



# Annual Governance Statement 2022-23



## Contents

1	Executive Summary .....	2
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. ....	10
8	Principle D: Determining the interventions necessary to optimise the achievement of intended outcomes. ....	11
9	Principle E: Developing the entity's capacity, including the capability of its leadership and the individuals within it. ....	12
10	Principle F: Managing risks and performance through robust internal control and strong public financial management. ....	13
11	Principle G: Implementing good practices in transparency, reporting, and audit to deliver effective accountability.....	15
12	The Head of Internal Audit opinion 2022/23.....	15
13	External Audit 2022/23 .....	16
14	Conclusion .....	16
15	Statement of commitment .....	17
16	Glossary of Terms .....	18
17	Appendix A – Outcomes of the annual review of effectiveness 2022/23 .....	20

## 1 Executive Summary

- 1.1 This Statement explains how the 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 Framework described in this Statement has been in place in the AFA for the year ending 31 March 2023, 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 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.
- 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 March 2024, our External Auditors identified a significant weakness in relation to the governance arrangements of the Service, as highlighted by the HMICFRS report and inspection findings, published in November 2023.
- 1.5 The Service was aware of the need to address all the recommendations from the inspection and were already taking significant steps to address the concerns raised. This was recognised by the Inspectorate during their re-visit to the Service in December 2023, and within the External Auditors 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 now being addressed. Our self-assessment has identified a number of 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 the people of Avon 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 Ethics Committee (AGEC) in 2022/23.
- 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 2021-2023](#).
- 2.6 The [AFA 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 AFA for the 2022/23 municipal year is depicted below. Following an independent governance review, changes to this structure will be made in 2023/24 as outlined in paragraph 5.10. 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 2021-2023](#).



- 3.2 The governance structure within the Service is the responsibility of the **Chief Fire Officer/Chief Executive (CFO/CE)**, and 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)**, who provide day to day leadership and management for the Service.
- 3.3 The **SLB** has responsibility for the organisation's strategic direction, leadership and decision making. It has overall responsibility for management of the organisation, the establishment of strategy, direction-setting and both capital and revenue requirements. The SLB monitors and oversees Service operations, ensuring competent and prudent management, good governance, sound planning and suitable procedures for the maintenance of adequate systems of internal control and for compliance with statutory and regulatory obligations.

- 3.4 The **SLT** oversees a working environment which supports the effective achievement of goals and priorities (both operational and non-operational), maintains all necessary standards of compliance and good practice, and helps ensure that the Service is a great place to work. It is also responsible for making key decisions to minimise and manage risk, initiating corrective action through the application of new and existing internal control processes.
- 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 2022/23 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, His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (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 2022/23 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 The AFA has a Values and Behaviour Framework which was refreshed in 2022/23 to take account of the new 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 to be:

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

5.2 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. On 26 February 2023, the BBC 'File on 4' reported on claims about the culture of UK Fire Services nationally in respect of bullying, sexism, racism, and abuse. The report included testimonies from staff in a number of fire and rescue services. It also included historic accounts from two female ex-employees of Avon Fire & Rescue Service (AF&RS) regarding their past experiences working for the Service. These reports have attracted public interest and had a detrimental impact on the reputation of all fire and rescue services across the UK.

5.3 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.

5.4 Prior to the 'File on 4' programme and HMICFRS Spotlight report, several further actions were already in progress during 2022/2023. A Zero Tolerance Statement was produced and published in December 2022 for all staff. The Zero Tolerance Statement was developed following feedback in the Staff Survey where it was suggested there were still some incidences of behaviours and conduct that go against our Values and Behaviour Framework and the [Core Code of Ethics for Fire and Rescue Services](#), and that there was a need to build confidence in these matters being addressed. The Zero Tolerance Statement has been supported by the Service developing a new

Dignity and Respect Policy which was launched in December 2022, a supporting Toolkit which launched in March 2023, and a new reporting line.

- 5.5 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. The AFA will be looking to implement the recommendations from this report, and the HMICFRS Spotlight report 2023/24, supported by the positive work already undertaken in 2022/23 to improve values and behaviour. Dedicated resource has been allocated to the implementation of the recommendations in the Spotlight report and there has been further investment in resourcing of the Diversity, Inclusion, Cohesion and Equality (DICE) team. The Service has also embedded the NFCC's [Core Code of Ethics](#) in our revised *Being the best that you can be: Our Leadership Commitment 2023-2026* and will continue our service level agreement with [SARI](#) to provide independent professional support for our equalities and community engagement programmes.
- 5.6 The AFA's DICE Strategy sets out how we are meeting the Public Sector Equality Duty and ensuring fair access to Services. The DICE e-learning programme was revised and relaunched in 2022/23, combined with a programme of face-to-face training, which all staff are required to complete and demonstrate their learning in everyday practices. [Gender Pay Gap](#) information is reported annually on the AFA's website.
- 5.7 The Clerk is a qualified solicitor and AFA's Monitoring Officer as 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 prepare a report to the AFA. The Clerk will advise if any proposal, decision, or omission by the AFA, in 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.
- 5.8 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 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.
- 5.9 The Statutory Finance Officer has 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 that includes a number of professionally qualified finance officers. During 2022/23, the previously named Treasurer left employment of

the AFA with an interim Treasurer employed to cover this role until the new Statutory Finance Officer joins the AFA in May 2023.

- 5.10 The two Statutory Officers have collective meetings monthly with the SLB where they act as formal advisors when strategic and statutory issues are considered to ensure that robust governance arrangements are maintained.
- 5.11 AFA Members are required to adhere to the [AFA Constitution](#) which includes a Members' Code of Conduct. The Constitution explains how the AFA operates, how it makes decisions and the procedures followed to ensure AFA is efficient, transparent, and accountable.
- 5.12 The AGECC keep under review the Code of Conduct for Members and ensures that Members receive appropriate training. By way of a Member Conduct Panel, the Committee deals with cases referred by the 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.
- 5.13 Towards the end of 2022/23 a review of the AFA's governance arrangements was carried out with support from the Local Government Association (LGA) to ensure it remained fit for purpose moving forward. The results of this review were reported to the AFA and 12 recommended changes to governance arrangements will be implemented and the AFA constitution updated in 2023/24. This includes reducing the number of committees 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 AFA. More detail on these 12 recommendations is available [here](#). Next year's 2023/24 AGS will review the effectiveness of these new arrangements.
- 5.14 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](#) 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 Toolkit approved. Collaboration is also an overarching theme in our Service Plan, Integrated Risk Management Plan (IRMP) and underpinning Service Strategies.

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

- 6.1 The [Annual Performance Report](#) is used to publish performance about the AFA to the public.
- 6.2 [Meetings, agendas, and minutes](#) of AFA and its governance boards are accessible to the public alongside agendas and committee papers.
- 6.3 AFA participates in the [Freedom of Information](#) Act publication scheme to ensure transparency with the public.
- 6.4 AFA ensures suitable consultation takes place on how and when it will consult with communities and other stakeholders. Public consultation takes place annually for the Draft Budget Strategy and on any significant changes to the Service Plan.
- 6.5 AFA has a Communication Strategy, and communication and campaign plans identify audience and stakeholders and the intended impact on the community.
- 6.6 An IRMP is produced and revised each year, which informs and is incorporated into the [Service Plan](#). The IRMP utilises data from Community Risk assessments, risk research and horizon scanning and sets out the rationale behind planned operational activity including current performance and forecasts. The IRMP essentially reviews the effectiveness of previous activity and highlights any areas of focus for the future.
- 6.7 The Service Plan, incorporating the IRMP, sets out how AFA intends to deliver the services over a period, and is widely consulted on before it is finalised and approved by AFA. Consultation with stakeholders includes an online questionnaire 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.

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

- 7.1 The [Service Plan](#), incorporating the IRMP, sets out AFA's vision, priorities and the outcomes it wants to achieve. The [Service Plan Proposals 2022-25](#) includes the activities that the Service needs to undertake to deliver against the priorities set out within the Service Plan, to ensure the continued safety of

communities following a comprehensive understanding of risk. The SLT receives regular progress reports against the Service's priorities.

- 7.2 Performance indicators are agreed aligned to the [Service Plan](#) priorities and reported to the SLT and the Performance, Review & Scrutiny Committee ([PRSC](#)) Members regularly.
- 7.3 The Service approach to risk is explained in its risk management strategy which is reviewed every three years. The risk management strategy will be reviewed in 2023/24 to take into account feedback from Internal Audit, who identified a number of areas that could be considered for further enhancement of the risk management processes, when compared to good practice across the public sector. The Corporate Risk Register (CRR) is regularly reviewed by the SLT, SLB and [AGEC](#), and escalated to the AFA, if necessary. The Risk Management strategy requires the CRR to be presented to the AGEC twice a year.
- 7.4 A four-year 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.
- 7.5 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. The long-term impact on funding is unknown and the MTFP will continue to link the Service Plan vision and intent to funding scenarios, ensuring value for money is achieved within a balanced and sustainable budget. The Head of Finance will ensure that any variation to the assumptions made in the MTFP are identified as early as possible and reported to Members at the AGEC Committee.
- 7.6 The [Environmental Strategy](#) sets out the Service's commitment and approach to protecting the environment and being more climate resilient. The AFA's environmental impact is monitored by Performance Indicators 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 all 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 Progress against planned activity in the [Service Plan Proposals 2022-25](#) is monitored, and progress against the Transformation Programme is monitored and reported to the Transformation Board regularly. Key Performance Indicators (KPIs) are aligned to the outcomes AFA has set to achieve [The Service Plan \(incorporating the IRMP\)](#). These are regularly reported to [PRSC](#) 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 in order to ensure they are able to react to changing circumstances quickly.
- 8.3 Performance against budgets is monitored by the SLT and [AGEC](#). The [MTFP](#) is the link between AFA's long-term objectives and its financial capacity.
- 8.4 The [Capital Programme](#) outlines AFA's approach to capital investment, ensuring it is in line with its Service Plan objectives.
- 8.5 The CRR is reviewed on a regular basis to ensure risks are monitored and to ensure control procedures are in place to mitigate risk. Responses to any recommendations deriving from audits and inspections are monitored regularly in action plans by the SLT and the [AGEC](#) and [PRSC](#) 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 course and bespoke online learning and courses, alongside corporate and business plans 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 recent HMICFRS [Values and culture in fire and rescue services](#) report has recommended nationally that leadership development is offered fairly to all staff, so this will continue to be a priority area moving forward.
- 9.5 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, and Mental Health Action Plan.

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

- 10.1 The [AGEC](#) provides independent assurance to the AFA on matters relating to Audit, Risk Management and the conduct of Members.
- 10.2 The CRR identifies significant corporate risks. It is a live document which accurately reflects the level of our current risks, the planned interventions to mitigate risks and progress against these mitigations. The SLT reviews the CRR regularly. SLT aim to ensure cross-functional consideration is applied to risk scores and a Service wide view of interventions and control measures are considered when analysing specific risks and planned mitigations. The [AGEC](#) monitors and reviews the CRR every six months as part of the governance arrangements seeking assurance that appropriate management actions are in place. There is a Corporate Risk Management Strategy which is reviewed every three years to ensure our approach to Risk Management remains effective. The Risk Management Strategy will be updated in 2023/24 and as part of this work we will strengthen further our Risk Management by developing a Risk Appetite Statement. We will also be reviewing the Risk Descriptors used in the CRR in 2023/24 to ensure the cause and impact has been suitable described.
- 10.3 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 AF&RS CRR and the Strategic Assessment.
- 10.4 Internal Audit arrangements are in place to review the effectiveness of internal controls through annual 'key financial control' reviews. In 2022/23 the Internal Audit review of Financial Controls focussed on our [Purchase to Pay](#) control

framework which concluded that the framework is well designed and provides clear segregation of duty within the finance system, with a reasonable assurance rating being given and two low and two medium rating actions for improvement. The internal control environment is further assessed as part of the annual External Audit, who report on 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).

