AVON FIRE & RESCUE

Annual Governance and Assurance Statement

2025-2026

PREVENTING PROTECTING RESPONDING

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1. Executive Summary

1.1 This Statement explains how Avon Fire Authority (AFA/The Authority) has complied with our Local Code of Corporate Governance and meets the requirements of The Accounts and Audit (England) Regulations 2015, in respect of the annual review of the effectiveness and preparation and publication of an Annual Governance Statement (AGS).

1.2 The financial, governance, and operational arrangements described in this Statement have been in place in the AFA for the year ending 31 March 2026, and up to the date of the approval of the Statement of Accounts.

1.3 This Statement also explains how the AFA has had regard for the Fire and Rescue National Framework for England (2018). In completing the review of the Service's financial, governance and operational arrangements, it has been concluded that the Service has had due regard to the requirements of the Framework.

1.4 The review of internal controls by our Internal Auditors, RSM UK Risk Assurance Services LLP, resulted in an overall opinion that the Service has an adequate and effective framework for risk management, governance, and internal control. Further enhancements to the framework were identified to ensure that it remains adequate and effective.

1.5 It is part of the External Auditor's role to be satisfied that proper arrangements have been made to secure economy, efficiency, and effectiveness in the use of resources (Value for Money – VFM). This paragraph will be updated when external audit work has been completed.

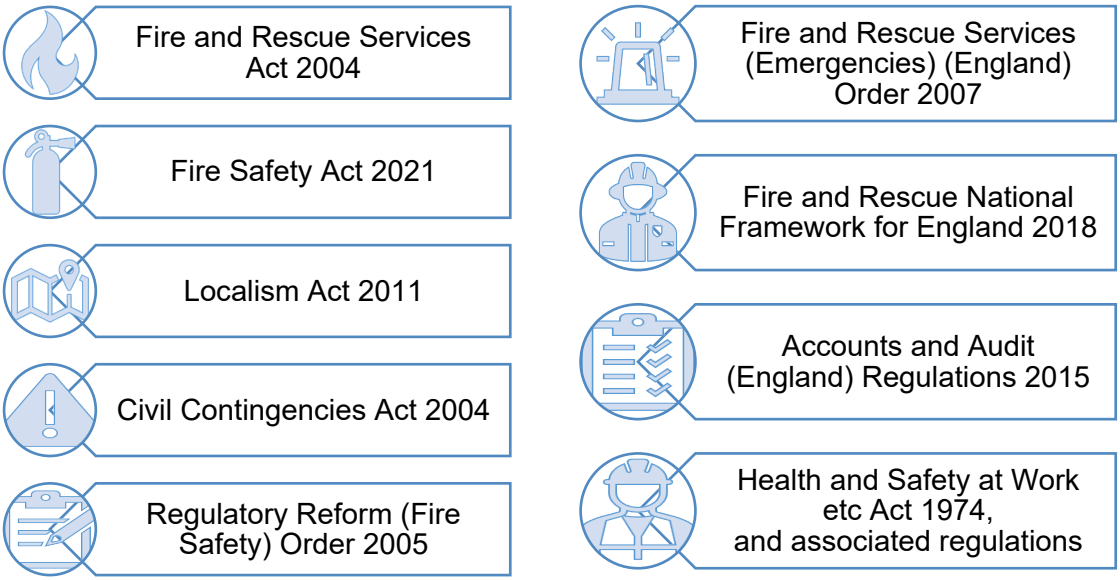
1.6 During 2025/26, both historic and more recent issues regarding pension administration were identified. This indicates a weakness in the Service's financial controls relating to these third-party providers. These matters were under investigation at the time of writing, and a breach has been reported to the Pensions Regulator. Enhanced oversight and strengthened assurance mechanisms have been put in place, to support remediation and reduce the likelihood of similar issues arising in the future. Further information is provided in paragraphs 10.15 to 10.19.

1.7 In completing the review of the Service's governance and assurance arrangements in place during 2025/26, no other significant governance issues were identified. Overall, it has been concluded that the arrangements were fit for purpose and operating effectively. The preparation of this Statement helps us reflect as we move forward. We continue to take a proactive approach to monitoring the effectiveness of our governance, and our identified planned improvements are set out in section 12.

2. Purpose and Context

2.1 The AFA is responsible for ensuring that it operates in accordance with relevant legislation, regulations and government guidance, with a sound system of governance in place. High standards of behaviour, integrity, and professional competence are required by all those working for and with the AFA.

2.2 Our key responsibilities are contained within the following legislation:



2.3 The Authority is also required to meet its duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency, and effectiveness. Public money must be used wisely, be properly accounted for, and deliver optimal value for money, to achieve the best possible outcomes for our local communities.

2.4 Each year, the AFA is required to prepare an Annual Governance Statement (AGS) in support of its Statement of Accounts, in accordance with the Accounts and Audit (England) Regulations 2015. This aims to provide an accurate representation of the corporate governance arrangements and controls in place that have supported the delivery of organisational objectives during the year. The AGS provides information about where arrangements have been effective and where any improvements are required.

2.5 Fire and Rescue Services (FRSs) must also publish an Annual Statement of Assurance as required by the Fire and Rescue National Framework for England and in accordance with the Guidance on statements of assurance for fire and rescue authorities in England. The statement should outline the way in which the Authority and its FRS has had regard to the Framework, the Community Risk Management Plan (CRMP), and to any strategic plan prepared by the Authority for that period. Each Authority must also provide

assurance to their community and to the Government on financial, governance, and operational matters.

2.6 The Annual Statement of Assurance aims to provide an accessible way in which communities, the Government, local authorities, and other parties can make an informed assessment of the AFA's performance. This statement will be used as a source of information for the Secretary of State's biennial report, under section 25 of the Fire and Rescue Services Act 2004.

2.7 To meet the requirements of both the National Framework and the Accounts and Audit Regulations 2015 in an efficient and streamlined manner, these obligations are combined into a single report entitled 'Annual Governance and Assurance Statement' (AGAS).

2.8 This statement is informed by an annual review of the effectiveness of the Authority's governance framework including the system of internal control. The review draws from:

- Feedback from managers within the organisation with responsibility for the development and maintenance of the governance environment.
- A self-assessment of compliance against the Fire and Rescue National Framework for England.
- A self-assessment of alignment to the Internal Governance and Assurance Fire Standard, which is cross mapped to the CIPFA/Solace principles – where CIPFA is the Chartered Institute of Public Finance and Accountancy and Solace is the Society of Local Authority Chief Executives and Senior Managers.
- Consideration of significant press interest throughout the year.
- A review of performance against objectives.
- A review of the Corporate Risk Register.
- A review of planned actions from the AGAS 2024-25.
- Reviews of external reports which have been issued within the year, including the Internal Audit Annual Report and Annual Opinion; the External Audit Annual Report; His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) Reports; other consultant reports.

2.9 When determining whether an issue is significant and needs to be included within an AGS, consideration is given if an issue:

- seriously prejudiced or prevented the achievement of a principal objective.
- resulted in the need to seek additional funding or required a significant diversion of resources from another part of the organisation.
- had a material impact on the accounts.
- attracted significant public interest or reputational damage.
- resulted in formal action being taken by the Section 112 Officer or the Monitoring Officer.
- received significant adverse commentary in external inspection reports and which the AFA has yet to address in a timely manner.
- has been identified by the Audit, Governance and Oversight Committee (AGOC).

3. Fire Standards

3.1 The National Fire Chiefs Council (NFCC) Fire Standards Board oversees the identification, organisation, development, and maintenance of professional standards for FRSs in England. There are 19 Fire Standards spanning all areas of the Service, so it is important that robust governance arrangements are in place to ensure the Standards are achieved and that local policies and procedures remain aligned to them.

3.2 The Fire Standards Board have acknowledged the link between HMICFRS 'Characteristics of Good' and Fire Standards, stating that 'the Fire Standards should not be seen as an additional burden or conflict with HMICFRS Characteristics of Good, but a means to achieve a positive inspection.' FRSs working to achieve the Standards are more likely to see improved inspection outcomes.

3.3 In the 2024/25 statement, we committed to completing the gap analysis for each Fire Standard, progress the outcome of the cross-mapping exercise with HMICFRS Areas for Improvement, and put in place mechanisms for governance and reporting. Our approach has since shifted from assessing compliance against each standard's criteria to adopting a 'three lines of assurance' model, building on information gathered during the initial phase. Avon Fire and Rescue Service (AF&RS) has engaged with the NFCC Fire Standards Implementation Team to support this work and will continue to do so. This has included two maturity model workshops covering Equality, Diversity and Inclusion and Wellbeing.

3.4 Each Fire Standard has an assigned owner and ten of the standards now have populated three lines of assurance tables. Planned work in 2026/27 includes completing assurance tables for all remaining standards, cross mapping the forthcoming 2025/27 full HMICFRS inspection report to the Fire Standards, maturity model assessments, and other Service activities to ensure a joined-up approach to improvement. By identifying themes of improvement work, the Service can work more efficiently in meeting both Fire Standards criteria and outcomes, and HMICFRS areas for improvement and recommendations.

4. Governance

Local code and the CIPFA/Solace Governance Framework

4.1 The AFA is responsible for putting in place proper arrangements for the governance of its affairs, which includes a sound system of internal control

and effective arrangements for the management of risk. The overarching system of internal control is made up of multiple policies, procedures, and corporate strategies that collectively ensure the key principles of governance are delivered.

