership register, provides a framework for employees involved with or considering a new partnership and assists in reviewing existing arrangements. The Authority has formal partnership arrangements in place with Sunderland City Council to provide specialist support services. Other arrangements with partners demonstrate clear and appropriate governance accountabilities.

# 7.4 Principle C: Defining outcomes in terms of sustainable economic, social, and environmental benefits.

- 7.4.1 The Authority's purpose and intended outcomes are communicated within the fire service and to external stakeholders. The TWFRS Strategy 2025 explains how the fire service intends to deliver high quality services that meet the needs of its communities now and in the future. The strategy presents a clear vision, strategic goals, and priorities for a five-year period.
- 7.4.2 The Community Risk Profile provides a comprehensive and forward-looking assessment of risks in the communities of Tyne and Wear. The Community Risk Management Plan contains actions to ensure that risks, including those identified in the Community Risk Profile are appropriately addressed and resources are targeted at those risks.
- 7.4.3 The Medium Term Financial Strategy (MTFS) and the annual budget process, ensures that financial resources are directed to the Authority's objectives and priorities. The MTFS and the Efficiency Plan are key to delivering value for money.
- 7.4.4 Budget monitoring at strategic and department levels via the production of regular financial monitoring reports for Capital and Revenue budgets. These reports, are scrutinised by budget managers and reported to the Executive Leadership Team and quarterly to the Authority.
- 7.4.5 All departments prepare, monitor and report on a suite of key performance indicators (KPIs) to review standards and promote the continuous improvement of services.

- 7.4.6 Equality impact assessments, data impact privacy assessments and risk assessments are carried out to ensure that any changes to procedures do not affect stakeholders adversely and service delivery outcomes are not affected.
- 7.4.7 In October 2019, CIPFA issued a new Financial Management Code. The purpose of the Code was to support good practice in financial management and to assist authorities in demonstrating their financial sustainability. It contained a set of minimum standards for financial management for authorities. A detailed review was undertaken by the Finance Director (S151 Officer), which concluded that the Authority's arrangements complied with the Financial Management Code.
- 7.4.8 The Authority's governance arrangements also extend to cover the wholly owned trading subsidiary "TWFRS Ltd" which is a local authority controlled company.

# 7.5 Principle D: Determining the interventions necessary to optimise the achievement of the intended outcomes.

- 7.5.1 As outlined in Principle A, the Authority, through the appointment of the Monitoring Officer, ensures that the necessary arrangements are in place to facilitate effective communication between officers and elected members; whilst the Authority's constitution sets out the roles and responsibilities of elected members and officers and ensures informed and effective decision-making by the Authority.
- 7.5.2 Progress against planned activity and projects is monitored and risks are reviewed regularly and reported to the Authority and its committee structure. Quarterly reports include performance against targets for KPIs as well as financial and project delivery performance. The Authority's performance management framework allows elected members to scrutinise performance data and ensure any issues identified are dealt with and appropriate interventions agreed upon.
- 7.5.3 The MTFS includes actions to ensure the financial sustainability of the Authority and the budget planning processes ensure budgets are prepared in accordance with objectives, strategies and the MTFS. This involves input from the fire service and elected members and shows how resources are to be deployed over the next few years to deliver agreed outcomes and priorities.
- 7.5.4 The Risk Management Policy and Procedure sets out the process to identify and control exposure to uncertainty, which may impact the achievement of the Authority's objectives or activities. A corporate risk register is in place and is reviewed regularly to ensure that risks are appropriately managed.

# 7.6 Principle E: Developing the Service's capacity, including the capability of its leadership and the individuals within it.

- 7.6.1 The Authority maintains robust strategic workforce planning processes to ensure it employs the correct number of people, with the necessary skills to meet the objectives set out in its corporate plans and strategies. Strategic workforce planning is embedded in the organisation and analysis of workforce data enables proactive identification of future staffing requirements.
- 7.6.2 There is a robust recruitment and selection processes for potential employees and all roles have detailed job descriptions. Induction processes are in place for new employees which include an introduction to the fire service, values, Codes of Conduct and Ethics and the requirements of the role.

