

Dorset & Wiltshire Fire and Rescue Authority Annual Governance Statement 2018-19

Scope and Responsibilities

Governance is about how organisations ensure that they are doing the right things, in the right way, for the right people, in a timely, inclusive, open, honest and accountable manner. It comprises the systems and processes, and cultures and values, by which local government bodies are directed and controlled and through which they account to, engage with and, where appropriate, lead their communities.

The functions and responsibilities of Fire and Rescue Authorities are set out in the Fire and Rescue Services Act 2004 which came into effect on 1 October 2004. Under this Act, every Fire and Rescue Authority must make provision, in its area for:

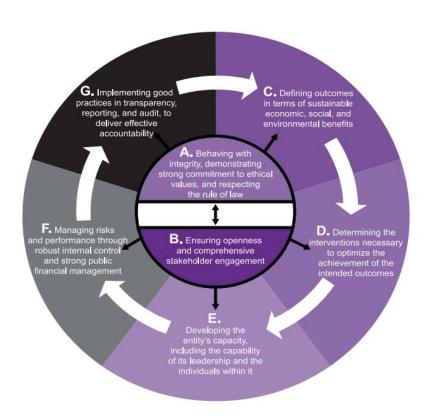
- Promoting fire safety
- Extinguishing fires
- Protecting life and property in the event of fires
- Rescuing people in the event of road traffic accidents
- Protecting people from serious harm, to the extent that it considers it reasonable to do so, in the event of road traffic accidents.

In discharging this overall responsibility, the Dorset & Wiltshire Fire and Rescue Authority (the Authority) is responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, which includes arrangements for the management of risk.

The Authority has a Corporate Governance Policy, and this is reviewed annually. The policy aligns to the Chartered Institute of Public Finance and Accountancy (CIPFA)/ Society of Local Authority Chief Executives (SOLACE) 'Delivering Good Governance in Local Government: Framework (2016) publication. In preparing this Annual Governance Statement, the CIPFA/SOLACE framework is used as the benchmark or standard by which to measure against.

The purpose of the governance framework

The governance framework comprises the systems and processes, and culture and values, by which the Authority is directed and controlled and its activities through which it accounts to, engages with and leads the community. It enables the Authority to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost effective services. An outline of the key principles is set out in the following model:



Achieving the intended outcomes while acting in the public interest at all times.

The system of internal control is a key element of the framework and is designed to manage risk to a reasonable level. It cannot eliminate risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable and not absolute assurance of effectiveness.

The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of the Authority's policies, aims and objectives to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

Key elements of our governance arrangements

The Authority has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of effectiveness is informed by the work of the senior managers within the Authority who have responsibility for the development and maintenance of the governance environment, the internal auditor's annual report, and also by comments made by the external auditors and other review agencies and inspectorates. In developing our annual Statement of Assurance document, we review our arrangements against the CIPFA framework.

The seven key areas of the governance arrangements include:

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

Members have agreed a clear set of values underpinned by a behaviour framework. This is a core element of the performance management system and underpins their agreed development process. There is a Member 'Code of Conduct' that builds on the Seven Principles of Public Life (the Nolan Principles), and this forms part of the Members' Handbook.

Members receive ethical awareness training as part of their constituent authority training programmes, and this is supplemented by the Authority, with Members having access to our e-learning packages. Where necessary Members are required to make a declaration of interest at each of their formal meetings as part of a standing agenda item. The Authority relies on the Standards Committees of constituent authorities to avoid inefficient working.

New members of staff attend a comprehensive induction programme and complete a probation process. Personal reviews take place on an annual basis, although these are on hold for 2019, whilst we review our process.

Our values and behaviours framework 'RESPECT' is well communicated in public receptions and workplaces, is included in core documents, such as corporate plans, and more widely via the website and intranet.

Decision-making is guided by the values agreed by the Authority, and this is overseen by the Chair and the Clerk & Monitoring Officer.

Protocols for partnership working are considered on a case-by-case basis within the framework of each partnership.

Statutory compliance remains at the centre of all planning and delivery discussions. Comprehensive assurance processes support the demonstration of this compliance. Members have referenced this within their constitution, policies and the Members' Handbook.

The roles of the key Statutory Officers are detailed in the Members' Handbook, which is published on the Service's website.