4.2 The AFA has adopted a Local Code of Corporate Governance – which is consistent with the principles of the *Delivering Good Governance in Local Government: Framework* (CIPFA/Solace, 2016). This Framework is intended to assist authorities in reviewing its governance arrangements and its approach to risk management, to ensure a sound system of control is in place and that there is clear accountability for decision making.

4.3 The seven core principles of the CIPFA/Solace Framework are:

Ref	Principle	Section of this statement addressing this principle
A	Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law	8. People, Culture & Leadership 4. Governance
B	Ensuring openness and comprehensive stakeholder engagement	5. Accountability, Transparency and Openness
C	Defining outcomes in terms of sustainable economic, social, and environmental benefits	6. Strategic Planning
D	Determining the interventions necessary to optimise the achievement of intended outcomes	6. Strategic Planning 7. Performance and Risk 9. Operational Assurance 10. Financial Assurance
E	Developing the entity's capacity, including the capability of its leadership and the individuals within it	8. People, Culture & Leadership
F	Managing risks and performance through robust internal control and strong public financial management	7. Performance and Risk
G	Implementing good practices in transparency, reporting, and audit to deliver effective accountability	5. Accountability, Transparency and Openness 11. External Assurance

4.4 Our local code is set out in our Governance and Assurance Framework 2024-2028.

4.5 The Internal Governance and Assurance Fire Standard focuses on ensuring that FRSs have internal governance structures and business planning processes which enable senior leaders to maintain comprehensive oversight of internal activities, assuring them that the Service is operating effectively. The desired outcomes closely align to the CIPFA/Solace Principles of Good Governance which can be cross mapped as shown below.

Internal Governance and Assurance	How maps to CIPFA/Solace Principle

Fire Standard Criteria	A	B	C	D	E	F	G
1. Strategic oversight & accountability				✓			✓
1a. Functional delivery plans aligned to vision agreed by leadership			✓	✓			✓
1b. Responsibility & accountability for strategic priorities				✓			✓
1c. Coordinate change & manage risks				✓	✓	✓	
1d. Agility & adaptable plans			✓	✓	✓		
1e. Continuous performance evaluation through audit						✓	✓
1f. Feedback to inform plans & ensure efficiency, effectiveness & compliance	✓	✓		✓		✓	
1g. Business cases with financial forecasting and monitoring				✓		✓	
1h. Risk management for delivery of activity						✓	
2a. Clear structure & decision framework	✓				✓		✓
2b. Terms of reference & delegated authority	✓				✓		✓
2c. Scrutiny & challenge of progress against deliverables						✓	✓
2d. Annual Statement of Assurance	✓					✓	✓
2e. Independent internal assurance						✓	✓
3. EDI* support & impact assessments	✓	✓	✓				
4. Communication & engagement		✓					
5. Acting on feedback		✓					✓
6. Recognised change processes & control				✓	✓	✓	✓
7. Learning and benchmarking		✓			✓		✓
8. Use networks & national guidance		✓			✓		
9. Maximise NFCC network		✓			✓		✓

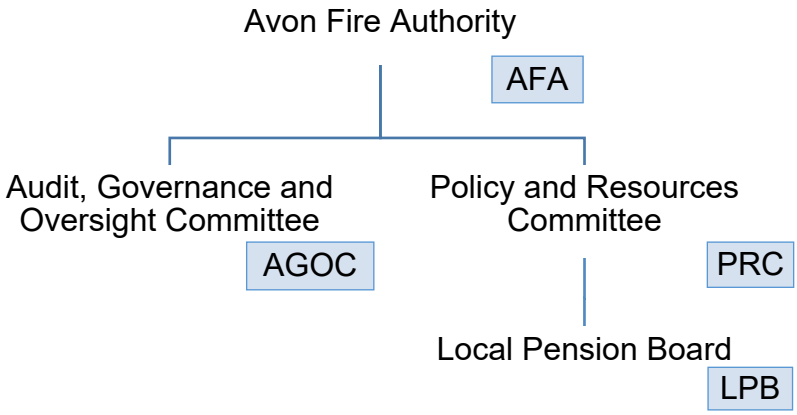
*EDI – Equality, Diversity and Inclusion

4.6 With substantial coverage of the CIPFA/Solace principles reflected within the Fire Standard, a gap analysis of the Fire Standard is a key source of information in the review of effectiveness. The gap analysis confirms that the Service is well aligned with the Standard, however, ensuring that all desired outcomes are fully achieved will remain an ongoing programme of work throughout 2026/27. Two key areas for continued improvement are:

- strengthening of processes to identify, capture, and share organisational learning;
- reviewing oversight and scrutiny arrangements relating to CRMP objectives, to ensure they are progressing at every level through Annual Delivery Plans and Local Risk Management Plans, through to individual objectives.

Governance Structure

4.7 The governance structure of the AFA and its Committees is depicted below, with the roles and responsibilities set out in the Constitution. The AGOC and the Policy and Resources Committee (PRC) serve as formal scrutiny bodies, challenging decisions, policies and performance.



4.8 The governance structure within AF&RS is the responsibility of the Chief Fire Officer/Chief Executive (CFO/CE). This is discharged through the Service Leadership Board (SLB), and the Service Leadership Team (SLT).

4.9 The SLB is led by the CFO/CE, made up of Service Directors and supported by Statutory Officers, with the purpose of:

- Overall responsibility for the organisation's strategic direction, leadership, core code of ethics, and decision-making.
- Considering strategic issues, finance, and risk.
- Overall responsibility for management of the organisation, the establishment of strategy, direction-setting, and both capital and revenue requirements.
- Monitoring and overseeing Service operations, ensuring competent and prudent management, good governance, sound planning and suitable procedures for the maintenance of adequate systems of internal control and for compliance with statutory and regulatory obligations.

4.10 The SLT is led by Service Directors, made up of Heads of Service and Managers, supported by invited representatives from across the organisation, with the purpose of:

- Providing strategic oversight and informed decision-making across the critical operational areas of Protection, Prevention, Resilience, and Response.
- Ensuring the implementation of the CRMP, associated strategic frameworks, and financial budgets, while maintaining compliance with applicable legal and regulatory standards.

- Cultivating a positive, inclusive, and progressive culture in line with the core code of ethics and the organisation's mission, vision, and values.

4.11 The AFA appoint a qualified solicitor as its Clerk and Monitoring Officer (the Clerk), a statutory role under section 5 of the Local Government and Housing Act 1989. The Clerk is also a member of the SLB. The role advises the Authority on the rule of law to ensure that decision-making is lawful and is responsible for raising any legal or governance concerns formally with Members. The Clerk oversees the Authority's governance arrangements and ensures that meetings are properly convened and conducted in accordance with the Constitution.

4.12 The Clerk reviews papers and minutes to support informed and lawful decision-making and provides legal advice to the AFA and the SLB on key matters. The role also includes reviewing the Constitution, policies, and other documents as required to ensure they remain up to date with legislation and are fit for purpose, and advising on strategic matters to identify and mitigate legal risk.

4.13 The Statutory Finance Officer (SFO) is a member of the SLB and SLT, with statutory duties under Section 112 of the Local Government Finance Act 1988 in relation to the financial governance and stewardship of the AFA. The role provides strategic management of the AFA financial strategies, including the Medium-Term Financial Plan (MTFP), Reserve Strategy, and the Annual Budget.

4.14 The SFO monitors and reports on the financial health of the AFA, which includes the oversight of the monthly monitoring and forecasting of budgets and reporting on projected expenditure. The role provides advice to the AFA on financial matters - to ensure decisions are made with a clear understanding of financial implications - and has responsibility for ensuring financial integrity through the maintenance of adequate systems of control. The SFO is a qualified accountant and is supported by the Head of Finance and by the Finance team which includes professionally qualified finance officers.

4.15 Under the Fire and Rescue Services Act 2004, Police and Crime Commissioners or Mayors are able to develop a proposal to take on governance responsibility for FRSs in their area. AF&RS is not coterminous with Avon and Somerset Police; however, the AFA has previously approved applications from incumbents of that role to sit on the Authority. The current incumbent has not applied to be a voting Member of the AFA.

4.16 At a national level, following a recommendation made in the Grenfell Tower Inquiry's Phase 2 Report, the Government transferred the ministerial responsibility for all FRS functions from the Home Office to the Ministry of Housing, Communities and Local Government (MHCLG) on 1 April 2025.

4.17 The Government has recently set out new legislation and policy on English devolution within the English Devolution and Community Empowerment Act 2026, including proposals that could enable elected Mayors to take on responsibility for FRSs where local boundaries align. The West of England Combined Authority (WECA) is not currently coterminous with AF&RS. However, at the time of writing, North Somerset Council is exploring joining WECA, which would result in AF&RS becoming coterminous with the combined authority area. Should proposals for governance change be developed in the future, clear information will be published and stakeholders, staff and the public will be kept appropriately informed.

How we have improved our governance arrangements in 2025/26

4.18 Governance arrangements have been strengthened in multiple areas over the previous year. These changes are noted throughout the statement, but some key areas summarised below:

- A new Strategic Performance Board (SPB) is in development, with the aim of supporting more in-depth discussions about performance, allowing more effective scrutiny and fostering a collaborative strategic approach to removing barriers that threaten the achievement of objectives.
- Annual Delivery Plans were re-introduced to support the achievement of objectives, alongside increasing alignment between Service Planning and personal development review (PDR) processes, strengthening a golden thread from the organisation's strategic priorities through to team and individual objectives.
- Increased monitoring and oversight of projects and programmes, supported by a revised Project Management Framework, has improved governance of change activity.
- Governance has been put in place to ensure accountability and cross functional ownership of the People, Culture and Leadership (PCL) programme via a PCL Committee.
- In September 2025, a business case was approved by the SLT to undertake a comprehensive review of its internal governance arrangements.
- The review was commissioned in January 2026, taking a proactive approach to identifying improvements and ensuring that governance arrangements remain effective, transparent, and fit for the future.