- 7.6.3 A modular training programme is in place for elected members. New members complete an induction to increase their knowledge, skills and abilities in their individual or collective roles in meeting the Authority's strategic objectives. The programme is supplemented by specific topic briefings, some of which are all member events and others are for specific committee members.
- 7.6.4 A fitness assessment programme for operational employees is embedded and fitness equipment is provided at all sites. Training plans ensure employees receive appropriate training and development to undertake their roles competently and safely.
- 7.6.5 All employees participate in the Performance and Development Review (PDR) process and have career conversations with their manager to discuss and set expectations about personal objectives and how they align with corporate goals. PDRs support staff to understand how they are performing and what opportunities are available for training and career progression.
- 7.6.6 A leadership training programme has been delivered to the Senior Leadership Team in support of the People and Organisational Development Strategy of how to nurture skills across the fire service.
- 7.6.7 The fire service has a dedicated training department, with competency frameworks for operational staff. Training is delivered using a variety of methods including elearning modules which are mandatory for certain subjects e.g. health and safety and data protection.
- 7.6.8 The health and wellbeing of the workforce is achieved through a range of measures to maintain physical and mental wellbeing including HR policies and guidance documents, flexible working, a Fitness Advisor and the work of the Occupational Health Unit that provides counselling, physiotherapy, trauma support and health and wellbeing at work initiatives.

# 7.7 Principle F: Managing risks and performance through robust internal control and strong public financial management.

- 7.7.1 The Monitoring Officer ensures compliance with established policies, procedures, laws and regulations.
- 7.7.2 Financial management supports the delivery of services and transformational change as well as securing good financial stewardship. There are comprehensive budgeting systems in place and a robust system of budgetary control, including quarterly and annual financial reports, which indicate financial performance against forecasts. The Authority's Statements of Accounts are subject to scrutiny and the External Auditor delivers an opinion annually on whether the Authority is providing value for money.
- 7.7.3 There is regular reporting of non-financial performance against targets and priorities to the Executive Leadership Team and elected members via the Authority and its committees.
- 7.7.4 The Authority adheres to the requirements of the CIPFA Statement on the Role of the Chief Financial Officer in Public Service Organisations. The Finance Director is responsible for the proper administration of the Authority's financial affairs as required by Section 151 of the Local Government Act 1972.

- 7.7.5 The MTFS provides the financial strand linking the budget-planning framework for Revenue and Capital budgets with Authority and fire service goals and priorities over a rolling four year period. The MTFS is presented to the Authority as part of the Revenue Budget report and published papers are made available to the public in February of each year on Sunderland City Council's website.
- 7.7.6 The budget planning framework and draft budget are scrutinised and approved by the Authority as part of a well-embedded budget cycle process each year culminating with the final approval of a legally required balance revenue budget in February by the Authority. This process ensures that a realistic and affordable budget is approved in accordance with the advice of the Finance Director (S151 Officer), who assures elected members that the budget is prudent, affordable and sustainable.
- 7.7.7 The Authority approved a balanced budget for 2023/2024 on 13 February 2023. Monitoring of expenditure against the budget is carried out throughout the year and the Executive Leadership Team is regularly kept informed of the position. Formal quarterly reports are also provided to the Authority where the Revenue Budget and Capital Programme are scrutinised and actions approved by members of the Authority as considered necessary. The fire service reported an estimated underspend of £0.603m for the financial year 2023/2024, the detail of which is set out in the quarterly budget monitoring report made to the Authority in January 2024. The final position however will not be known until the outturn report is finalised and reported to members in June 2024.
- 7.7.8 The Authority continues to ensure it has good arrangements for managing its finances and achieving value for money throughout the year. The financial planning process and the need to provide best value services is well embedded and understood across the Authority by elected members and employees. A financial services team, managed by the Head of Financial Services who reports directly to the Finance Director (S151 Officer) maintains the correct competencies and ensures that the Authority and the Executive Leadership Team receive appropriate financial information to support the key decisions and objectives of the fire service.
- 7.7.9 Treasury Management arrangements follow professional practices and are reviewed annually by elected members. The Treasury Management Policy and Strategy and Prudential Indicators, are regularly monitored and reported to the Governance Committee quarterly, to ensure that the Authority's proposed Capital Programme is sustainable, affordable and achievable within the total resources envelope available to the Authority and also helps inform the MTFS.
- 7.7.10 The Risk Management Policy and Procedure details the process for the identification and control of risks. A corporate risk register is maintained by the Risk and Resilience department and is monitored and reported on throughout the year.
- 7.7.11 Business continuity arrangements are in place to ensure that critical services can continue to be delivered at all times. The Authority aligns with ISO22301 for Business Continuity and arrangements are in place to ensure that critical services can continue in the event of disruption and are subject to regular review, development and testing. Where appropriate business continuity plans are co-ordinated with partners through the Local Resilience Forum to support the multi-agency response.
- 7.7.12 The Authority has arrangements to maintain registers of elected members and employees' personal and business interests and a register of gifts and hospitality. Policies for counter fraud and corruption and whistleblowing are in place which