- 10.5 Robust budget management arrangements are in place and financial performance is regularly reported to the SLT and SLB as well as being reported and reviewed by [PRSC](#) and the [AFA](#). The Statutory Finance Officer (previously known as the Treasurer) 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](#).
- 10.6 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 (whilst based on the best information available) are subject to potential change in such volatile times. The 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, AFA has established reserves to cover the risk of a variation to the key assumptions in the MTFP, and these reserves allow AFA time to identify efficiencies to deliver the required permanent savings over the longer term. 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.
- 10.7 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.
- 10.8 The [PRSC](#) work includes scrutinising performance against key indicators, considering reports on the outcome of reviews and making recommendations for improvement, and to monitor aspects of service improvement, including the [HMICFRS action plan](#). The KPIs in the [Corporate Performance Scorecard](#) are aligned to the Service Plan outcomes, and progress against these are reported quarterly to SLT and PRSC, year to date for February 2023 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 PRSC. Monthly performance and benchmarking data is also produced and provided to managers responsible for local targets and performance.
- 10.9 Data is managed in accordance with the law. The key information management and security policies in place are: The [Data Protection Policy](#),

[Freedom of Information Policy](#) and policies to ensure suitable security is in place for the Service's information technology.

- 10.10 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 the [AGEC](#). 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 are provided by Deloitte UK LLP. It 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 2021/22, the outcome of which is available [here](#) and although the report identifies that the Service still requires improvement, the direction of travel is positive, with all three causes of concern discharged from the 2018 inspection and positive feedback on the Service's robust [action plan](#) for resolving areas identified for improvement. HMICFRS will be inspecting the Service again during 2023, and the AFA will continue to ensure any areas identified for improvement are actioned and robustly managed.
- 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 The Head of Internal Audit opinion 2022/23

- 12.1 The Head of Internal Audit has formed the opinion that based on the areas reviewed during the 12 months ending 31 March 2023; 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’.*

- 12.2 Completion of Internal Audit actions are monitored by management through the internal action tracking spreadsheet and AGECC also monitors their implementation. Internal Audit also carry out an annual follow up audit to check and verify progress towards the management recommendations and actions. Internal Audit found that reasonable progress has been made in fully implementing internal audit actions, and a number of actions remain in progress towards their forthcoming completion dates.

## 13 External Audit 2022/23

- 13.1 Our External Auditors have confirmed that they will issue an unqualified opinion on the financial statements for the 12 months ending 31 March 2023.
- 13.2 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 March 2024, our External Auditors identified a significant weakness in relation to the governance arrangements of the Service, as highlighted by the HMICFRS report and inspection findings, published in November 2023.
- 13.3 Our External Auditors recognised that the Service is taking significant steps to address the findings such as creating a detailed action plan and strengthening the Corporate Risk Register to reflect the HMICFRS report findings, but recommended that the Service continues to review the actions implemented and ensure the desired outcomes are achieved to address the concerns raised.

## 14 Conclusion

- 14.1 As highlighted by the November 2023 HMICFRS report of the Service, and reflected in the 2022/23 External Auditors Value for Money work, a significant weakness in our governance arrangements has been identified based on the inspection findings. The Service was aware of the need to address all the recommendations from the 2023 Inspection and were already taking steps to address the concerns raised, which was recognised by the Inspectorate during their re-visit to the Service in December 2023. A detailed action plan to address the issues raised is in place, with our governance arrangements strengthened to ensure progress is effectively monitored.
- 14.2 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 identifying 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](#).

## 15 Statement of commitment

15.1 We have been advised of the result of the 2022/23 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.

15.2 This AGS was approved by the AGOC on **12 December 2024** and has been signed by the Chief Fire Officer/Chief Executive, the 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: \_\_\_\_\_

Chair of Avon Fire Authority: Ben Nutland



Chief Fire Officer/Chief Executive: Simon Shilton

Date: 12 December 2024

12 December 2024



Signed: \_\_\_\_\_

Clerk (Monitoring Officer): Amanda Brown



Statutory Finance Officer (S112 Officer): Verity Lee

Date: 12 December 2024

12 December 2024

## 16 Glossary of Terms

<b>ACAS</b>	Advisory, Conciliation and Arbitration Service	<b>DAPs</b>	Data Analysis Packs
<b>AF&amp;RS</b>	Avon Fire & Rescue Service	<b>DICE</b>	Diversity, Inclusion, Cohesion, Equality
<b>AFA</b>	Avon Fire Authority	<b>EDI</b>	Equality, Diversity and Inclusion
<b>AGEC</b>	Audit, Governance and Ethics Committee	<b>FBU</b>	Fire Brigade Union
<b>AGOC</b>	Audit, Governance and Oversight Committee	<b>FoI</b>	Freedom of Information
<b>AGS</b>	Annual Governance Statement	<b>FRS</b>	Fire and Rescue Service
<b>CFO / CEO</b>	Chief Fire Officer / Chief Executive Officer	<b>FSOL</b>	Fire Service Operational Learning
<b>CIPFA</b>	Chartered Institute of Financial Accountants	<b>GDPR</b>	General Data Protection Regulations
<b>CPD</b>	Continuous Personal Development	<b>H&amp;S</b>	Health and Safety
<b>CRMP</b>	Community Risk Management Plan	<b>HFSV</b>	Home Fire Safety Visit
<b>CRR</b>	Corporate Risk Register	<b>HMICFRS</b>	His Majesty's Inspectorate of Constabulary and Fire and Rescue Service
<b>CWG</b>	Constitution Working Group	<b>HR</b>	Human Resources

<b>IRMP</b>	Integrated Risk Management Plan	<b>PDR</b>	Personal Development Review
<b>IT</b>	Information Technology	<b>PiP</b>	Procurement in Partnership
<b>JCC</b>	Joint Consultative Committee	<b>PPE</b>	Personal Protective Equipment
<b>KPI</b>	Key Performance Indicators	<b>PRA</b>	Purchase Requisition Authorisation
<b>LGA</b>	Local Government Association	<b>PRSC</b>	Performance, Review and Scrutiny Committee
<b>LRF</b>	Local Resilience Forum	<b>SARI</b>	Stand Against Racism and Inequality
<b>MHAP</b>	Mental Health Action Plan	<b>SEN</b>	Staff Engagement Network
<b>MHFA</b>	Mental Health First Aid	<b>SLB</b>	Service Leadership Board
<b>MTFP</b>	Medium-Term Financial Plan	<b>SLT</b>	Service Leadership Team
<b>NFCC</b>	National Fire Chiefs Council	<b>SOLACE</b>	Society of Local Authority Chief Executives and Senior Managers
<b>NOG</b>	National Operational Guidance	<b>SPoC</b>	Single Point of Contact
<b>ORS</b>	Opinion Research Survey	<b>TAPB</b>	Transfers, Appointments, Promotion Board
<b>P&amp;CC</b>	People & Culture Committee	<b>TRiM</b>	Trauma Risk Incident Management

## 17 Appendix A – Outcomes of the annual review of effectiveness 2022/23

CIPFA/SOLACE Principle A		
‘Behaving with integrity, demonstrating strong commitment to ethical values and respecting the rule of law’		
Supporting Evidence	Actions Implemented in 2022-23	Actions / Improvements Planned 2023-24
<p><b><u>Constitution and the AFA</u></b></p> <ul style="list-style-type: none"> <li>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.</li> <li>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.</li> <li>Induction for new Members where they were introduced to key documents and expectations.</li> <li>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.</li> <li>Register of interests and register of gifts and hospitality (Members and staff).</li> <li>The Clerk and CFO regularly review and monitor register of interests.</li> </ul>	<ul style="list-style-type: none"> <li>The <a href="#">AFA Constitution</a> was updated in April 2022 including the creation of a new ‘role description’ for Political Group Leaders.</li> <li>Three new Members to AFA attended an induction 2022.</li> <li>No concerns were raised in 2022-23 in relation to fraud, money laundering, corruption, and bribery.</li> <li>12 Members volunteered to be a Fire Station Champion. At the AFA meeting in <a href="#">October 2022</a>, Members were reminded that they were invited to become a Fire Station Champion.</li> <li>The Local Pension Board attended a Local Government Association generic refresher training session in July 2022.</li> </ul>	<ul style="list-style-type: none"> <li>The current Constitution will be replaced with a new ‘Constitution Repository’ comprising key constitutional documents; some documents were approved by AFA at their meeting on 25 April 2023 and others will be replaced during the 2023/24 municipal year to implement Phase 2 of the governance reforms.</li> <li>Members to AFA will attend an induction following local elections.</li> <li>Local Pension Board attendees have been asked to complete a Pension Regulator Public Service Toolkit training DICE course.</li> </ul>

<ul style="list-style-type: none"> <li>• Grant of dispensation for Members is utilised once a year for voting on the council tax precept.</li> <li>• The Clerk monitors for any new legislation which may impact AF&amp;RS or the AFA and ensures policies/procedures are updated and staff/Members are briefed.</li> </ul>		
<p><b><u>Values &amp; Code of Conduct</u></b></p> <ul style="list-style-type: none"> <li>• The 2021 Core Code of Ethics for Fire and Rescue Services in England covers the conduct of officers and staff.</li> <li>• Ethics, values and DICE training for Members and staff.</li> <li>• The Probation Policy for Corporate Staff supported by the induction checklist and probation review process.</li> <li>• Ethical values statement included in contracts with external service providers.</li> <li>• Service Plan published annually in April which sets out our Mission, Vision, and Values.</li> <li>• 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.</li> <li>• SLT keep the Leadership Charter under review to embed employee commitment to values, behaviour framework and code of ethics.</li> <li>• Service Bulletins 'The Shout' and 'The Big Shout' recognise 'Value Stars', with staff recognised for their values-aligned work in the AF&amp;RS Awards. Bulletins also</li> </ul>	<ul style="list-style-type: none"> <li>• Dignity and respect policy launched in December 2022 with a supporting Toolkit launched in March 2023.</li> <li>• DICE Strategy updated and relaunched for 2023-2026.</li> <li>• AFA Members attended a session by SARI on unconscious bias in 2022 and will continue to receive training.</li> <li>• Zero tolerance statement introduced in December 2022.</li> <li>• The Values and Behaviour framework is embedded throughout the Service, including AFA training sessions, and with suppliers through the procurement process to ensure values align and are upheld.</li> <li>• Values based recruitment was consistently applied, requiring candidates to demonstrate alignment with our values. Helping to embed values across all Service areas.</li> <li>• The mandatory Equality and Dignity in the Workplace e-learning module, which aligns with the NFCC Core Code of Ethics, was revised and relaunched. This provides an</li> </ul>	<ul style="list-style-type: none"> <li>• Raise awareness within AF&amp;RS about our communities by conducting regular research to produce insight reports and statistical and demographic information about our local populations.</li> <li>• Ensuring the statistical information on populations is presented in an accessible format that is available to everyone in the organisation.</li> <li>• Work collaboratively with key agencies such as Police, health care professionals and Local Authorities, Equality, Diversity, and Inclusion (EDI) focus groups and community-based organisations to build a network.</li> <li>• We will continue to build relationships with community groups, to open channels for reporting emerging risks within our communities.</li> <li>• Ensure important information and insights about community groups is effectively disseminated across the Service using external communication methods and internal digital channels.</li> <li>• Continue to develop and promote our community and partnership database.</li> </ul>