Where our governance needs to improve and looking forward

4.19 The Internal Governance Review is looking at how decisions are made, how responsibilities are structured, and how oversight is provided across the Service. Its aim is to make governance simpler and clearer, so people

understand who is responsible for what and decisions can be taken more efficiently. The review will help strengthen accountability, support better decision-making, and ensure the organisation is well placed to meet future challenges while continuing to deliver high quality services.

4.20 Alignment with the Internal Governance and Assurance Fire Standard, and the CIPFA/Solace Principles of Good Governance remains a key consideration in designing a refreshed governance model. The review also provides an opportunity to address areas raised in the Round 3 HMICFRS inspection and staff feedback relating to governance.

4.21 The review is structured across six phases, running from February 2026 to January 2027, with defined outputs intended to support practical and sustainable improvements.

- Phase 1 (Discovery and Current State Analysis)
- Phase 2 (Draft Governance Framework Design)
- Phases 3–4 (Consultation)
- Phase 5 (Approval and Implementation)
- Phase 6 (Embedding and Review)

4.22 Phase 1 (diagnostic report on “as is”) was completed in March 2026 and has identified a number of improvements which will be addressed within the design stage “to be”. A revised governance model will be consulted on with key stakeholders and agreed improvements introduced in the autumn. Changes will be monitored and reviewed to ensure the improvements identified are having the desired effect.

4.23 Whilst the governance review is focused on the processes in place to provide clarity of decision-making (what and who), the way in which these operate (how) will be critical.

5. Accountability, Transparency and Openness

5.1 Accountability is about ensuring that those making decisions and delivering services are answerable for them. The AFA and its committees provide a key role in holding the Service to account. Reports, agendas, and minutes of the meetings are accessible to the public on a separate AFA website, providing an opportunity to scrutinise plans and progress. Meetings are recorded and made available on the AFA’s YouTube channel.

5.2 The AFA has robust decision-making mechanisms. The Constitution sets out a decision-making framework which ensures that all decisions are supported by relevant information (including financial, legal and other appropriate professional advice), that available options are considered, and that internal

and external stakeholders are consulted. Decisions are formally recorded and published subject to confidentiality requirements.

5.3 Independent assurance is regularly provided by Internal Audit, External Audit and HMICFRS, with the related reports and findings reported though the AGOC or PRC in line with their terms of reference.

5.4 Members are required to disclose any interests annually (and within 28 days of any change); a register of interests is maintained on the AFA website. There is also a register for declaring gifts and hospitality for Members and staff.

5.5 Transparency information is published on our website in accordance with the Information Commissioner's Office model publication scheme and we respond to information requests in accordance with the Freedom of Information Act (2000). Published information on our website includes expenditure over £500, procurement information, our organisational chart, senior salaries, the pay multiple, trade union facility time, and our premises. A Pay Policy Statement and Gender and Ethnicity Pay Gap Report are published annually to ensure the AFA is transparent about the way staff are remunerated.

5.6 Supporting the transparency agenda, data from the Service is provided annually to the MHCLG including incident data, workforce data, prevention and protection statistics, fire safety audits, and injuries to firefighters.

5.7 The Community Risk Management Plan 2024-2028 sets out how the AFA intends to deliver services over this period and is widely consulted on during its development. Public consultation takes place annually on both the draft Budget and the CRMP. By consulting with local communities, staff, and partners on our proposals, we ensure transparency within the planning process, raise awareness of our plans, and can adapt our approach based on the feedback received. The results of the consultation are reported to Members before the strategic objectives and key actions are finalised, approved by the AFA, and the CRMP is published.

5.8 AF&RS is committed to providing information in an open and transparent way to the public. The Service and AFA websites provide information regarding strategies, policies, plans, performance, finances, incidents, safety advice, and community work. Members of the public are encouraged to provide feedback, which is essential in ensuring that the high standards the public deserve continue to be met. The Concerns and Complaints process is published on the AF&RS website, for concerns relating to AF&RS as a whole, individual members of staff, or specific to a service provided.

5.9 Communication and campaign plans consider key messages, stakeholders and a variety of communication methods, to tailor information to the specific

audiences within the community, supporting meaningful engagement. Press coverage is monitored and has been largely positive throughout the year, with particular interest from the community regarding the redevelopment of Bath fire station.

5.10 The Service intranet ensures access to a wide range of documents, guidance, toolkits, dashboards, news, and information for all staff. A weekly staff newsletter, The Shout, is distributed to staff with an opening blog from a member of the SLB. A connectivity plan is in development to improve communications and engagement across the organisation.

5.11 Staff networks provide a platform for staff feedback. Staff are also represented though ongoing engagement with unions including the Fire Brigades Union (FBU) through the Negotiation Committee and with Unison and Unite through the Joint Consultative Committee. Open seats are available at key meetings, allowing any member of staff to attend and contribute. This is a great opportunity to gain insight into ways of working and share different perspectives. A Staff Suggestion Scheme is also in place.

5.12 Combined scoping impact assessments provide an initial assessment of impacts for data protection, the environment, people, safeguarding, estates, Information and Communication Technology (ICT), finance, and procurement. Staff must complete these when embarking on projects, policy changes, collaborations, events, and writing business cases. This process ensures that impacts are identified, mitigated where necessary and decision makers are well informed. A more detailed assessment is carried out where significant impacts are identified by the relevant subject matter expert.

6. Strategic Planning

6.1 The AFA has a statutory duty to produce a Community Risk Management Plan (CRMP). The CRMP 2024-2028 outlines our vision for the future of AF&RS and what we need to do to make our communities safer and our Service stronger. Our planning, research, and data helps us understand who is most at risk from fire and other incidents. By understanding our risks, we can ensure the right equipment and resources are in the right place, at the right time, helping those who need us most. The Service's risk-based approach is explained further in section 9 Operational Assurance.

6.2 The CRMP 2024-2028 sets out how we will continue to deliver our strategic direction, manage risk effectively, and continuously improve the way we work. The Service has six commitments which are: Prevention, Protection, Response, Resilience, Resources and People. Our strategic objectives and priorities are devised utilising community risk findings and horizon scanning, discussed with the SLT, agreed by the SLB, and approved by the AFA. Each

year our objectives are reviewed against up-to-date risk information and analysis to ensure they remain a current priority and are achievable.

6.3 Annual Delivery Plans were re-introduced in 2025 to support the achievement of objectives and Service strategies, strengthening ownership and accountability across the Service by documenting plans at a team level. The Service's PDR process was updated in 2025 to ensure greater alignment between Service Planning and PDR processes, facilitating a golden thread from the organisation's strategic priorities through to team and individual objectives.

6.4 In last year's statement, we committed to reviewing the Service Planning process. An internal audit subsequently provided a reasonable assurance opinion, confirming that effective arrangements are in place. Recommendations have been agreed to enhance the structured approach already established, supporting continuous improvement in planning and delivery.

6.5 Key performance indicators (KPIs) are aligned to outcomes the AFA has set to achieve in the CRMP and are reported regularly to the SLT and AGOC, to support effective oversight and assurance. Throughout 2025/26, progress against planned activity set out within the CRMP – and associated action plans – has been monitored and reported to the SLT, with a summary included in the Annual Performance Report.

6.6 A rolling four-year MTFP is produced annually and aligned to the vision and objectives set out within the CRMP, ensuring value for money is achieved within a balanced and sustainable budget. The supporting narrative report includes information on key concerns and risks considered as well as budget assumptions and justifications. The SFO ensures that any variation to the assumptions made in the MTFP is identified as early as possible and reported to Members.

6.7 The Environmental Strategy sets out the Service's commitment and approach to protecting the environment and being more climate resilient. The strategy outlines how AF&RS will protect the environment, manage our impacts, and address the climate crisis, with the ambitious goal to be Net Zero Carbon by 2030. The Service is committed to embedding environmental best practice, by making climate-responsible decisions, and by responding to our communities' concerns. The AFA's environmental impact is monitored through energy and water usage data and a KPI for carbon emissions.

6.8 Strategies for Prevention, Protection and Response outline the activities necessary to achieve our desired outcomes. Strategies for Fleet and Asset Management and Property and Estates, set out the approach and direction of travel for the management of our fleet and estate assets.

6.9 In line with the planned improvement set out in last year's statement, the Service has continued to deliver the objectives set out in the ICT Strategy 2025-26. A review of key ICT governance policies has taken place and work to modernise infrastructure continues, alongside a data modernisation project.

6.10 A Project Management Framework redeveloped during 2025/26, provides a clear structure for approving, planning, managing, and governing Service improvements, with guidance, tools, and templates to support staff. This will be embedded throughout 2026/27, and alignment between projects and programmes, financial planning, the CRMP, and Annual Delivery Plans, will continue to be strengthened.

6.11 Business cases help decision makers in the Service understand the value, costs, impacts, risks, and benefits of a proposed initiative. A revised process for business cases has been embedded, including thorough consultation across departments and robust approval processes.

6.12 The Corporate Risk Register (CRR) identifies significant corporate risks which could prevent AF&RS from achieving its strategic priorities and functions. Monitoring of the CRR is explained in section 7 Performance and Risk.

6.13 There is legislation which places a statutory duty on Fire and Rescue Authorities (FRAs) to collaborate. AF&RS recognises the value of working collaboratively, whether that's with colleagues across the Service, or with external organisations. The Service embraces collaboration as a key enabler to achieving its mission to improve public safety through prevention, protection, response, and resilience. Collaboration also helps us maintain an excellent service which is effective, efficient, and value for money.