confirms the Authority's commitment to operating in a fair and transparent manner. The Authority participates in the National Fraud Initiative.

- 7.7.13 The SIRO has overall responsibility for the management of information risk. Policies and arrangements are in place to manage the handling of data and are supported by mandatory information governance training for employees.
- 7.7.14 The use and disclosure of personal data is governed in the United Kingdom by the Data Protection Act 2018 and the General Data Protection Regulation (GDPR). Personal data is handled in accordance with the Act.
- 7.7.15 Publically reporting information governance and data protection arrangements including performance on responding to subject access requests for personal data, Freedom of Information Act requests for fire service/Authority data and reporting on breaches.
- 7.7.16 Information sharing protocols have been developed and agreed upon with partners and are recorded and monitored via the Partnership Register.
- 7.7.17 Arrangements are in place for compliance with health and safety requirements. Health and safety policies and procedures detail roles and responsibilities and accident and investigation reporting internally and to the Health and Safety Executive under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

# 7.8 Principle G: Implementing good practices in transparency, reporting, and audit, to deliver effective accountability.

- 7.8.1 The Authority, with assistance from the Monitoring Officer, oversees and reviews the adequacy and effectiveness of the governance arrangements and internal control environment.
- 7.8.2 The Strategic Framework for Communications, Engagement and Consultation sets out the approach to communicating with the public and other stakeholders. It recognises the need for different approaches for different audiences and the increased use of social media as a communications tool.
- 7.8.3 Having open, public reporting and decision-making and reporting confidentiality only when absolutely essential. Publishing committee minutes, key decisions, register of interest and gifts and hospitality. Collating and publishing spend over £500, salaries, elected member and officer salaries and personal/business declarations and other requirements of the Transparency Code.
- 7.8.4 Reports and minutes of the Authority and its committees are publicly available on the Sunderland City Council website (the Authority's secretariat). Reports follow a structured format, which ensures that key information is presented clearly and consistently to aid decision-making.
- 7.8.5 The Service's website includes details of performance, strategies, plans, financial statements and the Annual Report: Our Year in Review.
- 7.8.6 The Procurement Team help achieve value for money and provide support, guidance and advice while challenging the procurement process to ensure adherence to legal requirements. Wherever appropriate, tenders are used to test the market to obtain

best value contracts. The Procurement Services Manager provides advice and clear guidance on the procuring of goods and services.

- 7.8.7 Assessing the risk management and internal control environment through a programme of independent assurance audits by Internal Audit and having arrangements in place to address the recommendations for improvement actions are acted upon.
- 7.8.8 The Authority's Annual Governance Statement provides assurances that the Authority has the necessary governance arrangements in place to perform effectively. The Authority's Statements of Accounts (including the Annual Governance Statement) and its performance against key areas of risk and priority are subject to scrutiny by External Audit.
- 7.8.9 Processes are in place to ensure that recommendations for improvement selfidentified or from HMICFRS, Internal/External Audit or other regulatory bodies are recorded, monitored and actioned. Elected members and senior management are provided with regular reports on improvement and performance against KPIs and milestones.

