Item 26/24 Appendix A

Audit Improvement Plan Activities

DORSET & WILTSHIRE
FIRE AND RESCUE

Audit Improvement Plan Activities

KEY FOR RECOMMENDATION PRIORITY

Priority 1	- Findings that are fundamental to the integrity of the Service's business processes and require the immediate attention of management.
Priority 2	- Important findings that need to be resolved by management.
Priority 3	- Findings that require attention.

ICT Asset Management – Assistant Chief Officer – Director of Corporate Services

Main Finding	Priority	Management Response	Implementation Plan	Management Update	Progress
The DWFRS Asset Management Policy Statement states, "Has effective information and communication technology which enables the efficient delivery of its services". There are multiple findings that affect the confidence of the accuracy of the information in the ICT Inventory; we found issues around policies as mentioned above and we noted that the asset management system is manual via free text entry and therefore there is a risk of human error whenever there is an addition or change to asset information. We also confirmed that there is similar asset information across multiple sources and systems including Notes, Operational Communications internal spreadsheets and Operational Communications managed systems. This results in decreased efficiency of service as multiple sources of information		Work is already underway to implement Manage Engine Asset Management processes. This involves moving process off NOTES systems, and collation of a single source of the truth regarding ICT assets. This information will need to be accessible by all and meet several departmental requirements in relation to understanding what they own, procure, align and prioritise business continuity with. Data cleansing will occur as part of this work to assure a good	**Recommendation/Corrective Action:** • Collate all Asset information into one system, this is the plan with Manage Engine. • Remove all redundant sources of information where applicable. • Perform a data sanitisation exercise for all asset information before migration to the Manage Engine Asset Management System. **Responsibility:** Head of ICT **Revised Target Date:** 28 February 2026	Asset management is within one system and being managed accordingly. Policy and processes in place to assure recording through a single source for ICT assets. Assets being managed effectively and controlled with up to date information.	Complete

are required to be updated if there is a change to an asset.		standard of information within the new system and can continually be maintained in business as usual.			

People Development – Assistant Chief Officer - Director of People Services

Main Finding	Priority	Management Response	Implementation Plan	Management Update	Progress
DWFRS has developed a strong and well-documented framework for people development, with defined processes in place for 1:1 review, leadership development, Succession Planning (SP), and promotion. Each is supported by structured procedures, such as the ED 2 Uniformed Promotion Procedure, ED 12 Development Pathways and CPD Procedure, and the Succession Planning Guidance (March 2025) — and corresponding tools, including the 9-box grid for talent identification, career progression flowcharts, and a comprehensive suite of leadership development programmes. Despite this strong foundation, audit testing identified that these processes are not formally integrated in practice. There is currently no system-level prompt, data link, or structured mechanism to ensure that information from one process (e.g. SP risks or development needs) is actively used to inform another (e.g. leadership training allocation or promotion decisions). For example:		The importance of an integrated workforce and succession planning process that links to our promotion and progression activities is recognised and fully supported. Since the launch of the 1:1 system in 2020 there was always an ambition that this would be the first stage in the development process. However, each of the key linked processes highlighted (promotion process and our leadership offering) have undergone further reviews/changes or did not have sustained funding to support the realisation of these plans. We are close to finalising the Crew and	**Recommendation/Corrective Action:** A. Introduce a shared development prompt or field within the 1:1 review process to ensure managers record links to promotion readiness, SP flags, or leadership development activity. B. Provide existing training materials or written guidance to all line managers to support consistent use of the 1:1 process for development planning and linking outcomes to succession and promotion pathways. C. Progress will be measured by tracking	This is being considered as part of the transition to the new HRMIS system which will see the introduction of a new 1:1 process and associated guidance. The new HRMIS system is anticipated to be live by August 2026.	On Track

• The 1:1 review template does not include a prompt to reference SP outputs or promotion readiness. • Leadership development attendance is prioritised based on SP indicators. • Promotion assessment forms do not include a reference to the candidate's development plan or 1:1 outcome. These observations were supported by feedback from interviews with the Leadership and Organisational Development Lead, HR Lead for Promotions and Succession and the Senior HR Officer, who confirmed that the four processes often operate in isolation, with linkages depending on individual manager discretion rather than embedded process. The current separation limits the organisation's ability to take a joined-up approach to workforce and leadership planning. Without structured integration, there is a risk that development needs are identified but not acted upon, or that succession risks are not addressed through coordinated development or promotion opportunities.		Watch Manager promotion processes and now have a sustainable approach to our leadership development that will enable this integration to begin to take shape. Detailed guidance documents are in place for all staff and line managers. This also includes 'How To' videos to ensure individuals get the best out of their 1:1 one to one. The accompanying procedure also enables a discussion to take place should the individual wish to be considered for future promotion opportunities. A key focus of our Digital Transformation programme is to move away from Lotus Notes to Office 365. The 1:1 process is a Notes based system and the ability to amend the current system is limited as we do not have Lotus Notes developers. A new 1:1 system is part of the programme of work, and this is due to	completion of manager training and inclusion of the new prompt in all 1:1 templates. **Responsibility:** HR BP & Employee Relations Manager **Revised Target Date:** August 2026		