6.14 The Service's Collaboration Strategy 2026-28 outlines our approach to collaboration, areas of focus, and gives examples of our collaboration partners. A Collaboration Framework and online toolkit provide guidance, tools and good practice in relation to planning, monitoring, evaluating, and closing collaborations; including the capture of intended benefits during the planning phase which are reviewed during the evaluation phase.

7. Performance and Risk

7.1 AGOC provides independent assurance to the AFA on matters relating to audit, governance and risk management, Annual Statement of Accounts, Service performance, and the conduct of Members.

7.2 The PRC monitors and oversees priority programmes, such as programmes focused on cultural development, and all large-scale estates construction or

redevelopment schemes. The committee also monitors the Authority's procurement forward plan and approves business cases for proposed procurements in line with the Contract Procedure Rules.

7.3 Progress against the HMICFRS Inspection Action Plan is monitored and regularly reported to the Service Improvement Board, Internal Improvement Board (IIB), and the PRC.

7.4 In the AGAS 2024-25, the Service committed to an increase in monitoring and oversight of projects and programmes through the temporary Portfolio directorate. The new Project Management Framework was approved by SLT in January 2026. Highlight Reports are provided to the Programme Management Office (PMO) on a bi-monthly basis which feeds into a quarterly PMO health report for the SLT that includes achievements, exceptions and escalated risks. The PMO provides project management support to priority projects with governance trees and lines of assurance in place for every priority project. A projects register is used to record progress, alongside a digital dashboard to monitor RAG (Red, Amber, Green) status. Portfolio managers meet monthly to highlight any progress, risks, and issues in their areas of work.

7.5 Monthly performance and benchmarking data are produced and provided to managers responsible for local targets and performance. In line with our commitments in the AGAS 2024-25, we have enhanced our use of data to inform decision making, through dashboard development and digitisation. The 'People Dashboard' allows more informed decisions to be made regarding the health and wellbeing of our staff. In October 2025 we digitalised the Station Performance Monitors and will be digitalising the Scorecard by June 2026, allowing performance data to be viewed more dynamically.

7.6 The SLT and AGOC assess the performance of the Service against agreed measures and organisational targets and respond to areas of underperformance. Where necessary, AGOC report and make recommendations to the AFA. The KPIs in the Corporate Performance Scorecard are aligned to the six commitments in the CRMP 2024-2028. The suitability of the metrics and targets is reviewed annually and, if the circumstances in which the Service operates change, activity can be adapted accordingly. The Annual Performance Report is published to provide the public with details of the Service's performance over the previous year.

7.7 Strong financial management arrangements are in place, explained in Section 10 Financial Assurance.

7.8 The Service approach to risk is explained in its Corporate Risk Management Strategy 2024-2028 which is reviewed every four years in line with the CRMP planning cycle, to ensure it remains effective. The strategy has guided

improvement milestones, as part of advancement of the Service's risk management framework and risk culture.

7.9 The Risk Appetite and Tolerance Statement was republished in January 2026, in its third version, to reflect changes to risk categories and levels of risk appetite and tolerance. This was following review and amendment by the SLB in November 2025 and the SLT in December 2025. The leadership commitment to this annual review ensures that risk appetite is effectively guiding strategic risk management and decision making. Corporate risk appetite and tolerance levels are embedded into the CRR, using 'riskometers' to hold each risk event to account based on its risk category alignment.

7.10 The CRR is a live document which accurately reflects the nature and level of our current risks, the planned interventions to mitigate risks, and progress against these mitigations. The SLT reviews corporate risks monthly, supporting an approach that prioritises risk awareness at AF&RS, rather than risk avoidance. They scrutinise updates from risk owners, assess evaluation of likelihood and impact levels, and monitor actions to control / mitigate risk events. Interdependency considerations are made to ensure understanding and ownership of corporate risk is applied consistently across the Service.

7.11 Key risk indicators within the CRR, strengthen the assurance around risk evaluation (of current likelihood and impact levels) and risk scoring. In 2025/26, key control indicators were added as metrics to help monitor that control measures (mitigations) are being implemented as intended and are effective in supporting the management of risk events.

7.12 The Avon and Somerset Community Risk Register provides information on emergencies that could happen within the Service area, together with an assessment of how likely they are to happen and the impacts if they do. The information contained within the Avon and Somerset Community Risk Register is used to inform the AF&RS Community Risk Register and the Service's strategic assessment of risk.

7.13 Business Continuity arrangements are in place for critical services, to ensure they can continue to operate in an emergency. Further explained in Section 9 Operational Assurance.

7.14 Data is managed in accordance with the law. The key information management and security policies in place are: The Data Management Policy, Freedom of Information Policy, and policies to ensure suitable security is in place for the Service's information technology.

8. People, Culture and Leadership

8.1 AF&RS ethical principles are guided by the NFCC Core Code of Ethics (CCoE), under the principles of **Putting our Communities First, Integrity, Dignity and Respect, Leadership, Equality, Diversity and Inclusion (EDI).**

8.2 The CCoE is informing the development of AF&RS-owned ethical principles, allowing space for staff to interpret and apply these ethical principles in a local context. This ensures a primary reference point for ethical standards, decision making, and leadership behaviour across the Service. Through everyday conversations, coaching based reflection, and lived experience, staff and leaders will collectively explore how ethical behaviour is challenged, reinforced, and recognised in their roles

8.3 The People, Culture and Leadership (PCL) Strategy 2025-2030 provides the overarching direction for this programme of work, setting out our long-term ambition for a values-led, inclusive, and ethical culture under its four pillars:

- People (empowered, engaged and accountable)
- Leadership and Workforce Development
- Cultural Connection and Equity
- Health, Wellbeing and Resilience.

The Strategy is aligned with the CCoE and the NFCC Leadership framework, ensuring consistency with national standards while supporting a locally owned journey. It is developed to be adaptable to people, data, and shared lived experience.

8.4 Governance of the PCL programme is designed to ensure strong accountability, cross functional ownership, and alignment of strategic priorities, and the Service has achieved this by setting up a PCL Committee. The CFO, as senior sponsor, provides visible commitment and authority, helping to accelerate buy-in and highlight the programme's importance.

8.5 The Service has invested into a new People Services function which launched in September 2025. It pulls together all our people-focused teams to work collaboratively as one to support the whole organisation more effectively. This includes Employee Relations, Workforce Development, Wellbeing and Fitness, and Inclusion. These teams are guided by the strategic direction of the PCL Strategy, in line with the planned improvement set out in last year's statement.

8.6 The Leading the Service Fire Standard clearly articulates the expectations on those who lead within services, particularly their behaviours, ethics, and the activities required to lead well. The Leading and Developing People Fire Standard is focussed on how services should attract and retain a competent workforce that is diverse, motivated, and engaged. The standard also puts an emphasis on workforce development, health, and wellbeing.

8.7 The Service continues to strengthen alignment with these Fire Standards with activity continuing throughout the year ahead, including commissioned reviews relating to internal governance, training, and improving the Service's data and insights. The PCL Strategy and associated action plan – along with a Connectivity Plan – will shape improvements in leadership capability, communication and engagement, wellbeing, and the consistency of people management practices. The training review provides a detailed assessment of current training delivery and competence assurance, and its recommendations will inform improvements to training governance and quality assurance of development opportunities.

8.8 AF&RS promotes a safe, supportive, and respectful environment for all staff. The Dignity and Respect Policy together with its supporting digital toolkit, provides staff with the guidance, support, and procedures needed to address unwanted and/or inappropriate behaviour – whether they have experienced it, witnessed it, are supporting someone affected, managing a situation, or responding to an allegation. SLB reviewed and updated the Zero-Tolerance Statement in 2025, reaffirming their commitment to a zero-tolerance approach to bullying, harassment, and victimisation.

8.9 The Service is committed to continually improving values and behaviour-based discipline processes. The discipline and grievance policies are supported by manager training and toolkits providing clear information regarding associated processes and expectations. The Service utilise external professional investigators for employment cases as required.

8.10 The Professional Standards Board is responsible for maintaining professionalism and integrity around the disciplinary process, promoting ethical behaviour across the Service, ensuring quality and consistency in services, and enhancing public trust. The Board is made up of senior members of staff and accesses independent peer organisation representatives including Stand Against Racism & Inequality and Bristol Women's Voice as needed.

8.11 An HMICFRS Spotlight Report on *Values and culture in fire and rescue services* was published in 2023 which reported there were allegations by staff of bullying and harassment in every FRS in England. Throughout 2025/26, there have been negative press reports nationally, regarding culture within the sector, including within AF&RS. These reports attract public interest and have had a detrimental impact on the reputation of all FRSs across the UK.

8.12 A whistleblowing policy is in place, setting out the steps an employee can take to raise serious issues that are in the public interest. It is important employees feel able to raise such matters, without fear of victimisation, discrimination, disadvantage, or reprisal. A confidential reporting service is also in place,

providing a confidential way for staff to raise concerns, with the number of cases, themes, and outcomes published regularly on the intranet to provide staff with confidence that inappropriate behaviour is being addressed.

8.13 The Service employ a solicitor specialising in employment law to provide in-house legal advice and support with employment cases. The role of 'General Counsel' is consulted at an early stage by Employee Relations, the Professional Standards Board, and the SLB, to assist with case management, provide advice short of legal proceedings, and represent the Service in Employment Tribunals. The General Counsel also advises on other areas of law, for example Freedom of Information and Data Protection Act requests, which are often linked to employment cases.