### 8 Other assurances

#### 8.1 Internal Audit

- 8.1.1 The Internal Audit Plan for 2023/2024 was noted and agreed upon by the Governance Committee at their meeting on 6 March 2023 and set out the proposed plan of work for the Authority.
- 8.1.2 The following audits took place during the year, and gave overall assurance levels of substantial (risk levels are low) or moderate (risk levels are acceptable):
  - Contract management arrangements for the new fire station at Hebburn (Substantial assurance confirmed).
  - Health and Safety Arrangements (Moderate assurance confirmed).
  - Financial transaction testing (Substantial assurance confirmed).
  - Inspectorate report actions this was deferred to Quarter 1 of the next financial year because of the additional work in complying with an unexpected HMICFRS thematic inspection on the Authority's 'Processes on the Handling of Misconduct'.
  - Compliance with the General Data Protection Regulation (Substantial assurance confirmed).
  - Cyber Security Arrangements A cyber resilience update report was presented to the Governance Committee at their meeting of 26 February 2024. The National Fire Chiefs Council (NFCC) commissioned IBM to complete a Cyber Assessment within various fire and rescue services. The audit took place in April 2023, and reviewed the measures and controls the fire service had in place. The corporate and control room systems were audited separately. The areas for improvement identified focused on improving staff awareness and a more proactive monitoring and detection tool.

- 8.1.3 In addition, audit work was also undertaken on Sunderland City Council's key financial systems, which are used by the Authority. Systems audited during the year included:
  - Accounts Payable (Substantial assurance confirmed).
  - Accounts Receivable / Periodic Income (Substantial assurance confirmed).
  - Payroll (Substantial assurance confirmed).
- 8.1.4 The Governance Committee was updated on progress against the audit plan at their meeting on 26 February 2024.

## 8.2 External Audit

- 8.2.1 Mazars have now completed their audit of the 2021/2022 set of accounts, with the external auditors 2021/2022 Audit Completion Report being noted by the Governance Committee on 29 January 2024. The audit provided, as expected, full assurance of the control environment and gave an unqualified audit opinion on the audited accounts for 2021/2022 and also the detailed arrangements the Authority had in place to achieve value for money.
- 8.2.2 The auditors also completed their audit of the 2022/2023 set of accounts, with the 2022/2023 Audit Completion Report being noted by the Governance Committee on 26 February 2024. They issued an unqualified audit opinion on the Authority's financial statements and value for money arrangements in respect of the 2022/2023 Accounts which have been slightly delayed because of issues in approving the previous years (2021/2022) statement of accounts which have now been completed.

### 8.3 Risk Management

- 8.3.1 The Governance Committee received a progress report regarding the management of corporate risks on 15 September 2023 to ensure independent scrutiny of the corporate risk register. A further report to the Governance Committee was presented to members at their meeting on 26 February 2024.
- 8.3.2 The Executive Leadership Team continues to monitor the corporate risk register monthly undertaking a full review of the corporate risk register quarterly which allows individual risk events and overall risk to be understood and managed proactively, optimising success by minimising threats and maximising opportunities and outcomes. The corporate risks facing the Authority were last reviewed by the Executive Leadership Team on 6 February 2024 as part of their ongoing management of risk.

# 8.4 His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) Inspection

8.4.1 HMICFRS is currently undertaking the third round of inspections of all fire and rescue services in England. The Authority has an established continuous improvement approach that takes into account any feedback and findings from inspection activity, in addition to an internal programme of self-assurance. Feedback from HMICFRS inspections supports the Authority's drive for continuous improvement and provides additional assurance about performance.

