

Policy Statement	Corporate Governance		
Director	Deputy Chief Fire Officer (DCFO) Derek James		
Date	May 2019		
Overall judgement	Good X Good confidence, no major issues or failings, action plan in place		Best practice arrangements exist, no outstanding issues, high confidence
			Good confidence, no major issues or failings, action plan in place
			No major failings occurred or predicted, key issues exist, action plan in place, some cause of concern exists
	Poor		Failings have occurred or are likely to occur, considerable issues exist, known weaknesses, considerable areas of concern
Supporting Information	CIFPA/SOLACE baseline assessment 2018-19 Information governance annual assurance report 2018-19		
Basis of judgement	The governance arrangements for the Authority are contained within the Members' Handbook which includes roles and responsibilities for Statutory Officers and Members. Members receive an induction and on-going development appropriate to their role, and recognition is given to the skills and knowledge they bring to the position from their role within their constituent authority. Following the streamlining of the Authority and its governance arrangements; the Local Government Association (LGA) will lead a team to inspect the efficiency and effectiveness of these revised arrangements to support the Statement of Assurance.		

The corporate governance policy is assured through a structured process of baseline assessment and supporting assurances provided by relevant heads of department. A comprehensive baseline assessment is undertaken against the CIFPA/SOLACE code of governance 2016. This assessment uses an agreed model that outlines key and supporting principles and provides an indication of the typical evidence that might be proffered. The process by which this is assessment is constructed has been reviewed by internal auditors who have provided a high degree of assurance against the process. No significant governance issues have arisen over the past year or since the establishment of the Authority.

The corporate governance policy incorporates information management arrangements. The Authority is fulfilling its legal responsibilities under the General Data Protection Regulations and Freedom of Information Act 2000. A recent audit has demonstrated that policies and procedures are in place should the Service wish to employ the Regulation of Investigatory Powers Act 2000. Members receive regular reports providing assurance that the Service is demonstrating compliance with requests for information and wider information management legislation. A corporate complaints process ensures complaints are recorded, investigated and resolved within 14 working days. There are also arrangements in place to ensure learning takes place and the delivery of recommendations internally are monitored. These arrangements are monitored managerially and through the Finance & Governance Committee. Requirements under the Transparency Code 2015 are fulfilled and reviewed regularly.

Information security management processes are aligned to the International Standards Organisation (ISO) 27001 but not accredited to it. An Information Governance Group is well established and manages information risks Service wide. Information Asset Owners are clear about their responsibilities to manage their information assets in line with expectations and the role they undertake. Cyber security risk is monitored monthly and processes are in place to keep abreast of evolving risks and assess what actions need to be taken to manage these. It is accepted that the risk of cyber threat is rising at a national level and we are constantly reviewing our approach, alongside our Local Resilience Forums (LRF) and National Cyber Security guidance. Given the significance of this issue it has been put onto the Strategic Risk Register that is monitored by Members through the Finance & Governance Committee.

The Service is a signatory to a number of overarching data sharing protocols across the Service area; and compliant data sharing arrangements exist to support the effective delivery of Service priorities. The policy and procedural framework is now embedded across policy teams and provides staff with a single location for accessing policies, procedures and guidance. The review, consultation and publication of documents is centrally managed to ensure a consistent and robust process which ensures our policies and procedures meet our legal requirements.

There are no significant issues arising from the application of this policy that are not already detailed in the Service delivery action plan or in the strategic risk register.