8.14 AFA Members are required to adhere to the AFA Constitution which includes the Members' Code of Conduct, aligned to the Local Government Association Model Councillor Code of Conduct. AGOC keep the Code of Conduct under review and ensures that Members receive appropriate training. By way of a sub-committee, AGOC deals with cases referred by the Clerk/Monitoring Officer relating to Members' conduct.

8.15 An ongoing priority for the SLB and SLT is to accelerate culture change across AF&RS – proactively seeking to learn from staff feedback and lived experiences – to continue to move forward positively and foster an inclusive and supportive environment. AF&RS has created multiple, complementary opportunities for staff to connect, share experiences and influence change, these include a Staff Engagement Network and representative bodies. During 2025, we saw the launch of the LGBTQ+ and Black and Ethnic Minorities networks, alongside the Neurodiversity and Women and Allies networks. Each provides a safe space for staff to share insights, raise issues, and contribute to improving culture and inclusion across the Service.

8.16 In addition, 'Keeping Us Connected' was launched and is hosted by the SLB. These monthly sessions provide organisational updates, share insights into key projects and initiatives, and give staff the opportunity to ask questions and provide direct feedback to the SLB. This is further supported by 'Keeping us connected – teams conversations' where SLB capture key themes in team conversations to understand collective experience on where we have improved and identify any learning. This is fed into the PCL Committee.

8.17 The Inclusion team received a certificate of merit for Champions of EDI at the Asian Fire Service Association Winter Conference, for a number of key projects they have been leading on over the past year. Projects included the launch of ICARE Allies in June 2025, a peer support network of passionate individuals from all staff groups committed to making a difference by promoting inclusion, community, allyship, representation and equity.

8.18 In 2024, the Service commissioned a review of culture within Control, which highlighted areas where improvements could be made. The Control SHIFT Programme was introduced in June 2025, its purpose is to strengthen workplace culture through a structured, people-focused, co-creation approach. SHIFT (Support, Hear, Include, Facilitate, Transform) centres on listening to staff experiences, promoting inclusion, and building trust through transparency and collaboration. Key actions include a diverse working group, innovative feedback tools, leadership engagement, and targeted development sessions addressing core themes such as communication, workload, and future planning. Supported by bespoke inclusion training and ongoing initiatives like monthly surveys and leadership collaboration, the programme is embedding inclusive practices, encouraging open dialogue, and driving sustained cultural improvement across Control.

8.19 Health and wellbeing are of upmost importance to the Service, and we promote a positive working environment supported by the Wellbeing and Fitness team. A range of options are available to all staff to support physical and mental health, including access to mental health first aiders, counselling services, trauma support, occupational health, and supplementary healthcare provision.

8.20 In February 2026, the Service hosted a revitalised staff awards ceremony, shaped by feedback from over 100 staff and co-designed to ensure fairness across all groups. The event celebrated those who go above and beyond and was highly valued by attendees.

8.21 The Service needs to employ the right people to operate efficiently and effectively and to achieve intended outcomes. All corporate staff have a job description, and uniformed staff have role maps, providing clarity of purpose and responsibilities for each role. Each appointment is made using fair selection practices that measure candidates against criteria for each post. This ensures selection of the right people with the right skills, qualifications, and experience.

8.22 Staff are further supported by policies, guidance notes, training and bespoke online learning and courses, to ensure they have the support they need to carry out their roles. There is a mandatory requirement for all staff to undertake safeguarding training and have a Disclosure and Barring Service check – including enhanced checks, where required, based on role.

8.23 The selection process for the CFO/CE, SFO, and Monitoring Officer is overseen by a selection panel, with advice from suitably qualified professionals, in line with the AFA’s terms of reference. In addition, the AFA would establish a panel to be engaged in selection processes for Assistant Chief Fire Officers and the Director of Corporate Services, who are consulted in advance of the CFO making an appointment decision. AF&RS has a policy

which governs how it handles re-engagement/re-employment which is in line with guidance in the National Framework.

8.24 Workforce planning has a crucial role in ensuring the Service has the capacity to meet its obligations and fulfil its aims and objectives, both now and in the future. Introduced in December 2025, three governance groups work together to provide strategic, tactical, and developmental oversight of our workforce: the Strategic Establishment Board; Workforce Development Group, and Tactical Establishment Group – Operational.

8.25 Leadership development and our Development Pathways ensure that colleagues have all the support they need on their career journeys and that opportunities offered are accessible, transparent, and aligned with organisational priorities. The Service offers a range of apprenticeships and professional development opportunities, including Institute of Leadership & Management and other accredited programmes, to ensure colleagues at all levels can build the skills, confidence, and qualifications needed for progression, and to bring new talent into the organisation.

8.26 Annual PDRs for all staff provide an opportunity to set personal objectives and ensure that all staff are able to have discussions about their aspirations, performance, and future development. Organisational objectives can also be filtered down to individuals during these reviews. During the PDR window (April to June 2025), the Service achieved 95% completion rate. Additionally, 360-feedback is available to managers to support their development.

9. Operational Assurance

9.1 The AFA has overall responsibility for the strategic direction, budget, and functions of AF&RS, including oversight of the acquisition, disposal, and modification of premises and appliances. The CFO is responsible for the day-to-day management of the organisation and is accountable to the AFA for its efficient operation.

9.2 A key area of focus during 2025/26 has been to continue to improve the quality and timeliness of the site-specific risk information (SSRI) available to our operational crews. We proactively identify and visit sites which pose an operational risk, to build familiarity and capture information on the hazards that crews may face. Firefighter safety and usability is key and, by doing this well, we reduce risk to staff and to our community through being more effective on the incident ground. We risk-categorise each site and plan tactical response via initial actions and longer-term options. SSRIs for high-risk sites within 10km of our Service area border - plus *all* very high-risk sites - are made available to neighbouring FRSs and relevant partners.

9.3 SSRI training is in place - supported by effective quality assurance and robust processes - to identify, review, and upload risk information promptly. Fire Control has full access to evacuation strategies, while temporary and vulnerability-related risks are managed effectively. Risk information is clear, accessible, and supports safe and effective decision-making at incidents. Following a revisit in September 2025, HMICFRS acknowledged the significant progress made by the Service.

9.4 We have a duty to identify and assess all foreseeable fire and rescue-related risks through our CRMP. The CRMP is informed by insight, data analysis, community risk assessments, risk research, and horizon scanning to build a clear understanding of our Service area, local communities, and the risks facing our communities.

9.5 Mitigations are based on National Operational Guidance and supported by data and intelligence from our baseline report and strategic assessment of risk. We use incident data, risk intelligence, organisational learning and modelling tools to visualise where the greatest risks are within our Service area; overlaying the locations of our assets to decide how we strategically place and manage our resources to meet our risk profile in the most effective way. These findings underpin the CRMP and the actions set out to mitigate identified risks.

9.6 As an annual process, subject matter experts assess emerging risks and plan appropriate Prevention, Protection, and Response activities to reduce the potential impact of those risks. Following consultation with our community, staff, and partners, feedback is reviewed and actions are agreed to ensure resources continue to be matched to risk in line with the NFCC CRMP Strategic Framework and the CRMP Fire Standard.

9.7 In last year's statement we committed to formalising our baseline data and strategic assessment of risk into a single report, to make this information more readily available across the Service. To support the delivery of our CRMP, the Service has introduced Local Risk Management Plans, moving away from a single report approach. The local approach to risk assessment incorporates a broader range of data, including risk mapping, emerging risks and demographics. Additional risk information is included in the latest published CRMP, supported by a statement on emerging risks and their potential impact, to be included in the Annual Performance Report.

9.8 This process can be shown in practice through the unwanted fire signals review which delivered key improvements through a revised Standard Operating Procedure and 14 targeted actions. CRMP worked closely with the Protection team to analyse unwanted fire signals data by location, season, and time of day to inform recommendations. Enhanced data monitoring, updated guidance, media campaigns, and stronger stakeholder engagement

have been implemented. While reductions are still emerging, robust performance frameworks and interventions are now in place to improve resource availability and reduce unnecessary mobilisation costs.

9.9 To ensure there is suitable regard for the CRMP, the SLT receives regular updates to review and scrutinise progress towards achieving our strategic priorities. In addition, the AFA receives an annual update on progress along with any proposed changes to the CRMP resulting from the community risk management planning process.

9.10 The Avon and Somerset Local Resilience Forum coordinate a shared understanding of risk within our community and a joined-up approach to addressing the risk. We are active members of the forum and utilise information in its Community Risk Register as part of our risk analysis.

9.11 The Policing and Crime Act 2017 introduced a statutory duty on all three emergency services (Fire, Ambulance and Police) to collaborate with a view to improving efficiency and effectiveness for all parties. Local discretion in how the duty is implemented benefits local community needs and risks.

9.12 We continue to explore opportunities to work closely with our neighbouring Fire & Rescue Services, Avon & Somerset Constabulary, and the South West Ambulance Services Foundation Trust where this will improve efficiency and effectiveness for all parties and enable better outcomes for the public.

9.13 We are a key partner in the South West Emergency Services Collaboration Tactical and Strategic groups which allows us to co-ordinate a shared understanding of risk within our community, a joined-up approach to addressing the risk, optimise collaboration effectiveness and efficiency, and improve public safety across the South West.

9.14 We have mutual aid arrangements with our neighbouring FRSs under Sections 13 and 16 of the Fire and Rescue Services Act 2004, and in line with Fire and Rescue Service Circular 29/2006. Additionally, AF&RS is a signatory to the National Mutual Aid Protocol for Serious Incidents, as detailed in Fire and Rescue Service Circular 42/2006.