- 8.4.2 In previous rounds of inspections, fire and rescue services were assessed and given graded judgments for the three principal questions of the inspection methodology (efficiency, effectiveness and people) and 11 sub diagnostic questions.
- 8.4.3 The Authority was judged as 'Good' for all three principal areas in both previous inspections.
- 8.4.4 In the Round 3 inspection process, fire and rescue services will be assessed and given graded judgments for the 11 diagnostic questions only. The Authority's Round 3 inspection is scheduled for April 2024.
- 8.4.5 In addition, the Authority participated in a HMICFRS thematic inspection in December 2023; one of 10 fire and rescue services selected to help form an overarching national picture on effective misconduct handling in fire and rescue services' in England.
- 8.4.6 There will be no graded judgments or individual report for the Authority as a result of the thematic inspection, instead the findings and evidence gathered from all 10 inspections will contribute to a national report; due for publication in summer 2024.

## 8.5 Statutory Officer and SIRO Assurance Statements

8.5.1 The views of the Chief Fire Officer/Chief Executive, Chief Finance Officer (Finance Director/S151 Officer), Monitoring Officer and SIRO provide additional assurance and their signed statements are located in **Appendix A.** 

### 9 How the Authority addressed the 2023/2024 improvement actions

- **9.1** The Annual Governance Statement 2022/2023 contained four legacy improvement actions for completion during the year. Throughout 2023/2024 progress against these actions was monitored by the Corporate Governance Board and all four actions have been closed.
  - Action ref 43 2018/19 Review and streamline policies and procedures, to include PIA & EIA and support training, to align to new strategic planning framework.
  - Action ref 8 2021/22 Further guidance and training required for staff on Privacy Impact Assessment (PIA) to improve staff understanding of and compliance with PIA requirements.
  - Action ref 1 2022/23 Develop a Communications and Engagement Strategy that sets out how the Service will continue to effectively engage with internal and external stakeholders.
  - Action ref 3 2022/23 Review and improve the Service's Information Governance approach and develop an Information Governance Framework.
- **9.2** Appendix B provides a summary of the action taken during 2023/2024 to complete these improvement actions.

## 10 Governance matters identified for improvement during 2024/2025

**10.1** The review of the effectiveness of the Authority's governance framework confirms that the arrangements in place during 2023/2024 continue to be fit for purpose and good assurance can be given that the framework is operating effectively in practice.

- **10.2** The annual governance review has identified five new improvement actions for completion during 2024/2025. The improvement action plan can be viewed in **Appendix C**.
- **10.3** The Governance Committee has responsibility for ensuring the delivery of the actions needed to improve the Authority's governance framework.

### 11 Opinion on the Governance Framework

- **11.1** The Authority is satisfied that appropriate governance arrangements are in operation and remains committed to enhancing these via the delivery of the improvement action plan during 2024/2025.
- **11.2** No review can provide absolute assurance; this statement is intended to provide reasonable assurance that there is an ongoing process for reviewing the Authority's governance framework and its operation in practice.
- **11.3** Based on the evidence examined, the Authority's governance framework has continued to be in place for the year ending 31 March 2024 and up to the date of approval of the 2023/2024 Statement of Accounts.

### 12 Agreement on the Annual Governance Statement

- **12.1** This statement has been reviewed by the Chair of the Fire Authority, Chief Fire Officer/Chief Executive and Finance Director/S.151 Officer and is considered an accurate reflection of the Authority's governance arrangements.
- **12.2** To the best of our knowledge, the governance arrangements, as defined within this statement and the Authority's Code of Corporate Governance, have been effectively operating during 2023/2024 with the exception of the improvement actions noted in Appendix C.
- **12.3** We pledge our commitment that over the coming year we will take steps to address the improvement actions to further enhance the Authority's governance arrangements.
- **12.4** We are satisfied that these steps will address the need for improvements that were identified in our review of effectiveness and will monitor their implementation and operation during the year and as part of our next annual governance review.

Councillor Phil TyePeter HeathDennis NapierChair of the<br/>Fire AuthorityChief Fire Officer/<br/>Chief ExecutiveFinance Director<br/>(S151 Officer)

Date:

Date:

Date:

## Appendix A - Statutory Officer and SIRO Assurance Statements

Tyne and Wear Fire and Rescue Service



### Chief Fire Officer/Chief Executive Assurance Statement for 2023/2024

To comply with the Accounts and Audit (England) Regulations 2015, Tyne and Wear Fire and Rescue Service conducts an annual review of the effectiveness of its system of internal control.