<p>includes updates from the CFO, news, incidents, our people, and events.</p> <ul style="list-style-type: none"> <li>• Zero tolerance statement.</li> </ul>	<p>overview of diversity, inclusion, cohesion, equality, respect, dignity, and fairness at AF&amp;RS. All staff are required to demonstrate their learning in everyday practices. 86% of staff completed by the end of March 2023, 8% completed after March, 6% not started.</p>	<ul style="list-style-type: none"> <li>• Work with our Prevention teams to ensure the Prevention and Protection materials and resources are appropriate for everyone in our communities.</li> <li>• The Service will impact assess and if necessary, revise our literature to ensure that we have translations for the most common languages spoken in our service areas.</li> <li>• A new DICE training programme aimed at Watch Managers, all corporate staff, managers, and wholtime staff. This will be a full day training and will cover EDI, SARI, Core Code of Ethics, Racism, Sexism, and Misogyny. Starting Sept 23 and aiming to complete last QTR of 24.</li> <li>• A full review of the equalities e-learning will be conducted.</li> </ul>
<p><b><u>Policies, systems and procedures</u></b></p> <ul style="list-style-type: none"> <li>• Discipline and Grievance Policies.</li> <li>• External Compliments and Complaints Policy</li> <li>• Dignity and Respect Policy, Toolkit and recording systems.</li> <li>• AF&amp;RS Leadership Charter sets out what we expect from leaders within Avon Fire &amp; Rescue Service including decision making practices.</li> <li>• Anti-fraud and Anti-corruption Strategy and Response Plan.</li> <li>• Personal Development Review (PDR) of officers and staff (Performance Appraisals).</li> </ul>	<ul style="list-style-type: none"> <li>• A number of Service policies were reviewed as part of the Transformation Team's strand on Policy, the intention is to reduce the length of policies to make them more accessible and more easily understood, with guidance and process information stored separately.</li> <li>• Advisory, Conciliation and Arbitration Service (ACAS) training sessions held for Single Point of Contacts (SPoC) and Investigating Managers.</li> </ul>	<ul style="list-style-type: none"> <li>• Service policies will continue to be reviewed as part of the Transformation Team's strand on Policy in 2023/24, including the Discipline and Grievance Policies.</li> <li>• Personal Development Review (Performance Appraisals) workshops for managers to support roll out of the new PDR system.</li> <li>• Currently awaiting the outcome of an external review into the handling of discipline and grievance investigations and will use this as the basis to assess future training needs. This will include development activities such as sharing</li> </ul>

<ul style="list-style-type: none"> <li>• Confidential Reporting Code and Guidance.</li> <li>• DICE Strategy (2023-26) sets out how we are meeting the Public Sector Equality Duty.</li> <li>• Procurement Strategy in place 2019-22.</li> <li>• Contract Procedure Rules, Contract monitoring and procurement processes.</li> <li>• Purchase Requisition Authorisation (PRA) electronic compliance system.</li> <li>• Policy Production and Management process.</li> <li>• Use of Bluelight e-procurement system.</li> <li>• Combined scoping Impact Assessments provides 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. Impact Assessments helps ensure work is legally compliant and identify issues. A more detailed Impact Assessment is carried out when necessary.</li> <li>• SLB/SLT review of culture in relation to disciplinary and grievance cases and lessons arising.</li> <li>• <a href="#">2021-2026 Collaboration Strategy</a> and Collaborative Working Framework.</li> <li>• Register of Collaborations and Partnerships.</li> </ul>	<ul style="list-style-type: none"> <li>• Two x two-hour PRD in-house training sessions delivered at the Supervisory Development Courses.</li> <li>• Station and Department visits by Officers and Members.</li> <li>• Purchase Requisition Authorisation (PRA) process reviewed and amended. New contract procurement rules introduced. Embedding new processes and identifying improvements around sustainable procurement.</li> <li>• The <a href="#">2021-2026 Collaboration Strategy</a> was refreshed. The Collaboration Framework, Procedures and supporting documents have been updated to include due diligence checks when identifying potential suitable partners; the requirement to ensure alignment of partner values; reference to the Core Code of Ethics for Fire &amp; Rescue Services and reference to the Values &amp; Behaviour Framework.</li> <li>• Dignity and respect policy launched in December 2022 with a supporting Toolkit launched in March 2023</li> <li>• <a href="#">Modern Slavery Policy</a> reviewed and published with the new requirements under Modern Slavery Act.</li> <li>• Leadership academy developed which aims to identify and support colleagues with high potential.</li> </ul>	<p>learning from cases and convening SPOC and Investigation panels, supported by HR and external HR experts, to build upon the skills gained within the initial ACAS awareness training.</p> <ul style="list-style-type: none"> <li>• Risk Management training will be provided to SLT and Members to support the CRR.</li> <li>• A new Learning Management System will be launched following procurement in 2022/23.</li> <li>• A revised Service Planning incorporating our IRMP will be produced which will inform Service Plan. This will utilise data from community risk assessments, risk research and horizon scanning, ensuring we align to the Fire Standard Strategic <a href="#">Community Risk Management Planning</a>.</li> <li>• Induction and probation processes will be updated with supporting tools.</li> <li>• The Service is moving PRA system to Microsoft 365 forms.</li> <li>• New contract procurement rules will be implemented following the Governance review.</li> <li>• Leadership academy launch which aims to identify and support colleagues with high potential.</li> </ul>
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	<ul style="list-style-type: none"> <li>2022-2025 Service Plan published in line with the National Fire Chiefs Council (NFCC) CRMP Strategic Framework and AF&amp;RS annual planning cycle, to identify all foreseeable fire and rescue related risks, challenges, and opportunities.</li> </ul>	
<b><u>Governance</u></b> <ul style="list-style-type: none"> <li>Corporate Risk Register</li> <li>Work of External Audit and Internal Audit, with Internal Audit plan agreed by the AGECE, focusing on key areas of risk to provide assurance to Members.</li> <li>People &amp; Culture Committee are updated on issues and trends arising from Discipline and Grievance cases.</li> <li>Members are bound by the Members' Code of Conduct as set out in the AFA Constitution.</li> </ul>	<ul style="list-style-type: none"> <li>Zero Tolerance sessions with Middle Managers and teams to embed.</li> <li>An audit plan was agreed by AGECE focusing on key areas of risk to provide assurance to Members.</li> <li>The Terms of Reference for the PRSC were reviewed during 2021-22, following the appointment of the new Chair and updated within the April 2022 version of the Constitution.</li> <li>Vale Consulting Solutions were commissioned to undertake an independent review of AFA's governance arrangements to ensure that they were as efficient and effective as they could be.</li> <li>A Constitution Working Group (CWG) considered the recommendations of the governance review and reviewed re-drafted documents to reflect the recommended governance changes.</li> </ul>	<ul style="list-style-type: none"> <li>The Corporate Risk Management Strategy, Corporate Risk Register and risk scoring matrix will be reviewed.</li> <li>The Service will continue to collaborate with teams, the People Services Forum and Unions to embed the Values and Behaviour Framework.</li> <li>The new governance structure to be implemented for the 2023/24 municipal year will no longer include a People and Culture Committee, with that Committee's responsibilities now split between the AFA and the new two committee structure.</li> </ul>
<b><u>Respecting the rule of law</u></b> <ul style="list-style-type: none"> <li>The AFA, its Committees and Avon Fire &amp; Rescue Service (AF&amp;RS) utilise all the powers contained in the following</li> </ul>	<ul style="list-style-type: none"> <li>One freedom of information case progressed to First Level Tribunal, in joint party with the Information Commissioners Office (ICO), resulting</li> </ul>	

<p>legislation for the benefit of citizens, communities and other stakeholders:</p> <ul style="list-style-type: none"> <li>○ Fire and Rescue Services Act 2004</li> <li>○ Civil Contingencies Act 2004</li> <li>○ Regulatory Reform (Fire Safety) Order 2005</li> <li>○ Fire Safety Act 2021</li> <li>○ Building Safety Act 2022</li> <li>○ Policing and Crime Act 2017</li> </ul> <ul style="list-style-type: none"> <li>• Breaches of security and data protection are recorded and investigated.</li> <li>• 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.</li> <li>• The <a href="#">Transparency Code</a> page on AF&amp;RS website is regularly reviewed and updated.</li> <li>• Participation in the <a href="#">National Fraud Initiative</a>.</li> </ul>	<p>in judgement that our actions were upheld.</p> <ul style="list-style-type: none"> <li>• One data protection case appealed to the ICO, resulting in decision that our actions were upheld.</li> <li>• 1 x freedom of information case requested Internal Review, resulting in assessment that process was performed correctly.</li> <li>• The information printed on the AF&amp;RS website to meet the requirements of the <a href="#">Transparency Code</a> has been regularly reviewed and updated.</li> <li>• Business Fire Safety inspectors have received training on the requirements and the implications of both the Fire Safety Act 2021 and the Building Safety Act 2022.</li> </ul>	
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CIPFA/SOLACE Principle B		
‘Ensuring Openness and comprehensive stakeholder engagement’		
Supporting Evidence	Actions Implemented in 2022-23	Actions / Improvements Planned 2023-24
<p><b><u>Constitution and the Avon Fire Authority</u></b></p> <ul style="list-style-type: none"> <li>• AFA website provides information regarding the Strategies, Policies, Service Plan (and supporting documents) as well as news and information about levels of performance,</li> </ul>	<ul style="list-style-type: none"> <li>• Work of AFA and key decisions published on a separate AFA website and other communication channels.</li> <li>• AFA Standing orders require that an Agenda and copies of all reports are</li> </ul>	<ul style="list-style-type: none"> <li>• New ‘Constitution Repository’ to be set up in the Library of the Avon Fire Authority website containing the key documents which comprise the AFA’s Constitution. Some key documents</li> </ul>