9.15 We continue to engage with the Emergency Services Network (ESN) development programme. ESN is being delivered by the Emergency Services Communications Programme in the Home Office and will replace the current Airwave service used by the emergency services in England, Wales and Scotland. The ESN will build secure and resilient mission-critical communications between the emergency services and other first responders.

9.16 The Service's Collaboration Strategy outlines our approach to collaboration and key areas of focus, providing examples of our collaboration partners

including local authorities, education, housing, charities, the voluntary sector, and business partners.

9.17 The Service's Prevention team has a register of partners who help us reach and support the most vulnerable people in our communities through home fire safety visit referral mechanisms. We continue to develop prevention activities in line with local and national risk and, where appropriate, work with partners to support prevention delivery.

9.18 The Service has safeguarding procedures in place to protect and support local communities. This includes a clear policy, procedures, and training on how to identify and raise concerns of a safeguarding nature. We work closely with the relevant Local Safeguarding Boards, partnerships, and other relevant agencies to ensure the best outcomes for our communities.

9.19 The Service has made provision for promoting fire safety, including fire prevention and protection in both domestic and non-domestic properties. The Service uses the NFCC Person Centred Framework to ensure it targets its prevention activity at the those most vulnerable in our communities, through home fire safety visits and targeted interventions.

9.20 Our Business Fire Safety risk-based inspection programme is designed to help the Service to target premises that present the highest risk and meet our statutory duty to enforce fire safety legislation and to reduce the risk of fire causing death, serious injury and property-related losses in the community.

9.21 We have a Fire Safety Enforcement Policy that supports the commercial/business community on technical and legislative fire safety matters within:

- The Regulatory Reform (Fire Safety) Order 2005
- The Fire Safety Act 2021
- The Building Safety Act 2022
- The Regulators Code
- The Enforcement Management Model

9.22 The policy outlines our commitment to firm but fair enforcement of the Fire Safety Order and uses the principle of proportionality in applying the law and securing compliance.

9.23 In February 2026, concerns were raised by the HMICFRS inspection team around the lack of reinspection's carried out at premises where formal notices had been issued. An action plan has been introduced to ensure all premises on the enforcement register are reinspected. Internal mechanisms have been set up to monitor compliance and strengthen oversight.

9.24 Following the publication of the Grenfell Inquiry Phase 2 Report in September 2024, the government committed to setting out measures to increase the pace of remediation. In December 2024, the government published its plan for buildings in England with unsafe cladding. WECA has the responsibility to deliver this plan locally. The Service is working with the WECA administration and local authority partners to develop its plan and implement a regional inspection team to support the increased pace of remediation and secure significant long-term funding to support the work.

9.25 The Fire Safety (Residential Evacuation Plans) (England) Regulations 2025 introduce new legal duties on responsible persons and FRSs. This relates to the creation, maintenance, and sharing of Residential Personal Emergency Evacuation Plans for residents who may require assistance to evacuate during a fire. These regulations aim to ensure that information about residents who need support to evacuate is available, accurate, and accessible to operational crews during an incident. AF&RS has already taken substantial steps to prepare for implementation and ensure operational readiness.

9.26 Our mobilisation policy sets out a series of protocols for the mobilisation of staff and appliances including, but not limited to, pre-determined attendance, and mobilisation of specialist appliances and assets. AF&RS measure response using a risk-based approach, ensuring that we respond quickest to incidents with the most risk. For the two response categories, we set a target based upon the average time from when we alert our appliances to when they arrive on scene, both of which are consistently being achieved.

9.27 Business continuity arrangements, align to the Business Continuity Institute Good Practice Guidelines, ensure critical services can continue to operate in an emergency. This includes a backup and recovery strategy for dealing with a disaster and Service-wide plans for specific disruptions such as severe weather, fuel shortage, and high absence. Our business continuity plans identify the critical activities we must maintain during a disruption, referred to as the Critical 5, and include Control and communications, operational response including fire safety, resource planning, fleet and technical services and information technology. Department level plans are subject to an annual review and tactical level plans are reviewed on a rolling cycle. A Business Continuity Steering Group maintains oversight of business continuity arrangements and documentation, and we actively participate in the NFCC Business Continuity Group.

9.28 To prepare for major incidents, under the Joint Emergency Services Interoperability Programme (JESIP), the Service works closely with other local and national emergency services to prepare for major incidents such as a terrorist attack, widespread flooding, or pandemic to provide an effective multi-agency response. The Service regularly test cross-border interoperability and

captures shared learning through joint training and exercises with our partners.

9.29 The Service also hosts specialist assets as part of the country's national resilience (NR) arrangements to respond to major incidents and natural disasters. These include high volume pumping, urban search and rescue (USAR), hazard detection, identification, and monitoring (H-DIM), marauding terrorist attack (MTA), specialist response teams, and the mass decontamination unit capability.

9.30 The Service fully engages with the NFCC's NR Assurance Team, which carries out regular checks and reviews of each capability, including site visits and national exercises. The 2025 assurance result was Grade 1 (non-compliant, high risk) due to not being able to fully meet NR mobilisation KPIs with shortfalls in technician numbers and required skills. Support contracts and voluntary recall processes provide short-term resilience and a USAR selection process is underway to assist in sustaining a reliable, fully compliant USAR capability. Despite this grading, AF&RS ranked (overall) within the top four teams nationally, acknowledging the strength in performance of other areas.

9.31 AF&RS attend associated national working groups and are in regular contact with the leads for the NR assets we hold. There are procedures in place for maintenance and testing of all our NR assets provided, in line with the long-term capability management arrangements.

9.32 The Service's 'maintenance of skills and training' system provides a view of skills and capabilities, including those required by the NR Assurance Team, and we maintain a local skills matrix for our NR capabilities, aiding any gap analysis. The NR web application contains a personnel register, which highlights any gaps in qualifications; this enables succession planning to ensure capabilities meet the KPI standards. Temporary skills gaps have been identified and, although not impacting on our ability to meet the KPIs, these are addressed on an ongoing basis as allocated funding for courses allows.

9.33 Our 'Escalation to 'Critical' national threat' guidance document outlines the procedures to follow during periods when the UK national terrorism threat level is raised to 'Critical'. To ensure the Service can respond to the threat of terrorism, both locally and nationally, it provides a response as per JESIP. Response capabilities comprise a dedicated National Interagency Liaison Officer cadre, level 2 specialist MTA responders and level 1 non-specialist responders. The Service carries out joint training with partners MTA operatives, which helps to support and strengthen assurance of our MTA capabilities.

9.34 MTA response and capability within the fire sector is currently a consideration nationally. In November 2023, the FBU issued a circular withdrawing agreement to attend or train for MTA incidents. This has an impact regionally and locally, with FBU members having the option of following the Union's guidance. Negotiations continue locally and nationally to agree a position in the fire sector providing a response to MTA - once negotiations conclude, plans have been developed to expand our capability. In the meantime, the risk is being managed and mitigations are in place.

9.35 The Service has a statutory duty and a legal requirement under the Civil Contingencies Act 2004 to provide an emergency fire and Rescue provision to our communities. Resilience arrangements for maintaining emergency response during potential industrial action are led through the Industrial Action Planning Group. This includes the management of a cadre of auxiliary Reserve Firefighters and Control operators who can provide emergency response cover during periods of industrial action. The wider mobilisation framework also recognises the need for effective mobilisation plans to support response, resolution, and recovery during major or significant incidents.

9.36 Resilience for the on-call provision is assisted by a team of on-call Support Officers who provide daytime fire cover across the Service area where the need is greatest. Additionally, a number of our wholetime firefighters hold a secondary contract to provide cover at our on-call fire stations.

9.37 Health, safety, and welfare is considered throughout all of our core activities, and we look to promote a positive and safe working environment supported by our Health, Safety and Welfare Policy.

9.38 A health and safety management system aligned to HSG65 is embedded and supports the team to effectively manage health and safety workstreams and compliance throughout the organisation. Additionally, to promote the sharing of information between key stakeholders on health and safety issues relating to FRS operations, training, and other related activities we consider:

- statutory advice or updates in relation to health and safety legislation;
- any relevant findings from Internal Audit, health and safety investigations, Joint Organisational Learning and National Operational Learning;
- consultation with key stakeholders such as the Health and Safety Executive, National Operational Guidance, the NFCC; and other areas of recognised best practice, and
- data and information (including the publication of our annual Performance Report).

9.39 During 2025, the Service conducted a comprehensive review of fitness standards and practices to identify areas of good practice. It is now in the final stages of updating the Operational Fitness Policy and developing a comprehensive accompanying procedure. The Policy contains the fitness

principles from Annex C of the Fire and Rescue National Framework, including annual fitness assessment and support. The Authority employs a Fitness and Wellbeing Advisor and maintains a network of Station Fitness Advisors to support staff with firefighter fitness. The Service also has an occupational health contract which provides additional advice and support to help manage firefighter fitness and awarded a two-year contract in May 2025, to provide Supplementary Health Care for the Service.

9.40 The Service has established processes to provide support to operational personnel who experience difficulties in meeting the required fitness standards. This consists of a multidisciplinary approach between the Wellbeing and Fitness Team, Occupational Health, and line management to ensure appropriate support and tailored individual plans in place. In exceptional cases, when alternative options have been exhausted, the Authority may enact the ill health retirement process (in accordance with the relevant pension regulations) or a capability process.

10. Financial assurance

10.1 Robust budget management arrangements are in place, and financial performance is regularly reported to the SLT and the SLB, as well as being reported and reviewed by the PRC and AFA.