To support this process annual departmental self-assessments and senior manager assurance statements are completed and have been used to inform the Annual Governance Statement 2023/2024.

Departmental self-assessments are an important element of the fire service's governance arrangements and an integral part of the governance framework that supports the production of the Annual Governance Statement.

The self-assessments take the form of a standard template and are used to identify how each senior manager's area of responsibility aligns with the adopted Code of Governance which is consistent with the principles of the CIPFA/SOLACE Delivering Good Governance in Local Government Framework 2016.

The departmental self-assessments and supporting assurance statements indicate that a sound system of internal control was in place for 2023/2024. The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of our 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.

Through the annual governance review process, five improvements were identified by senior managers in their assurance statements and are reflected in section 10 and Appendix C of the Annual Governance Statement 2023/2024.

Based on the opinions of senior managers and our ongoing oversight of improvement action plans and operations, I am satisfied that Tyne and Wear Fire and Rescue Service's financial, governance, and operational assurance arrangements are adequate and are operating effectively and that the improvements identified will further enhance our assurance arrangements.

Peter Heath KFSM Chief Fire Officer/Chief Executive Date

Tyne and Wear Fire and Rescue Service



## Chief Finance Officer Assurance Statement for 2023/2024

Section 73 of the Local Government Act 1985 requires the Authority to make arrangements for the proper administration of its financial affairs and appoint a Chief Finance Officer to have responsibility for those arrangements.

The responsibilities of the Chief Finance Officer are set out in Part 4 of the Authority's Constitution.

In addition, CIPFA have produced a Statement on the Role of the Chief Finance Officer which sets out how the requirements of legislation and professional standards should be fulfilled by officers in the carrying out of their role.

For the Authority an appointment has been made of the Chief Finance Officer, titled as the Finance Director (S151 Officer).

Within the Authority the following processes have been in place throughout 2023/2024 to provide the Chief Finance Officer with assurance on financial affairs:

- Adherence to all Financial Regulations and Standing Orders;
- Financial Management arrangements are working effectively throughout the fire service;
- Monitoring of all budgets by appropriate officers;
- The Authority has received regular finance updates and reports;
- The Governance Committee has reviewed and scrutinised the Statement of Accounts, Treasury Management reports and other financial governance matters;
- High level financial risk assessment is set out in the annual budget setting report;
- A corporate risk register is maintained and regularly reviewed, with updates provided monthly to the Executive Leadership Team and reported to the Governance Committee covering all key financial risks;
- Annual budget sign-off processes and budget monitoring arrangements are robust and effective;
- Review of financial implications/risks within individual Authority and other committee reports and engagement/sign off of all reports by the key statutory officers;
- Overview and Scrutiny of the MTFS, annual detailed budget proposals and all other financial matters; and
- Overview of the delivery of the Internal Audit Plan, specifically financial systems and internal control audit work. Sunderland City Council provides independent internal audit support to the Authority.

I confirm that based on this evidence the internal control, risk management and governance arrangements operating in relation to the Authority's financial affairs are in place, firmly embedded and are operating effectively.

Dennis Napier Finance Director (S151 Officer) Date:

Tyne and Wear Fire and Rescue Service



## Monitoring Officer Assurance Statement for 2023/2024

The Monitoring Officer is a statutory appointment under Section 5 of the Local Government and Housing Act 1989 and has a key role in ensuring the ethical governance of the Authority.

The responsibilities of the Monitoring Officer are set out in Part 4 of the Authority's Constitution.

Within the Authority the following processes have been in place during 2023/2024 to provide the Monitoring Officer with assurance on the governance arrangements:

- The Authority's Constitution is in place and where appropriate has been reviewed and updated ensuring it remains fit for purpose.
- The Monitoring Officer for the Authority attends meetings of the Authority and the Governance Committee.
- Written reports to the Authority and other committee meetings include a section on the legal implications of the report and the Monitoring Officer signs off reports in advance of each committee, together with other statutory officers.
- A register of Members' interests (including gifts and hospitality) is maintained.