<p>incidents, and the work that we do in the community, minutes, and papers from AFA Meetings.</p> <ul style="list-style-type: none"> <li>• Quarterly AFA Member Development Briefings and ad hoc training which include updates on key topics.</li> <li>• The AFA and Performance Review and Scrutiny Committee monitors the level of service delivery to the public via post-incident surveys conducted by Opinion Research Services, a suite of Performance Indicators and Quarterly reports.</li> <li>• Member engagement sessions.</li> <li>• Induction course for new members and all members are made aware of the Service's documents and procedures regarding: Codes of conduct, Whistleblowing, Compliments and complaints, Anti-fraud and corruption.</li> <li>• Work of the AFA and key decisions promoted on AF&amp;RS website and other communication channels. Video recording and live streaming of AFA meetings.</li> </ul>	<p>submitted to every Member at least five clear days before the FA or Committee meeting (excluding bank holidays and weekends). The Service has also introduced Modern.gov, a system for the administration of all meetings and sharing of reports.</p> <ul style="list-style-type: none"> <li>• A strategic options report will be presented to AFA to determine the next steps / timescales for implementing a long-term training delivery model and the required infrastructure once the Joint Training Centre (Severn Park) PFI Contract ends in 2028.</li> </ul>	<p>were approved by the AFA at their meeting on 25 April 2023 and other documents will be updated during the 2023/34 municipal year.</p>
<p><b><u>Service Planning</u></b></p> <ul style="list-style-type: none"> <li>• The Service Plan is prepared in consultation with key stakeholders: <ul style="list-style-type: none"> <li>○ Level 1 – Staff, AFA Members, Rep Bodies, and the Staff Engagement Network (SEN)</li> <li>○ Level 2 – Local communities, Avon and Somerset Police &amp; Crime Commissioner, local businesses,</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Strategic Options on long-term training infrastructure agreed.</li> <li>• The Community Risk Report 2022 was produced. The findings of this report and subsequent engagement form the foundation of the risk-driven action planning for the next IRMP.</li> </ul>	<ul style="list-style-type: none"> <li>• The Service will determine extent of consultation and stakeholder engagement on the Service Plan based on the extent of changes being made.</li> <li>• A new Strategic Assessment and Baseline Report will be produced</li> </ul>

<p>local authorities and bordering fire and rescue services</p> <ul style="list-style-type: none"> <li>○ Level 3 – Avon &amp; Somerset Constabulary, South Western Ambulance Service NHS Foundation Trust and Avon &amp; Somerset Local Resilience Forum members</li> <li>○ Level 4 – Local media and local Members of Parliament (MPs)</li> </ul> <ul style="list-style-type: none"> <li>• Consultation with staff through SEN, Research and Development Groups, Transformation team and equipment working groups.</li> <li>• SLB workshops take place to scope and update the Service Plan, including horizon scanning and objective setting.</li> <li>• Public consultation takes place for the Draft Budget Strategy and Service Plan annually.</li> <li>• Corporate Communications strategy and plan.</li> <li>• MTFP and Budget Consultation.</li> </ul>	<ul style="list-style-type: none"> <li>• The MTFP and supporting narrative report included 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.</li> </ul>	<p>accompanied by a new Community Risk Report 2023.</p>
<p><b><u>Policies, systems and procedures</u></b></p> <ul style="list-style-type: none"> <li>• The <a href="#">Transparency Code</a> page on the AF&amp;RS website is regularly reviewed and updated in line with the <a href="#">Local Government Transparency Code</a>.</li> <li>• Privacy Notices published on the website and regularly updated.</li> <li>• Registers are in place to assist in monitoring collaboration, partnership, and Home Fire Safety Visits (HFSV) referral arrangements.</li> </ul>	<ul style="list-style-type: none"> <li>• <a href="#">Accessibility statement</a> reviewed and published.</li> <li>• The Service created a new SharePoint intranet website for ease of access to information and continue to reduce the number of platforms in use as well as increase staff personal accountability for communicating across platforms.</li> <li>• Growing social media presence with quality and engaging content.</li> </ul>	<ul style="list-style-type: none"> <li>• A new AF&amp;RS website to support digital engagement with public and staff will be designed, built and launched.</li> <li>• Continue to promote the use of Microsoft 365 applications and encourage staff to engage with the platforms.</li> <li>• Update Communications Charter.</li> </ul>

<ul style="list-style-type: none"> <li>• Communications Charter to reduce the number of platforms the Service uses in line with the adoption of Microsoft 365.</li> <li>• Employee relations policy.</li> <li>• The Service publishes a regular bulletin to keep staff and stakeholders informed of key updates and changes.</li> <li>• The Service publishes content on Teams and is seeing increasing engagement. Content includes CFO updates and SLT roundup videos.</li> </ul>	<ul style="list-style-type: none"> <li>• Job Description reviews to update statements on DICE, Community, Health &amp; Safety (H&amp;S) and environmental responsibilities.</li> <li>• Production of 'Being the best that you can be' which is a re-work of both the leadership charter influenced in line with findings from the cultural survey.</li> </ul>	<ul style="list-style-type: none"> <li>• The redraft of the 'Making Avon Fire &amp; Rescue Service a better place to work' document, will sit with the Culture Change Working group which sits within the People Service Forum.</li> </ul>
<p><b><u>Governance</u></b></p> <ul style="list-style-type: none"> <li>• Annual Performance Report.</li> <li>• Freedom of Information Act publication scheme and Code of Practice.</li> <li>• HMICFRS and auditor Inspection reports published on the website.</li> <li>• External and Internal Annual Reports published on the website.</li> <li>• Record of decision making and supporting materials.</li> <li>• Business cases are presented to SLB/SLT for consideration and approval.</li> </ul>	<ul style="list-style-type: none"> <li>• The Service conduct post-incident customer satisfaction surveys to gain feedback and valid against our performance standards.</li> </ul>	<ul style="list-style-type: none"> <li>• All key governance documents will continue to be published on the AFA website for the public to view.</li> <li>• Use of SharePoint for collaboration on the Corporate Risk Register, Internal Audit, and Service Planning.</li> </ul>
<p><b><u>Collaboration</u></b></p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• Tactical Research and Development group utilises the knowledge and experience of staff with regards to advances and innovation within the fire</li> </ul>	<ul style="list-style-type: none"> <li>• Consultation with staff through SEN, Research and Development Groups, Transformation team working groups and Watch Manager workshops. With increasing attendance and positive feedback.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase staff engagement through continuation of the SEN and Watch Manager workshops to facilitate discussion on key themes and topics including culture.</li> <li>• Continue to seek feedback on the format and access to communication channels to increase engagement.</li> </ul>

<p>sector, to improve firefighter and community safety.</p> <ul style="list-style-type: none"> <li>• Collaborations in procurement/purchasing ensure the Service shares knowledge, resources, buying power and best practice, to deliver the best value service to our communities.</li> <li>• Joint Consultative Committee (JCC) constitution, Fire Brigades Union (FBU) negotiations committee in place.</li> <li>• The Collaborative Working Framework and Operational Guidance sets out ways of working for staff.</li> <li>• The Collaboration Strategy sets out the Service and AFA commitment to collaborative working.</li> <li>• Partnership agreements, memorandum of understanding, Service Level Agreements are in place.</li> <li>• The DICE team connects with organisations within our Service area, and manages a Community &amp; 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.</li> <li>• H&amp;S Committees for staff at all levels to be able to contribute to the decision-making process.</li> </ul>	<ul style="list-style-type: none"> <li>• Newly published Collaboration Framework, Procedures and Toolkit outlines good practice, i.e.: <ul style="list-style-type: none"> <li>○ early identification of internal and external stakeholders when planning a collaboration or formal partnership;</li> <li>○ early communication with internal stakeholders to discuss the potential impact of a new collaboration or formal partnership, determine their needs and responsibilities, and share expectations;</li> <li>○ open and honest conversations with new partners when planning a new collaboration or formal partnership to ensure shared goals (value to be created), clear commitments and responsibilities, and agreed governance and management arrangements;</li> <li>○ open and honest conversations with existing partners when evaluating a collaboration or formal partnership to ensure decisions on change, problem-solving, effectiveness, and continuance are mutually agreed and evidence based; and that stakeholder feedback is routinely requested, freely given and acted upon;</li> <li>○ the importance of good partner relationship management, so that openness, honesty, trust, and respect prevail throughout the</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Continue to explore other possible procurement collaboration opportunities.</li> <li>• Promote newly published Collaboration Framework, Procedures and Toolkit Service-wide to ensure collaborators are aware of, understand, and apply new practices.</li> <li>• Further develop collaboration activity and efficient methods of working on MS Teams.</li> <li>• Continue to be members of Procurement in Partnership (PiP).</li> <li>• Update/refresh Station Reference Guide (SRG2) Community Safety.</li> <li>• Collaborate with NFCC on national procurement opportunities.</li> </ul>
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<ul style="list-style-type: none"> <li>• AF&amp;RS work collaboratively with Stand Against Racism &amp; 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&amp;RS as an employer of choice.</li> <li>• Members of Procurement in Partnership (PiP), a group of collaborative South West public sector organisations including police, NHS, universities and councils. National frameworks for PPE and Emergency Response Vehicles in place.</li> <li>• CYP are an active member of the Community Safety Partnership and attend all meetings.</li> </ul>	<p>lifetime of a collaboration or formal partnership, aiding success, and leaving the door open for potential future collaboration opportunities.</p> <ul style="list-style-type: none"> <li>• Collaboration with the NFCC on national projects including the procurement of Personal Protective Equipment (PPE), consumables, specialist uniform and Emergency Response Vehicles Framework agreement.</li> <li>• DICE work with SARI to improve Service understanding of increasingly diverse communities and how best to engage and remove barriers that may hinder access to services.</li> <li>• CYP meet with SARI about community engagement for home fire safety.</li> <li>• Community Safety Campaigns evaluated to identify improvements in community engagement.</li> <li>• A Positive Action Campaign Community Engagement Event took place on 08/08/2022 involving members of DICE, Corporate Communications, uniformed staff and 20 young people from Ethnic Minority disadvantaged backgrounds. The event enabled the sharing of knowledge about one-another and created a direct line from the community to our recruitment process &amp; the Yes You Can campaign. The aim of the event was to learn more about potential barriers the young people may encounter when trying to access AF&amp;FS services or gain employment and to</li> </ul>	
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	<p>provide an insight into the range of employment opportunities within the Service.</p> <ul style="list-style-type: none"> <li>• Training on Community Safety activities for all wholetime operational staff.</li> <li>• Evaluation carried out following the wholetime recruitment campaign, and planning for a two-year campaign commenced. Corporate communications focused on insight work in order to improve our offer to our diverse communities. The Corporate Communications Team continues to conduct evaluation for safety campaigns upon their completion to gather insight and evidence on the effectiveness of communications.</li> </ul>	
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CIPFA/SOLACE Principle C		
‘Defining outcomes in terms of sustainable economic, social and environmental benefits’		
Supporting Evidence	Actions Implemented in 2022-23	Actions / Improvements Planned 2023-24
<p><b><u>Service Planning</u></b></p> <ul style="list-style-type: none"> <li>• The Service Plan including IRMP is updated and reviewed by the FA on an annual basis. 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.</li> <li>• Public consultation takes place for the Draft Budget Strategy and Service Plan annually.</li> </ul>	<ul style="list-style-type: none"> <li>• Insight and evaluation work undertaken to better understand our communities. This has included working closely with Babbasa, an organisation inspiring and supporting under-represented young people in Bristol, analysis of our 1000+ person recruitment mailing database, consultation and engagement work aligned to our Service Plan, reviewing</li> </ul>	<ul style="list-style-type: none"> <li>• A new Strategic Assessment will be produced. Risk Register will align to the CRMP strategic framework and fire standards board.</li> <li>• Plan to increase public consultation and stakeholder engagement on the 2024 iteration of the Service Plan.</li> </ul>

