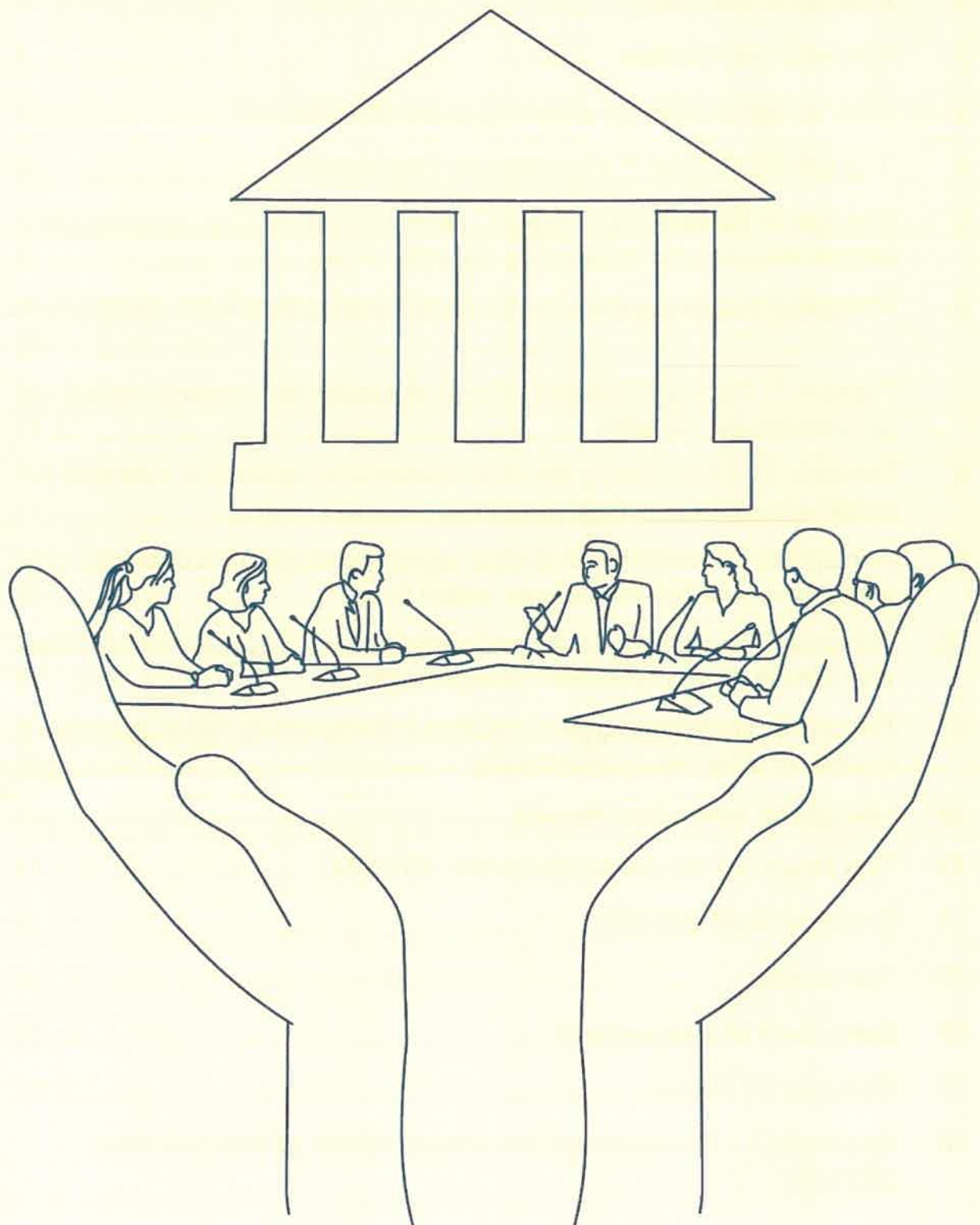




AVON
FIRE & RESCUE



Annual Governance Statement 2023-2024

PREVENTING PROTECTING RESPONDING

Contents

1	Executive Summary	3
2	Purpose and Context	3
3	Who is responsible for ensuring good governance?	5
4	The CIPFA/SOLACE Governance Framework	6
5	Principle A: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law.	7
6	Principle B: Ensuring openness and comprehensive stakeholder engagement.	10
7	Principle C: Defining outcomes in terms of sustainable economic, social, and environmental benefits.	11
8	Principle D: Determining the interventions necessary to optimise the achievement of intended outcomes.	12
9	Principle E: Developing the entity's capacity, including the capability of its leadership and the individuals within it.	14
10	Principle F: Managing risks and performance through robust internal control and strong public financial management.	15
11	Principle G: Implementing good practices in transparency, reporting, and audit to deliver effective accountability.	17
12	HMICFRS Inspection Results	18
13	The Head of Internal Audit opinion 2023/24	19
14	External Audit 2023/24	19
15	Conclusion	20
16	Statement of commitment	21
17	Glossary of Terms	22
18	Appendix A - Outcomes of the annual review of effectiveness 2023/24	

1 Executive Summary

- 1.1 This Statement explains how Avon Fire Authority (AFA) has complied with our Local Code of Corporate Governance and also meets the requirements of The Accounts and Audit (England) Regulations 2015, specifically Regulation 6 (1) in respect of the annual review of the effectiveness and preparation and publication of an Annual Governance Statement (AGS).
- 1.2 The governance arrangements described in this Statement have been in place in the AFA for the year ending 31 March 2024, and up to the date of the approval of the Statement of Accounts. The development and publication of our AGS helps us take stock as we move forward.
- 1.3 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 of risk management, governance and internal control were identified, to ensure that it remains adequate and effective.
- 1.4 It is part of External Audit's role to be satisfied proper arrangements have been made to secure economy, efficiency, and effectiveness in the use of resources (Value for Money – VFM). In their report to AGOC in December 2024, our External Auditors identified a significant weakness in relation to the governance arrangements of the Service. In particular, in relation to the implementation of His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS), action plans from the Round 3 inspection report, published in November 2023.
- 1.5 The Service was aware of the need to implement the required actions to close the remaining causes of concern from the inspection and were already taking significant steps to address the concerns raised. This has been recognised by the Inspectorate during their re-visits, and within the External Auditor's report.
- 1.6 In completing the review of the Service's governance and assurance arrangements, **no other significant governance issues were identified in addition to those highlighted in the HMICFRS report, which are being addressed.** Our assessment has identified improvements to further strengthen our governance arrangements, these can be found noted throughout the statement and in the Action Plan in [Appendix A](#).

2 Purpose and Context

- 2.1 The AFA is responsible for ensuring that it delivers its services in accordance with the prevailing legislation, regulations and Government guidance and that proper standards of stewardship, conduct, probity, and professional competence are set and adhered to by all those working for and

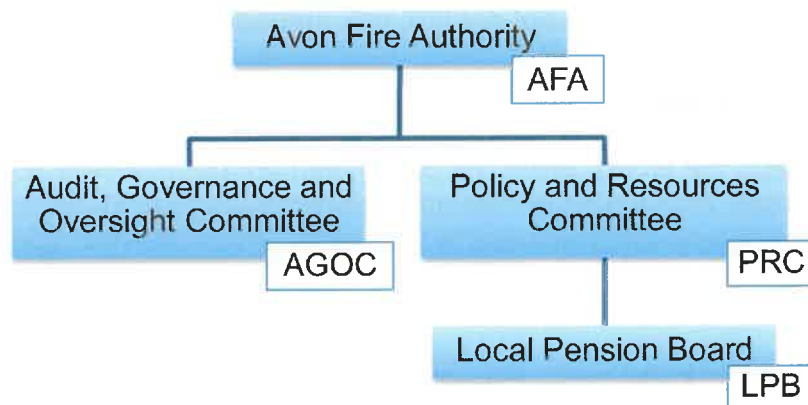
with the AFA. This will ensure the services provided to our local communities are delivered efficiently, effectively, and economically, and that public money is used wisely, is properly accounted for, and achieves optimum value for money.

- 2.2 The AFA is committed to continuously improving its services to meet the needs of the public; reviewing and developing what it does and consulting with the public about its activities on a regular basis. In discharging these responsibilities, 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. However, the arrangements in place cannot completely eliminate the risk of failure, and therefore can only provide reasonable, and not absolute, assurance of effectiveness.
- 2.3 When determining whether an issue is significant and needs to be included within the AGS, consideration is given if an issue:
- is 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 AFA's business.
 - had a material impact on the accounts.
 - attracted significant public interest or seriously damaged the AFA's reputation.
 - resulted in formal action being taken by the S112 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 relevant audit committee – Audit, Governance and Oversight Committee (AGOC).
- 2.4 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.
- 2.5 The AFA has adopted a Local Code of Corporate Governance, which is consistent with the principles of the CIPFA/SOLACE (Chartered Institute of Public Finance and Accountancy/Society of Local Authority Chief Executives and Senior Managers) Framework *Delivering Good Governance in Local Government*. A copy of our code has been incorporated into our [Governance and Assurance Framework 2024-2028](#).
- 2.6 The [Constitution](#) sets out how the AFA operates, how decisions are made and the procedures that are followed, which enable the AFA and the Service to fulfil its statutory obligations. The Constitution is reviewed on a regular basis to ensure it remains up to date and relevant, taking into account local and national changes in the way fire and rescue services operate.

- 2.7 The AGS is a key corporate document for the AFA which provides 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 notes where any improvements are required. Further detail and explanation about the governance and assurance framework can be found [here](#).

3 Who is responsible for ensuring good governance?

- 3.1 The corporate governance structure surrounding the AFA is depicted below. Following an independent governance review, changes to this structure were made in 2023/24 as outlined in paragraph 5.16. The detail regarding the roles and responsibilities of the AFA and its Committees can be found in the [Constitution](#) and the [Governance and Assurance Framework 2024-2028](#).



- 3.2 The governance structure within the Service is the responsibility of the **Chief Fire Officer/Chief Executive (CFO/CE)**. This is discharged through the **Service Leadership Board (SLB)**, which consists of the most senior executive officers of the Service and the **Service Leadership Team (SLT)**, which includes Area Managers, Heads of department and invited representatives from across the organisation. Full Terms of Reference can be viewed in Appendix 2 and 3 of [Being the best that you can be](#).
- 3.3 The **SLB** has overall responsibility for the organisation's strategic direction, leadership, decision making, capital and revenue requirements, and risk management. The SLB oversees Service operations, ensuring competent and prudent management and planning, good governance, and suitable procedures for the maintenance of control measures to ensure compliance with statutory and regulatory obligations.
- 3.4 The **SLT** provides day-to-day leadership and management for the Service, overseeing a working environment which supports the effective achievements of our organisational priorities. The SLT maintain necessary

standards of compliance and ensures the Service is a great place to work. It is also responsible for the review and scrutiny of detailed reports on specific organisational business which require consideration and decision making.

- 3.5 The **Statutory Finance Officer** provides effective strategic management of the AFA Financial Strategies, including the Medium-Term Financial Plan (MTFP), Reserve Strategy, and the Annual Budget. The Statutory Finance Officer 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 overspends or underspends.
- 3.6 The **Clerk** is the Monitoring Officer whose role is to advise on the rule of the law and ensure decision making is legally sound, and for advising upon and overseeing governance arrangements for the AFA. Further detail on the Clerk can be found in section 5.
- 3.7 **Internal Audit** is an independent and objective assurance service to the AFA who complete a programme of reviews throughout the year, to provide an opinion on the internal control, risk management, and governance arrangements of the AFA.
- 3.8 **External Audit** review and report on the AFA's financial statements (including the AGS), providing an opinion on the accounts and use of resources, concluding on the arrangements in place for securing economy, efficiency, and effectiveness in the use of resources (the value for money conclusion).

4 The CIPFA/SOLACE Governance Framework

- 4.1 The AGS 2023/24 is aligned to the 'Delivering Good Governance in Local Government Framework', published by CIPFA/SOLACE in 2016. This Framework is intended to assist the AFA in reviewing its governance arrangements and its approach to risk management. The overall aim of the CIPFA/SOLACE Framework is to ensure a sound system of control is in place and that there is clear accountability for decision making.
- 4.2 In order to achieve good governance, each year the AFA will demonstrate that its governance structures comply with the seven core principles of the CIPFA/SOLACE Framework. The seven principles (A to G) are considered below and have been utilised in our review of governance and in developing this Statement, along with the views of the External Auditor, Internal Audit, HMICFRS, and review of our performance against stated objectives and the effectiveness of any changes made during the last financial year. Further detail on the outcome of the annual review of effectiveness 2023/24 can be found in [Appendix A](#).

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

5.1 AF&RS has a Values, Ethics and Behaviour Framework which was refreshed in 2022/23 to take account of the national [Core Code of Ethics for Fire and Rescue Services](#). Guided by these standards of behaviour captured in our values, we support our staff to embrace challenges, recognise achievements, and live out our values. Our values are:

- Respectful
- Honest
- Courageous
- Ambitious
- Inclusive
- Transparent

5.2 '[Being the best that you can be](#)' was launched in June 2023 and outlines the Service's vision and commitment to achieving excellence; promoting leadership at every level of the organisation with an expectation that everyone - no matter where they work, their rank or their role - has a responsibility for leading themselves in line with our values, to help us be the best we can be. The document sets out what is expected from every member of AF&RS staff. It aims to bring together the guiding principles, frameworks and tools including our Values, Ethics and Behaviour Framework, the [Core Code Of Ethics](#), our Zero Tolerance Statement, and the [National Fire Chiefs Council \(NFCC\) Leadership Framework](#).