Policy Statement	Health and Safety		
Director	Deputy Chief Fire Officer (DCFO) Derek James		
Date	June 2019		
	Excellent		Best practice arrangements exist, no outstanding issues, high confidence
	Good	Х	Good confidence, no major issues or failings, action plan in place
Overall judgement	Fair		No major failings occurred or predicted, key issues exist, action plan in place, some cause of concern exists
	Poor		Failings have occurred or are likely to occur, considerable issues exist, known weaknesses, considerable areas of concern
Supporting Information	Health and Safety assurance framework		
Basis of judgement	The health and safety policy is central to almost everything that the Service undertakes. Given its all-embracing nature, the Service has established an internal Health and Safety Committee. This committee meets quarterly and is chaired by the DCFO. The committee comprises key officers and all representative bodies and receives quarterly assurance statements from lead officers from across the Service to help ensure that issues are regularly raised, aired, and resolved. The committee also receives a comprehensive quarterly report which is reviewed to ensure procedures are being adhered to and that trends are within tolerance. Member champions are regularly		

Key Assurance Statements

appraised of the health and safety arrangements and the key issues and are involved in the British Standards Institution (BSI) audit process. The Finance & Governance Committee receive a quarterly performance overview of progress and key issues against the health and safety Key Line of Enquiry (KLOE).

To support the process of assurance the Committee has developed an assurance framework that integrates the expectations set out in this policy. The assurance statement also aligns and supports the BSI 18001 Health and Safety management standard which has been secured by the Service. The assurance framework provides a means for a holistic annual assessment against this important agenda. It also allows both the representative bodies and staff to feedback any concerns or issues. This provides both a reality check and increases understanding and ownership. The Committee has recently reviewed the assurance framework against the policy and believe that the Service has an overall Good position. This was also supported by the recent Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services assessment.

Together these assurances indicate that there are no significant issues or failing occurring or being predicted. As one would expect, there are improvements to further strengthen our arrangements. These are already included in the Service Delivery Plan.

There are no significant issues arising from the application of this policy that are not already detailed in the Service delivery action plan or in the strategic risk register.



Policy Statement	Community Safety		
Director	Assistant Chief Fire Officer (ACFO) James Mahoney		
Date	June 2019		
Overall judgement	Excellent		Best practice arrangements exist, no outstanding issues, high confidence
	Good		Good confidence, no major issues or failings, action plan in place
	Fair		No major failings occurred or predicted, key issues exist, action plan in place, some cause of concern exists
	Poor		Failings have occurred or are likely to occur, considerable issues exist, known weaknesses, considerable areas of concern
Supporting Information	Community Safety Plan 2018-2022 Service Delivery Plan 2019-20 Our approach to Integrated Risk Management		
Basis of judgement	Prevention Our strategic assessment of risk has identified that the number of individuals and householders that the Service needs to engage with to reduce deaths and serious injuries from fire, or to prevent unnecessary hospital stays, is set to increase. We are therefore focused on making sure that we increase the targeting of high risk individuals and		

households, offering a tailored level of support and engagement for those at medium to low risk. We will also continue to deliver an integrated approach to risk management bringing together prevention, protection and response at a locality level to target those most at risk from fire and other emergency events. Our approach will reflect the work that is being undertaken through the National Fire Chiefs Council to ensure that risk assessments align to a national definition of risk as it emerges. We will also continue to work with partners to better use data to identify those most at risk and jointly work to get 'up stream' of the demand for those that require our collective services.

To achieve our aims, we are actively seeking to use our brand and reputation to make people safer from fire related incidents, road traffic crashes and to contribute towards helping people to make positive health and lifestyle choices. Our focus is to help those people who are the most vulnerable by effectively targeting our limited resources. We seek to do this by using intelligence and data that is already being used by our partners, such as the Joint Strategic Needs Assessments undertaken by Health and Wellbeing Boards. We also recognise that we need to be able to evaluate what we do and feed this back into the priorities and outcomes of our partners; as well as setting out how we believe we make a positive contribution to reducing vulnerability and improving safety at an individual and systematic level. We are also focused on making sure that all of our interventions provide good value for money and that we are able to provide the same level of service to all individuals within our diverse communities.

We are actively engaged in contributing towards the development of an Office for Data Analytics through our work in supporting the South West Emergency Services Collaboration Programme. This work aims to collate multi-agency data from national data sources across police, ambulance, public health, fire and rescue, local authority as well as the Connecting Care and Troubled Families programmes. The intention is to give all contributing service providers a true picture of vulnerability and demand through facilitating access to the totality of live data held by partners; and apply predictive analytics and visualisation to make possible a joined up and collaborative view on vulnerability, risk and early intervention opportunities. We see this work as a crucial catalyst for even closer working across blue light services, local authorities and with clinical and public health bodies.