<ul style="list-style-type: none"> <li>• The annual Baseline Report sets out the level and location of risks, providing information on the effectiveness and efficiency in dealing with the risks identified, and the Operational demands placed on AF&amp;RS.</li> <li>• The Strategic Assessment enables AF&amp;RS to identify issues with the potential to affect the future strategic direction of the Service. This includes a PESTELO analysis.</li> <li>• Communication and campaign plans identify audience and stakeholders and the intended impact on the community.</li> <li>• The Service publish a Final Accounts report that contains full details of the Authorities financial affairs including the Statutory Finance Officer's foreword, Budget reports and MTFP.</li> <li>• AF&amp;RS Environmental Strategy 2020-2030 outlines the approach to protecting the environment and being more climate resilient. Annual action plan and annual report produced and performance against Environmental Strategy and Net Zero goal is reported to PRSC.</li> <li>• Capital investment is structured to achieve appropriate life spans and adaptability for future use of resources to optimise social, economic and environmental wellbeing.</li> <li>• The Capital Asset &amp; Projects Board is made up of Service managers with responsibility for Capital Projects and Asset Management including Property, Fleet &amp; Equipment, ICT, Procurement and Finance. This group considers the financing of capital projects,</li> </ul>	<p>our internal scoring and evaluation processes for corporate communications activity, discovery workshops and surveys to better understand our communities and their needs in terms of a new Service website.</p> <ul style="list-style-type: none"> <li>• Refresh of Performance Scorecard aligned to refresh of Service Plan.</li> <li>• DICE Strategy was updated for 2023-2026.</li> <li>• The Transformation programme aims to improve services to the community, increase efficiency, capacity and cohesiveness, and maximise the added value of digital solutions, making the service more economical. Transformation scope and priorities were reviewed and updated in 2022 due to capacity and shifting timeframes for completion.</li> </ul>	<ul style="list-style-type: none"> <li>• The remaining work packages within the Transformation programme will be completed bringing the benefits of increased efficiency, capacity and cohesiveness, and maximising the value of digital solutions, making the service more economical.</li> </ul>
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<p>procurement and the ongoing management of assets throughout the Service.</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• The DICE Strategy sets out how AF&amp;RS ensure fair access to Services.</li> </ul>		
<p><b><u>Policies, systems and procedures</u></b></p> <ul style="list-style-type: none"> <li>• Combined scoping Impact Assessments 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 Impact Assessment is carried out when necessary.</li> <li>• Environmental impact is monitored by monthly/quarterly Performance Indicators on Energy, Water, Business Travel &amp; Carbon Emissions.</li> <li>• Social, economic and environmental factors are considered and implemented within procurement processes and contract management.</li> <li>• The Collaboration Strategy and Framework sets out the intended principles on which the Service enters partnerships. Partnership agreements set out intended outcomes and how effectiveness is monitored.</li> </ul>	<ul style="list-style-type: none"> <li>• A new Impact Assessment process has been developed and rolled out to encompass all areas of Impact Assessment as part of any Policy Review. There has been a marked increase in the volume of completed and approved Impact Assessments.</li> <li>• All the Supplies &amp; Procurement team, along with the Environmental Officer, attended a day-long bespoke training workshop on Sustainable Procurement in May 2022.</li> <li>• The Public Sector Flexible Framework continues to be used as a self-assessment mechanism and to determine the 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&amp;RS is currently between Levels 1-3.</li> <li>• The previous Collaborative Working Framework and Operational Guidance has been reviewed, and replaced with</li> </ul>	<ul style="list-style-type: none"> <li>• Work on improvements to the Combined Scoping Impact Assessment (CSIA) is ongoing. The improvements will see the author receiving just one email with all the information required to progress into stage 2 IA's where applicable and will also provide the author with a copy of their CSIA report. There are also improvements being made for IA approvers, the improvements will create efficiencies in the process, so that CSIA's they can approve easier and quicker than the current process. Once these improvements are implemented the longer-term goal remains to have a Combine Impact Assessment with intelligent branching so that the author has one form to complete, and this will produce one Combined Impact Assessment Report.</li> </ul>

	<p>the newly published Collaboration Framework 2023, and Collaboration Procedures &amp; Toolkit 2023, which together provide collaborators with guidance on the following:</p> <ul style="list-style-type: none"> <li>○ Framework - outlines the Service's approach to, and core principles of, collaboration;</li> <li>○ Procedures &amp; Toolkit - provides collaborators (indeed all staff) with step-by-step guidance and supporting tools for planning, monitoring, evaluating, and closing a collaboration or formal partnership.</li> <li>• The Toolkit captures intended benefits and social value during the planning phase, and reviews this during the evaluation phase.</li> <li>• Collaborators are required to complete a Scoping Impact Assessment (including any environmental impact) and any subsequent full assessments during the planning phase; to be reviewed during the evaluation phase.</li> </ul>	
<p><b><u>Governance</u></b></p> <ul style="list-style-type: none"> <li>• The Corporate Risk Register is monitored and reviewed regularly by SLT and AGECC.</li> <li>• Monitoring of HMICFRS inspection action plans co-ordinated and reported by HMICFRS Service Liaison Officer. SLT monitor progress against the action plan every other month and relevant committee review at each meeting for Member-led scrutiny.</li> </ul>	<ul style="list-style-type: none"> <li>• An additional Corporate Risk was introduced to ensure compliance with all relevant environmental legislation and regulations, and to ensure the Service's goal of Net Zero carbon emissions by 2030 is achieved.</li> <li>• The Round 2 HMICFRS inspection report confirmed that the three causes</li> </ul>	<ul style="list-style-type: none"> <li>• The Risk Management Strategy will be reviewed and amended in line recommendations from the Internal Auditors.</li> <li>• Round 3 HMICFRS Inspection in Q1 of 2023/24. Findings from the published report, will be addressed through the</li> </ul>

<ul style="list-style-type: none"> <li>• AFA papers include sections to consider the financial, legal, equality and diversity, environmental and sustainability, data protection and crime and disorder impacts.</li> <li>• External Audit - Value for Money opinion</li> <li>• Outcomes resulting from the Internal Audit inspection process.</li> <li>• Regular reports on progress against the Service Plan objectives with key matters arising reported to the SLT/AFA.</li> <li>• An annual benchmarking report of results is produced by Opinion Research Survey (ORS) which compares AF&amp;RS with other FRSS.</li> <li>• Performance figures are produced and reported to the FA highlighting key areas of activity. Additional scrutiny is provided by Members via the PRSC.</li> </ul>	<p>of concern resulting from Round 1 have now been formally discharged. The Round 2 Inspection Action Plan designed to address the 22 'areas for improvement' included in our Round 2 inspection report has been regularly monitored by the SLT and PRSC.</p> <ul style="list-style-type: none"> <li>• The Performance scorecard was revised with new metrics organised under the Service's seven key objectives.</li> <li>• Work undertaken towards an ISO 14001 compliant Environmental Management System (EMS)</li> </ul>	<p>development of a Round 3 action plan, with appropriate actions, with assigned responsibility and timescales for all areas of improvement. Our HMICFRS Inspection Action Plan is regarded as a 'priority programme' and will be overseen by the AGOC.</p> <ul style="list-style-type: none"> <li>• 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.</li> </ul>
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CIPFA/SOLACE Principle D		
'Determining the interventions necessary to optimise the achievement of the intended outcomes'		
Supporting Evidence	Actions Implemented in 2022-23	Actions / Improvements Planned 2023-24
<p><b><u>Constitution and the Avon Fire Authority</u></b></p> <ul style="list-style-type: none"> <li>• Decision making protocols set out in the Leadership Charter and the AFA Constitution.</li> <li>• AFA Papers, Option Appraisals and Business Cases.</li> </ul>	<ul style="list-style-type: none"> <li>• AFA Constitution reviewed.</li> </ul>	<ul style="list-style-type: none"> <li>• 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</li> </ul>

<ul style="list-style-type: none"> <li>Discussion between Members and officers on the information required to support decision making.</li> </ul>		<p>their meeting on 25 April 2023 and other documents will be updated during the 2023/24 municipal year.</p>
<p><b><u>Service Planning</u></b></p> <ul style="list-style-type: none"> <li>The Service Plan is a 3-year plan which is reviewed and updated each year, in line with a pre-prepared timeline.</li> <li>SLB/SLT and Member Planning Workshops/Engagement Sessions take place to help determine the actions within the Service Plan.</li> <li>Service strategies and station/team plans are regularly reviewed to ensure they align with priorities and targets set out in the Service Plan.</li> <li>Public Consultation takes place when significant changes are proposed within the Service Plan.</li> <li>Budget consultation, Final Accounts and MTFP.</li> <li>Communication Strategy 2021-2024.</li> <li>Capital Steering &amp; Prioritisation group with a focus to ensure the forward Capital programme is sustainable and affordable.</li> </ul>	<ul style="list-style-type: none"> <li>Public consultation took place for the Draft Budget Strategy</li> <li>Part of the budget setting process is to consider Service developments and changes with SLB and SLT, to ensure budgets are set with the fulfilment of Service objectives in mind. The Service plan and MTFP processes have also been aligned in terms of timescale to ensure this continues.</li> <li>MTFP informed by an increase in financial and business planning.</li> </ul>	<ul style="list-style-type: none"> <li>MTFP will be refreshed and informed by the Capital Steering Group.</li> <li>Devolved budgets will continue to be rolled out across the Service.</li> <li>National Guidance being followed; PESTELO analysis is contained in National Guidance and will form part of the Strategic Assessment planning process.</li> <li>Macro and micro environmental analysis will be considered in reviewing the Strategic Assessment.</li> <li>Service wide training to be rolled out to all staff on the use of MS Teams to facilitate more efficient ways of working and improved communication across the organisation to assist in shared understanding of objectives.</li> </ul>
<p><b><u>Policies, systems and procedures</u></b></p> <ul style="list-style-type: none"> <li>Budget guidance and protocols are in place.</li> <li>Reports are automated where possible to ensure capacity in generating information.</li> <li>Leadership Charter in place.</li> <li>Safeguarding training delivered across the Service.</li> </ul>	<ul style="list-style-type: none"> <li>Team Plan template developed for corporate staff teams.</li> </ul>	<ul style="list-style-type: none"> <li>Improvements to monitoring and tracking of Team Plans via system development.</li> <li>Mandatory Prevent training has been issued across the service</li> <li>The Safeguarding Policy has been revised and will be released in 2023/24</li> <li>The Designated Safeguarding Leads continue to review current practices and</li> </ul>

		procedures to look for improvements, including a revision of the SG101 form, improving the recording of information and releasing role specific training.
<b><u>Governance</u></b> <ul style="list-style-type: none"> <li>• A Corporate Forward Plan sets out key dates for developing and submitting plans and reports to AFA, Committees, SLB and SLT.</li> <li>• Risk Management Strategy.</li> <li>• KPIs have been established and approved for each Service element and included in the Service Plan and are reported upon regularly.</li> <li>• Reports include detailed performance results and highlight areas where corrective action is necessary.</li> </ul>	<ul style="list-style-type: none"> <li>• Business case template has been revised with the governance process for sign off amended. This includes financial information and associated risks. FA papers have increased emphasis on the financial costs of any proposed changes in business cases.</li> <li>• Corporate Forward plan developed detailing key dates for papers, meetings, and committees. Draft agendas prepared for all meetings.</li> </ul>	<ul style="list-style-type: none"> <li>• A Corporate Forward Plan will continue to be 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.</li> <li>• The Risk Management Strategy will be updated following advice on best practice from advisory internal audit report.</li> </ul>
<b><u>Collaboration</u></b> <ul style="list-style-type: none"> <li>• The Capital Asset and Projects Board is made up of Service Managers with responsibility for Property, Fleet &amp; Equipment, ICT, Procurement and Finance. This group considers the financing of capital projects, procurement, and the ongoing management of assets throughout the Service.</li> <li>• Various staff working groups, for example SEN and Research and Development Groups, seek feedback from our staff when implementing new projects.</li> <li>• Attendance at the Local Resilience Forum ensures a joined-up approach with</li> </ul>	<ul style="list-style-type: none"> <li>• Representation at the Health, Safety and Wellbeing Strategic (HSWS) Committee.</li> <li>• Internal Audit benchmarking undertaken of the business cases &amp; benefits realisation within the Service.</li> <li>• Safeguarding policy reviewed.</li> </ul>	<ul style="list-style-type: none"> <li>• Review and identify opportunities for greater staff engagement and feedback in the Service Planning process.</li> </ul>