5.3 The [Leading the Service](#) Fire Standard was launched in January 2023, to clearly articulate the expectations on those who lead within Services, particularly their behaviours, ethics, and the activities required to lead well. Ensuring alignment to this Fire Standard, will be an ongoing piece of work throughout 2024/25.

5.4 Aligned with the Dignity & Respect Policy, a digital toolkit was launched in March 2023 and embedded throughout 2023/24. It outlines that AF&RS is striving to provide and promote a safe, harmonious, and inclusive workplace with a zero-tolerance approach to bullying and harassment. The toolkit provides staff with the support, guidance, and procedures needed to deal with unwanted and/or inappropriate behaviour, whether on the receiving end of it, witnessed it, want to support someone, need to manage it, or are accused of it.

5.5 An HMICFRS Spotlight Report on [Values and culture in fire and rescue services](#) was published on 30 March 2023 which reported there were allegations by staff of bullying and harassment in every fire and rescue service in England. Throughout 2023/24 there have been numerous negative press reports nationally, regarding culture and misogyny within the sector, including within AF&RS. These reports have attracted public interest and had a detrimental impact on the reputation of all fire and rescue services across the UK. Locally, there has been negative press following an

inspection of AF&RS by HMICFRS, as well as coverage in relation to an efficiency and savings project and the potential impact on the number of firefighter posts.

- 5.6 One of the main priorities for the SLB and SLT is the acceleration of culture change in AF&RS - proactively seeking to learn from staff feedback and historic matters to continue to move forward positively. Short 'Touchpoint' staff surveys have been introduced to gain more regular staff feedback relating to culture.
- 5.7 In April 2023, an action plan was created to address the recommendations within the HMICFRS Spotlight Report, with dedicated resource to support implementation of the actions. Significant progress has been made with all identified actions complete, or partially complete. A confidential reporting service was launched in August 2023, enabling a confidential way for staff to raise concerns. The Disclosure and Barring Service (DBS) checks process is embedded with HR and Managers (including enhanced checks where required, based on role), ensuring all staff have complied with the mandatory requirement on an ongoing basis. AF&RS have complied with the requirement to disclose complaints, confidential reports, discipline, and grievance cases to HMICFRS.
- 5.8 In January 2023 an independent and external historic case review was instigated to help the Service learn and further improve on the handling of values and behaviour-based discipline processes. Significant progress has been made against all recommendations supported by the positive work already undertaken in 2023/24 to improve values and culture. Improvements have included the establishment of a Professional Standards Board, review of discipline and grievance policies, and development of supporting toolkits, increased usage of external professional investigators for employment cases and training for all middle managers by qualified employment law solicitor. AF&RS will continue the service level agreement with [SARI](#) (Stand Against Racism & Inequality) to provide independent professional support for our equalities and community engagement programmes.
- 5.9 The Service's Diversity, Inclusion, Cohesion and Equality (DICE) Strategy sets out how we are meeting the Public Sector Equality Duty and ensuring fair access to Services. The DICE team - in collaboration with HR - developed a new training programme. Line management training workshops have been delivered throughout 2023/24 with further ongoing training and workshops to be delivered throughout 2024/25. Training content covers DICE principles, NFCC Core Code of Ethics, relevant legislation, and interactive exercises covering inappropriate behaviour, banter, and the 'Being the best you can be' leadership framework. Attendees consist of a blend of uniformed and non-uniformed staff to encourage the sharing of experiences and best practice across varied areas of the Service. [Gender and Ethnicity Pay Gap](#) information is reported annually to the Policy and Resources Committee and published on the AFA's website.

- 5.10 The AFA appoint a qualified solicitor as their Clerk and Monitoring Officer, which is a statutory role set out in section 5 of the Local Government and Housing Act 1989. The Clerk's role is to advise on the rule of law to ensure decision making is legally sound and to raise any concerns by preparing a report to the AFA. The Clerk will advise if any proposal, decision, or omission by the AFA, or any Committee, has given rise, or is likely to give rise, to a contravention of any enactment, rule of law or code of practice or maladministration. The Clerk is responsible for advising upon and overseeing governance arrangements for the AFA and for ensuring that all meetings are properly organised and convened in accordance with the AFA's Constitution.
- 5.11 The Clerk is responsible for reviewing papers and minutes to ensure that they are comprehensive and accurate to enable appropriate and lawful decisions to be made by elected Members. The Clerk also provides a legal know-how service to the AFA and the SLB on key matters and reviews the Constitution, documents, and policies, as required, to ensure that they correctly reflect current legislative requirements and meet the needs of the AFA. The Clerk meets with the SLB monthly, acting as a formal advisor when strategic issues are considered to ensure that any legal issues are identified, and steps taken to mitigate any legal risks.
- 5.12 The Statutory Finance Officer is a member of the SLB, with statutory duties in relation to the financial governance and stewardship of the AFA. The Statutory Finance Officer is a qualified accountant and is supported by the Head of Finance and by the Finance Team which includes professionally qualified finance officers.
- 5.13 The AFA Members are required to adhere to the [AFA Constitution](#) which includes the latest Members' Code of Conduct, which was approved on 4 October 2023, aligned to the Local Government Association (LGA) Model Councillor Code of Conduct. The Constitution explains how the AFA operates, how it makes decisions, and the procedures followed to ensure the AFA is efficient, transparent, and accountable.
- 5.14 The AGOC keep under review the Code of Conduct for Members and ensures that Members receive appropriate training. By way of a Sub-Committee (minimum three Members), the Committee deals with cases referred by the Clerk/Monitoring Officer relating to Members' conduct. Members are required to disclose any interests at all meetings and on the register of interests. There is also a register for declaring gifts and hospitality for Members and staff.
- 5.15 From 1 April 2024 the Service has employed a solicitor specialising in employment law, to provide in-house legal advice and support with employment cases. The role of 'General Counsel' will be consulted at an early stage by HR and the SLB, to assist with case management, provide advice short of legal proceedings and represent the Service in Employment Tribunals. The General Counsel will also advise on other areas of law, for

example Freedom of Information and Data Protection Act requests, which are often linked to employment cases.

- 5.16 Towards the end of 2022/23 a review of the AFA's governance arrangements was carried out with support from the LGA to ensure it remained fit for purpose moving forward. The results of this review were reported to the AFA at an extraordinary meeting on 25 April 2023 and 12 recommended changes to governance arrangements were accepted by the Fire Authority. Many of those recommendations have already been implemented, for example, the number of committees has reduced from three to two – *Policy and Resources Committee (PRC)* and *Audit, Governance and Oversight Committee (AGOC)* – which are in addition to the Local Pension Board and the full Fire Authority. The remaining recommendations are on track for implementation by the next AGM in June 2024. More detail on these 12 recommendations is available [here](#).
- 5.17 The AFA embraces collaboration as a key enabler to achieving its mission to improve public safety through prevention, protection, response, and resilience. Collaboration also helps in providing a service which is effective, efficient, and value for money. 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, with local discretion in how the duty is implemented to benefit local community needs and risks. The Service's [Collaboration Strategy 2021-2026](#) outlines our high-level approach to collaboration, our areas of collaboration focus, and gives examples of our collaboration partners. The strategy was refreshed in 2022/23 and a new Collaboration Framework and online Collaboration Toolkit launched in January 2024. Collaboration is also an overarching theme in our Service Plan and underpinning Service Strategies.

6 Principle B: Ensuring openness and comprehensive stakeholder engagement.

- 6.1 The [Annual Performance Report](#) is presented to the AGOC and is used to publish performance about the Service to the public.
- 6.2 [Meetings, agendas, and minutes](#) of the AFA and its committees are accessible to the public alongside agendas and committee papers, on a separate AFA website, at the following link: [Meetings, agendas, and minutes - Modern Council \(moderngov.co.uk\)](#).
- 6.3 The AFA participates in the [Freedom of Information Act publication scheme](#) to ensure transparency with the public.
- 6.4 A new AF&RS website was launched in March 2024, with the aim of improving access to information and services for the public.

- 6.5 The AFA has a statutory duty to produce a Community Risk Management Plan (CRMP), which informs and is incorporated into the [Service Plan](#). The CRMP utilises data from Community Risk assessments, risk research and horizon scanning to assess foreseeable challenges and risks facing local communities, and outlines how the Service intends to mitigate these. The CRMP reviews the effectiveness of previous activity and highlights areas of focus for the future.
- 6.6 [The Service Plan](#) sets out how the AFA intends to deliver services over a four-year period and is widely consulted during its development. The AFA approves the Communication Strategy for consultation on the plan, which includes an online questionnaire for stakeholders, during which the proposed plans are put forward and feedback is requested. The results of the consultation are published on the [website](#) and reported to Members before the Service Plan is finalised and approved by the AFA, and published.
- 6.7 The AFA ensures suitable consultation takes place with communities and other stakeholders. Public consultation takes place annually for the draft Budget Strategy and, if necessary, on any significant changes to the Service Plan.
- 6.8 Service communication and campaign plans identify key audiences and stakeholders and they set out the intended impact on the community.

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

- 7.1 The [Service Plan](#) sets out the AFA's vision, priorities, and the outcomes it wants the Service to achieve and includes the activities that the Service needs to undertake to deliver against the plan. The SLT receives regular reports to review and scrutinise progress towards achieving Service's priorities and objectives.
- 7.2 The CRMP, which is incorporated into our Service Plan, is developed through insight and data analysis to understand our Service area and local communities. AF&RS identify and assess all foreseeable fire and rescue related risks through the community risk management planning process. Research and horizon scanning is carried out to understand potential threats to how the Service operates, and any emerging risks that may affect our communities.
- 7.3 Subject matter experts assess emerging risks and plan appropriate Prevention, Protection, and Response activities to reduce the potential impact of those risks. These mitigations are based on National Operational Guidance (NatOG) and backed up by data intelligence through our baseline report and strategic assessment of risk. Existing risks are regularly reviewed

against operational learning outcomes and our own incident data is analysed for patterns and trends.

- 7.4 Using our incident data, risk intelligence, and modelling tools we can 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.
- 7.5 Performance indicators are agreed which are aligned to the [Service Plan](#) priorities and reported to the SLT and [AGOC](#) Members regularly.
- 7.6 A rolling 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 annual accounts reflect the actuals for the year and the narrative report reflects how this has varied from budgets and prior years with key explanations as required.
- 7.7 The assumptions made in the MTFP - particularly around inflation, pay awards, and future government grants - are unknown (whilst based on the best information available) and therefore subject to change. The long-term impact of future funding is unknown, however the MTFP will continue to link the Service Plan's vision and objectives, ensuring value for money is achieved within a balanced and sustainable budget. The Statutory Finance Officer will ensure that any variation to the assumptions made in the MTFP are identified as early as possible and reported to Members as part of revenue and capital monitoring reports presented to the PRC.
- 7.8 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 by KPIs on energy and water use, business travel, and carbon emissions.

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

- 8.1 The AFA has robust decision-making mechanisms to ensure that its defined outcomes can be achieved in a way that provides the best trade-off between resource inputs and enabling effective and efficient operations. 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.

- 8.2 The new Service Improvement Team, are responsible for pulling together the revised HMICFRS inspection action plan following the latest inspection report. They also support delivery of the remaining work of the Transformation Programme, the Efficiency and Savings project and progressing the recommendations included in the HMICFRS Spotlight Report into values and culture in the fire and rescue service. The Programme Management Office (PMO), also included in this team, are in place to ensure effective governance and assurance throughout this programme of work.
- 8.3 Progress against the HMICFRS Inspection Action Plan and Transformation Programme is monitored and reported to the Service Improvement and Internal Improvement Boards and the PRC regularly (now in a combined report entitled 'Service Improvement'). Additional oversight arrangements are in place for the HMICFRS Causes of Concern, via the central Fire Performance Oversight Group (FPOG). Progress against planned activity in the [Service Plan](#) - and associated detailed action plan - is monitored and reported to the SLT.
- 8.4 The new Continuous Improvement Framework and Toolkit launched in February 2024, to provide a structure for planning, managing, and governing Service improvements, with guidance, tools and templates and a SharePoint Improvement Register, to assist with tracking or monitoring.
- 8.5 Key Performance Indicators (KPIs) are aligned to the outcomes the AFA has set to achieve in the [Service Plan](#). These are regularly presented in a Performance Report to AGOC and the [Annual Performance Report](#) details the activity and performance of the Service. If the circumstances in which the Service operates changes, activity can be adapted accordingly. Decisions affecting service delivery are delegated to officers to ensure they are able to react to changing circumstances quickly.
- 8.6 Performance against budgets is monitored by the SLT, and the PRC reviews a Budget Monitoring Report and a Capital Programme Update on a quarterly basis. The [MTFP](#) is the link between the AFA's long-term objectives and its financial capacity.
- 8.7 The [Capital Programme](#) outlines the AFA's approach to capital investment, ensuring it is in line with its Service Plan objectives.
- 8.8 The Corporate Risk Register (CRR) identifies significant corporate risks, which could prevent AF&RS from achieving its core strategic objectives and functions. Monitoring of the CRR is explained in [Section 10 \(Principle F\)](#). Responses to any recommendations deriving from audits and inspections

are monitored regularly in action plans by the SLT, [AGOC](#) and the [PRC](#) respectively.

9 Principle E: Developing the entity's capacity, including the capability of its leadership and the individuals within it.