Protection

We fully recognise our duty to protect vulnerable people and work with partners to ensure that we have processes in place to provide the right support to those people when they need it. We have a statutory duty to help businesses meet their obligations under the Regulatory Reform (Fire Safety) Order 2005; and we aim to do this in a way that supports business growth and economic prosperity. However, we also take our enforcement role seriously and we have robust, legally compliant processes in place to make sure that public safety is maintained within the built environment.

Our approach to business regulation will continue to meet any emerging statutory expectations associated with the Regulatory Reform (Fire Safety) Order 2005 or new legislation and this work will be fully integrated with our prevention and response activities at a local, service and sub-regional level. Specialist officers and operational crews will continue to work seamlessly to reduce risk and keep people safe within the built environment. Local station action plans are a key part of our approach to integrated risk management. Managers are empowered to use their resources in the best way they see fit to reduce the risk from fire and to keep vulnerable people safe.

The Government's 'Focus on Enforcement' paper (2013) encourages a consistent approach to the advice given to businesses, and in the assessment of compliance. To ensure we have a consistent approach to the advice and guidance given by the fire safety team and to make sure we have in place a common approach to enforcement we have ensured that the majority of fire inspecting officers have now passed a Level 4 Diploma in Fire Safety. This is a recognised national competence level to ensure that fire safety matters are investigated correctly. The achievement of the level 4 diploma is a key part in the development pathway for all fire safety officers. Our approach to development also includes ongoing in-house training which is programmed at appropriate intervals to ensure our staff are able to maintain their competence. Following a recent Continuous Professional Development event, evidence collected suggests 83% of attendees stated they felt they had gained from the event.

Guest speakers are also invited in to provide training in specific areas where we feel there is merit so that we can be assured we are upskilling staff in key risk critical areas. Recent examples of this type of training are Colin Todd, Managing Director of C.S.Todd & Associates Ltd on the Specialised Housing Guide and David Stotesbury LLB (Lond) MA (Cantab), Barrister-at-Law on Fire Safety Law. On each occasion we use the opportunity to open spaces to external partners, thereby sharing learning and maximising value for money within our training budgets. The Fire Safety Team are also working with the Institute of Fire Engineers for accreditation as Life Safety Auditors. This third-party accreditation is achieved by peer review and it is an ongoing live external assessment by a sector competent professional body. Having our staff achieve a level 4 qualification with an accredited body allows us to actively evidences our collective fire safety competence in meeting National Occupational Standards in Fire Safety. The qualification is taken through a blended style of learning, with both optional and mandatory units. This helps us to ensure our work is supported by high levels of technical sector competence and consistency in delivery.

A key area of focus for us is to deliver advice, support and consistent regulation of fire safety standards based upon high risk buildings. Fire safety officers undertake audits on the basis of our risk based system, giving priority to buildings assessed as being of higher risk or outside of operational response areas. We allocate the greatest audit and inspection efforts to premises where a compliance breach would pose a serious risk to the safety of people and

where we have reason to believe that there is a high likelihood of non-compliance with the law. In order to facilitate this, we analyse data, obtained through the Experian data collection system, to deliver an enhanced targeted programme of inspections that complement our prevention and response arrangements which are coordinated through station action plans. This approach ensures we make the best use of operational crews to support our thematic reviews. One area of focus that we have identified as a result of this approach is the need to undertake a programme of audits in care homes. This is as a direct result of several small fires in these types of premises and it is also reflective of a regional and national trend. As well as the audit programme we also use every opportunity to engage with care providers to establish compliance benchmarks and deliver education for health carers and people with physical disabilities.