<p>Category 1 and Category 2 responders and the voluntary sector.</p> <ul style="list-style-type: none"> <li>Attendance at Safeguarding Boards ensure a joint approach to delivering services to our most vulnerable service users.</li> <li>Attendance at Community Safety Partnerships ensure a joint approach to delivering services to our communities.</li> </ul>		
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CIPFA/SOLACE Principle E		
'Developing the entity's capacity, including the capability of its leadership and the individuals within it'		
Supporting Evidence	Actions Implemented in 2022-23	Actions / Improvements Planned 2023-24
<p><b><u>Constitution and the Avon Fire Authority</u></b></p> <ul style="list-style-type: none"> <li>New Member training and continued development for Members.</li> <li>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.</li> <li>AFA Standing Orders and financial regulations are kept under review, as they form part of the Constitution, which is working document.</li> <li>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</li> </ul>	<ul style="list-style-type: none"> <li>A 'Service Roundup' report is a standing item for the AFA to brief Members on recent operations.</li> <li>As part of the revised constitution the financial aspects were reviewed and scrutinised by the Statutory Finance Officer, which links to the changes in roles and responsibilities around devolved budgets.</li> <li>New Members were notified to the Authority in June 2022 and following the AGM on 22 June 2022, the Clerk appointed Members to Committees in accordance with the agreement reached with the political group leaders.</li> </ul>	<ul style="list-style-type: none"> <li>Newly inducted Members will be reminded of their roles and the responsibilities of Lead Directors. Members provided with key documents including the latest AFA Constitution.</li> <li>The Clerk will arrange training for both Members and officers in accordance with the training recommendations of the Independent Governance Review.</li> <li>Both the Clerk and Statutory Finance Officer will complete professional Continuing Professional Development (CPD) training for their role.</li> </ul>

<p>represents the percentage of members from each party nominated to the AFA).</p> <ul style="list-style-type: none"> <li>• Public access statements, public consultation and LGA Peer Review.</li> <li>• Protocol for Member/Officer relations: roles of Chair and CFO published on external website.</li> </ul>	<ul style="list-style-type: none"> <li>• Members received updates on new fire safety legislation. Legislation was introduced because of the Grenfell Tower Inquiry findings.</li> <li>• The Clerk and Statutory Finance Officer completed professional Continuing Professional Development (CPD) training for their role.</li> <li>• The public can attend AFA meetings in person by giving the Clerk notice in advance. They must still submit Public Access Statements 2 days in advance of a meeting.</li> <li>• Member/Officer relations policy is published as part of the 2022 re-issue of the Constitution. The new CFO/CE has continued weekly telephone calls with the AFA Chair to keep her abreast of day-to-day issues.</li> </ul>	
<p><b><u>Service Planning</u></b></p> <ul style="list-style-type: none"> <li>• Estates Strategy sets out the rationale for funding and resourcing work on our buildings.</li> <li>• Fleet Strategy sets out the rationale for funding and resourcing work on our fleet.</li> <li>• Data analytics are used to match resource to risk.</li> <li>• Cultural Survey, Cultural Review and Action Plan.</li> </ul>	<ul style="list-style-type: none"> <li>• The Service analysed data from quantitative and qualitative reports, using information to identify areas for consideration and improvements.</li> <li>• Progress towards several projects taking place as part of the Transformation programme which will enhance digital capability on the fireground and contribute to increased firefighter safety.</li> <li>• The Service are investing in a Risk Based Inspection Programme and have developed a data warehouse to provide detailed risk information.</li> </ul>	<ul style="list-style-type: none"> <li>• The Service will continue to analyse data from quantitative and qualitative reports, using information to identify areas for consideration and improvements.</li> <li>• Planned completion of several projects taking place as part of the Transformation programme which will enhance digital capability on the fireground and contribute to increased firefighter safety.</li> <li>• Mental Health Action Plan will be reviewed and updated.</li> </ul>

	<ul style="list-style-type: none"> <li>• The Service explored the use of Breathing Apparatus (BA) telemetry, in relation to its reliability, benefits and costs, and decided this is uneconomical at the moment given the lifespan of our existing apparatus.</li> <li>• Redevelopment of Avonmouth fire station completed.</li> <li>• Environmental Strategy produced to support 2030 Net Zero target. Bedminster Construction Phase (January 2023), Bath Collaboration agreement, funding and design / construction progression, Weston Detailed design and construction programme to be developed.</li> </ul>	<ul style="list-style-type: none"> <li>• Update 'Making Avon Fire and Rescue Service a better Place to Work'.</li> <li>• Continuation of research on blended fleet, and Fleet Strategy to be updated to reflect any changes.</li> </ul>
<p><b><u>Leadership and development</u></b></p> <ul style="list-style-type: none"> <li>• S112 and Monitoring Officer appropriately qualified and with high levels of experience.</li> <li>• MOST knowledge standards have been written for flexi officers and frequency of repeats set.</li> <li>• Incident command assessments are carried out on a two-yearly basis.</li> <li>• Specialist skills are assessed through peer assessment within that speciality.</li> <li>• Half day development day per month for SLT including external providers delivering leadership training.</li> <li>• Development pathways</li> <li>• Leadership Academy provides structured approach to leadership development</li> <li>• Talent management programme</li> </ul>	<ul style="list-style-type: none"> <li>• CFO undertook a programme of visits to stations and teams including SLT members visiting teams to help identify and address common themes.</li> <li>• Quarterly Member Development sessions are used to help identify and address any concerns raised by Members.</li> <li>• Leadership Academy developed and promoted prior to launch in May 2023.</li> <li>• Internal TRiM workshops and guidance provided to practitioners. New Wellbeing Advisor developed and delivered a new Suicide prevention course. A review of Blue</li> </ul>	<ul style="list-style-type: none"> <li>• Quarterly Member Development sessions are used to help identify and address any concerns raised by Members, as well as provide Members with training.</li> <li>• Leadership Academy launch in April 2023.</li> <li>• Continued delivery of TRiM workshops and guidance for practitioners.</li> <li>• Aim to onboard 50 Blue Light Champions.</li> <li>• Blue Light mental health training to be delivered to all those with supervisory responsibilities in the Service (i.e., Crew Manager upwards).</li> </ul>

<ul style="list-style-type: none"> <li>• Training plans</li> <li>• Apprenticeship programmes</li> <li>• 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 &amp; Group Managers monthly to allow informed local decision making.</li> </ul>	<p>Light Champion role was completed and training delivered which was authorised by the directors of Mind.</p> <ul style="list-style-type: none"> <li>• Enhanced counselling provision introduced via a new provider in January.</li> <li>• New Occupational Health provider introduced in November 2022.</li> </ul>	<ul style="list-style-type: none"> <li>• Supporting the NFCC Direct Entry (DE) Scheme by recruiting a single Station Manager through a trial of the direct entry route.</li> </ul>
<p><b><u>Policies, systems and procedures</u></b></p> <ul style="list-style-type: none"> <li>• Employees Pay Structure – Hay evaluations conducted as required to ensure corporate staff salaries are in line with their responsibilities.</li> <li>• Business cases are reviewed by SLB/SLT to ensure that resources are matched to Service priorities.</li> <li>• Succession Planning Policy and Report.</li> <li>• Human Resource policies, Health &amp; Safety Policies.</li> <li>• Financial Regulations are published online and integrated into internal procedures.</li> <li>• The Financial Services contract provides access to a range of financial support services and resources.</li> <li>• Strong regional and national finance support networks provide good resource on financial issues.</li> </ul>	<ul style="list-style-type: none"> <li>• Labour market review conducted for several critical roles and market supplements used as needed to aid recruitment and retention. Review underway to compare spinal column point distribution with Fire Services and Local Authorities to identify salary differentials and assess costs to address gaps.</li> <li>• Decision taken that HR would not be involved in every recruitment due to capacity. A risk assessment was undertaken, and line managers received training in the form of coaching and an in-house e-learning package developed by HR for line managers. This bespoke training was designed around the AF&amp;RS recruitment process.</li> </ul>	<ul style="list-style-type: none"> <li>• All Health and Safety Policies and Standard Operating Procedures (SOPs) to be reviewed and updated by the end of 2023.</li> <li>• Recruitment and selection training to be rolled out to corporate staff managers.</li> <li>• 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.</li> <li>• Transformation work package on induction to the Service will improve induction processes.</li> <li>• Discipline and grievance policies to be reviewed and republished.</li> </ul>