		be completed by the end of April 2026. This does therefore impact on our ability to undertake some of the recommendations and associated delivery timescales. As a result, the following response is proposed: - A) Existing 1:1 Guidance Notes will be reviewed to ensure Managers include a discussion about promotion readiness that can be recorded with the 'Development' section of our current 1:1 process. This can be replicated in the new 1:1 system when built. The Guidance Notes will also reference any Leadership Development activities that the individual can access, ensuring this is also recorded on the Development Plan to ensure this is tracked and followed up. B) We do not have the resources to undertake Manager Training sessions and therefore will need to rely on Managers taking			

		time to familiarise themselves with the changes to the Guidance Notes and accompanying communications. i) Once the Guidance Notes have been updated Managers will be made aware of this update, to enable them to refresh their knowledge and awareness. ii) We will also ensure that they newly developed Management in Lifesaving makes reference to this. C) Completion of this task will need to be confirmed through existing SDT reporting arrangements, with Managers responsible for undertaking spot checking of 1:1s undertaken within their teams/department. The Standards and Assurance Team could complete a quality assurance check of this work.			

Main Finding	Priority	Management Response	Implementation Plan	Management Update	Progress
The 1:1 review process is a key part of DWFRS's people development framework, supported by clear policy (ED 9 – 1:1 Review Procedure V2.0) and user guidance for staff and managers. These documents outline expectations for discussions on performance, wellbeing, development goals, and behaviours aligned to the Core Code of Ethics. Audit testing confirmed that 1:1 completion is well-monitored, with Q1 2025 data showing a strong compliance rate of 90%. The Collect system provides alerts, and People Partners follow up on outstanding reviews. This reflects positively on DWFRS's commitment to regular staff engagement. However, a review of 20 anonymised 1:1s (One to Ones for Audit – June 2025) showed variation in content quality. While some reviews included clear development actions and wellbeing discussions, others were brief, lacked follow-up, and made little or no reference to progression. This variation appears to stem from differing manager approaches. As confirmed by the Senior HR Officer, the People Team monitor completion of 1:1s but does not quality assure content unless concerns are raised. Without consistency checks or development prompts, there is a risk that 1:1s become transactional rather than developmental, limiting their value for progression and workforce planning.		1) A review of the existing guidance can include the development of a checklist which can be added to the 1:1 guidance material. 2) Through existing reporting mechanisms, SDT meetings, Managers can confirm that they are using the checklists to support completion of 1:1 reviews. 3) With the introduction of a new Compliance and Investigation Team, consideration could be given to future monitoring and quality assurance by this team once fully established and embedded.	**Recommendation/Corrective Action:** Develop and roll out a short manager briefing and checklist to support consistent completion of 1:1 review. The checklist will focus on ensuring that discussions capture development goals, promotion interest, and behavioural feedback aligned with the Core Code of Ethics. The success of this action will be measured by: • Incorporation of the checklist into 1:1 guidance material, and • Managers will be accountable for ensuring the checklist is used consistently during 1:1 reviews, with compliance monitored through existing quarterly reporting mechanisms rather than direct oversight by HR People Partners. **Responsibility:** HR BP & Employee Relations Manager **Revised Target Date:** August 2026	This is being considered as part of the transition to the new HRMIS system which will see the introduction of a new 1:1 process and associated guidance. The new HRMIS system is anticipated to be live by August 2026.	On Track