- 9.1 The Service needs appropriate structures and leadership, as well as people with the right skills, appropriate qualifications, and mindset to operate efficiently and effectively and achieve their intended outcomes within the specified periods.
- 9.2 Within the Service, all Corporate Staff have a job description, and uniformed Officers have role maps. 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. 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.
- 9.3 Workforce planning has a crucial role in ensuring the Service has the capacity to meet its obligations and fulfil its aims and objectives. The Transfer, Appointments and Promotions Board (TAPB) ensure that information regarding the establishment and skills set is regularly reviewed to ensure appropriate succession planning.
- 9.4 Leadership development and our Development Pathways ensure that colleagues have all the support they need on their career journeys. The Service offers a range of apprenticeships to improve skills and bring new talent into the organisation. The HMICFRS [Values and culture in fire and rescue services](#) report recommended nationally that leadership development is offered fairly to all staff, so this will continue to be a priority area moving forward.
- 9.5 Annual Personal Development Reviews (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. Additionally, 360-feedback has been introduced for the SLB and the SLT to support their development. A new PDR system will be launched in 2024/25 and will contain a 360-feedback option for use by all staff as required.
- 9.6 Health, Safety & Wellbeing is one of our core activities, and we look to promote a positive working environment supported by our Health, Safety & Wellbeing policy.

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

- 10.1 [AGOC](#) provides independent assurance to the AFA on matters relating to audit, governance and risk management, annual accounts, Service performance and the conduct of Members.
- 10.2 The Service approach to risk is explained in its Corporate Risk Management Strategy and Roadmap 2024-2028 which is reviewed every four years in line with the Service Plan planning cycle, to ensure it remains effective.
- 10.3 The strategy was updated in February 2024 to take into account Internal Audit feedback which identified areas that could be considered for further enhancement of the risk management processes, when compared to best practice across the public sector. The updated strategy is supported by a Corporate Risk Appetite and Tolerance Statement to further strengthen the Service's Risk Management. A review of the Corporate Risk descriptors used in the CRR is underway as part of further enhancements being made in 2024/25. This is to ensure the risk events, causes and consequences are being suitably described, evaluated, and monitored.
- 10.4 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 are applied consistently across the Service areas.
- 10.5 [AGOC](#) monitors and reviews the CRR as part of the governance arrangements, seeking assurance that appropriate management actions are in place.
- 10.6 The [Community Risk Register](#) provides information on emergencies that could happen within the Avon and Somerset area, together with an assessment of how likely they are to happen and the impacts if they do. The information contained within the Community Risk Register is used to inform the AF&RS Community Risk Register and the Strategic Assessment.
- 10.7 Internal Audit arrangements are in place to review the effectiveness of internal controls through annual 'key financial control' reviews. In 2023/24 the audit focused on our [Payments to Staff](#) control framework which concluded that AF&RS mitigates many of the inherent risks in the payments to staff framework and provides clear segregation of duty within the finance system. A reasonable assurance rating was given with two low and two

medium rated actions for improvement. The internal control environment is further assessed as part of the annual External Audit, who report on the AFA's financial statements (including this AGS), providing an opinion on the accounts and concluding on the arrangements in place for securing economy, efficiency, and effectiveness in the use of resources (the value for money conclusions).

- 10.8 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 PRC and the [AFA](#). The Statutory Finance Officer oversees the financial affairs of the AFA and provides professional advice and guidance to the AFA to ensure compliance with statutory and regulatory financial requirements, including the AFA's Annual [Statement of Accounts](#).
- 10.9 Whilst no significant weaknesses have been identified in the financial control systems at present, the assumptions made in the MTFP, particularly around inflation, pay awards, and future government grants are subject to potential change in such volatile times. The previous Grey Book pay settlement of 7% increase backdated to July 2022, plus an additional 5% from July 2023 has put financial pressure on the AFA. However, the 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 Statutory Finance Officer will continue to ensure that any variation to the assumptions made in the MTFP are identified at the earliest possible time and reported to Members.
- 10.10 The AFA takes part in the [National Fraud Initiative](#) which proactively conducts fraud detection work through a bi-annual exercise that matches electronic data within and between public and private sector bodies to prevent and detect fraud.
- 10.11 AGOC assesses the performance of the Service against agreed measures and organisational targets and responds to areas of underperformance - reporting and making recommendations where necessary to the AFA. The KPIs in the Corporate Performance Scorecard are aligned to the Service Plan outcomes, and progress against these is reported quarterly to the SLT and AGOC. Year to date for January 2024 there were five KPIs not on target out of the 32 KPIs on the Scorecard, with further information on these KPIs and actions to address underperformance provided in the [Performance Report](#) to AGOC. Monthly performance and benchmarking data is also produced and provided to managers responsible for local targets and performance.
- 10.12 Prior to the new 2024/25 reporting period, AF&RS carried out its annual review of the ongoing suitability of the metrics and targets in the performance scorecard. Changes were proposed and approved by the SLT which took into account feedback from the 2023/24 LGA Governance Review, the publication of a HMICFRS inspection report as well as further

insight and input from the SLT. The new 2024/25 Performance Scorecard is now set out against the six objectives in the new 2024-2028 Service Plan.

- 10.13 Internal Audit carried out a Data Governance and Performance Management audit within 2023/24 which gained a Substantial assurance rating. Data analytics performed identified that AF&RS achieves good data integrity, with Internal Audit able to reperform and validate the performance reported through the AFA governance structure via the performance scorecard.
- 10.14 The PRC monitors and oversees priority programmes such as the HMICFRS Action Plan, the Transformation programme, programmes focused on cultural development, and all large-scale estates construction or redevelopment schemes.
- 10.15 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.
- 10.16 Business Continuity arrangements are in place for critical services, to ensure they can continue to operate in an emergency.

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

- 11.1 Accountability is about ensuring that those making decisions and delivering services are answerable for them.
- 11.2 Internal audit services are 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.
- 11.3 External audit services have been provided by Deloitte UK LLP during 2023/24, with new auditors, Bishop Fleming, contracted for 2024/25. External Audit provides an opinion on the financial statements of the Authority, as well as providing assurance that value for money has been delivered.
- 11.4 HMICFRS independently assesses the efficiency and effectiveness of AF&RS. The Service was last subject to a full inspection by HMICFRS during 2023/24, the outcome of which is available here – [Avon Fire and Rescue Service Inspection report 2023-2025](#). Further details are set out below in section 12. The Service is working at pace to address the four Causes of Concern with enhanced governance, scrutiny, and oversight

arrangements, including from the central Fire Performance Oversight Group (FPOG). Progress against the HMICFRS action plan is reported to the [PRC](#) on a quarterly basis.

- 11.5 A [Pay Policy Statement](#) is published annually to ensure the AFA is transparent about the way staff are remunerated.
- 11.6 Transparency information is [published](#) in accordance with the [Transparency Code](#).

12 HMICFRS Inspection Results

- 12.1 In November 2023, HMICFRS published its findings into AF&RS, following their Round 3 inspection. The inspection assessed the Service's effectiveness, efficiency and how well it looks after its people, measuring the Service against 11 areas, with each one being given a graded judgement.
- 12.2 The inspection identified two accelerated causes of concern, one relating to the Service's mobilising system and the other regarding site-specific risk information. It 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 Chief Fire Officer will report back on Service improvements to the FPOG, made up of representatives from HMICFRS, the Home Office, Local Government Association, and the National Fire Chiefs Council.
- 12.3 In January 2024, following a revisit HMICFRS published a letter acknowledging that AF&RS had made good progress:
"... We are pleased to see that the service has started to make good progress in relation to both accelerated causes of concern. We recognise that the service has invested time and resources to develop its action plan and has established appropriate and clear governance arrangements, which are being further strengthened following the publication of our full report..."

The full letter can be viewed here [Avon Fire and Rescue Service: Causes of concern revisit letter – January 2024](#).

- 12.4 A further revisit took place during March 2024 to review progress against the Service mobilising system accelerated cause of concern. HMICFRS published a letter acknowledging that AF&RS has made further progress.
"We were pleased to see the significant steps the service had taken in response to the accelerated cause for concern. The fire control staff we spoke with now have more confidence in the mobilisation system,"
"We will need to be assured that the original problems with the mobilisation system have been fully addressed and won't happen again. During our next revisit, we will review the effectiveness of the mobilisation system."

The full letter can be viewed here [Avon Fire and Rescue Service: Cause of concern revisit letter - March 2024](#).

- 12.5 The most recent revisit took place in September 2024. The revisit found significant improvements have been made to the mobilisation system to make sure it is reliable and stable. This has resulted in the closure of the accelerated cause of concern about the mobilisation system. Additionally, eight of the 20 recommendations have been closed.

The full letter can be viewed here [Avon Fire and Rescue Service: Cause of concern revisit letter - September 2024](#).

13 The Head of Internal Audit opinion 2023/24

- 13.1 The Head of Internal Audit has formed the opinion that based on the areas reviewed during the 12 months ending 31 March 2024; 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'*.
- 13.2 Completion of Internal Audit actions are monitored by management through an internal action tracker and the SLT and AGOC also monitor their implementation. Internal Audit review progress throughout the year to check and verify progress towards the management recommendations and actions and evidence of implementation. The progress position is reflected in the Internal Auditors' annual report and opinion, including the number of actions fully implemented and actions in progress towards their forthcoming completion dates.

14 External Audit 2023/24

- 14.1 Our External Auditors have confirmed that they will issue an unmodified opinion on the financial statements for the 12 months ending 31 March 2024.
- 14.2 It is also part of External Audit's role to be satisfied proper arrangements have been made to secure economy, efficiency, and effectiveness in the use of resources (Value for Money – VFM). In their report to AGOC in December 2024, our External Auditors identified a significant weakness in relation to the governance arrangements of the Service, in particular implementation of HMICFRS action plans. The report noted that following the most recent visit from HMICFRS in September 2024, progress is still required in respect of one 'Accelerated cause of concern' and two 'Causes of concern'. The recommendation stated that "The Authority must promptly implement the required actions to close the remaining causes of concern and recommendations made by HM Inspectorate to strengthen its arrangements to secure economy, efficiency and effectiveness in its use of resources."

- 14.3 In addition, the prior auditors significant finding from 2022/23 was reported to be 'ongoing'. This was the recommendation that the Service continues to review the actions implemented and ensure the desired outcomes are achieved to address the concerns raised by HMICFRS.

15 Conclusion

- 15.1 As highlighted by the November 2023 HMICFRS inspection report, and reflected in the 2023/24 external auditors Value for Money work, a significant weakness in our governance arrangements has been identified. The Service was aware of the need to implement the required actions to close the remaining causes of concern from the inspection and were already taking significant steps to address the concerns raised. This has been recognised by the Inspectorate during their re-visits, and within the External Auditors report. A detailed action plan to address the issues raised is in place, with our governance arrangements strengthened to ensure progress is effectively monitored.
- 15.2 Our self-assessment and the annual analysis of the system of internal control has not identified any other significant weaknesses in our governance arrangements, in addition to those identified from the HMICFRS report, which are now being addressed. We will continue to be proactive in our approach to monitoring the effectiveness of our governance to identify areas of improvement. As a result of our self-assessment, over the coming year we will take the steps to address the improvements identified in the action plan in Appendix A.

16 Statement of commitment

16.1 We have been advised of the result of the 2023/24 review of the effectiveness of the governance and internal control framework, and of the plans to address identified weaknesses to ensure continuous improvement of the systems in place. We propose over the coming year to take steps to address the matters set out in Appendix A to enhance further the Service's governance and internal control arrangements.

16.2 This AGS was approved by AGOC on Friday 14 February 2025 and has been signed by the Chief Fire Officer/Chief Executive, the Interim Chair of Avon Fire Authority and both Statutory Officers.

We are satisfied that these steps will address the need for improvements that were identified in our review of effectiveness, and that we will monitor their implementation and operation over the next year and as part of our next annual review of effectiveness.