Compliance with CIPFA's Statement on the Role of the Chief Financial Officer in Local Government occurs through an annual review against the five key principles and subprinciples within the CIPFA Statement, and assurance is given through the Annual Governance Statement.

Anti-fraud and corruption procedures exist, and an annual assurance is provided. The whistleblowing procedure is available to members of the public, employees, partners and contractors via the website. The complaints procedure is well publicised and there is a structured process of Officer and Member scrutiny.

A register of interests and a register of gifts and hospitality is also maintained. The Strategic Planning and Corporate Assurance department supports structured and well governed committee processes and legal advice is provided by Dorset Council through a Service Level Agreement. The Clerk & Monitoring Officer or Deputy Clerk & Monitoring Officer provide legal advice to Members at each of their meetings.

The Authority has agreed an Equality, Diversity and Inclusion Policy.

Principle B: Ensuring openness and comprehensive stakeholder engagement

Values that incorporate an open culture have been agreed. A local transparency code exists and is monitored by Officers to ensure compliance. The Authority provides fully transparent reports that are available via its website or in hard copy format upon request. The Authority also produces an annual report.

The Clerk & Monitoring Officer or Deputy Clerk & Monitoring Officer and respective chairs ensure decision-making is open about actions, plans, resource use, forecasts, outputs and outcomes. Part 2 (confidential) papers have been challenged by Members and moved to Part I.

Meeting report templates clearly identify rationale, risks and resources and key decisions (Part II only considered by exception).

All reports follow an agreed and structured process. Statutory Officers and technical support are present at meetings to support Members in reaching their decisions. All formal meetings are supported by pre-briefings for Chairs to further enhance sound decision-making. A calendar of committee meeting dates operates and is monitored for submitting, publishing and distributing timely reports.

The priorities of the Authority have been aligned to the outcomes and success factors contained within key partnerships. Officers have a process of structured attendance at key partnerships and local democratic arrangements such as Area Boards and localities. Officers shape and work within the partnership frameworks that exist on a case-by-case basis.

There is a good history of public consultation over significant issues affecting the community and external stakeholders. Any proposals for significant change to service delivery affecting the public will be supported by a consultation process.

The Service has a structured process of external communication with the principal mechanisms being the website and face-to-face interactions at key partnerships and local democratic arrangements. The Service has drawn upon the joint needs assessment processes that exist. An evaluation framework is being developed to strengthen this relationship.

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

The Authority's Community Safety Plan sets a clear vision and intended outcomes. The Service Delivery Plan translates this through the Service, linking clear actions/projects and tasks for individual teams to key lines of enquiry, which in turn link to the key priorities via the planning, risk and performance management arrangements. These corporate plans are underpinned by the Medium-Term Finance Plan (MTFP).

The Community Safety Plan sets out the longer-term direction of the Authority and the outcomes for the community. Members and Officers receive regular and structured performance reports against all aspects of its priorities. These are tailored at a local level through Local Performance and Scrutiny Committees led by Members and accessible to members of the public. All performance reports are made available via the website.

The risks of not achieving the Authority's priorities are identified and managed through senior Officers and Members at the Finance & Governance Committee, where regular structured reports are considered and supported by the risk management systems.

The capital programme directly aligns to the Community Safety Plan. In support of longer-term planning there are a number of associated plans in place or being reviewed and developed as part of the continued process of harmonisation (e.g. property, ICT, fleet).

An integrated property asset strategy for land and buildings has been developed in harmony with wider public thinking such as the One Public Estate initiatives.

Our procurement procedures identify our commitment and adoption of the Public Service (Social Value) Act 2012, which ensures that pre-procurement deliberations are undertaken if there are economic, social and environmental well-being issues in connection with public services contracts.

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

Members and Officers receive structured reports to support sound decision-making. Business cases outlining options for interventions are considered. All reports and considerations are aligned to the priorities of the Authority and have a risk assessment.

The Authority has a structured and robust process for strategic and operational planning. This is supported by a performance framework comprising key lines of enquiry, actions, projects and key performance indicators, and a structured process of performance review and monitoring supporting senior officer and Member decision-making.