Main Finding	Priority	Management Response	Implementation Plan	Management Update	Progress
DWFRS's promotion process is well-structured, fair, and aligned with national frameworks such as the National Fire Chiefs Council (NFCC) Leadership Framework. Clear guidance, standardised scoring tools, and behavioural assessment criteria support consistency and transparency across promotion decisions. As confirmed during the interview with the Strategic HR Lead for Promotions and Succession Planning, while some managers informally consider this information, it is not recorded or embedded in the process. This limits the service's ability to ensure promotion decisions are informed by prior development activity or aligned with succession and workforce planning.		We can address these actions by making some straightforward updates to our promotion process: • Add a question to the promotion application and panel member guidance/forms asking if the candidate has a current development plan or is flagged for progression through succession planning • Ensure these updated forms which are used in all promotion processes, from Crew Manager to Area Manager • Ensure clear guidance is given to all panel members on how to use this information when making decisions through panel briefings and on any written guidance which exists	**Recommendation/Corrective Action:** A. Add a prompt to promotion application and panel assessment forms asking whether the candidate has a current development plan or is flagged for progression through SP. B. Ensure updated forms are used in all promotion processes (Crew Manager to Area Manager). C. Provide brief written guidance to promotion panel members on how to use this information when making decisions. **Responsibility:** Head of People Support **Revised Target Date:** August 2026	Once the promotions process has been integrated into the new HRMIS system, we can look to add a flow to include succession planning as part of the 121 process and feed into the promotion process. The new HRMIS system is anticipated to be live by August 2026.	On Track

Culture Plan – Assistant Chief Officer - Director of People Services

Main Finding	Priority	Management Response	Implementation Plan	Management Update	Progress
While new staff are introduced to the Core Code of Ethics during recruitment and onboarding, and assessed against these, existing employees are not consistently required to formally acknowledge these standards. However, there is no embedded process in place for existing staff to acknowledge the organisation's Code of Ethics and associated culture related behavioural expectations. We are aware that various avenues to introduce a refresh of the standards expected by staff is in a work in progress. However, the lack of this can create a gap in reinforcing ethical expectations across the full workforce. Without a consistent acknowledgement process, there is a risk that ethical standards may be unevenly understood or applied, weakening cultural alignment and accountability across the organisation.		This is acknowledged in our existing plans to update and re-issue DWFRS employee contracts. This will be further enhanced by the imminent introduction of a digital Code of Ethics resource which will include records of completion.	**Recommendation/Corrective Action:** Fully embed a formal process for all staff to periodically acknowledge the Code of Ethics and culture related behavioural standards. For example, through digital signatures, to ensure consistent understanding and endorsement of organisational values **Responsibility:** EDI Manager **Target Date:** 31 March 2026 – Digital CoE resource 30 June 2026 - Updated Contracts of Employment	A digital Code of Ethics resource is being finalised with the L&OD team and due to be launched imminently. Updated contracts of employment requires more work as a result of the Employment Rights Act. Contracts may be updated by our current target date but may not have been issued to staff due to the significant volume of work this entails.	On Track
Main Finding	**Priority**	**Management Response**	**Implementation Plan**	**Management Update**	**Progress**
Management has indicated that the current Culture Action Plan and Culture Delivery Plan have been outgrown, with closure of both imminent. This signals a transition point in the organisation's cultural journey and presents an opportunity to reflect on progress and shape future direction. However, there is no structured process in place to capture lessons learned from the lifecycle of the plans. Without a clear approach to review outcomes, assess effectiveness, and share insights, valuable		A lesson learnt exercise will be undertaken on delivery of the Culture Action Plan which will consider the content of this audit as well as the audit being undertaken by Practice to Progress and any additional HMI feedback following their re-visit. These areas of	**Recommendation/Corrective Action:** Perform a lesson learned exercise on the close of the action plan to identify areas that worked well, and improvements required for evolving cultural priorities **Responsibility:** EDI Manager	The next iteration of our cultural journey, incorporating recommendations and other priorities is currently in development. Processes and practices that worked and all improvements will be	Complete

learning may be lost, and future planning may lack the benefit of past experience. A structured transition process will be essential to ensure cultural momentum is sustained and future plans are informed by meaningful insight.		learning will help inform our approach going forward.	**Target Date:** 31 March 2026	considered and documented as part of this process.	

Overtime (and Secondary Contract) Management – Assistant Chief Fire Officer – Response

Main Finding	Priority	Management Response	Implementation Plan	Management Update	Progress
Testing of 12 overtime claims submitted through the Gartan system found that in five cases (dated between December 2024 and May 2025) the approver's service number matched that of the claimant. Three of these claims were for Watch Managers. When we discussed the authorisation process with the Employee Relations Manager, they confirmed that Gartan has no built-in system controls to prevent employees from authorising their own overtime claims once submitted. When we explored whether any secondary or compensating controls exist to mitigate this weakness, we were informed that the Employee Relations Team "sense check" Gartan and e-Claims data and raise anything which looks obviously incorrect. However, they do not carry out any substantial checks prior to processing which would mitigate this weakness. The team work on the premise that all claims they are sent have already been properly reviewed prior to authorisation and they treat all claims as valid for payment.		Changes will be made to Gartan to remove the ability for members of staff to sign off their own overtime claims. We have been assured that this will be possible, but we will need to submit a change request to Gartan as this will be development work. Work undertaken by Gartan has a minimum turnaround of 90 days unless the importance is increased and then we will pay for development time. An internal monitoring process will be run until the changes to Gartan have been implemented. The ultimate fix will be	**Recommendation/Corrective Action:** Review Gartan user permissions and workflow rules to ensure that no individual can authorise their own overtime. **Responsibility:** Assistant Chief Fire Officer - Response **Revised Target Date:** September 2026	Following discussions with Gartan and consideration of options, concerns remain that the system does not fully meet the Services' requirements. Gartan will now undertake full development analysis and scope the implementation of a secondary level authorisation process at the timesheet/pay claim stage. This will better align with the intended governance and assurance requirements.	On Track