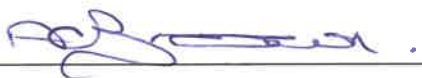
Signed:


Interim Chair of Avon Fire Authority: Councillor Paul Goggin


Chief Fire Officer/Chief Executive: Simon Shilton

Date:

Signed:


Clerk (Monitoring Officer): Amanda Brown


Statutory Finance Officer (S112 Officer): Verity Lee

Date:

17 Glossary of Terms

AF&RS	Avon Fire and Rescue Service	JCC	Joint Consultative Committee
AFA	Avon Fire Authority	KPI	Key Performance Indicator
AGOC	Audit, Governance and Oversight Committee	LPB	Local Pension Board
AGS	Annual Governance Statement	LGA	Local Government Association
BFS	Business Fire Safety	MHFA	Mental Health First Aid
CFO / CE	Chief Fire Officer / Chief Executive	MTFP	Medium-Term Financial Plan
CIPFA	Chartered Institute of Financial Accountants	NFCC	National Fire Chiefs Council
CPD	Continuous Personal Development	NatOG	National Operational Guidance
CRMP	Community Risk Management Plan	ORS	Opinion Research Survey
CRR	Corporate Risk Register	PDR	Personal Development Review
DBS	Disclosure and Barring Service	PiP	Procurement in Partnership
DICE	Diversity, Inclusion, Cohesion, Equality	PMO	Programme Management Office
DPIA	Data Protection Impact Assessment	PRA	Purchase Requisition Authorisation
EDI	Equality, Diversity, and Inclusion	PRC	Policy and Resources Committee
FBU	Fire Brigade Union	SARI	Stand Against Racism and Inequality
FoI	Freedom of Information	SEN	Staff Engagement Network
FPOG	Fire Performance Oversight Group	SLB	Service Leadership Board
FRS	Fire and Rescue Service	SLT	Service Leadership Team
H&S	Health and Safety	SOLACE	Society of Local Authority Chief Executives and Senior Managers
HFSV	Home Fire Safety Visit	SSRI	Site-specific Risk Information
HMICFRS	His Majesty's Inspectorate of Constabulary and Fire & Rescue Services	TAPB	Transfers, Appointments and Promotion Board
HR	Human Resources	ToR	Terms of Reference
IA	Impact Assessment	TriM	Trauma Risk Incident Management
IT	Information Technology	VFM	Value for Money

18 Appendix A – Outcomes of the annual review of effectiveness 2023/24

CIPFA/SOLACE Principle A 'Behaving with integrity, demonstrating strong commitment to ethical values and respecting the rule of law'	
Constitution and the AFA (under Principle A)	
Supporting Evidence • AFA Members are required to adhere to the AFA Constitution which includes a Members' Code of Conduct, decision-making practices, arrangements for whistleblowing and the prevention and detection of fraud, money laundering, corruption, and bribery. • Quarterly AFA Member Development Briefings which include updates on key topics such as budget setting and draft budget, our Service Plan, HMICFRS and the values and behaviour framework. • Induction for new Members where they are introduced to key documents and expectations. • Members are required to submit an updated Member Form 2 each municipal year, updating and declaring their interests. Declarations of interests also made at all meetings. • Register of interests and register of gifts and hospitality (Members and staff). The Clerk and CFO regularly review and monitor register of interests. • Grant of dispensation for Members is utilised once a year for voting on the council tax precept. • The Clerk monitors for any new legislation which may impact AF&RS/AFA and ensures policies/procedures are updated and staff/Members are briefed. • Members are updated on issues and trends arising from Discipline and Grievance cases.	Improvements Planned for 2024-25 • The remaining chapters of the 2022 Constitution will be reviewed by the Clerk and updated to ensure alignment with the new governance structure. Changes will be reviewed by Members at a Constitution Working Group and considered by the full AFA for formal adoption. • The Clerk will develop an annual training plan for elected Members, with help from external training providers. • Following Bristol City Council and Police & Crime Commissioner elections May 2024, new Members will be invited to an Induction on 7 June 2024.
Values & Code of Conduct (under Principle A)	
Supporting Evidence • The 2021 Core Code of Ethics for Fire and Rescue Services in England covers the conduct of officers and staff. • Ethics, values and DICE training for Members and staff. • The Probation Policy for Corporate Staff supported by the induction checklist and probation review process. • Ethical values statement included in contracts with external service providers. • Service Plan sets out our Mission, Vision, and Values. • Staff are encouraged to submit e-Rec cards to their colleagues to thank them for their support or to recognise them aligned to the values.	

Values & Code of Conduct (under Principle A)	
• SLT keep the 'Being the best that you can be' document under review to embed employee commitment to values, behaviour framework and code of ethics. • Service Bulletins 'The Shout' and 'The Big Shout' recognise 'Value Stars', with staff recognised for their values-aligned work in the AF&RS Awards. • Zero Tolerance Statement. • Values based recruitment consistently applied, requiring candidates to demonstrate alignment with our values - embed values across all Service areas.	
Actions Implemented in 2023-24	Improvements Planned for 2024-25
• The DICE team has created a Diversity calendar (available on the intranet) featuring information about our communities by highlighting celebration, remembrance, and festive events. • The DICE team have collaborated with HR to develop a new training programme which supersedes the previous plan for Watch Managers, all corporate staff, managers, and wholetime staff. DICE & HR have delivered Line Management training workshops, with content covering EDI principles, NFCC Code of Ethics, relevant legislation and interactive exercises on inappropriate behaviour, banter, and being the best you can be leadership framework. Attendees consist of a blend of uniformed and non-uniformed staff to encourage the sharing of experiences and best practice across varied areas of the Service. • The Service continued to collaborate with teams, the People Services Forum, and Unions to embed the Values and Behaviour Framework. • Short 'Touchpoint' staff surveys were introduced to help monitor culture and gain staff feedback.	• The new Diversity Calendar provides information on our community groups. DICE will update its pages on the intranet and external website, ensuring all information relating to communities is accurate and accessible. • Ensure key information and insights about community groups is effectively disseminated across the Service using relevant communication methods. • DICE will be working on providing statistical demographic data during 2024. • The next Line Manager workshops to be delivered on 8/04/2024 and 22/04/2024. SARI will be attending the workshop on the 8 April for observation. A 'mop up' session to capture any staff that missed the previous workshops, will conclude the training programme in May 2024. • DICE will be reviewing the Equality Dignity & Respect in the Workplace 2023. • The Leading the Service Fire Standard articulates the expectations on those who lead within Services, particularly their behaviours, ethics and the activities required to lead well. Ensuring alignment to this Fire Standard, will be an ongoing piece of work throughout 2024/25. DICE in collaboration with the members of the People Services Department (PSD), will continue to embed the Ethics & Values Behaviour Framework via training, station visits and stakeholder engagement. • 'Touchpoint' staff surveys will continue to help monitor culture via staff feedback.
Policies, systems, and procedures (under Principle A)	
Supporting Evidence	
• Discipline and Grievance Policies; External Compliments and Complaints Policy; Dignity and Respect Policy, Toolkit and recording systems. • AF&RS 'Being the best that you can be' document sets out what we expect from leaders within AF&RS, including decision-making practices. • Anti-fraud and Anti-corruption Strategy and Response Plan. • Personal Development Review (PDR) of officers and staff (Performance Appraisals). • Confidential Reporting Code and Guidance. • DICE Strategy (2023-26) sets out how we are meeting the Public Sector Equality Duty. • Contract Procedure Rules, Contract monitoring and procurement processes. • Purchase Requisition Authorisation (PRA) electronic compliance system. • Policy production, review, and approval processes in place, with policies accessible to staff via the Policy Hub. • Use of Bluelight e-procurement system.	

Policies, systems, and procedures (under Principle A)

- Combined Scoping Impact Assessments (IAs) provide an initial assessment of impacts for Data Protection, the Environment and People. Staff must complete these when embarking on projects, policies, collaborations, events, and writing business cases. IAs help ensure work is legally compliant and identify issues. A more detailed IA is carried out when necessary. - The SLB/SLT review of culture in relation to disciplinary and grievance cases and lessons arising. 2021-2026 Collaboration Strategy. - The Collaboration Framework and online Collaboration Toolkit highlight the importance of sharing our Values, Ethics and Behaviour Framework, and the Core Code of Ethics for Fire and Rescue Services in England, with new partners. - Safeguarding training delivered across the Service to ensure staff understand their responsibilities within safeguarding.	Actions Implemented in 2023-24 - Service policies continued to be reviewed as part of the Transformation Team's strand on Policy. This included the Discipline and Grievance Policies. - The SharePoint Policy Hub was launched w/c 2 October 2023, acting as a digital library for all Service policies and advice on writing new policies or reviewing historical ones. Production, review, and approval processes have been refreshed. - Personal Development Review (PDR) workshops for managers took place. - External review into the handling of discipline and grievance investigations used to assess learning from cases and actions required. Line management/HR investigation and disciplinary hearing training instigated in early 2024. - Decision to establish Professional Standards Board to manage discipline and grievance cases and instigate external scrutiny and governance. - Corporate Staff induction and onboarding processes have been extensively reviewed and a new process and supporting tools have been designed and are being launched. - Introduced a new PRA system in March 2024, using Microsoft 365 forms. - New contract procurement rules have been implemented following the Governance review. - Procurement strategy review took place in Dec 23. - Mandatory Prevent training has been issued across the Service and added to induction training. - The Safeguarding Policy has been revised and re-released. - The Designated Safeguarding Leads continue to review current practices and procedures to look for improvements, including a revision of the SG101 form, improving the recording of information, and releasing role specific training. - DBS Checks introduced for all staff. - A confidential reporting service was launched in August 2023, enabling a confidential way for staff to raise concerns. Improvements Planned for 2024-25 - Small amount of residual Transformation Programme policy work which will be completed in Q1 2024/25. - PDR workshops for managers will be completed by end of April 2024. Additional sessions will be added should any managers not have been captured. PDR training for SLT scheduled June 2024. - The DICE Strategy 2023-2026 will be subsumed into the People Strategy this year and will then become obsolete. - Professional Standards Board first meeting in April 2024. Established to manage discipline and grievance cases and instigate external scrutiny and governance. - The newly reviewed Corporate Staff induction and onboarding processes and tools will be launched. - Bluelight e-procurement system to be replaced with In-Tend e-procurement system. - New Procurement strategy to be agreed and published. - Contract Procedure rules and other process and templates to be reviewed and updated following implementation of new Procurement Act. - Awareness sessions will be delivered to all teams Service-wide to promote the new online Collaboration Toolkit, with an emphasis on the importance and process of evaluation.
--	--

Respecting the rule of law (under Principle A)	
Supporting Evidence - The AFA, its Committees and Avon Fire & Rescue Service (AF&RS) utilise all the powers contained in the following legislation for the benefit of citizens, communities, and other stakeholders: - Fire and Rescue Services Act 2004 - Fire Safety Act 2021 - Civil Contingencies Act 2004 - Building Safety Act 2022 - Regulatory Reform (Fire Safety) Order 2005 - Policing and Crime Act 2017 - Breaches of security and data protection are recorded and investigated. - Enforcement action is taken under the Regulatory Reform (Fire Safety) Order, where compliance coaching to responsible people is not achievable in line with our Enforcement Policy. - Modern Slavery Statement reviewed and published annually. - Work of External and Internal Audit, with Internal Audit plan agreed by the AGOC, focusing on key areas of risk to provide assurance to Members. - Information and data transparency information is reviewed and published on the website in accordance with the <u>Local Government Transparency Code</u>. - Participation in the National Fraud Initiative.	
Actions Implemented in 2023-24 - One decision in a Subject Access case linked to an ongoing legal case was challenged, which was refused and then appealed to the Information Commissioner's Office. Decision that our actions were correct was upheld. - Two Internal Reviews for Freedom of Information requests made, resulting in assessment that process was performed correctly. - Nine Data Protection (DP) and 11 Freedom of Information (FoI) cases extended due to complexity, police request or involvement, requirement for full Public Interest Test, or consultation with Interested Parties. - Fire Safety Inspecting officers carried out 609 Fire safety Audits on Commercial premises. - BFS department responded to 527 Licensing applications and 940 Building Regulations submissions. - BFS issued one enforcement notice and issued 9 probation / Restriction notices.	Improvements Planned for 2024-25 - DPIA workshop to be held on 19/04/2024. - Review of DP training to be carried out as contract with existing provider ends in August 2024 and renewal is currently impractical. - Review and publication of a revised Business Fire Safety Risk Based Inspection Policy. - Prosecution training for inspecting officers provided by specialist. - Delivery as part of a Multi Discipline Team working as part of the Building Safety Regulator. - The New Procurement Act will go live on the 28 October 2024. Procurement specialists will complete all necessary training and upskilling in time for go live. The procurement team will be delivering targeted presentations and comms to appropriate stakeholders and teams including AFA Members. Procurement team will conduct a review of current tender templates and Contract procedure rules to ensure they are in line with the new Act.
CIPFA/SOLACE Principle B 'Ensuring Openness and comprehensive stakeholder engagement'	
Constitution and the Avon Fire Authority (under Principle B)	
Supporting Evidence - The AFA website provides information regarding the Strategies, Policies, Service Plan (and supporting documents) as well as news and information about levels of performance, incidents, and the work that we do in the community. - Minutes and papers from the AFA Meetings and Committees are available on the AFA Modern Gov website. The AFA Standing orders require that all papers are submitted to every Member at least five clear days before a meeting.	

- Quarterly AFA Member Development Briefings and ad hoc training which include updates on key topics. - The AFA and AGOC monitors the level of service delivery to the public via a suite of Performance Indicators and Quarterly reports. - Induction course for new members and all members are made aware of the Service's documents and procedures for: Codes of conduct, Whistleblowing, Compliments and complaints, Anti-fraud and corruption. - Work of the AFA and key decisions promoted on AF&RS website and other comms channels. Video recording and live streaming of the AFA meetings.	
Actions Implemented in 2023-24 A new 'Constitution Repository 2023' was set up in the Library of the AFA website containing the key constitutional documents approved by the Fire Authority at their meeting on 25 April 2023. The Constitution Repository 2023 comprises the 10 chapters/documents already updated following the independent governance review.	Improvements Planned for 2024-25 - During 2024/25 the Clerk will review the remaining chapters of the 2022 Constitution to ensure they are aligned to the new governance structure. - Any suggested amendments to the remaining chapters of the Constitution will be reviewed by a Constitution Working Group and presented to the Fire Authority for approval and publication.
Service Planning (under Principle B)	
Supporting Evidence - The Service Plan is prepared in consultation with key stakeholders: - Level 1 – Staff, AFA Members, Rep Bodies, and the Staff Engagement Network (SEN) - Level 2 – Local communities and local community groups, Avon and Somerset Police & Crime Commissioner, local businesses, local authorities and bordering fire and rescue services - Level 3 – Avon & Somerset Constabulary, South Western Ambulance Service NHS Foundation Trust and Avon & Somerset Local Resilience Forum members - Level 4 – Local media and local Members of Parliament (MPs) - SLB and SLT workshops take place to scope and update the Service Plan, including horizon scanning and objective setting. - Public consultation takes place for the Draft Budget Strategy annually. - Corporate Communications strategy and plan. - MTFP and Budget Consultation. - The MTFP and supporting narrative report include information on key concerns and risks considered as well as budget setting assumptions and justifications. The annual accounts reflect the actuals for the year and the narrative report reflects how this has varied from budgets and prior years with key explanations as required.	
Actions Implemented in 2023-24 - A revised Service Plan (incorporating the CRMP) was produced. This utilises data from community risk assessments, risk research and horizon scanning, ensuring we align to the Fire Standard for Community Risk Management Planning. - Public consultation took place on the 2024-2028 Service Plan. - Background analysis work was undertaken to inform the Service Plan 2024-2028 and feed into the Strategic Assessment and Baseline Report. - The new Service Plan was published on the new website in a digital format to increase access to this information, by making it a more user-friendly format.	Improvements Planned for 2024-25 - The Service will determine extent of consultation and stakeholder engagement on the Service Plan, should changes be required throughout the 4-year period, based on the extent of changes being made. - The new Strategic Assessment 2024 and Baseline Report will be published in Q1 2024/25, to support the Service Plan 2024-2028.