10.2 The stewardship of public money is a fundamental responsibility for both Members and staff. The AFA is committed to making sure that the opportunity for fraud and corruption is reduced to the lowest possible risk. Where there is the possibility that fraud, bribery, and corruption have occurred, we will deal with the issue in a firm and controlled manner as set out in the Anti-fraud and Anti-corruption Strategy and Response Plan.

10.3 The AFA takes part in the National Fraud Initiative which proactively conducts fraud detection work though a bi-annual exercise that matches electronic data within and between public and private sector bodies to prevent and detect fraud.

10.4 Financial services are provided by Bristol City Council (BCC) under a Financial Services agreement. Payroll services transitioned to a new provider, Capita, in July 2025.

10.5 A number of key financial plans are regularly produced, approved by the AFA or relevant committee, and published in the Finance library on the AFA website, including:

- The **Capital Strategy and Programme**, which outlines the AFA's approach to capital investment ensuring it is in line with its CRMP objectives.

- The **Annual Revenue Budget**, presented to the AFA prior to 1 March each year. This paper proposes a level of Council Tax precept for the following financial year, as well as presenting an annual budget for approval, to satisfy the legislative requirement to set a balanced budget in advance of each financial year.
- A four-year **Medium-Term Financial Plan (MTFP**) is produced annually. The supporting narrative report includes information on key concerns and risks considered as well as budget assumptions and justifications. The plan links the AFA's long-term objectives and its financial capacity.
- **The Annual Statement of Accounts** reflect the actuals for the year and is published alongside the Narrative Report which provides information on the AFA's main objectives, strategies and principal risks as well as providing commentary on how the Authority has used its resources to achieve its desired outcomes. It provides an analysis of the Authority's performance with clear linkages between the information presented in the Narrative Report and the Annual Statement of Accounts.
- The three-year **Productivity, Efficiencies and Savings Strategy**, approved by the PRC on 16 April 2025, defines the purpose and strategic direction for delivering productivity, efficiencies, and savings across AF&RS, upholding our statutory obligation of best value.
- The **Reserves Strategy**, presented in accordance with the Fire and Rescue National Framework, the strategy outlines the AFA's approach to reserve management for longer-term financial planning and considers the adequacy and relevance of the reserves currently held.

10.6 Internal Audit arrangements are in place to review the effectiveness of internal controls through annual 'key financial control' reviews; in 2025/26 this focused on devolved budgets. A reasonable assurance rating was given, with agreed actions regarding formalisation and consistency of budget holder training and variance management. The internal control environment is further assessed as part of the annual external audit, which is explained further in section 11 External Assurance.

10.7 Due to a national backlog of audit opinions for local government bodies, the Government set statutory backstop dates, up to the year 2027/28, to enable the local audit system to recover and clear the backlogs. Delays to the publication of audited accounts increases the risk of governance or financial issues being identified too late and hinders accountability.

10.8 The SFO oversees compliance with statutory and regulatory financial requirements, including the AFA's Annual Statement of Accounts. Having cleared the backlog in previous years, the latest accounts were approved by AGOC at an extraordinary meeting in February 2026, in advance of the backstop date. All Annual Statements of Accounts and Narrative Reports are published on the website.

10.9 The draft Annual Statement of Accounts 2025/26 will be presented to AGOC in June 2026. It is anticipated that these accounts will be signed off prior to the backstop date of 31 January 2027.

10.10 The AFA follows a detailed close-down procedure to produce the Annual Statement of Accounts, in conjunction with Bristol City Council (BCC) under the terms of a financial services contract. The latest accounting requirements are considered and included, where appropriate.

10.11 The external audit process commences following a period of public inspection of the draft Annual Statement of Accounts. Regular review meetings are held with the SFO, Head of Finance, Financial Accountant, and the External Auditors to assist in the planning of the audit. This helps ensure the auditors are updated on significant events or changes during the financial year, and that the audit fieldwork is tailored accordingly, resulting in a more efficient end-to-end external audit process.

10.12 The assumptions made in the MTFP, particularly around inflation, pay awards, and local and central government grants and funding (based on the best information available at the time), are subject to potential change. A three-year funding settlement has provided more stability, alongside updates to the Fair Funding Review data, resulting in an increase in government grant funding. The maximum available council tax precept has been confirmed for the 2026/27 financial year, and additional capital funding grants will support necessary improvements in our estate and fleet. The 2026/27 budget has been approved with a small deficit due to the inflation, interest rates and the borrowing costs and pay increases that affect our Service.

10.13 Whilst the three-year settlement provides some stability, there are still unknowns within the four-year MTFP. The Service is looking at options to identify further savings, including reducing non pay costs and reviewing the capital programme. Internal governance, crewing and training reviews will ensure these areas are operating efficiently and we will be conducting a review of our Green Book establishment and carrying out careful vacancy management. The Service is legally required to set a balanced budget each year, and further updates will be taken to the AFA in due course to ensure this requirement is met.

10.14 AFA has established reserves to cover the risk of a variation to the key assumptions in the MTFP, and these reserves allow the AFA time to identify efficiencies to deliver the required permanent savings over the longer term. The SFO will continue to ensure that any variation to the assumptions made in the MTFP is identified as early as possible and reported to Members, as part of revenue and capital monitoring reports presented to the PRC.

10.15 The Firefighter Pension Scheme Administrator – West Yorkshire Pension Fund (WYPF) – have reported a breach to the Pension Regulator about the delay in production of the Annual Benefits Statements / Remedial Service Statements. The production of the statements has been delayed because WYPF's administration system has needed significant reprogramming to comply with the legislative changes. This has affected the 2024/25 statements with some still outstanding, and the 2025/26 statements will also be affected. A National Oversight Board has been established to monitor workflow at WYPF and to set targets for completion of time sensitive work, including legislative changes to the scheme that affects exiting and retired members as well as former retained staff who had not been offered a pension while employed.

10.16 During a previous reporting period, the Authority reported a matter relating to historic pension administration records and associated data. Since that disclosure, further investigations and reviews have been undertaken and the matter has progressed. The Authority continues to address the issue through its established governance and risk management arrangements and has taken appropriate professional advice. In light of the current status of the matter and the need to protect the Authority's interests, limited information is being included within this statement at this stage. The Authority remains committed to resolving the matter appropriately and will continue to monitor progress through its governance framework.

10.17 Following payroll migration to Capita, issues have arisen relating to record keeping and data submission, with delays in the monthly processing of pension data for new members, joining from 1 July 2025. This has been assessed as materially significant and further breach has been reported. At the time of writing, this issue is being actively progressed with WYPF, our payroll provider (Capita) and Finance staff.

10.18 During 2025/26, further historic errors in pension administration were identified by WYPF. The full extent of these errors is not yet known; specialist legal advice has been sought. Any FPS errors already identified by WYPF have been corrected going forwards, and back to February 2024; that date marks the start of their tenure as administrators. In light of the current status of the matter and the need to protect the Authority's interests, limited information is being included within this statement at this stage. The Authority remains committed to resolving the matter appropriately and will continue to monitor progress through its governance framework.

10.19 In the AGAS 2024-25 we committed to increasing assurance mechanisms relating to pension contributions. In February 2026, internal audit completed a review of pension contributions to provide assurance that calculations undertaken by the payroll provider were accurate. The conclusion was that there were no issues in calculations across the three schemes for the sample

selected. Overall, based on the samples examined during the review, the Service can take some assurance that pension calculations for the schemes assessed were accurate. The Service has also invested in additional staff within the in-house pensions team, to support an accurate and compliant pensions administration and improve assurance to the AFA via the Local Pensions Board.

11. External assurance

The Head of Internal Audit opinion 2025/26

11.1 During 2025/2026, internal Audit services were provided by RSM UK Risk Assurance Services LLP and reported to AGOC. Regulation 5 of the Accounts and Audit regulations 2015 states that the 'Authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control, and governance processes, taking into account public sector internal auditing standards or guidance'. Internal Audit is an independent and objective assurance service to the AFA which completes a programme of reviews throughout the year.

11.2 The Service is satisfied that the internal audit provision has been adequate and effective during 2025/26. Following a routine procurement process, a new internal audit provider, SWAP Internal Audit Services, has been appointed from 1 April 2026. To enhance assurance further, the number of audit days has been increased from 50 to 80 days per year.

11.3 The Head of Internal Audit has formed the opinion that based on the areas reviewed during the 12 months ending 31 March 2026, the Service has an adequate and effective framework for risk management, governance, and internal control. Internal Audit also stated, 'our work has identified further enhancements to the framework of risk management, governance and internal control to ensure that it remains adequate and effective'.

11.4 Consideration should be given to areas provided with partial assurance. A partial assurance rating was given in the Stores and Stock Management Audit Report, with twelve management actions for improvement. The report concluded that "the control framework in place at the time of our review, demonstrated several gaps relating to record keeping, financial management of stock, information technology and the design of the control framework, resulting in inaccurate stock records and challenges with maintaining financial records for inventory." Work to complete these actions is well underway, with eight actions already completed at the time of writing, improving controls for this area significantly.

11.5 Completion of Internal Audit actions are monitored by management through an internal action tracker and oversight is provided by the SLT and AGOC. The Internal Auditors review progress throughout the year to verify that recommendations and management actions are being implemented and supported by appropriate evidence. The progress position for management actions, is reflected in the Internal Auditors' annual report and opinion.

External Audit

11.6 External audit services are provided by Bishop Fleming. External Audit is responsible for reporting on the AFA's financial statements, including the AGS, and for providing an opinion on the accounts and on the arrangements in place for securing economy, efficiency, and effectiveness, and value for money (VFM) in the use of resources.