Resilience

As a Category 1 Responder as defined in the Civil Contingencies Act 2004, we have a statutory duty to take a full and active role in the work of the Local Resilience Forums (LRF) in our area to:

- Assess the risk of emergencies occurring and use this to inform contingency planning
- Put in place emergency plans
- Put in place business continuity management arrangements
- Put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn, inform and advise the public in the event of an emergency
- Share information with other local responders to enhance co-ordination
- Co-operate with other local responders to enhance co-ordination and efficiency

We fully recognise our duties under the Civil Contingencies Act and play an active role in both LRF's that cover our area. We ensure that we are prepared for any emergency by having effective and robust internal business continuity arrangements in place that ensure we are able to fulfil our statutory responsibilities in the event of a large scale emergency. These plans are tested and enable us to effectively support the delivery of LRF plans which are developed in partnership.

Our strategic managers lead and support LRF executive meetings and our territorial group managers support and contribute to LRF business management meetings, ensuring our own plans and response is integrated with partners. Training managers support and contribute to LRF training and exercising meetings, ensuring a joined-up approach which helps to improve efficiency and effectiveness through embedded joint working.

Our Media and Communications Manager also takes an active part in both LRFs warning and informing groups and supports other LRF communication activities such as the NHS winter flu campaign, and the Met Office 'Get Ready

for Winter' campaign amongst a number of others. Each LRF holds regular risk meetings to assess new and emerging risks and to review existing risks. We attend the Risk Review Group and contribute fully to assessments of risk and lead on the assessment of risk in our areas of expertise such as hazardous materials and the training and exercise arrangements for this area.

LRF plans are developed to mitigate the risks set out within the Community Risk Register. We take a full and active part in the process, engaging with Category 1 and Category 2 Responders and the third sector. This ensures an effective and efficient approach to integrated emergency management is in place and we use this information to inform our own Integrated Risk Management Plan, prevention, protection, business continuity and response plans.

LRF Plans are supported by regular training and validated by exercising. These exercises are thoroughly debriefed, and lessons learnt are shared via Joint Organisational Learning, and internal debriefing processes. This information is used to inform future practice and to amend plans where needed. This work is managed by the respective Training and Exercising (T&E) Subgroups of each LRF. Good practice is shared amongst the LRF T&E Groups in the South West via a South West Regional T&E group. LRF T&E Groups also organise and run generic multiagency incident management training, such as: Multi Agency Operational Training, Multi Agency Tactical Training and Multi Agency Strategic Training and we have supported the development of these courses and help to deliver them. Strategic officers are developed further by attending the Multi Agency Gold Incident Command course which is nationally accredited, and we have made a commitment for all strategic commanders to gain the level 7 award in fire service strategic incident command. Training is undertaken to the appropriate level by all of our operational managers to allow them to fully contribute to and support Tactical Coordinating Groups, Strategic Coordinating Groups and other LRF functions and this is reflected in our development pathways for operational staff.

The Resilience Direct website is the tool that is used to provide common access to LRF plans and work packages and it is also used as a common platform during response and recovery operations in a multi-agency emergency, with the intention of ensuring joint understanding of risk and shared situational awareness. All of our middle and strategic officers have access to Resilience Direct for both LRFs. Work is ongoing to extend this access to Resilience Direct Mapping and a multi-agency training plan is in place.

As well as having in place nationally recognised command structures associated with integrated emergency management such as Strategic Coordinating Group (SCG) and Tactical Coordinating Group (TCG), both LRFs make use of a system called 'Operation Link'. This is a telephone conference that can be set up in the early stages of an incident before TCGs and SCGs can be set up, or where there is a need to share urgent real time information across partner agencies.

The Government led Joint Emergency Services Interoperability Programme (JESIP) provides a framework to ensure that emergency service commanders work effectively together at the scene of incidents. We have provided instructors to run JESIP courses and ensured that all our commanders have completed multi-agency training. JESIP is now business as usual and is embedded in our own and LRF command and control protocols.