Policies, systems, and procedures (under Principle B)		
Supporting Evidence - The Publication Scheme page on the AF&RS website is regularly reviewed and updated in line with the Local Government Transparency Code. Privacy Notices published on the website and regularly updated. Accessibility information on the AF&RS website - Registers are in place to assist in monitoring collaboration, partnership, and Home Fire Safety Visits (HFSV) referral arrangements. - Communications Charter to reduce the number of platforms the Service uses in line with the adoption of Microsoft 365. - The Service Bulletins 'The Shout' and 'The Big Shout' include updates from the CFO, news, incidents, our people, and events to keep staff and stakeholders informed of key updates and changes. - The Service publishes content on Teams and is seeing increasing engagement. Content includes CFO updates and the SLT roundup videos. - The Service conduct post-incident customer satisfaction surveys to gain feedback and valid against our performance standards. - HMICFRS reports published on the website. - All key governance documents published on the AFA website for the public to view, including External and Internal Audit Reports. - Annual Performance Report. - Record of decision making and supporting materials. - Business cases are presented to the SLB/SLT for consideration and approval.		
Actions Implemented in 2023-24 - A new AF&RS website was designed, built and launched, to support digital engagement with public and staff. - Internal Communications Survey to understand How & What platforms staff are using to shape the development of our SharePoint intranet and determine our usage of M365 applications for Service-wide communications. - The 'Making Avon Fire & Rescue Service a better place to work' document, has been superseded by the People Strategy, which is owned by the People Services Department. 'Being the best that you can be' launched in June 2023 which is a re-work of the leadership charter influenced by findings from the cultural survey. - Use of SharePoint for collaboration on the Corporate Risk Register, Internal Audit, and Service Planning.	Improvements Planned for 2024-25 - Developing new staff Intranet to increase ease of access to information for staff. - Continue to promote the use of Microsoft 365 applications and encourage staff to engage with the platforms. - Continue to seek feedback on the format and access to communication channels to increase external engagement.	
Collaboration (under Principle B)		
Supporting Evidence - The Staff Engagement Network (SEN) aims to involve staff in Service decisions and allows for a platform for staff to raise issues that may affect the Service. - Tactical Research and Development group utilises the knowledge and experience of staff with regards to advances and innovation within the fire sector, to improve firefighter and community safety. - Collaborations in procurement/purchasing ensure the Service shares knowledge, resources, buying power and best practice, to deliver the best value for money. - Joint Consultative Committee (JCC) constitution, Fire Brigades Union (FBU) negotiations committee in place. - The Collaboration Strategy sets out the Service and the AFA's commitment to collaborative working.		

Collaboration (under Principle B)

- The Collaboration Framework outlines our approach to collaborative working, and the online Collaboration Toolkit provides guidance, tools and good practice in relation to planning, monitoring, evaluating and closing collaborations, including internal and external stakeholder management.
- Collaboration written agreements (Partnership Agreements, Memorandums of Understanding, Service Level Agreements, etc) are in place.
- A formal Structure of health and safety Committee meetings to enable all staff to contribute to health and safety matters.
- The DICE team connects with organisations within our Service area, and manages a Community & Partnerships database, to engage with and understand the needs of our community. This database is available to all staff and has proven to be a useful tool for engagement and relation/partnership building with local communities.
- DICE attends monthly network meetings including the Bristol Equality Practitioners Meeting and the Race Equality Strategic Leaders Meeting and 6 monthly, the Stepping Up Stakeholder Board meeting. All network meetings incorporate key agencies and community led organisations and representatives.
- AF&RS work collaboratively with Stand Against Racism & Inequality (SARI) and Babbasa to identify and mitigate any barriers to participation or engagement and encourage underrepresented groups and individuals including the young generations to consider AF&RS as an employer of choice.
- Members of Procurement in Partnerships (PiP), a group of collaborative South West public sector organisations including police, NHS, universities, and councils. Use National frameworks for various categories of spend. Collaborate with NFCC on national procurement opportunities.
- Prevention staff are active members of the Community Safety Partnership and attend all relevant meetings.

Actions Implemented in 2023-24

- Continued staff engagement through SEN, Watch Manager workshops, SLT department and station visits and CFO discussion sessions to facilitate discussion on key themes and topics including culture.
- Short 'Touchpoint' staff surveys were introduced to help monitor culture and gain staff feedback.
- Conducted internal survey on communication platforms and conducted IT user surveys.
- DICE attends monthly network meetings including the Bristol Equality Practitioners Meeting and the Race Equality Strategic Leaders Meeting and 6 monthly, the Stepping Up Stakeholder Board meeting. All network meetings incorporate key agencies and community led organisations and representatives.
- Continued to explore possible procurement collaboration opportunities.
- Awareness sessions were held with all teams Service-wide to promote our updated Collaboration Framework, Procedures and Toolkit.
- The new online Collaboration Toolkit was designed and published on SharePoint to provide staff with instant access to collaboration planning, monitoring, evaluation and closure tools and guidance, including stakeholder management.
- All collaboration management activities (planning, monitoring, evaluation and closure) are carried out on MS Teams, allowing instant access to work, enabling all stakeholders to participate, and streamlining processes.
- Updated Station Reference Guide (SRG2) Community Safety.
- Worked collaboratively with key agencies such as Police, health care professionals and Local Authorities, Equality, Diversity, and Inclusion (EDI) focus groups and community-based organisations.
- Continued to build relationships with community groups, to open channels for reporting emerging risks within our communities.
- DICE and Prevention and Protection have worked together on several community events in 2023.

Improvements Planned for 2024-25

- Awareness sessions will be delivered to all teams Service-wide to promote the new online Collaboration Toolkit, with an emphasis on the importance and process of evaluation.
- Short 'Touchpoint' staff surveys will continue, to help monitor culture and gain staff feedback.
- DICE and Prevention and Protection team will review all public focused materials and documents to ensure they are fully accessible during 2024.
- DICE and Prevention and Protection will continue to work together on community events.
- DICE will identify language translation services and review our materials to ensure we have translations for the most spoken languages.
- Development of a service level agreement with Bristol Women's Voice.
- We will continue to explore other possible procurement collaboration opportunities.

CIPFA/SOLACE Principle C

'Defining outcomes in terms of sustainable economic, social, and environmental benefits'

Service Planning (under Principle C)

Supporting Evidence

- The Service Plan including CRMP is updated and reviewed by the AFA. The Service Plan explains how the Service matches resources to risk, and along with corporate strategies and team plans, sets out Service aims and objectives.
- Public consultation takes place for the Draft Budget Strategy and Service Plan annually.
- The Baseline Report assesses trends in incidents and reviews utilisation data so we can measure our effectiveness and efficiency in dealing with the operational demands placed on AF&RS.
- The Strategic Assessment enables AF&RS to identify issues with the potential to affect the future strategic direction of the Service. This includes a PESTELO analysis in line with the NFCC's Strategic Framework for CRMP.
- Communication and campaign plans identify audience and stakeholders and the intended impact on the community.
- The Service publish a Final Accounts report that contains full details of the Authorities financial affairs including the Statutory Finance Officer's foreword, and summary extracts of Budget reports and MTFP.
- AF&RS Environmental Strategy 2020-2030 outlines the approach to protecting the environment and being more climate resilient. Annual action plan and report produced and performance against Environmental Strategy and Net Zero goal is reported to EMS Management Review Committee and PRC.
- Capital investment is structured to achieve appropriate life spans and adaptability for future use of resources to optimise social, economic, and environmental wellbeing.
- The Capital Prioritisation and Steering Group ensure all potential capital projects and replacements are assessed for affordability and impact in terms of the Service's key objectives.
- The DICE Strategy sets out how AF&RS ensure fair access to Services.

Actions Implemented in 2023-24

- Background analysis work was undertaken to inform the Service Plan 2024-2028 and feed into the Strategic Assessment and Baseline Report.
- Work continued on the Transformation programme throughout 2023/24, bringing the benefits of increased efficiency, capacity, cohesiveness, and maximising the value of digital solutions, making the service more economical.
- Detailed objectives and actions have been created to support the new Service Plan objectives.

Improvements Planned for 2024-25

- The new Strategic Assessment 2024 and Baseline Report will be published in May 2024, to support the Service Plan 2024-2028.
- Macro and micro environmental analysis will be considered in reviewing the Strategic Assessment
- The remaining Transformation work packages will be progressed through to completion in 2024/25 with the Transformation Programme ending on 31/03/25.
- Detailed objectives and actions, to support the new Service Plan objectives, will be imported into the SharePoint improvement register to improve visibility of actions alongside other workstreams to assist in prioritising and reporting on progress.

Policies, systems, and procedures (under Principle C)

Supporting Evidence

- Combined Scoping Impact Assessments (IA) provide an initial assessment of impacts for Data Protection, the Environment and People. Staff must complete these when embarking on projects, policies, collaborations, events, and writing business cases. A detailed IA is carried out when necessary.
- Environmental impact is monitored by monthly/quarterly Performance Indicators on Energy, Water, Business Travel & Carbon Emissions. In addition, there are regular Environmental Site Audits and a log of site specific environmental non-conformities that are reviewed and actioned.
- Annual Environmental Action Plan.
- Environmental Management System (EMS) established including Compliance Register.
- Social, economic and environmental factors are considered and implemented within procurement processes and contract management.
- The Collaboration Strategy sets out the Service and AFA commitment to collaborative working.
- The Collaboration Framework outlines our approach to collaborative working, and the online Collaboration Toolkit provides guidance, tools and good practice in relation to planning, monitoring, evaluating and closing collaborations; including the capture of intended benefits and social value during the planning phase, reviewed during the evaluation phase.
- Collaborators are required to complete a Scoping IA to highlight and address any impact, including environmental impact.

Actions Implemented in 2023-24

- We have improved the user experience for Scoping Impact Assessments (IA), by ensuring that users get fewer, but more impactful comms. Upon completion of a scoping IA, the user now receives a single email, containing all follow up work with tailored explanation and advice.
- End users now have better access to a report of their scoping results, so they can more easily collaborate with SMEs to update and improve their assessments.
- The approval mechanism for scoping and stage two IAs has been overhauled and is now much more efficient. It is now easy to see the exact status of each IA at a glance, including work that has been completed, and work that is ongoing or due.
- We have introduced a mechanism to allow all stage two IAs and complementary evidence to be saved and stored centrally in one location, moving from a process where stage 2 IAs were saved disparately, in separate departmental file structures.
- The Public Sector Flexible Framework continues to be used as a self-assessment mechanism and to determine necessary actions for embedding sustainable procurement. It encompasses Policy, Process, Suppliers, People and Monitoring, from a Foundation Level 1 to Leadership Level 5 for each aspect. AF&RS is currently between Levels 1-3.

Improvements Planned for 2024-25

- In the short to medium term, our next goal for improving the IA system further is to enhance and automate a review mechanism, so completed IAs are reviewed annually, for continued relevance and an archival process for IAs which are confirmed to be no longer relevant. Conversations are also ongoing about the move of IAs to form a key part of the wider continuous improvement framework which is being developed. This will be a significant result to ensure that IAs can transition into a managed BAU process.
- Awareness sessions will be delivered to all teams Service-wide to promote the new online Collaboration Toolkit, with an emphasis on the importance and process of evaluation.
- The Public Sector Flexible Framework will continue to be used as a self-assessment mechanism and to determine the necessary actions for embedding sustainable procurement.

Governance (under Principle C)

Supporting Evidence

- The Corporate Risk Register is monitored and reviewed regularly by the SLT and AGOC.
- Monitoring of HMICFRS inspection action plans are co-ordinated and reported by HMICFRS Service Liaison Officer. The SLT monitor progress against the action plan every other month and a report on 'Service Improvement' is presented to the PRC at each meeting for Member-led scrutiny.