The Service has a structured approach to internal engagement that has a clear delivery plan. This is monitored on a quarterly basis by senior Officers; Internal Audit have reviewed the approach and delivery and have been very positive. Whilst media management, website and attendance at partnerships is considered good, work is ongoing to strengthen external communication and engagement.

Risk management is well developed within the Service and the Authority. It is also a significant feature of other key partnerships. Where significant resource commitment may be needed, more careful assessment is undertaken.

Community risk is determined in consultation with Local Resilience Forums and an operational capability assessment is undertaken each year.

Delivery and planning arrangements are kept under constant review with regular monitoring. Key performance indicators (KPI) operate at both corporate and departmental level and are integral to the performance management framework. An electronic performance system includes these KPIs and displays them on a daily basis to Officers and Members. Members receive quarterly performance reports.

The Service has a structured process of performance reporting. The Information, Knowledge and Communications department is responsible for ensuring accurate and timely data to support this regime. Information management systems continue to be harmonised or aligned to support this regime.

The Medium-Term Finance Plan and the associated budget-setting process is aligned to the Community Safety Plan, and the strategic priorities and finance seminars with Members support this.

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

The Service is engaged with a large number of local and regional partnerships to improve efficiency and effectiveness in delivering strategic priorities. These flow across all priority areas and are reviewed regularly, with key issues and opportunities discussed with Members.

The Service has strengthened its approach to workforce development and reform and succession planning, with good arrangements for monitoring and managing day-to-day needs. Identifying, developing and displaying leadership is central to the approach to organisational development.

There are good working relationships between Officers and Members. This is supported by clear protocols, schemes of delegation and regular meetings. All meetings have clear Terms of Reference to support this relationship. Member champions are in place and active.

Members and Officers regularly review, and amend as appropriate, the Scheme of Delegation, Standing Orders and Financial Regulations.

Members have an induction process and a programme of seminars to support their development in specific areas or understanding of new legislative requirements. Members have an agreed Member Development procedure.

The chairs of committees attend external conferences, meetings and seminars to ensure that they have the right knowledge and understanding to drive effective decision-making.

Officers and Members are active at a national and local level to help ensure that Service and individual leaders are effective in their role. There is a good history of welcoming and responding positively to external challenge.

The Service continues to work towards a number of external standards and accreditation with subject-specific inspections undertaken.

Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) independently inspects all fire and rescue services, assessing and reporting on efficiency, effectiveness and leadership. The Service was subject to its first inspection in November 2018 and the inspection report is due for publication in June 2019.

The Health and Safety Policy was reviewed in 2019 and this sets out the key requirements and expectations for the Service. The assurance framework checks that the Service is continuing to deliver against the commitments made in our Health and Safety Policy Statement.

Our health and safety process has been inspected and assessed by the British Standards Institute (BSI) and was identified as 'an example of good practice'. The Authority has achieved the BSI 18001 accreditation across the whole Service area in 2018, and we are now working towards International Standards Organisations (ISO) 45001 - the new international standard for occupational health and safety. In addition, the Service monitors a suite of corporate indicators against a common performance tolerance through the Health & Safety Committee, Strategic Leadership Team and the Finance & Governance Committee.

Principle F: Managing risks and performance through robust internal controls and strong public financial management

Risk management arrangements are integral to all aspects of the work of Members and Officers and decision-making is supported by embedded risk assessments.

We have a Risk Management Procedure, aligned to industry best practice and the Corporate Governance Policy, and this is reviewed on a regular basis. It was last reviewed in January 2019.

Performance management arrangements are in place to allow strategic intent to flow down to individuals. The performance framework includes key lines of enquiry, corporate targets and key performance indicators along with key activities to continue to strengthen performance. This is detailed in the Service Delivery Plan and supported by a corporate calendar to provide clear planning, monitoring and review arrangements.

All significant decisions taken by Officers and Members follow an agreed democratic process that includes a report pro forma to capture key issues.

The Authority has well-structured constitutional and democratic arrangements. These have been reviewed by internal audit, and, through the Governance Working Group, were strengthened in 2018. The Local Government Association (LGA) will be visiting us in June 2019 to conduct an independent peer review of governance.

Scrutiny and oversight operates well, with a good and open relationship between Members and Officers.

The democratic function is supported by a calendar of dates for submitting, publishing and distributing timely reports. This is overseen by the Head of Strategic Planning & Corporate Assurance, Statutory Officers and the Strategic Leadership Team.