This issue is compounded by discussions with a Station Manager interviewed during the audit, who expressed that Watch Managers are able to submit and approve their own overtime within the Gartan system. Allowing staff to approve their own overtime claims removes a fundamental segregation-of-duties control, increasing the risk of: - unauthorised or inaccurate payments being processed; - potential misuse of the overtime process; - reputational and financial exposure if irregularities occur. System configuration in Gartan appears to permit approval rights to be retained by claimants in certain circumstances (e.g. small teams, watch management level) without enforced segregation.		dictated by Gartan development time, but this may take up to 6 months to be implemented. As an interim measure, the compliance and investigation office will carry out a monthly dip test of whole time Watch Managers overtime claims to ensure that they are a true reflection of the work undertaken.			

Financial Controls – Director of Financial Services & Treasurer

Main Finding	Priority	Management Response	Implementation Plan	Management Update	Progress
CONTRACT MANAGEMENT The current approach to contract management lacks consistency across the Authority and records are not always maintained. Existing procedures outline roles and responsibilities, but there is a lack of implementation guidance. Additionally, the Procurement Team do not currently have assurance that all contracts are being managed effectively due to a lack of monitoring and oversight. To address this, contract management training was delivered in November 2025 and the Procurement Manager is in the process of introducing a Contract Management Guide, supported by standardised templates, the introduction of a formal handover document from tendering to contract management and a centralised filing system with spot checks to ensure transparency, accountability, and compliance. Additionally, the Services contract management e-learning modules are being refreshed, and staff will be required to complete this training annually. Collectively, these changes aim to mitigate unmanaged contracts, improve performance monitoring, and deliver a robust, auditable framework for contract management going forward.		Since the implementation of the UK Procurement Act 2023 on 24 February 2025, the Service has completed a detailed review of its policies and procedures, including its approach to contract management to ensure compliance. Training via an external provider was delivered to officers in Q3 2025-26 and e-learning content will also be refreshed in Q4 2025-26. This, alongside the additional documentation, will give contract owners sufficient knowledge and guidance to ensure appropriate levels of contract management are ongoing for our contractual arrangements. Monitoring and oversight processes including spot checks will be implemented in Q4 2025-26. This will include an internal escalation process so	**Recommendation/Corrective Action:** We will ensure that the programme of work to improve the contract management process is rolled out on a timely basis and monitoring to ensure contracts are being effectively managed is carried out regularly. **Responsibility:** Procurement Manager **Target Date:** 28 April 2026	The Procurement Manager has now completed and finalised the Contract Management Guidance, other guides, templates and information sheets.	Complete

		responsible Directors within the Strategic Leadership Team will have oversight of the contact management being completed in their respective areas.			

Procurement – Director of Financial Services & Treasurer

Main Finding	Priority	Management Response	Implementation Plan	Management Update	Progress
The Procurement Plan has an action plan, however, the actions identified do not align with the outcomes outlined in the 'how will we get there' section. There is a risk that objectives may not be achieved, as actions do not directly support the Plan's intended outcomes, leading to ineffective delivery and poor accountability.		The Procurement Plan is an internal planning document for the Procurement team for the period 2026 – 2028. It has recently been refreshed to align to the significant changes made as part of the Procurement Act 2023, which officially went live from 24 February 2025. The document is reviewed on a quarterly basis with the Procurement team, and the action plan section therefore focuses on quarterly and annual tasks that need to be completed by the team locally. This report finding is noted, and the content of the plan will be expanded to include a focus on the strategic aims of the team over the period and how the team will meet the intended outcomes.	**Recommendation/Corrective Action:** The Action Plan update is underway and will be reviewed and approved by the Director of Financial Services once it is complete. **Responsibility:** Procurement Manager **Target Date:** 30 March 2026	The Action Plan update has been completed and has been approved by the Director of Financial Services.	Complete