Governance (under Principle C)	
- The AFA papers include sections to consider the financial, legal, equality and diversity, environmental and sustainability, data protection and crime and disorder impacts. - External Audit – Value for Money opinion. - Outcomes resulting from the Internal Audit inspection process. - Regular reports on progress against the Service Plan objectives with key matters arising reported to the SLT/AFA.	
Actions Implemented in 2023-24 - Round 3 HMICFRS Inspection in Q1 of 2023/24. Findings from the published report are being addressed through the development and delivery of an action plan containing assigned responsibilities and timescales for all areas of improvement. Our HMICFRS Inspection Action Plan is a 'priority programme', overseen by the Service Improvement Board and PRC. - Environmental Management System (EMS) launched. EMS is a framework which will help us to achieve our environmental goals through consistent review, evaluation, and improvement of our environmental performance. As a public service serving our communities, it's important that we lead by example and demonstrate what we're doing as an organisation to become more sustainable.	Improvements Planned for 2024-25 - Work will continue at pace to deliver the improvements set out in the HMICFRS action plan. Evidence of delivery will be captured, and the impact of the improvement will be reviewed at a future point (determined by the nature of the action). - A further two week revisit by HMICFRS is planned for September 2024 where progress against the causes of concern will be evaluated.
CIPFA/SOLACE Principle D	
'Determining the interventions necessary to optimise the achievement of the intended outcomes'	
Constitution and the Avon Fire Authority (under Principle D)	
Supporting Evidence - Decision-making protocols set out in the AFA Constitution. - The AFA Papers, Option Appraisals and Business Cases. - Discussion between Members and officers on the information required to support decision making. - A Corporate Forward Plan is presented to meetings of the AFA to help Members understand the decisions they will be asked to make during the next batch of AFA and Committee meetings.	
Actions Implemented in 2023-24 - New 'Constitution Repository' to be set up in the library of the AFA website containing the key documents which comprise the AFA Constitution. Some key documents were approved by the AFA at their meeting on 25 April 2023 and other documents will be updated during the 2024/25 municipal year. - Following the governance review the Terms of Reference (ToR) for the Fire Authority and Committees are much clearer so that Members know what reports they are going to see in Agendas.	Improvements Planned for 2024-25 The remaining chapters of the 2022 Constitution will be reviewed to ensure that they align with the new governance arrangements. It is intended that all new chapters of the Fire Authority Constitution will be finalised in 2024/25 and saved in a 2024 Constitution Repository in the Library section of the Fire Authority website.

Service Planning (under Principle D)	
Supporting Evidence • The SLB/SLT and elected Member Planning Workshops/Engagement Sessions take place to help determine the actions within the Service Plan. • Service strategies and station/team plans are regularly reviewed to ensure they align with priorities and targets set out in the Service Plan. • Public Consultation takes place when significant changes are proposed within the Service Plan. • Budget consultation, Final Accounts and MTFP. • Part of the budget setting process is to consider Service developments and changes with the SLB and the SLT, to ensure budgets are set with the fulfilment of Service objectives in mind. • Communication Strategy 2021-2024. • The Capital Prioritisation and Steering Group ensure all potential capital projects and replacements are assessed for affordability and impact in terms of the Service's key objectives. • Business case template in place with process for sign off. This includes financial information and associated risks. AFA papers have increased emphasis on the financial costs of any proposed changes in business cases. • Performance figures are produced and reported to the AFA highlighting key areas of activity. Additional scrutiny is provided by Members via the AGOC.	Improvements Planned for 2024-25 • MTFP will be refreshed and informed by the Capital Steering Group, the SLB and the SLT. • Devolved budgets will continue to be rolled out across the Service where possible. • A proposed new business case flowchart will be presented to SLB and once approved a new set of procedures and templates will be produced and shared with SLT. • Prevention Strategy to be published (April 2024) • Protection Strategy to be produced and published.
Policies, systems, and procedures (under Principle D)	
Supporting Evidence • Budget guidance and protocols are in place. • Reports are automated where possible to ensure capacity in generating information. • An annual benchmarking report of results is produced by Opinion Research Survey (ORS) which compares AF&RS with other FRs.	Improvements Planned for 2024-25 • The Improvement Register will be developed further to incorporate actions from the Service Plan, Internal Audit and other corporate projects.
	Actions Implemented in 2023-24 • A new Continuous Improvement Framework and Toolkit was developed and launched. This provides a structure for planning, managing, and governing Service improvements with guidance, tools and templates relating to any Service improvement work. The main benefits include: ◦ A consistent and inclusive approach ◦ Better prioritisation of work and capacity planning ◦ Improved governance and assurance ◦ Fit for purpose tools, templates and guidance. • Improvements have been made to monitoring and tracking of Service Improvements (such as projects and action plans) via system development on SharePoint, known as the Improvement Register.

- Investment in IT hardware to remove IT challenges experienced for operational staff, improving efficiency, in particular in SSRI completion in addition to increased connection speeds. - Microsoft 365 Knowledge Hub created including video training on all associated applications, to facilitate more efficient ways of working and improved communication across the organisation to assist in shared understanding of objectives.	
Governance (under Principle D)	
Supporting Evidence	
- A Corporate Forward Plan sets out key dates for developing and submitting plans and reports to the AFA, Committees, the SLB and the SLT. - Corporate Risk Management processes support managers in assessing risk associated with achievement of objectives. - KPI's and regular performance reporting support managers in assessing risk associated with achievement of objectives. - Terms of reference (ToR) for the SLB and the SLT set out decision-making protocols and responsibilities for monitoring and scrutinising.	
Actions Implemented in 2023-24	
- The Corporate Forward plan is maintained by the Clerk for internal use by officers to manage workloads i.e. report writing required by their managers. - Creation of the new Service Improvement Team, responsible for pulling together the revised HMICFRS inspection action plan, the remaining work of the Transformation Team, the Efficiency and Savings project and progressing the recommendations included in the HMICFRS Spotlight Report. Includes a Programme Management Office (PMO), to ensure effective governance and assurance throughout. - Increased staff engagement through SEN; optimising the format of meetings and increasing attendance, to maximise the opportunities for feedback and learning. - See Principle F for detailed information regarding Corporate Risk improvements. - See Principle F for detailed information regarding Performance.	Improvements Planned for 2024-25 - See Principle F for more detailed information regarding Corporate Risk improvements. - See Principle F for more detailed information regarding Performance. - Continue to extend the reach and impact of SEN, adding bi-monthly local stakeholder engagement sessions, to increase Service-wide knowledge and awareness of governance processes and reporting.
Collaboration (under Principle D)	
Supporting Evidence	
- Various staff working groups, for example SEN and Research and Development Groups, seek feedback from our staff when implementing new projects. - Attendance at the Local Resilience Forum ensures a joined-up approach with Category 1 and Category 2 responders and the voluntary sector. - Attendance at Safeguarding Boards and Community Safety Partnerships ensure a joint approach to delivering services to our most vulnerable service users. - The Collaboration Strategy sets out the Service and the AFA commitment to collaborative working. - The Collaboration Framework outlines our approach to collaborative working, and the online Collaboration Toolkit provides guidance, tools and good practice in relation to planning, monitoring, evaluating and closing collaborations, including the capture of intended outcomes and benefits during the planning phase, and the importance of monitoring and evaluation to achieve these.	
Actions Implemented in 2023-24	
- Clear collaboration reporting lines were agreed and published as part of the online Collaboration Toolkit: outlining collaboration roles and responsibilities. These reporting lines: - provide robust and demonstrable collaboration governance from inception to closure. - provide clarity of procedures and reporting (e.g. who completes what, signs what, approves the plans), especially for those new to collaboration management.	Improvements Planned for 2024-25 Awareness sessions will be delivered to all teams Service-wide to promote the new online Collaboration Toolkit, with an emphasis on the importance and process of evaluation.

- o ensure managers are aware of ongoing collaboration activity and outcomes within their departments. • provide opportunity for discussion so actions can be taken to address any issues (e.g. following an evaluation, or if considering a collaboration's closure).	
---	--

CIPFA/SOLACE Principle E

'Developing the entity's capacity, including the capability of its leadership and the individuals within it'

Constitution and the Avon Fire Authority (under Principle E)

Supporting Evidence	
• New Member training and continued development for Members. • Welcome briefing and Member' induction programme is regularly updated to reflect the changing environment and includes a briefing to Members on the Statutory Officer roles. • The AFA Standing Orders and financial regulations are kept under review, as they form part of the Constitution, which is a working document. • Members are appointed by the four unitary Authorities to AFA, following discussion with political group leaders to ensure political balance (each committee is chaired by a different political party and the split of members sitting on each committee represents the percentage of members from each party nominated to the AFA). • Public access statements, public consultation and LGA Peer Review. • Protocol for Member/Officer relations: roles of Chair and CFO published on external website.	• Following the May 2024 elections at Bristol City Council and for the Police & Crime Commissioner, the Fire Authority will again welcome new Members. • The composition of the Fire Authority will change, and the Clerk will ensure political balance on each committee. Also, Members will be asked to nominate a new Chair and Vice Chair of the Fire Authority. • A new Member Induction will take place on 7 June 2024. • An external facilitator has been engaged to develop a new Member/Officer Protocol in July 2024, which once drafted will be presented to the Fire Authority for approval and adoption into the Constitution. • A new Member Training Strategy will be introduced for Members during 2024/25. • Follow-up training for Elected Members on new Corporate Risk Management Strategy, Risk Appetite & Tolerance and newly refined CRR, is booked for early September 2024.

Actions Implemented in 2023-24	
• Newly inducted Members were briefed of their roles and the responsibilities of Lead Directors. Members were provided with key documents including the latest AFA Constitution. • The Clerk arranged training for Members in the newly adopted LGA Model Councillor Code of Conduct. • Both the Clerk and Statutory Finance Officer completed professional Continuing Professional Development (CPD) training for their roles as advisers to Members. • Risk management training was provided to the AFA elected Members in January 2024.	

Service Planning (under Principle E)

Supporting Evidence	
• Estates Strategy sets out the rationale for funding and resourcing work on our buildings. • Fleet Strategy sets out the rationale for funding and resourcing work on our fleet. • Cultural Survey. • The People Service Strategy sets out the strategic direction for the DICE, Learning and Development, Health and Safety and HR teams.	

Service Planning (under Principle E)		
Actions Implemented in 2023-24 - Planned completion of several projects as part of the Transformation programme to enhance digital capability on the fireground and contribute to increased firefighter safety. - Fleet Strategy updated. - The People Services Department was formed, and 12-month People Services Strategy was produced. This was launched in February 2024 prioritising four key areas: insight, collaborative working, fostering a culture of excellence, and promoting innovation.	Improvements Planned for 2024-25 - A new People Services Strategy will be produced, which will provide strategic direction for the People Services Department. - A refresh of the Estates strategy. - A new IT Strategy will be developed. - Planned completion of several projects as part of the Transformation programme to enhance digital capability on the fireground and contribute to increased firefighter safety.	
Leadership and development (under Principle E)		
Supporting Evidence - S112 and Monitoring Officer appropriately qualified and with high levels of experience. - MOST knowledge standards for flexi officers with frequency of repeats set. - Incident command assessments are carried out on a two-yearly basis. - Specialist skills are assessed through peer assessment within that speciality. - Half day development day per month for the SLT including external providers delivering leadership training. - The SLB and the SLT undertake a joint ongoing programme of station and department visit to ensure all staff have an opportunity to discuss issues with leaders within the Service. - Leadership Academy provides structured approach to leadership development, in particular identifying and supporting colleagues with high potential. - Talent management programme, development pathways, apprenticeship programmes, and training plans - The Transfer, Appointments and Promotions Board (TAPB) ensures that all the processes named in the title are carried out in a consistent way using clear and transparent criteria based on business needs. TAPB page on intranet includes all vacancies and anonymised transfer list and minutes of TAPB Board meetings. Transfer list sent to Station and Group Managers monthly to allow informed local decision making.		
Actions Implemented in 2023-24 - Quarterly Member Development sessions were used to help identify and address any concerns raised by Members, as well as provide Members with training. - Leadership Academy launched in April 2023. - Supported the NFCC Direct Entry (DE) Scheme through recruitment of a single Station Manager through a trial of the direct entry route. 360-feedback for the SLB & SLT launched in Jan 2024 with individual debrief sessions taking place in from March 2024. - A review of the Personal Development Review (PDR) process was instigated prior to the release	Improvements Planned for 2024-25 - The Statutory Finance Officer and Monitoring Office required in their professions (accountant and solicitor) to undertake annual Continuing Professional Development. - Elected Members will be invited to assess their own skills and knowledge to determine what training and development they require as part of a new Member Training & Development Strategy. - Individual debrief sessions will be completed following 360-feedback for the SLB & SLT. Group sessions will be held in April & May to share feedback and review team development needs. - The new PDR system will be launched and will contain a 360-feedback option for use by all staff as required. - Ops Fire Safety Training & Prevention training is ongoing by the Prevention team and RPU to book in new training dates and add additional appliances to these. - Fire Survival Guidance & Evacuation training being delivered across the Service, a number of large high-rise evacuation exercises have taken place which validated and tested this training.	

Leadership and development (under Principle E)		
of the Spotlight Report. The new PDR system has been prepared to launch.	Specific piece of work to be undertaken to review IT training needs and create and deliver an IT training plan.	
Policies, systems, and procedures (under Principle E)		
Supporting Evidence - Employees Pay Structure – Hay evaluations conducted as required to ensure corporate staff salaries are in line with their responsibilities. - Promotion and Succession Planning. - Health, Safety and Wellbeing Policy. - The Wellness Assessment can be used to identify what keeps us well at work and the things that may have a negative effect on our mental health. It also helps to identify measures that can be implemented within the workplace in order to keep staff mentally healthy. - Human Resource policies. - HR Business Partner model which enables closer working with hiring managers to ensure recruitment processes are fair, consistent, and inclusive. - Financial Regulations are published online and integrated into internal procedures. - The Financial Services contract provides access to a range of financial support services and resources. - Regional and national finance support networks provide good resource on financial issues. - Each Service role has a job description for corporate staff and role map for uniformed officers. 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. Staff are further supported by policies, guidance notes, training courses including bespoke online learning and courses to ensure they have the support they need to carry out their roles. - Annual PDR's 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. - Debrief and Monitoring, Lessons learned from projects. - MHFA and TRIM practitioners able to support staff in addition to Health and Wellbeing Advisors and provision of counselling services as required. - AF&RS Neurodiversity Network (NDN) meets monthly and has a dedicated Teams channel. The aim of the NDN is to be an 'employee resource group' that adds value in promoting awareness, representation, recognition, and support for neurodiversity within AF&RS. - The Service has a Reasonable Adjustments Passport process to provide personalised support for employees with any needs around disability (including neurodiversity), physical and/or mental ill health.		
Actions Implemented in 2023-24 - A schedule of HSW documentation reviews put in place as part of H&S management system. - Transformation work packages relating to how and where we advertise vacancies, manage applications, interview and offer employment for corporate roles will ensure that the best candidates are attracted to roles within the Service. This work package has been in progress throughout 2023/24 and will continue into 2024/25.	Improvements Planned for 2024-25 - Completion of the HSW toolkit within SharePoint, to include: - Guidance on safety procedures; - Line manager responsibilities; - Template and resources. - Discipline and grievance policies to be republished with supporting toolkits to coincide with implementation of a Professional Standards Board. - Research to be undertaken in applicant tracking systems to streamline recruitment processes.	