I confirm that based on this evidence the internal control, risk management and governance arrangements in relation to Authority's governance are in place and are operating effectively.

Elaine Waugh Monitoring Officer

Date:

Tyne and Wear Fire and Rescue Service



## Senior Information Risk Owner Assurance Statement for 2023/2024

The Senior Information Risk Owner (SIRO) under delegated authority from the Chief Fire Officer/Chief Executive, oversees compliance with the Data Protection Act 2018, the UK's implantation of GDPR.

The SIRO supports the implementation of standards for information management and security and is responsible for all information risk.

The SIRO is the Assistant Chief Fire Officer. The SIRO is supported by the Data Protection Officer, Information Governance Advisor and Information Asset Owners.

The key responsibilities of a SIRO are to:

- Identify business-critical information assets and set objectives, priorities and plans to use information;
- Establish and maintain an appropriate risk appetite with proportionate risk boundaries and tolerances;
- Act as the champion for information risk within the fire service, being an exemplar for employees;
- Ensure compliance with regulatory, statutory and fire service information security policies and procedures;
- Ensure all employees are aware of the necessity for information assurance and of the risks affecting the fire services corporate information; and
- Establish a reporting and learning culture to allow the fire service to understand where problems exist and develop policies, procedures and awareness to prevent problems occurring in the future.

Within the Authority the following processes have been in place during 2023/2024 to provide the SIRO with assurance on Information Governance:

- Information security of the Authority's information is provided by the Security Working Group.
- The Authority has a dedicated Data Protection Officer.
- An Information Governance Framework and data protection policies are in place.
- Whilst some policies require further updating, they remain fit for purpose.

I confirm that based on this evidence the internal control, risk management and governance arrangements in relation to the Authority's information and data management are in place and are operating effectively.

Lynsey McVay Assistant Chief Fire Officer

Date:

## Appendix B – Implementation of previous year's Annual Governance Statement improvement actions

The Annual Governance Statement 2022/2023 included four improvement actions for completion during 2023/2024. All actions have been completed, see below for an update on the action taken during the year.

| Action<br>Reference | Area for Improvement                                                                                                                                                       | Lead<br>Officer                      | Action Taken                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 43 2018/19          | Review and streamline<br>policies and procedures, to<br>include PIA & EIA and<br>support training, to align to<br>new strategic planning<br>framework                      | Director of<br>People<br>Services    | Service policy and procedure templates now include a data protection impact<br>assessment (DPIA) screening questions and an equality impact assessment (EIA).<br>A DPIA is a type of risk assessment that helps to identify and minimise risks relating<br>to personal data processing activities. DPIAs are also known as PIAs (privacy<br>impact assessments).                                                                               |
| 8 2021/22           | Further guidance and training<br>required for staff on Privacy<br>Impact Assessment (PIA) to<br>improve staff understanding<br>of and compliance with PIA<br>requirements. | Director of<br>People<br>Services    | <ul><li>DPIA screening questions, a full DPIA template and guidance documents have been published. All documents signpost to the Information Governance Advisor who offers a tailored approach to guidance and training based on individual DPIAs and their requirements.</li><li>A DPIA intranet page has been developed offering additional guidance for employees.</li></ul>                                                                |
| 1 2022/23           | Develop a Communications<br>and Engagement Strategy<br>that sets out how the Service<br>will continue to effectively<br>engage with internal and<br>external stakeholders. | Director of<br>Corporate<br>Services | A new Strategic Framework for Communications, Engagement and Consultation was published in June 2023.                                                                                                                                                                                                                                                                                                                                          |
| 3 2022/23           | Review and improve the<br>Service's Information<br>Governance approach and<br>develop an Information<br>Governance Framework                                               | Director of<br>People<br>Services    | A new Information Management Framework was published based on all elements<br>of the information life cycle and includes signposting to updated information<br>governance procedures.<br>Benchmarking has been undertaken against the Information Commissioner's Office<br>accountability tracker and in accordance with the Fire Standards Board criteria for<br>Information Governance to ensure policies align with statutory requirements. |