<ul style="list-style-type: none"> <li>• 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, alongside corporate and business plans to ensure they have the support they need to carry out their roles.</li> <li>• Health, Safety and Wellbeing Policy.</li> <li>• HR Business Partner model which enables closer working with hiring managers to ensure recruitment processes are fit for purpose, fair, consistent, and inclusive.</li> <li>• Debrief and Monitoring, Lessons learned from projects.</li> </ul>	<ul style="list-style-type: none"> <li>• A full Health &amp; Safety and Welfare team was in place to support Service requirements.</li> <li>• MHFA course available with all new TRiM practitioners completing the course.</li> <li>• Promotions policy was reviewed, with consideration of including the transfer policy.</li> <li>• Alignment with Fire Standard for Operational Learning started. Operational Assurance is now a single function within Learning &amp; Development. System and policy review has started, implementation is aligned with the NOG implementation in process.</li> <li>• New Learning Management System procured which will provide a PDR facility.</li> <li>• Work started towards implementing a single linked Operational Assurance process that aligns to National Operational Guidance and Fire Service Operational Learning (FSOL). Business case in place to build team to support. This process will link to Health &amp; Safety, risk assessment and Strategic Actions and Tactical Actions as defined in National Operational Guidance and required by FSOL.</li> </ul>	<ul style="list-style-type: none"> <li>• Research to be undertaken in applicant tracing systems to streamline recruitment processes.</li> <li>• NFCC Attendance Management Policy to be adapted and implemented. The HR Business Partner model introduced in May 2022 provides the capacity to finalise this policy and supporting processes and toolkit, and commence the training of employees and line managers to embed this. The introduction of the Welfare Form and welfare focussed discussions will assist in changing the attendance and wellbeing culture.</li> <li>• PDR training workshops for managers to facilitate rollout of new PDR system.</li> <li>• Service wide training to be rolled out to all staff on the use of MS Teams to facilitate more efficient ways of working and improved communication across the organisation.</li> <li>• In 2023 we are anticipating that all H&amp;S risk assessments will need aligning to National Operational Guidance.</li> </ul>
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<p><b><u>Governance and assurance</u></b></p> <ul style="list-style-type: none"> <li>• Regular reviews of activities, outputs, and planned outcomes.</li> <li>• HMICFRS Inspections, Reports and Action Plan is monitored and reported to SLT and relevant Committee.</li> <li>• Performance and benchmarking information produced monthly and reported to the local managers, the SLT, PRSC, and the AFA.</li> <li>• 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 monthly to SLT and twice a year to the audit committee, streamlined to highlight exceptions.</li> <li>• Local Performance Indicators and agreed annual targets.</li> <li>• Monthly target updates, Absence Monitoring, PDR completion monitoring, H&amp;S target monitoring and Incident monitoring.</li> <li>• Performance levels are challenged, and remedial actions discussed and implemented. PRSC continue to oversee the scrutiny of the performance of AF&amp;RS and delivery of the AFA's policies, plans and objectives.</li> <li>• Standing orders and financial regulations are reviewed regularly, any legal and organisational changes are considered and acted on.</li> </ul>	<ul style="list-style-type: none"> <li>• The Round 2 HMICFRS inspection report confirmed that the three causes of concern resulting from Round 1 have now been formally discharged. The Round 2 Inspection Action Plan designed to address the 22 'areas for improvement' included in our Round 2 inspection report has been regularly monitored by the SLT and PRSC.</li> </ul>	<ul style="list-style-type: none"> <li>• The HMICFRS Action Plan is regarded as a 'priority programme' and will be overseen by the new Policy and Resources Committee. Continue with active monitoring of HMICFRS-related actions and recommendations via SLT and PRC.</li> <li>• All external and internal audit reports will be considered by the new Audit, Governance and Oversight Committee (AGOC).</li> </ul>
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<b>CIPFA/SOLACE Principle F</b> 'Managing risks and performance through robust internal control and strong public financial management'		
Supporting Evidence	Actions Implemented in 2022-23	Actions / Improvements Planned 2023-24
<b><u>AFA, Constitution, Governance &amp; Internal control</u></b> <ul style="list-style-type: none"> <li>• Terms of Reference/Constitution.</li> <li>• The Corporate Forward Plan is provided to Members at every FA meeting, supported by the new 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 has been adhered to.</li> <li>• Standardised report templates for all AFA meetings uploaded to Modern Gov. Templates contain a subheading for the report writer to outline operational, financial, or reputational risks for consideration.</li> <li>• 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.</li> <li>• Publication of minutes of meetings with evidence of improvements as a result of scrutiny.</li> </ul>	<ul style="list-style-type: none"> <li>• The Constitution was reviewed and published in April 2022, including updated Terms of Reference for the PRSC and AGECE, and new wording to reflect the introduction of devolved budgets.</li> <li>• Ongoing review of the Financial Regulations will be undertaken to ensure these documents are updated in line with developments.</li> <li>• LGA hosted a Governance Workshop in December 2022 which identified the need for an independent governance review and 'areas of focus' for that review.</li> <li>• New Agenda and Management System, "Modern.Gov", introduced.</li> <li>• RSM contracted to carry out the 22/23 Internal Audit Plan, with monthly meetings scheduled with RSM to monitor progress.</li> </ul>	<ul style="list-style-type: none"> <li>• Independent review of AFA Governance arrangements was carried out by Vale Consultancy in 2022/23. This has resulted in 12 recommendations which require amendments to the Governance structure and Constitution. All 12 recommendations were accepted by AFA at their meeting on 25 April 2023 to be implemented in two phases (the first phase to implement the new governance structure of AFA and two committees in the 23/24 municipal year). All recommendations to be introduced and the Constitution to be updated accordingly in 23/24.</li> <li>• RSM remain contracted to deliver the 23/24 Audit Plan. Progress against the plan will continue to be monitored monthly.</li> <li>• 22/23 AGS draft to be presented to AGOC in June 2023 and finalised and published with Statement of Accounts.</li> </ul>

<ul style="list-style-type: none"> <li>• Regular training provided to all elected Members including quarterly Member Development sessions.</li> <li>• Code of conduct, Register of Interests, Gifts &amp; Hospitality Register. Each year Members submit Member Form 2 to disclose their interests to be added to the Register of Interests.</li> <li>• Standing agenda item requiring Members to disclose interests in advance of an agenda item discussing a tender exercise.</li> <li>• Audit plan approved by AGECE annually and audit reports which are circulated to the SLT and AGECE for consideration and approval.</li> <li>• Annual Governance Statement produced each year and presented to the AGECE for approval.</li> <li>• 2021-2023 Governance and Assurance Framework published on website.</li> </ul>		
<p><b><u>Managing Risk</u></b></p> <ul style="list-style-type: none"> <li>• A Corporate Risk Strategy and Risk Management strategy are in place.</li> <li>• Corporate Risk Register is reviewed and reported each month which is scrutinised by SLT, followed by updates to AGECE twice a year.</li> <li>• AFA papers include a mandatory summary of risk.</li> <li>• NFCC Community Risk Strategic framework followed to identify &amp; assess</li> </ul>	<ul style="list-style-type: none"> <li>• Risk Assessment SOP in place. Basic risk assessment is covered in IOSH for all operational Crew Managers and above.</li> <li>• The 5-step approach as directed by the National Community Risk and Management Planning Strategic Framework as part of our Community Risk Management Planning process.</li> <li>• The Provision of Operational Risk Information System (PORIS) Team</li> </ul>	<ul style="list-style-type: none"> <li>• The Risk Management Strategy and the Risk Descriptors on the CRR will be updated. A risk appetite statement will be produced to support the management of risk. Risk Management training to be rolled out to Members.</li> <li>• Following the recommendations of the Constitution Working Group, the new AGOC committee will consider the Corporate Risk Register quarterly rather than twice a year although reports will be 'by exception' where possible.</li> </ul>

<p>foreseeable fire and rescue related risks as part of the IRMP.</p> <ul style="list-style-type: none"> <li>H&amp;S Risk Management processes managed by the Health and Safety (H&amp;S) department who monitor and support relevant managers to review all risk assessments in line with their required review periods. Business risks are identified and managed by local managers.</li> </ul>	<p>assessed internal and external datasets to identify medium and high-risk sites.</p> <ul style="list-style-type: none"> <li>7(2)(d) visits were conducted for these sites to ensure crew familiarity and that our site-specific risk data is current. Detailed Computer-Aided Design (CAD) plan customised for AF&amp;RS were produced for key sites to aid with incident response.</li> <li>Site-specific risk data for sites 10km either side of the service border were shared with neighbouring services via ResilienceDirect.</li> <li>The Service has adopted a Risk Based Inspection Programme (RBIP) which seeks to prioritise the audits of premises which present the highest risk to life. The RBIP has been developed in line with national guidance and through collaborative working with local blue light partners.</li> </ul>	<ul style="list-style-type: none"> <li>The Provision of Operational Risk Information System (PORIS) Team will look to utilise additional datasets to identify new sites for 7(2)(d) visits.</li> <li>New hardware and software to be implemented to improve the level of site-specific risk information captured and to streamline the process of publishing this data to frontline Mobile Data Terminals (MDTs).</li> <li>It is unanticipated that by the end of 2023, all operational RAs will be aligned to NatOG and all H&amp;S RAs reviewed as part of this process.</li> <li>Avon Data Warehouse will be developed to provide a repository for all knowledge relating to risks within AF&amp;RS. This will enable data analytics and data sharing.</li> </ul>
<p><b><u>Managing Performance</u></b></p> <ul style="list-style-type: none"> <li>PRSC committee includes elected members from each political party. They are provided with regular performance updates and encouraged to challenge areas of under-performance on behalf of the AFA. PRSC Terms of Reference detail how this is done. Responsible officers answer questions and provide solutions to overcome performance issues.</li> <li>Benchmark data for incident and sickness information is report regularly.</li> </ul>	<ul style="list-style-type: none"> <li>Dashboards created using Microsoft Power BI, an interactive data visualisation software product, will be produced.</li> </ul>	<p>Under the new governance structure, organisational performance will be the responsibility of the Audit Governance and Oversight Committee (AGOC). AGOC will assess on a quarterly basis the performance of the Service against agreed measures and organisational targets and respond to areas of strong and/or under performance, reporting and making recommendations where necessary to the AFA.</p>

<p>Benchmarking of HMICFRS data is presented on the Data Analysis Packs.</p> <ul style="list-style-type: none"> <li>Performance map showing all key activities have benchmarking and performance measures.</li> </ul>		
<p><b>Financial Management</b></p> <ul style="list-style-type: none"> <li>Financial management supports the delivery of services and transformational change as well as securing good stewardship.</li> <li>On an annual basis as part of the budget setting process, AF&amp;RS will consider Service developments and changes with SLB and 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.</li> <li>Budget monitoring reports, MTFP, financial regulations and standing orders, cost performance.</li> <li>Monthly reporting is shared with budget managers and SLT to ensure performance is as expected.</li> <li>Compliance with the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014).</li> <li>Participation in the National Fraud Initiative.</li> <li>Compliance with the CIPFA Finance Management Code.</li> </ul>	<ul style="list-style-type: none"> <li>Finance audit completed receiving an internal audit opinion of 'substantial assurance'. Internal Audit undertake transactional testing as part of the audit plan.</li> <li>In 22/23 the Internal Audit review of Financial Controls focussed on Purchase2Pay control framework and concluded that the framework is well designed and provides clear segregation of duty within the finance system, with a reasonable assurance rating being given and two low and two medium rating actions for improvement.</li> <li>The Service will continue to complete the NFI reviews to ensure standards are maintained. AF&amp;RS completed and published the National Fraud Initiative review with support from Bristol City Council. No areas of concern raised.</li> </ul>	<ul style="list-style-type: none"> <li>Financial monitoring will continue to be provided to all relevant meetings with additional reporting to SLT and SLB on capital and other key areas of finance.</li> <li>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 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, AFA has established reserves to cover the risk of a variation to the key assumptions in the MTFP, and these reserves allow AFA time to identify efficiencies to deliver the required permanent savings over the longer term. 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.</li> <li>A new Statutory Finance Officer appointed by AFA from 2 May 2023,</li> </ul>

		who will assume overall responsibility for financial management and will provide financial advice to Members.
<p><b>Managing Data</b></p> <ul style="list-style-type: none"> <li>• Data management procedures, Record of Processing Activity (ROPA), Retention Schedule, Privacy Notices</li> <li>• Data Protection Policy, Freedom of Information Policy, IT policies and Security Incident Management Policy.</li> <li>• Data Protection Impact Assessments (DPIA).</li> <li>• Mandatory staff training for data protection and information security.</li> <li>• Data Protection Officer registered on Information Commissioner's Office Data Protection Register.</li> <li>• Senior Information Risk Officer/Owner in place.</li> <li>• Robust IT Infrastructure and commitment to invest in digital technology for continuous improvement.</li> </ul>	<ul style="list-style-type: none"> <li>• Data Protection Impact Assessment procedure (DPIA) has been amalgamated into Joint Scoping procedure.</li> <li>• Privacy notice for personal monitoring devices has been completed and published.</li> <li>• ROPA and Retention Schedule maintained.</li> <li>• Privacy Notices reassessed and amended where necessary for insurance purposes.</li> <li>• Trial run completed for course on personal data and data breach management to be targeted at all staff at or above Station Manager level.</li> <li>• Three data protection and information security courses rolled out, with aim for 80% completion on Course 1 (basic Information Security).</li> </ul> <p>Figures as of 31 March 2023 are:</p> <ul style="list-style-type: none"> <li>○ 830 staff active</li> <li>○ 723 have completed</li> <li>○ 3 have completed over 50%</li> <li>○ 11 have begun but completed under 50%</li> <li>○ 6 have yet to begin</li> </ul>	<ul style="list-style-type: none"> <li>• All data management policies scheduled for full revision.</li> <li>• All AF&amp;RS data management procedures to be reviewed and revised to meet Data Management Fire Standards, including completing list of functions while ensuring legal and Information Commissioner's Office (ICO) requirements are still met.</li> <li>• ROPA and Retention Schedule to be maintained and updated with a view to publishing (internally and externally).</li> <li>• Move Firewatch 7.7.2 from Desktop connection to Cloud connection, then upgrade to 7.8.</li> <li>• Service Level Agreement standard wording and Privacy Notices to be reassessed and amended where necessary, including for planned update to CCTV system.</li> <li>• IT infrastructure project to be finalised, by decommissioning of old kit and software and reports to be presented to the AFA and AGOC.</li> <li>• Course on personal data and data breach management to be rolled out to all staff at or above Station Manager level.</li> </ul>