Policies, systems, and procedures (under Principle E)	
- Transformation work package on induction to the Service will improve induction processes. This work package has been in progress throughout 2023/24 and will continue into 2024/25. - NFCC Attendance Management Policy was adapted and implemented as a new Supporting Attendance Policy and Toolkit which was introduced in September 2023. Training took place for employees and line managers to embed this. The introduction of the Welfare Form and welfare focussed discussions also aims to assist in changing the attendance and wellbeing culture. - PDR training workshops for managers were rolled out, continuing in to 2024/25. - Microsoft 365 Knowledge Hub created including video training on all associated applications, to facilitate more efficient ways of working and improved communication across the organisation. - H&S Risk Assessment management system in place. - Health and Wellbeing training delivered in: Health and Wellbeing; Mental Health (Blue Light Champion based); Suicide Awareness; MHFA; and TRiM. - Established a Menopause Working Group. - Promotion and facilitation of access to courses run by the Firefighters Charity on the following topics: Managing Stress; Communication; Resilience; Menopause; Mental Health & Physical Exercise; Strong Relationships - Dispatched a new credit card-sized information booklet to all staff. It contains vital resources related to wellbeing services, advice and support for those who may be facing unwanted behaviour in the workplace. The initiative underpins our dedication to promoting employee wellbeing and providing access to necessary support structures. In doing so, we aim to ensure that every single member of staff feels supported and empowered to seek assistance if needed.	- Recruitment and selection training will be updated and rolled out to corporate staff managers in conjunction with Transformation Package (TP03) linked to attraction, recruitment, and onboarding. - A Talent Acquisition Specialist role has been created and will be filled from May 2024 to focus on the relevant Transformation work packages, diversifying talent pools through exploration of apprenticeships and 'growing our own', proactive recruitment, use of social media/LinkedIn, stakeholder engagement and improving applicant tracking systems. - Review of corporate staff grade evaluation (Hay scale) and the spinal column points used. An analysis of the salary structures is being refreshed to be presented to Service Leadership Board for consideration. - PDR training for SLT and adjustments to the PDR process to prepare for the new PDR system to be launched in April 2025. - Having established a Menopause Working Group, we will develop a toolkit and tailor support for staff; work towards obtaining 'Menopause Friendly Accreditation'. - As part of the 2024 review, all systematic risk assessments for H&S will align with NatOG. - We will focus on delivering more support around managing stress across the Service. - We will review the Wellness Assessment and ensure it is fit for purpose. - We will work closely with The Fire Fighters Charity to deliver more training on Managing Stress in the future. This can be delivered to specific teams and watches as well. We will also develop in-house resources to help support and better manage your stress and wellbeing.
Governance and assurance (under Principle E)	
Supporting evidence - Regular reviews of activities, outputs, and planned outcomes. - HMICFRS Inspections, Reports and Action Plan are monitored and reported to the SLT, Service Improvement Board and PRC. - Performance and benchmarking information produced monthly and reported to the local managers, the SLT, PRC, and the AFA. - Internal Audit Plan agreed by audit committee focusing on key areas of risk to provide assurance to Members. Internal Audit reports and Action Tracking are reported to the SLT and twice a year to the audit committee, streamlined to highlight exceptions. - Local Performance Indicators and agreed annual targets. - Monthly target updates, Absence Monitoring, PDR completion monitoring, H&S target monitoring and Incident monitoring.	

Governance and assurance (under Principle E)	
- Performance levels are challenged, and remedial actions discussed and implemented. PRC continue to oversee 'Service Improvement'. AGOC scrutinise Service performance. - Standing orders and financial regulations are reviewed regularly, any legal and organisational changes are considered and acted on.	
Actions Implemented in 2023-24	Improvements Planned for 2024-25
- The HMICFRS Action Plan is regarded as a 'priority programme' and was overseen by the PRC. Continued active monitoring of HMICFRS-related actions and recommendations via the SLT, Service Improvement Board, PRC and FPOG. - All external and internal audit reports were considered by the Audit, Governance and Oversight Committee (AGOC).	- The HMICFRS Action Plan continues to be regarded as a 'priority programme' and on-going progress will be overseen by the PRC. Continue with active monitoring of HMICFRS-related actions and recommendations via the SLT, Service Improvement Board, and PRC (as part of a 'Service Improvement' paper). - Future reviews of the impact of actions in the HMICFRS action plan, and sustainability of improvement are now features of the those plans.
CIPFA/SOLACE Principle F	
'Managing risks and performance through robust internal control and strong public financial management'	
AFA, Constitution, Governance & Internal control (under Principle F)	
Supporting evidence - Terms of Reference (ToR) / Constitution. - The Corporate Forward Plan is provided to Members at every FA meeting, supported by the Modern.gov system, which ensures that agendas are prepared in advance and all report writers are aware of the timeline for reports. Deadlines for submitting and publishing reports have been adhered to. - Standardised report templates for all the AFA meetings uploaded to Modern Gov. Templates contain a subheading for the report writer to outline operational, financial, or reputational risks for consideration. - Discussion between Members and Officers on the information required to support decision making. The Clerk ensures members have sufficient time to ask questions to support decision making. - Publication of minutes of meetings with evidence of improvements as a result of scrutiny. - Regular training provided to all elected Members including quarterly Member Development sessions. - Code of conduct, Register of Interests, Gifts & Hospitality Register. Each year Members submit Member Form 2 to disclose their interests to be added to the Register of Interests. - Standing agenda item requiring Members to disclose interests in advance of an agenda item discussing a tender exercise. Governance and Assurance Framework	
Actions Implemented in 2023-24	Improvements Planned for 2024-25
Independent review of the AFA Governance arrangements was carried out by Vale Consultancy in 2022/23. This resulted in 12 recommendations which required amendments to the Governance structure and Constitution. All 12 recommendations were accepted by the AFA at their meeting on 25 April 2023 to be implemented in two phases (the first phase implemented the new governance structure of the AFA and two committees in the 23/24 municipal year).	- RSM remain contracted to deliver the 24/25 Audit Plan. - Progress against the plan will continue to be monitored. - It is intended to implement the remaining recommendations of the Independent Governance Review during 2024/25. The clerk will report progress

AFA, Constitution, Governance & Internal control (under Principle F)		
RSM remained contracted to deliver the 23/24 Audit Plan, with progress against the plan monitored.	with the recommendations to the Fire Authority AGM in June 2024.	
Managing Risk (under Principle F)		
Supporting evidence - A Corporate Risk Management Strategy with Roadmap and Corporate Risk Appetite & Tolerance Statement are in place. - Corporate Risk is scrutinised monthly by the SLT. The full Corporate Risk Register (CRR) is reviewed quarterly, with deep dive presentations scheduled for the months in between. AGOC review Corporate Risk at each meeting – with alternating full CRR reports and CRR exception reports being presented. - The AFA papers include a mandatory summary of risk. - NFCC Community Risk Strategic framework followed to identify & assess foreseeable fire and rescue related risks as part of the CRMP. - H&S Risk Management processes managed by the Health, Safety and Welfare (HSW) department who monitor and support relevant managers to complete or review risk assessments within their areas of business. - The Service has adopted a Risk Based Inspection Programme (RBIP) which seeks to prioritise audits of premises which present the highest risk to life.		
Actions Implemented in 2023-24 - In December 2023 a Corporate Risk Appetite & Tolerance Statement was produced, following a thorough process of engagement with the SLB to set appetite & tolerance levels for 14 categories of corporate risk. A new Corporate Risk Management Strategy with Roadmap 2024-2028 was published February 2024; it outlines the plan to improve the Service's Risk Management Framework and risk culture. - Risk management training was provided to the AFA elected Members in January 2024 and to the SLT in April 2024. Guidance for corporate risk owners on descriptions, evaluation, and controls was produced and shared in March 2024. - Stage 1 of the improved risk description work was undertaken in March 2024 – engaging with risk owners to break their corporate risks into separate risk events, with causes and consequences. - Following the recommendations of the Constitution Working Group, the new AGOC committee consider the Corporate Risk Register (CRR) quarterly rather than twice a year; the full CRR is considered at every other meeting and in between AGOC consider a 'by exception report' which simply highlights those risks with changed scores. - Implementation of new procedures to improve the quality of the Site-Specific Risk Information (SSRI) available to our operational crews during incidents. The SSRI team have developed a new system with the focus on providing crews with greater control over the output of the risk information. This will allow them to draw upon their ability,		
Improvements Planned for 2024-25 - The Corporate Risk Appetite & Tolerance levels will be imbedded into the CRR, using 'riskometers' to hold each risk event to account based on the alignment to relevant risk categories. - Stage 2 of the improved risk description work will create a new refined CRR for reporting to the SLT and AGOC from August 2024. - Follow-up training for Elected Members (on new Strategy, Risk Appetite & Tolerance and newly refined CRR) is booked for early September 2024. - Further training / guidance publications and a Service-wide comms plan will be produced and rolled out. - The risk matrix used for corporate risk event evaluation (risk scoring) will be evaluated to ensure it is still best fit for AF&RS. - Corporate Risk Management process steps will be analysed and improved. - The CRR will become digital, with improved use of data as key risk indicators and to create triggers for monitoring, evaluation and scrutiny purposes. - Risk maturity will be assessed (to allocate a current level for the Service) and a plan created for how improved risk maturity will be achieved over the coming year and into 2026. - Improved horizon scanning exercises for corporate risk will be designed and rolled out. - It is anticipated that by the end of 2024, all operational RAs will be aligned to NatOG and all H&S RAs reviewed as part of this process. - The Site-Specific Risk Information (SSRI) team will look to utilise additional datasets to identify new sites for SSRI visits. Avon Data Warehouse will be developed further to assist with this.		

Managing Risk (under Principle F)	
knowledge, and expertise to ensure that the SSRI suits their needs. Initial training was completed in December. - Development of Site-Specific Risk Information (SSRI) policy and associated process to identify, risk assess and gather SSRI data. Present and make that data available to staff. - Avon Data Warehouse has been developed and utilised for BFS risk analysis for premises. - Business Continuity Week in May 2023 on the theme “Embracing the Challenge of Resilience” with daily updates on Teams.	- Publish and implement a robust Site-Specific Risk Information (SSRI) policy and associated process to identify, risk assess and gather SSRI data. Present and make that data available to staff in accessible formats that are available across a number of systems, including Mobile Data Terminals (MDTs). - Recruitment of an Airbus Product Manager to assist in the roll out of the rear mounted MDT's. - Business Continuity Week in May 2024 on the theme “Resilience alongside Business Continuity” with daily updates on Teams for all staff.
Managing Performance (under Principle F)	
Supporting evidence - AGOC committee includes elected members from each political party. They are provided with quarterly performance updates and encouraged to challenge areas of under-performance on behalf of the AFA. Live incident and sickness information is available to managers to integrate to identify trends and areas to address. - Performance scorecards shared by email with Service managers on a monthly basis. - Areas of underperformance are reported regularly to the SLT and AGOC. - Benchmarking of HMICFRS data is presented in the Data Analysis Packs.	
Actions Implemented in 2023-24 - Under the new governance structure, organisational performance was the responsibility of the Audit Governance and Oversight Committee (AGOC). AGOC have assessed on a quarterly basis the performance of the Service against agreed measures and organisational targets and responded to areas of strong and/or under performance, reporting and making recommendations where necessary to the AFA. - AF&RS carried out its annual review of the ongoing suitability of the metrics and targets in the performance scorecard. Changes were proposed and approved by the SLT which took into account feedback from the 2023/24 LGA Governance Review, the publication of a HMICFRS inspection report as well as further insight and input from the SLT. The new 2024/25 Performance Scorecard is now set out against the six objectives in the new 2024-2028 Service Plan. - Internal Audit carried out a Data Governance and Performance Management audit within 2023/24 which gained a Substantial assurance rating. Data analytics performed identified that AF&RS achieves good data integrity, with Internal Audit able to reperform and validate the performance reported through the AFA governance structure via the performance scorecard. - New PDR Performance Dashboard developed to improve access to this information to managers. - A new Supporting Attendance Performance Dashboard has been created to improve access to information for managers.	
Improvements Planned for 2024-25 - Performance reports will continue to be presented quarterly to AGOC. - In addition, Members will scrutinise the Service Response to HMICFRS's Inspection findings and future revisits by reviewing progress with the Inspection Action Plan at meetings of the Policy and Resources Committee. - New scorecard metrics will be rolled out and monitored.	