Response

Our strategic assessment of risk and our experience both locally and nationally indicates that there will be continued pressure on recruiting and retaining on-call firefighters who work in rural areas. This is due to a variety of factors amongst which are, the affordability of housing stock within villages and the fact that people are increasingly working in more urban areas. This results in less recruitment opportunities and means that we need to continue to look at our terms and conditions and the offer we make to enable us to attract, recruit and retain more on-call firefighters and be an attractive employer.

Additional work is taking place to converge the availability and payroll modules in Gartan for all on-call staff so that we reduce the burden placed on managers and remove duplication. An additional module, Gartan Roster, is also being delivered so that we can accurately plan, and record staff work time and link with other key systems. It should dramatically reduce administration and make the day-to-day running of a number of rosters at multiple locations significantly easier and more efficient.

Recruitment campaigns are a regular feature of station work programmes and these are having a positive effect in a number of locations, although retention of on-call staff is an on-going issue. Greater emphasis is also being placed on positive action initiatives at a local level following the successful wholetime firefighter recruitment campaign. Using evidence and research from the Army, a more targeted approach is being delivered to encourage a wider base of female and under-represented groups applying to become on-call firefighters. Examples include visits to gyms, sports clubs and a focus on attending and building relationships with under-represented groups within local communities. The on-call review has also introduced the concept of a specific impact assessment which aim to ensure that new procedures and processes are considered from an on-call perspective prior to implementation.

Whilst our focus is on prevention and protection activities, we must also be ready to respond to emergencies as and when required. We therefore keep our response capability under constant review to ensure that we keep pace with our changing operating environment and risk profile, whether that is as a result of developments in the built environment or other factors such as increased risk of flooding. Our response capability is about having the right people in the right place with the right training and equipment to deal with any reasonably foreseeable emergency and this will remain a focus for us.

We are also working closely with our partners in the Networked Fire Services Partnership (NFSP) to develop joint capabilities where these are appropriate and look to align our ways of working, regardless of our geographical boundaries. We use our Communities Programme and integrated risk management process to ensure our response capability remains relevant, suitable and sufficient and to make certain that we are effectively planning for the future. We also ensure that we learn from every significant emergency that we attend by reviewing our performance at incidents and where appropriate we do this, with our partners.

The Emergency Response Standards introduced by the Authority are life-focused indicators setting challenging targets for a wider variety of incidents. The target response times to life risk incidents reflect the outcomes of research that was undertaken by Exeter University on fire survivability. The corporate target is that on 75% of occasions the first pumping appliance will achieve an attendance time of 10 minutes to all premise's fires; this response time includes call handling, mobilisation and travel time. The Key Performance Indicator's (KPI) to support this target are 90 seconds call handling, 2 minutes turn out time for wholetime or 5 minutes for on-call staff with the remaining 6.5 or 3.5 minutes available for travelling to the incident. The standard for the second pumping appliance is 13 minutes to premises with a sleeping risk e.g. dwellings, hotels, prisons and 15 minutes for non-sleeping risks. The response standard for Road Traffic Collisions is 15 minutes for the first appliance.

Our performance management arrangements associated with our appliance response times also focus on making sure that where we are able to meet our 10 minute response time, that we achieve this on 95% of occasions. Where we fail, then the circumstances associated with this are investigated at a local level in order to resolve any underlying issues. For domestic premises outside of the 10 minute response time, increased prevention activity is undertaken to reduce the risk of a fire occurring in the first place. This is managed through the use of the Pinpoint system which all safe and well advisors, on-call support officers and wholetime crews are trained to use. This complements local knowledge and referrals that are received from partners and those received directly from the public. Whilst the majority of our response standards in areas with wholetime appliances are met, the Service continually monitors and seeks improvements in on-call availability to minimise response times in our more rural areas.

More details of our plans in prevention, protection, resilience and response can be found in the Service Delivery Plan under the respective KLOE's for Priority 1, 2 and 3.

There are no significant issues arising from the application of this policy that are not already detailed in the Service delivery action plan or in the strategic risk register.