	<ul style="list-style-type: none"> <li>• FireWatch upgrades implemented to version 7.7.2, most up to date version available.</li> <li>• IT infrastructure project progressed; all staff migrated to 365. All applications moved to new infrastructure. New servers and firewalls purchased and implemented.</li> </ul>	<ul style="list-style-type: none"> <li>• All existing data management training courses to be reviewed and updated.</li> <li>• 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.</li> <li>• 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.</li> <li>• Planned campaign of phishing exercises to assist with staff cyber security training.</li> <li>• Explore practicalities of using the policy rollout tool / e-learning package to record staff acknowledgement of receipt of updated policies.</li> </ul>
<p><b><u>Collaboration</u></b></p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• Data sharing agreement/register, Partnership agreements, Memorandum of Understanding (MOU's).</li> <li>• Collaboration and formal partnerships register</li> </ul>	<ul style="list-style-type: none"> <li>• The previous Collaborative Working Framework and Operational Guidance has been reviewed, and replaced with the newly published Collaboration Framework 2023, and Collaboration Procedures &amp; Toolkit 2023, which together provide collaborators with guidance on the following: <ul style="list-style-type: none"> <li>○ Framework - outlines the Service's approach to, and core principles of, collaboration;</li> <li>○ Procedures &amp; Toolkit - provides collaborators with step-by-step</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Creation of a 'Collaboration Risk Assessment', to include partner relationship risk, collaboration activity risk, and risk associated with partner use of our premises. This will be a standard document that collaborators can tailor to their collaboration or formal partnership needs, which will support the guidance and instruction given within the written agreement.</li> <li>• Creation of risk management guidance for the following stakeholders when</li> </ul>

<ul style="list-style-type: none"> <li>• Collaborators are required to complete a Scoping Impact Assessment (which might highlight any risk/negative impact) and any subsequent full assessments during the planning phase; and reviews this during the evaluation phase.</li> <li>• Collaborators are required to complete a risk assessment (where one is necessary) during the planning phase; partner risk assessments are also requested during this phase.</li> <li>• The Register of Collaborations &amp; Formal Partnerships records an effectiveness (RAG) rating for each arrangement, based on evidenced performance during the last evaluation period.</li> </ul>	<p>guidance and supporting tools for planning, monitoring, evaluating and closing a collaboration or formal partnership.</p> <ul style="list-style-type: none"> <li>• The Toolkit captures monitoring and performance plans during the planning phase, and reviews this during the evaluation phase.</li> <li>• Written agreements include risk management guidance and instruction where collaboration activities are to be conducted on our premises (in the form of an appendix), which will be supported further by the awaited Collaboration Risk Assessment.</li> </ul>	<p>collaboration activities are to be conducted on our premises:</p> <ul style="list-style-type: none"> <li>○ partners and their staff</li> <li>○ any accompanying visitors (i.e., members of the public)</li> <li>○ AF&amp;RS staff based at the premises to be used.</li> </ul>
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<b>CIPFA/SOLACE Principle G</b> 'Implementing good practices in transparency, reporting and audit to deliver effective accountability'		
Supporting Evidence	Actions Implemented in 2022-23	Actions / Improvements Planned 2023-24
<b><u>Implementing Good practices in Transparency</u></b> <ul style="list-style-type: none"> <li>• Website up to date with Transparency Code and Local Publication Scheme information.</li> <li>• AFA Meeting minutes, reports and committee papers all published online.</li> <li>• Incident data is published to aid responses to FOI requests.</li> <li>• Annual Performance report produced and published on Internet.</li> </ul>	<ul style="list-style-type: none"> <li>• Templates for transparency requests reviewed to maintain legal requirements and provide greater clarity with aim to reduce requests for Internal Review.</li> <li>• 378 requests were processed in 2022/23 under the Freedom of Information Act (FoIA) 2000, with 97% responded to within legal deadline.</li> <li>• 88 requests were processed under other legislation or transferred.</li> </ul>	<ul style="list-style-type: none"> <li>• Review of all transparency templates to meet Data Management Fire Standards, while ensuring legal requirements are still met.</li> <li>• Continue meetings with Information Asset Owners to confirm procedures are in line with Data Management Fire Standards and legal requirements.</li> </ul>

	<ul style="list-style-type: none"> <li>• One Fol case progressed to First Level Tribunal, in joint party with the ICO, resulting in judgement that our actions were upheld.</li> <li>• One data protection case appealed to the ICO, resulting in decision that our actions were upheld.</li> <li>• 1 x Fol case requested Internal Review, resulting in assessment that process was performed correctly.</li> <li>• Meetings with Information Asset Owners responsible for commonly requested data to confirm procedures for collating, legal requirements, and potential exemptions.</li> </ul>	<ul style="list-style-type: none"> <li>• Investigate financial and resource costs for publishing a Disclosure Log to cut repeat and duplicate requests.</li> </ul>
<p><b><u>Implementing good practices in Reporting</u></b></p> <ul style="list-style-type: none"> <li>• Modern Gov system provides effective reporting tool.</li> <li>• Final Accounts Report, VFM, Efficiency Returns, Policy Documents, Budget Monitors and Outturns are in place and produced consistently in a timely basis.</li> <li>• Level of Council Tax, Spending within Budget, MTFP, well managed and timely capital programme.</li> </ul>	<ul style="list-style-type: none"> <li>• The introduction of Modern.Gov for report writing and production of packs for Members ensured a clear chain where reports pass through appropriate Senior Managers/Lead Directors, to 'take ownership' of reports and carefully check accuracy.</li> <li>• 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.</li> <li>• The MTFP and supporting narrative report updates include information on key concerns and risks considered, as well as budget setting assumptions and justifications.</li> </ul>	<ul style="list-style-type: none"> <li>• Continued use of Modern.Gov and the Corporate Forward Plan to improve version control and reporting efficiency. Ensuring Senior Managers/Leads 'take ownership' of report accuracy. Open papers published a week before meetings and approved minutes published.</li> <li>• Continued use of separate AFA website for the publication of agendas and papers and key governance documents, including the revised 'Constitution Repository'.</li> </ul>

<p><b><u>Governance, Assurance &amp; Accountability</u></b></p> <ul style="list-style-type: none"> <li>• Annual Governance Statement (AGS) produced each year, with actions for improvement identified and presented to the AGECE for approval.</li> <li>• Internal Audit Plan, reports and recommendations, External Audit, Value for Money Audits. Circulated to the SLT and AGECE for consideration and approval.</li> <li>• SLT and AGECE are updated on progress of corrective actions and recommendations for consideration and sign off.</li> <li>• Compliance with the Chartered Institute of Public Finance and Accountancy (CIPFA).</li> <li>• Standing Orders and Financial Regulations reviewed on an annual basis and updated for AFA approval.</li> <li>• Statement on the Role of the Head of Internal Audit (2010) and compliance with Public Sector Internal Audit Standards.</li> <li>• Regular HMICFRS inspection process in place, and findings acted upon.</li> <li>• Annual audit schedule is agreed by the AGECE and implemented which focuses on key areas of risk to provide assurance to Members.</li> </ul>	<ul style="list-style-type: none"> <li>• Corporate Forward Plan was updated and used to ensure agendas were populated appropriately throughout the year.</li> <li>• Progress on Internal Audit recommendations, Audit reports, and external audit annual report presented to SLB, SLT and AGECE to ensure FA members are updated.</li> <li>• The HMICFRS Round 2 Inspection Action Plan progressed which is designed to address the 22 'areas for improvement' included in our Round 2 inspection report is regularly monitored by the Service Leadership Team and scrutinised by the AFA's Performance Review and Scrutiny Committee.</li> <li>• The Local Government Associate (LGA) hosted Governance Workshop took place in December 2022 and identified 'focus areas' for an Independent Governance Review.</li> </ul>	<ul style="list-style-type: none"> <li>• AGS draft to be presented to AGOC June 2023 and published when finalised.</li> <li>• Corporate Forward Plan for 23/24 to be updated but waiting for Constitution to be updated following Governance Review, and dates of Committees to be confirmed.</li> <li>• Performance information, Audit reports, and Internal Audit Management Actions will continue to be presented and monitored by SLB/SLT and AGOC in 23/24.</li> <li>• Round 3 HMICFRS inspection in Q1 of 2023/24. Findings from the published report will be addressed through the development of a Round 3 action plan (including the local recommendations from HMICFRS' Spotlight Report on values and culture in fire and rescue services published in March 2023) with assigned responsibility and timescales for all areas of improvement. Our HMICFRS Inspection Action Plan is regarded by AFA as a 'priority programme' and will be overseen by the AGOC.</li> <li>• New Governance structure to be introduced during the 2023/24 municipal year in accordance with the decision of AFA to accept the recommendations of the independent Governance Review comprising of the AFA and two committees, namely PRC and AGOC.</li> </ul>
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<p><b><u>Collaboration: Assurance &amp; Accountability</u></b></p> <ul style="list-style-type: none"> <li>• Collaboration Framework and toolkit in place to provide the necessary assurance, risk management and understanding of accountability in place when working in partnership.</li> <li>• A Collaboration and Partnership Working Update report is provided to PRSC on a six-monthly basis.</li> </ul>	<ul style="list-style-type: none"> <li>• The previous Collaborative Working Framework and Operational Guidance has been reviewed, and replaced with the newly published Collaboration Framework 2023, and Collaboration Procedures &amp; Toolkit 2023, which together provide collaborators with guidance on the following: <ul style="list-style-type: none"> <li>○ Framework - outlines the Service's approach to, and core principles of, collaboration</li> <li>○ Procedures &amp; Toolkit - provides collaborators with step-by-step guidance and supporting tools for planning, monitoring, evaluating and closing a collaboration or formal partnership.</li> </ul> </li> <li>• The Toolkit captures partner roles and responsibilities during the planning phase, and reviews this during the evaluation phase.</li> <li>• All written Collaboration and Partnership agreements (e.g., Memorandums of Understanding (MOUs) Service Level Agreements (SLAs) include clear roles, responsibilities, and commitments of each party, and jointly agreed governance arrangements.</li> </ul>	<ul style="list-style-type: none"> <li>• Enhance and formalise clear and meaningful collaboration reporting lines across the Service to ensure that the appropriate managers: <ul style="list-style-type: none"> <li>○ are aware of collaboration activities within their departments.</li> <li>○ review and sign off collaboration proposals and written agreements during the planning phase.</li> <li>○ review and sign off evaluation outcomes and performance evidence during the evaluation phase.</li> <li>○ review and sign off closure reports.</li> </ul> </li> </ul>
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