## Appendix C - Improvement action plan for 2024/2025

The annual governance review 2023/2024 has identified the following improvement actions for completion during 2024/2025.

| Reference   | Area for<br>Improvement                                      | Action to be taken in 2024/2025                                                                                                                                                                                                                                                                                                                                                                      | Lead Officer                         | Target Date       |
|-------------|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------|
| 1-2024/2025 | HR policies                                                  | HR will conduct a full review of existing people policies and develop a detailed plan and prioritise accordingly, taking into consideration legal requirements and business need.                                                                                                                                                                                                                    |                                      | March 2024        |
|             |                                                              | Communications will be sent out to the Senior Leadership Team to<br>remind managers of the process involved along with an evaluation of<br>how effective the process is via an internal audit.                                                                                                                                                                                                       |                                      | April 2024        |
|             |                                                              | Structured approach and plan to be implemented based on available resources and skill set within the department. Initial sign off of draft polices by the Head of HR, prior to the necessary consultation. Seventeen polices are in date, with 36 outstanding for review, which equates to two policies per month by the target date.                                                                |                                      | September<br>2025 |
| 2-2024/2025 | Stakeholder<br>Analysis and<br>Prioritisation                | Stakeholder analysis to be carried out with the Executive Leadership<br>Team during 2024, to identify and prioritise key stakeholders.<br>The new Media and Communications Manager to refresh and relaunch<br>the Communications and Engagement Working Group, to discuss and<br>develop a Service database/system to maintain a working stakeholder<br>directory at all levels of the organisation. | Director of<br>Corporate<br>Services | June 2024         |
|             |                                                              | Director of Corporate Services to review resources across the function<br>to ensure we have appropriate skills and staff to continuously review<br>stakeholder analysis and engagement.                                                                                                                                                                                                              |                                      |                   |
| 3-2024/2025 | Standardisation<br>of the Data<br>Protection Officer<br>role | The Data Protection Officer (DPO) role currently sits within the HR<br>Manager's responsibilities which may be considered a conflict in<br>responsibilities.                                                                                                                                                                                                                                         |                                      | March 2024        |

|             |                                                                                 | A review of the DPO role requirements and responsibilities undertaken<br>against the ICO guidance has highlighted that the role may be more<br>suitable in another department other than the HR Department.<br>A review of the Information Governance (IG) Advisor tasks and<br>workload to ensure the role responsibilities are fully captured. There is<br>limited business continuity for the IG role, as the temporary<br>administration support is currently vacant. A review of the<br>administration support is to be conducted, with the view to potentially<br>utilise the apprenticeship levy. |                                |           |
|-------------|---------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------|
| 4-2024/2025 | Off boarding - the<br>returning of<br>Service<br>equipment,<br>passes and keys. | Review the leaver checklist process to ensure it is working effectively.<br>When an employee leaves the fire service their leaving letter explains<br>that they must return all items prior to their last day at work. To ensure<br>all items are returned, an electronic leaver checklist form is sent to the<br>line manager for completion. The leaver checklist form is completed<br>and returned to the HR helpdesk for audit processing. This is reviewed<br>on a monthly basis against the leaver report to ensure compliance.                                                                    | Director of<br>People Services | June 2024 |
| 5-2024/2025 | Digitalisation of<br>the Occupational<br>Health Unit                            | A process is now underway to create electronic medical files with<br>existing paper files only being used for review purposes.<br>As of 1 January 2024, all new starters will have an electronic medical<br>file, the aspiration is to have all medical files electronic and this will be<br>achieved in a phased approach. The focus will be on operational<br>employee health surveillance records.<br>Once this is achieved an external scanning company will be identified<br>who will commence a programme of scanning all employee medical<br>records.                                             | Director of<br>People Services | June 2024 |

March 2024