Policy Statement	People		
Director	Director of People Services, Jenny Long		
Date	May 2019		
Overall judgement	Excellent Best practice arrangements exist, no outstanding issues, high confiden		Best practice arrangements exist, no outstanding issues, high confidence
	Good	X	Good confidence, no major issues or failings, action plan in place
	Fair		No major failings occurred or predicted, key issues exist, action plan in place, some cause of concern exists
	Poor		Failings have occurred or are likely to occur, considerable issues exist, known weaknesses, considerable areas of concern
Supporting Information	None		
Basis of judgement	Our strategic assessment document sets out a cultural change framework. A revised values and behaviours framework, RESPECT, is in place and this continues to be widely communicated to ensure that it is embedded across the organisation. The framework has been aligned to the Police's ethical framework to help create joint leadership and management opportunities. Our policies and procedures appropriately reference and align to this framework. As a result, RESPECT is now embedded in our corporate induction process; referenced in the introduction to all training courses and has been built into training for authors of policies and procedures. Job applicants are assessed against the values and behaviour framework and we have developed a self-assessment		

for potential candidates to explain the framework, to contextualise the behaviours in workplace scenarios and to ensure the values are a fundamental element of our organisational culture. Following its success in 2018 a new 12-month programme of Masterclasses and strategic updates has been developed and rolled out to our Leaders Forum, consisting of Strategic Leadership Team, heads of department, group managers and corporate equivalents. A Leadership Masterclass programme for station manager and corporate equivalents is also being delivered. These programmes ensure our Leaders have the essential skills and knowledge to lead the service and drive culture change.

We are currently reviewing our approach to personal reviews and a prototype design is being developed with the new process set to be in place by April 2020. This process will support individuals with their personal development needs through a positive discussion about the performance against their tasks and expected behaviours. The resultant action plan is then monitored by managers to help develop and improve performance. As part of our organisational learning, themes from action plans will feed into our leadership development offering. Development pathways include technical elements associated with role family groups, as well as core managerial skills and specific organisational leadership interventions. We have a development pathways prospectus which enables managers and staff to see when and how development interventions can be accessed and in what ways to ensure they are aware of any flexibility that has been built in to meet individual learning styles and needs. We have developed 'workbooks' to assist staff in their development journey. The workbooks are currently being refreshed to ensure they remain current and fully align with our leadership expectations and development opportunities.

Our People procedures comply with employment law. Good practice principles provided by Chartered Institute of Personnel and Development (CIPD) and the Advisory, Conciliation and Arbitration Service are observed during the procedure development process. Our procedures are consulted upon with representative bodies prior to Service wide consultation process after which time the procedure is published. Procedures have regular review periods but are responsive to changes in legislation or as a result of case law. Our procedure authors and HR Managers ensure they keep up to date through CIPD updates and through attendance at annual Employment Law updates. Managers also attend National Fire Chiefs Council (NFCC) People Workstream conferences to ensure participation and collaboration in fire service sector 'people' development issues. When necessary, guidance is sought from employment law specialists, the LGA and the National Joint Council Employers.

In partnership with the Royal National Lifeboat Institution (RNLI) we are delivering Leadership Development Programmes at supervisory and middle level and are developing a strategic level programme also in partnership with the RNLI. The leadership programme includes a bespoke 360-degree review process which helps to track an individual's progression through the programme. As part our strategic leadership development offering, we

participate in the national Fire Service Executive Leadership Programme. In addition to this we have a programme of Leadership Masterclasses in place. To complement this work, the Service developed 360-degree reviews for all strategic and middle managers that are based on our RESPECT values and behaviours framework and linked to our Personal Review process, providing a personal development plan. The members of our Leaders Forum have undertaken a comprehensive personality profiling exercise to better understand our leadership capability and personality preferences in support of improving team development. We are mapping our leadership development against the NFCC Leadership Framework to ensure we fully align with good practice. HR Business Partners and HR Central Services provide guidance and support to managers to ensure that staff perform their roles in accordance with our values and behaviours. To augment this, we are developing an approach to coaching which will focus on developing coaching skills to ensure 'coaching conversations' support the development of our staff.