A comprehensive assurance framework is in place to support the Statement of Assurance required under the Fire and Rescue Service National Framework and this Annual Governance Statement, required under the Account and Audit Regulations. Supplementary assurance statements in key areas of the Service support these frameworks.

The Authority has an established audit committee function, through the Finance & Governance Committee, with clear terms of reference. Members receive training at each of its meetings. The Committee complies with best practice and in line with the CIPFA guide "Audit Committees: Practical Guidance for Local Authorities and Police" (CIPFA, 2018).

The Authority has effective arrangements in place for the safe collection, storage, use and sharing of data, including processes to safeguard personal data. A clear policy and supporting procedures are in place with specific responsibilities assigned to specialist roles and an Information Governance Group to oversee these. An annual assurance statement further complements quarterly performance reporting.

The Authority has effective arrangements in place, and operates effectively, when sharing data with other bodies to support the delivery of its strategic priorities. Officers also participate in local and regional groups and have jointly supported the development of data sharing agreements.

Our Information, Knowledge and Communications department ensures that data is accurate and timely to support performance management arrangements. Data validation occurs throughout the generation and reporting process. Our information systems migration programme is harmonising management systems to ensure that quality data is provided to Officers and Members.

The Authority has arrangements in place for ensuring effective financial management is undertaken, with an overarching Financial Management Policy. There is a history of good financial management, supported by positive external audit opinions and value-formoney assessments.

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

Members and Officers strive to ensure that reports are written in an understandable style for the intended audience. Officers have undertaken 'Plain English' training as part of the internal engagement strategy. Our Community Safety Plan and website were developed with support from specialists in this area.

The Authority produces its Annual Report to support the Statement of Assurance, Annual Governance Statement and Statement of Accounts.

All annual outturns and reports are scrutinised internally, and then through Members, who formally approve them. Where improvement actions are identified, they are built into the planning, performance and risk management arrangements. All reports are made available on our website at www.dwfire.org.uk. Other examples include transparency reports, pay policy statements etc.

Both external audit and internal audit have direct access to Members and Officers. All internal and external audit reports are presented to the Finance & Governance Committee and any improvement actions as a result are incorporated into the performance management system and overseen by the Strategic Planning & Corporate Assurance Department and senior Officers. Quarterly appraisal of performance against the improvement action occurs by Members.

Review of Effectiveness

The Authority has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of effectiveness is informed by the work of the senior managers within the Authority who have responsibility for the development and maintenance of the governance environment, the internal auditor's annual report, and by comments made by the external auditors and other review agencies and inspectorates.

In addition to the annual review, all ongoing activities, including those designed to strengthen governance, are integrated into the planning, performance and risk management arrangements. The delivery of these activities is reviewed monthly by managers and at least quarterly within Delivery Teams and the Strategic Leadership Team. Activities to address weaknesses and ensure continuous improvement of the system are in place.

Significant Governance Issues and Risks

Since Combination in April 2016 much of the work of the Service has been focused on the harmonisation of policies, practices and procedures with heavy investment in good governance. During this time, we have not identified any significant governance issues of major concern, and all the issues and concerns identified are being managed through our normal performance management processes.

Risks within the Strategic Risk Register, along with any new emerging strategic risks are reviewed on a monthly basis and managed by the Strategic Leadership Team. The Strategic Risk Register is reported to the Finance & Governance Committee at each of its meetings. They monitor risk and make recommendations to the Authority when necessary.

On an annual basis, the strategic risks are reported to the Authority as part of the Annual Governance Statement for the Authority.

The Strategic Risk Register for the Authority currently contains the following risks:

Risk 006 - Failure to secure financial sustainability that ensures and maintains effective service provision.

Risk 009 - Failure to have a robust and financially sustainable On-Call duty system to meet the needs of the Service.

Risk 232 - Failure to transform our workforce to meet the future needs of the Service.

Risk 301 - Failure to protect the Service against cyber threats and attacks.

The strategic risk register for the Authority is available on the Service website at www.dwfire.org.uk as reported at the Finance & Governance Committee.

Cllr Rebecca Knox Chair Ben Ansell Chief Fire Officer & Chief Executive