Financial Management (under Principle F)

Supporting evidence

- Financial management supports the delivery of services and transformational change as well as securing good stewardship.
- On an annual basis as part of the budget setting process, AF&RS will consider Service developments and changes with the SLB and the SLT to ensure budgets are set with the fulfilment of Service objectives in mind. The Service Plan and MTFP processes are aligned in terms of timescales to ensure this continues.
- Level of Council Tax, Spending within Budget, MTFP, well managed and timely capital programme.
- The MTFP and supporting narrative report updates include information on key concerns and risks considered, as well as budget setting assumptions and justifications.
- Budget monitoring reports, MTFP, financial regulations and standing orders, cost performance.
- Monthly reporting is shared with budget managers and the SLT to ensure performance is as expected.
- Compliance with the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014).
- Participation in the National Fraud Initiative.
- Compliance with the CIPFA Finance Management Code, Prudential Code and Treasury Management Code.
- Internal Audit carry out annual Financial Control audits on a rolling programme to provide assurance in key areas.
- External Audit carry out annual financial audits.

Actions Implemented in 2023-24

- Financial monitoring continued to be provided to all relevant meetings with additional reporting to the SLT and the SLB on capital and other key areas of finance.
- The assumptions made in the MTFP, particularly around inflation, pay awards, and future government grants (whilst based on the best information available) are subject to potential change in such volatile times. The Head of Finance ensured that any variation to the assumptions made in the MTFP are identified at the earliest possible time and reported to Members.
- A new Statutory Finance Officer appointed by the AFA in May 2023, assumed overall responsibility for financial management and provided financial advice to Members.
- Internal Audit carried out a Payments to Staff audit which resulted in a Reasonable assurance opinion, with recommendations tracked and monitored through the usual mechanisms.
- Review of compliance with CIPFA codes completed during the year and the following changes made (with further changes planned for 24/25):
 - Update of Prudential and Treasury Management indicators to include all those recommended by CIPFA, approved a part of the 24/25 budget setting process.
 - Introduction of the Treasury Management Practices document, approved as part of the 24/25 budget setting process.
 - Update of the Capital and Treasury Management Strategies to ensure all required information is included, again approved as part of the 24/25 budget setting process.

Improvements Planned for 2024-25

- Internal Audit planned for Key Financial Controls Asset Management
- The assumptions made in the MTFP, particularly around inflation, pay awards, and future government grants (whilst based on the best information available) are subject to potential change in such volatile times. The Head of Finance will continue to ensure that any variation to the assumptions made in the MTFP are identified at the earliest possible time and reported to Members.
- Financial Services contract renewal to be completed by 31st March 2025, aiming to ensure future contracts are subject to stringent contract management, ensuring value for money and quality of service by adherence to newly defined KPIs.
- Training for the Finance Team on both ABW (accounting system) and RAM (fixed asset register software).
- CIPFA training to aid understanding of financial reporting requirements is planned for Fire Authority Members.
- Improved compliance with CIPFA best practice including the introduction of the following:
 - Mid-year and annual reviews of Treasury Management activities.

Financial Management (under Principle F)	
Appointment of Bruton Knowles, over a five-year period, to provide property valuation services to ensure compliance with both CIPFA and Accounting Standards for year-end financial statement preparation. First valuation completed in March 2024, for reflection in the 23/24 Statement of Accounts.	- Formal options appraisal methodology to be adopted as part of the refreshed business case process. - Regular balance sheet reporting to Policy and Resources Committee, facilitated by frequent fixed asset updates and reconciliations and monthly accruals accounting being adopted.
Managing Data (under Principle F)	
Supporting evidence - Data management procedures, Record of Processing Activity (ROPA), Retention Schedule, Privacy Notices - Data Protection Policy, Freedom of Information Policy, IT policies and Security Incident Management Policy. - Data Protection Impact Assessments (DPIA). - Mandatory staff training for data protection and information security. - Data Protection Officer registered on Information Commissioner's Office Data Protection Register. - Senior Information Risk Officer/Owner in place. - Robust IT Infrastructure and commitment to invest in digital technology for continuous improvement.	
Actions Implemented in 2023-24 - Data Management Policy reassessed, reviewed and consultation completed to meet Data Management Fire Standards, including completing list of functions, and published on new website. - Data Protection Impact Assessment procedure (DPIA) amalgamation into Joint Scoping procedure has been markedly successful, with updated procedures in place. - DPIAs for both personal monitoring device completed, and usage of devices begun. - All existing Privacy Notices reassessed and amended where necessary for new website. - ROPA and Retention Schedule maintained. - Three data protection and information security courses rolled out, with the aim for 80% completion on Course 1 (basic Information Security) exceeded, reaching 92%. - Figures as of 15/05/2024 (at the time of writing) are: 816 staff registered. 13 have begun and completed under 50%. 55 have not yet started.	
Improvements Planned for 2024-25 - All other AF&RS data management procedures currently being reviewed and revised to meet Data Management Fire Standards while ensuring legal and Information Commissioner's Office (ICO) requirements are still met. - Preparation for finalising external publication of highlighted areas of the ROPA and Retention Schedule begun. Internal publication for use by staff to be agreed. - Service Level Agreement standard wording template and Privacy Notices to be reassessed and amended where necessary. - Potential to update vehicle CCTV to cloud-based system currently being assessed, as recently determined would not impact on station Wi-Fi bandwidth. - All existing Data Management training courses to be reviewed and updated due to termination of contract with current provider. - Staff listed as not having completed basic Information Security course to be contacted to determine reason – aim to reach 90% completion within 1 month of starting employment. - Planned campaign of phishing exercises to assist with staff cyber security training. - New course to be written for all staff at or above Station Manager level concerning the Data Management Fire Standards, and potential changes arising from rescheduled Data Protection and Digital Information Bill. - Trial run for course on personal data and data breach management to be targeted at all staff at or above Station Manager level has been extended due to Data Management Fire Standard requirements.	

Managing Data (under Principle F)	
FireWatch upgrades implemented and moved from Desktop connection to Cloud connection, improving ease of access for staff.	FireWatch upgrades will continue to include single sign on which will improve speed and access to staff and increase efficiency. This will also offer the availability for more functionality to explore.
Collaboration (under Principle F)	
Supporting evidence - The Collaboration Strategy sets out the Service and the AFA commitment to collaborative working. - The Collaboration Framework outlines our approach to collaborative working, and the online Collaboration Toolkit provides guidance, tools and good practice in relation to planning, monitoring, evaluating and closing collaborations, including collaboration risk and performance management. - The Collaboration Toolkit sets out clear reporting lines and accountability for collaboration actions and responsibilities when working in partnership. - Collaborators are required to complete a Scoping Impact Assessment to highlight any impact, including health and safety impact. This is reviewed during the evaluation phase. - Collaborators are required to complete a risk assessment (where one is necessary) during the planning phase. Risk assessments are reviewed during the evaluation phase. - Written agreements (partnership agreements, memorandums of understanding, etc) include reference to risk assessments and, where applicable, detailed guidance (in the form of an Appendix) where partners are collaborating on our premises. - A collaboration's intended benefits and outcomes are captured during the planning phase; performance against this is captured during the evaluation. - The Register of Collaborations & Formal Partnerships records an effectiveness (RAG) rating for each collaboration based on evidence provided during the last evaluation period. - South West Regional Operational Assurance Group work on standardising processes and procedures for operational assurance, and sharing of risk critical information, allowing Services to better carry out joint operations, with larger data sets, and improved joint learning. - An annual monitoring of collaboration and partnerships report is presented to AGOC, in accordance with AGOC ToR.	
Actions Implemented in 2023-24 - The creation of a Collaboration Risk Assessment and associated guidance. - A new Appendix has been created to outline the procedures to be followed when partners collaborate on our premises, to mitigate any risk. This Appendix is attached to new and updated written agreements where this is applicable; these written agreements are shared with staff at the participating premises. - A new Monitoring Record has been introduced to allow Collaborators to capture progress, activities and outcomes/benefits between evaluation points, which will assist in providing evidence of performance. The Monitoring Record forms part of the online Collaboration Toolkit. - A KPI has been established to report the completion of collaboration evaluations. The percentage of those 'in-date' is to be reported to the Performance Improvement Team and the SLT, and evidence of completion is to be made available upon being audited.	Improvements Planned for 2024-25 - Progress the creation of a Collaboration Risk Assessment. - Awareness sessions will be delivered to all teams Service-wide to promote the new online Collaboration Toolkit, with an emphasis on the importance and process of evaluation. - Work will continue to ensure all collaborations are evaluated annually and on time, with a view to attaining a 90% completion rate by end of year. - An Evaluation Tracker will be created to provide Collaborators with instant online information regarding their collaboration's evaluation status, thereby ensuring an evaluation does not fall out of date. - A brief six-monthly report will be introduced for Managers accountable for collaborations to ensure they are aware of progress and the effectiveness of evaluations within their departments.

CIPFA/SOLACE Principle G

'Implementing good practices in transparency, reporting and audit to deliver effective accountability'

Implementing Good practices in Transparency (under Principle G)

Supporting evidence

- Website up to date with Transparency Code and Local Publication Scheme information.
- The AFA Meeting minutes, reports and committee papers all published online.
- Incident data is published to aid responses to Freedom of Information (FoI) requests.
- Annual Performance report produced and published on Internet.

Actions Implemented in 2023-24

- Transparency templates to meet Data Management Fire Standards were reviewed, while ensuring legal requirements were met.
- Form to collect information from Information Asset Owners (IAOs) created to confirm procedures are in line with Data Management Fire Standards and legal requirements.
- One decision in a Subject Access case linked to an ongoing legal case was challenged, which was refused and then appealed to the ICO. Decision that our actions were correct was upheld.
- Two Internal Reviews for FoI requests made, resulting in assessment that process was performed correctly.
- Nine Data Protection and 11 Freedom of Information cases extended due to complexity, police request or involvement, requirement for full Public Interest Test, or consultation with Interested Parties.
- 11 CCTV requests processed.
- Started monitoring time taken to collate data to answer repeat requests, with a view to determining whether a Disclosure Log would be of use.

Improvements Planned for 2024-25

- Information from IAOs to be collated to ensure Data Management Fire Standards are being met.
- Investigate financial and resource costs for publishing a Disclosure Log to assist with responding to repeat and duplicate requests and monitor time taken to collate data to answer all requests, due to the steady rise in numbers made.
- Review requirements to determine whether more data can be published to meet best practice guidelines in further move towards meeting Data Management Fire Standards.

Implementing good practices in Reporting (under Principle G)

Supporting evidence

- A Corporate Forward Plan sets out key dates for developing and submitting plans and reports to the AFA and Committees.
- Modern Gov system provides effective reporting tool ensuring a clear chain where reports pass through appropriate Senior Managers/Lead Directors, to 'take ownership' of reports and carefully check accuracy.
- Final Accounts Report, VFM, Efficiency Returns, Policy Documents, Budget Monitors and Outturns are produced consistently in a timely basis.
- Annual accounts provide actuals for the year and the narrative report reflects how this has varied from budgets and previous years, providing key explanations as required.

Actions Implemented in 2023-24

- Continued use of Modern.Gov to improve version control and reporting efficiency. Senior Managers/Leads 'take ownership' of report accuracy. Open papers published a week before meetings and approved minutes published.
- Continued use of a separate AFA website for publication of agendas and papers and key governance documents, including the revised 'Constitution Repository'.

Improvements Planned for 2024-25

- Reports will continue to be published via Modern.gov on the separate Avon Fire Authority website, one week before public meetings.
- Key documents will continue to be uploaded to the Avon Fire Authority website, library tab to ensure accessibility for the public.

Governance, Assurance & Accountability (under Principle G)

Supporting evidence

- Internal Audit Plan approved by AGOC annually which focuses on key areas of risk to provide assurance to Members. Audit reports circulated to the SLT and AGOC for consideration and approval.
- Recommendations from Internal Audit reports are tracked, monitored and progress reported to SLT and AGOC.
- Annual Statement of Assurance produced each year and presented to AGOC for approval.
- Annual Governance Statement (AGS) produced each year, with actions for improvement identified and presented to AGOC for approval.
- External Audit, Value for Money Audits.
- Compliance with the Chartered Institute of Public Finance and Accountancy (CIPFA).
- Standing Orders and Financial Regulations reviewed regularly and updated for the AFA approval.
- Statement on the Role of the Head of Internal Audit (2010) and compliance with Public Sector Internal Audit Standards.
- Regular HMICFRS inspection process in place, including revisits, and findings acted upon.

Actions Implemented in 2023-24

- 22/23 AGS draft was presented to AGOC in June 2023.
- Round 3 HMICFRS Inspection in Q1 of 2023/24. Findings from the published report, are being addressed through the development and delivery of an action plan containing assigned responsibilities and timescales for all areas of improvement. Our HMICFRS Inspection Action Plan is regarded as a 'priority programme' and will be overseen by the Service Improvement Board and PRC.
- New Governance structure introduced during the 2023/24 municipal year in accordance with the decision of the AFA to accept the recommendations of the independent Governance Review comprising of the AFA and two committees - PRC and AGOC.

Improvements Planned for 2024-25

- The HMICFRS Inspection Action Plan will continue to be monitored, overseen by the Service Improvement Board and PRC.
- 23/24 AGS will be presented to AGOC in June 2024, once approved, this will be published with the Statement of Accounts.
- Internal Audit actions and Service Plan objectives to move to the Improvement Register to improve tracking and monitoring and improve overall visibility of improvement work across the Service.
- HMICFRS Governance audit to take place.