The Service's Operational Licence covers four areas of the Fire Professional Framework. These are driving, breathing apparatus and fire behaviour training, incident command and casualty care. All eight areas of the Fire Professional Framework for the Operational Licence are covered in the acquisition and maintenance phases of operational training. These include working at height, water rescue, extrication and hazardous materials. The competence of staff is monitored locally at station level on an ongoing basis and at monthly Area Management meetings. Where individuals fail to meet the requirements of their role, either in terms of meeting the required outcomes or the set frequencies for reaccreditation, a judgement is made to determine if they should remain available for all aspects of their operational role. Individuals are then provided with a development plan to allow them to become reaccredited. All operational staff are required to actively monitor their own competence and make sure they remain in date. Levels of competency are monitored and considered through formal assessment, incident monitoring and monthly competency reports. Compliance against the Operational Licence is monitored at Community Safety Delivery Team meetings. Our mobile trainers and on-call support officers add capacity to assist in the maintenance of competence. We have moved to a single competence recording system. This will enable better performance monitoring through a single set of KPI's which are monitored at Delivery Team meetings.

Learning and Development governance arrangements are being put in place. This sets out our approach to operational training competence and assessment. An annual training plan is developed and reviewed to ensure we are delivering the right courses at the right place at the right time. A quality assurance procedure is also in place to support the evaluation of our staff. An Incident Command Board oversees our approach to incident command and improved assessment facilities came into operation in May 2019. We are looking at a longer-term training strategy which will clearly set out our training delivery model which will ensure training can be delivered in a flexible manner in support of our approach to smarter working and talent management.

Development pathways include technical elements associated with role family groups, as well as core managerial skills and specific organisational leadership interventions. Our development pathways prospectus enables managers and staff to see when and how development interventions can be accessed and in what ways to ensure they are aware of any flexibility that has been built in to meet individual learning styles and needs. Our Development pathways and accompanying workbooks are being refreshed to ensure alignment with our learning and development offerings. Our collaboration with the RNLI and other partners includes a joint approach to incident command ensuring that operational skills and knowledge are not acquired and applied in an isolated environment, but inclusive of the partners we will be working with at the incidents we attend.

We know that we must manage our staff effectively and with dignity and respect. To achieve this our processes must be fair, equal and inclusive. Our Equality, Diversity and Inclusion (ED&I) Assurance Framework is the mechanism by which we provide assurance against key areas of equality work. The assurance framework incorporates the revised Fire and Rescue Service Equality Framework and progress is monitored by the ED&I Committee and reported to the Authority. We are simplifying this framework so that our teams can clearly identify their key areas and allow them to take ownership. Our Inclusion Manager has set in place a programme of station visits so that structured yet practical conversations about inclusion and diversity take place to support our aim to increase the diversity and retention of our workforce.

Our managers will be developed, encouraged, and supported when dealing with good and poor performance issues. When performance issues are identified improvement/action plans are developed with key milestones and a clear understanding of the improvements required. HR Business Partners and HR Central Services provide guidance and support to managers to ensure that staff perform their roles effectively and in cases where improvements are required, will set in place a time measured action plan. As part of our Leadership Programme a series of HR related programmes have been set in place to support managers with managing the performance of their staff.

Effective strategies to recruit and retain a high calibre, talented and diverse workforce that reflects the community we serve is a vital part of our workforce plan so that we can employ people who share our values and behaviours from across all of our diverse communities. An integral part of this process is to make sure we have a pro-active, integrated and managed approach to succession planning linked to our financial profile, so we are able to identify what skills and behaviours will be required in the future. We have a corporate target to increase the diversity of our operational workforce by 20%. Progress against the corporate target is monitored at People Delivery Team. As part of this work we are progressing well with our approach to apprenticeships. We have registered as a training provider

to enable us to draw down on our apprentice levy. We plan to run apprenticeship programmes for our firefighters, fire safety staff and fire control operators as well utilising apprenticeships for corporate staff. We monitor our gender pay gap and have an action plan in place to improve. This includes making better use of apprenticeships as well as ensuring our procedures offer flexibility.