11.7 Our External Auditors issue an opinion based on the work undertaken to date on the financial statements for the 12 months ending 31 March 2026.

11.8 Part of External Audit's role is to be satisfied that proper arrangements have been made to secure VFM and provide a VFM conclusion. *This paragraph will be updated when External Audit work has been completed*.

His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS)

11.9 HMICFRS independently assess and report on the efficiency and effectiveness of each FRS and how well it looks after its people. In the most recent cycle of inspections, a greater focus has been given to Fire Authority Governance, and leadership at every level.

11.10 Governance arrangements are in place to ensure we are progressing the recommendations and actions needed for our improvement journey. The Service Improvement Board, with internal and external representatives, provides strategic oversight of the causes of concern.

11.11 The Internal Improvement Steering Group and Board ensures that continuous improvement across the Service is also delivered within the agreed expectations, and appropriate scrutiny and assurance is applied. Responsible Managers submit Close Out reports where they deem the action(s) for a Recommendation or Area for Improvement to be complete. The board will review whether there is sufficient evidence that the desired outcome has been achieved and is sustainable, and either close the action, or request that further action be taken by the Responsible Manager.

11.12 In November 2023, HMICFRS published its findings into AF&RS, following their Round 3 inspection. The 2023/25 HMICFRS report is available on the

HMICFRS website and the status of each action on the Service's HMICFRS Inspection Action Plan, is published on our website.

11.13 The inspection identified two accelerated causes of concern:

- The Service doesn't have an effective system to gather and record relevant and up-to-date risk information to help protect firefighters, the public, and property during an emergency.
- The Service's mobilisation system, which records information and dispatches resources to emergency incidents, isn't reliable and crashes during 999 calls. This unnecessarily delays the mobilisation of resources, and results in the public receiving a slower response to emergencies.

11.14 HMICFRS also identified two further causes of concern, one relating to promoting the right values and culture, and the other around preventing fires and other risks. As a result, the Service entered enhanced monitoring known as 'Engage'. As part of the monitoring process, the CFO/CE reports back on Service improvements to the Fire Performance Oversight Group, made up of representatives from HMICFRS, the MHCLG, Local Government Association, and the NFCC.

11.15 HMICFRS has carried out four revisits relating to the 2023/25 inspection. HMICFRS has now closed both the accelerated cause of concern relating to the Service's mobilising system and SSRIs.

11.16 One 'Preventing fires and other risks' recommendation remains open, along with this cause of concern. Progress on the two remaining causes of concern have been reviewed during the latest full inspection, which took place between 17 November 2025 and 13 February 2026.

11.17 In June 2026, the Service received the latest report, setting out the outcomes of the 2025/27 inspection. The judgements for all 10 areas will be summarised here: *This paragraph will be updated when the new inspection gradings are available, with a short summary of key findings, including any relating to governance.*

11.18 In March 2023, HMICFRS released their Values and culture in the fire and rescue services spotlight report. The report focused on the values and culture of all FRSs in England and draws on the evidence collected through their inspections, which have been taking place since 2018. Recommendations in the report intended to assist all FRSs to improve values, culture, fairness and diversity. The report contains 35 recommendations, of which 20 were for individual FRSs to complete, within set deadlines. Significant progress has been made and the actions now complete. The final activity is to carry out assurance on the work undertaken.

11.19 During 2023/24 HMICFRS carried out an inspection of the handling of misconduct in FRSs in England. The report can be found on the HMICFRS website. Only one of the 17 recommendations has not yet been implemented, plans are in place to meet this recommendation by 31 July 2026.

11.20 The Service has published progress relating to each of the actions from the HMICFRS Spotlight report and the Standards of Behaviour: The Handling of Misconduct in FRS report recommendations on the website.

11.21 HMICFRS host a portal, on which services are required to provide quarterly updates on progress against recommendations and areas for improvement identified in inspections, spotlight and other thematic reports.

12. Current Challenges and Planned Improvements

12.1 Financial sustainability continues to be an area of focus for AF&RS. Whist the three-year settlement provides some stability, general inflation, borrowing costs and equipment and infrastructure costs continue to have an impact. Balancing the budget while meeting operational demand and striving for continuous improvement, remains a challenge.

12.2 Nationally, cultural transformation remains a priority in the fire sector. Lasting change requires continued focus, leadership, and collaboration to ensure that processes, policies and initiatives are embedded.

12.3 The Service recognises the need to address HMICFRS findings. Effective governance arrangements are in place, to ensure we are progressing the recommendations and actions needed to continue our improvement journey.

12.4 As set out in section 4, the new legislation and policy on English devolution, could enable elected Mayors to take on responsibility for FRSs where local boundaries align. This could represent a significant shift in the governance of fire and rescue services. The Act also signals a longer-term direction towards alignment of public service boundaries and the integration of local services alongside increased expectations for collaboration across public sector partners. Should this progress, information will be published and stakeholders, staff and the public will be kept informed.

12.5 Planned improvements for 2026/27. We will:

- remain committed to delivering the objectives set out in our CRMP 2024-2028 and the improvements identified by HMICFRS. We will ensure that a robust action plan and suitable governance arrangements remain in place to address any areas of improvement identified.

- complete a ‘three lines of assurance’ table for all remaining Fire Standards, and cross map any recommendations and areas for improvement contained in the 2025/27 HMICFRS inspection report to relevant Fire Standards criteria. The Service will also undertake maturity model assessments where this links with required improvements.
- agree a revised governance model based on the outcomes of the Internal Governance Review and begin implementation. Changes will be monitored and evaluated to ensure the improvements identified are having the desired effect.
- put in place strengthened oversight and scrutiny arrangements relating to CRMP objectives, in line with recommendations from the Internal Governance Review, to ensure they are progressing at every level through Annual Delivery Plans down to individual objectives.
- review the Governance and Assurance Framework to ensure that changes from the Internal Governance Review are reflected.
- continue to deliver the objectives set out in the PCL Strategy.
- implement cohesive processes to identify, capture and share organisational learning throughout the organisation.
- review the way we deliver training and assure competence, with subsequent recommendations informing improvements to training governance and quality assurance of development opportunities.
- complete the training review and act upon the findings, with a view to improving training governance and quality assurance of development opportunities.
- conduct a review of our Green Book establishment. We are focused on ensuring that we match our resources to risk across the Service, and this means ensuring that we have the right people with the right skills in the right places across the organisation.
- further increase assurance and oversight relating to pensions, utilising support from the Local Government Association alongside consideration of additional internal audits for future years.
- enhance our performance framework through increasing the visibility of Local Performance Indicators.

13. Statement of commitment

13.1 We have been advised of the result of the 2025/26 review of the effectiveness of the governance and internal control framework, and of the plans for improvement of the systems in place.

13.2 We propose over the coming year to take steps to address the matters set out in section 12, to enhance further the Service's governance and internal control arrangements. We will monitor their implementation as part of our next annual review of effectiveness.

13.3 As Chief Fire Officer of Avon Fire & Rescue Service and Chair of the Avon Fire Authority, we are satisfied that during 2025/26 our business has been conducted in accordance with proper standards and law, and that public money was properly accounted for and used economically, efficiently, and effectively. Additionally, we are satisfied that the AFA has done everything within its power to comply with the requirements of the Fire and Rescue National Framework for England 2018 and the expectations set out in the AFA's community risk management plans.

13.4 This Annual Governance and Assurance Statement was approved by the AFA on xx xx xx and has been signed by the Chief Fire Officer/Chief Executive, the Chair of Avon Fire Authority and both Statutory Officers.

Signed: _____ _____

Chair of Avon Fire Authority: Councillor Paul Goggin

Chief Fire Officer/Chief Executive: Matt Cook

Date:

Signed: _____ _____

Clerk (Monitoring Officer): Zoë Coombs

Statutory Finance Officer (S112 Officer): Verity Truscott

Date:

14. Glossary of Terms

AF&RS/the Service	Avon Fire and Rescue Service	**MHCLG**	Ministry of Housing, Communities and Local Government
AFA/the Authority	Avon Fire Authority	**MTA**	Marauding Terrorist Attack
AGOC	Audit, Governance and Oversight Committee	**MTFP**	Medium-Term Financial Plan
AGS	Annual Governance Statement	**NFCC**	National Fire Chiefs Council
AGAS	Annual Governance and Assurance Statement	**NR**	National Resilience
BCC	Bristol City Council	**PCL**	People, Culture and Leadership
CCoE	Core Code of Ethics	**PDR**	Personal Development Review
CFO/CE	Chief Fire Officer / Chief Executive	**PMO**	Programme Management Office
CIPFA	Chartered Institute of Public Finance and Accountancy	**PRC**	Policy and Resources Committee
CRMP	Community Risk Management Plan	**SFO**	Statutory Finance Officer
CRR	Corporate Risk Register	**SLB**	Service Leadership Board
EDI	Equality, Diversity and Inclusion	**SLT**	Service Leadership Team
ESN	Emergency Services Network	**SOLACE**	Society of Local Authority Chief Executives and Senior Managers
FBU	Fire Brigade Union	**SSRI**	Site-Specific Risk Information
FRS	Fire and Rescue Service	**USAR**	Urban Search and Rescue
H-DIM	Hazard Identification and Monitoring	**VFM**	Value for Money
HMICFRS	His Majesty's Inspectorate of Constabulary and Fire & Rescue Services	**WECA**	West of England Combined Authority
JESIP	Joint Emergency Services Interoperability Programme	**WYPF**	West Yorkshire Pension Fund
KPI	Key Performance Indicator		