The health and wellbeing of staff is vital to our success and considerable work is underway to reflect this. Health and wellbeing is about embracing the whole person, the physical and mental health of the individual, both inside and outside of the workplace, is considered to be important and is greater than simply an absence of ill health and disease; it is a feeling of physical, emotional and psychological wellness. As one of the largest fire and rescue services in the UK, we are striving to become an exemplar of good practice. We want to promote a safe, healthy and supportive environment where people can actively participate, share ideas and feel involved. To reflect our focus on health and wellbeing we have a dedicated health and wellbeing team in place who work closely with HR business partners to ensure that managers are confident and well equipped to better support and manage their staff. In support of our commitment to health and wellbeing, we have set in place a suite of procedures which outlines the Service's approach to health and wellbeing and the variety of support mechanisms available. We are Mind Bluelight champions and through our Trauma Risk Management process have good arrangements in place to support staff. We signed up to the Trades Union Congress Dying to Work charter and have a measured approach to strike the appropriate balance to support staff yet ensure public value and reputation.

A research project into employer branding has been carried out by one of the HR business partners as part of the Aspire HR Development programme. Part of this work focussed on how the Service could better 'market' ourselves to prospective employees by providing greater information on the total 'reward package'. The resulting action plan fed into our recruitment and workforce planning arrangements.

Our ED&I Assurance Framework and station action plans seek to set out and improve how we can better work with the diverse communities we serve. In order to better understand and engage with our communities we have equality profiles of our community which enables a more tailored approach to improve liaison and engagement.

A suite of KPI's has been developed and are regularly monitored at People Delivery Team. The monitoring includes trend analysis and identification of areas of organisational learning and improvement.

There are no significant issues arising from the application of this policy that are not already detailed in the Service delivery action plan or in the strategic risk register.



Policy Statement	Equality, Diversity and Inclusion		
Director	Deputy Chief Fire Officer (DCFO) Derek James		
Date	May 2019		
Overall judgement	Excellent Good Fair		Best practice arrangements exist, no outstanding issues, high confidence
			Good confidence, no major issues or failings, action plan in place
			No major failings occurred or predicted, key issues exist, action plan in place, some cause of concern exists
	Poor		Failings have occurred or are likely to occur, considerable issues exist, known weaknesses, considerable areas of concern
Supporting Information	Equality, Diversity and Inclusion assurance framework		
Basis of judgement	The Equality, Diversity and Inclusion (ED&I) policy is central to almost everything that the Service undertakes and is fully embedded in the Service Delivery Plan that underpins the Community Safety Plan. Due to its all-embracing nature, the Service has established an internal ED&I Committee. This Committee meets quarterly and is chaired by the DCFO. It comprises key officers, all representative bodies and members of staff who lead a number of staff networks with growing memberships and allows all participants to feedback any concerns or issues. To support the process of assurance this committee has an assurance framework that integrates the expectations set out in the draft national Equality Framework for Fire and Rescue Services (Revised 2017). The assurance framework provides a means for a holistic assessment against this important agenda. To support this assessment, the Service		

Key Assurance Statements

works with the charity Stonewall to undertake an assessment against the workplace equality index which has shown an improving picture for the Service. Having said this the current operational workforce does not reflect the community we serve. This a complex national issue that is not easily or quickly rebalanced and is reliant on a wide range of factors and practical constraints particularly for services with a high reliance on on-call firefighters such as ours. Together these arrangements and assurances indicate that there is a great deal of great work being undertaken and still lots to do. In a general sense there are no significant failings occurring or being predicted.

There are no significant issues arising from the application of this policy that are not already detailed in the Service delivery action plan or in the strategic risk register.



Policy Statement	Financial Management		
Director	Head of Financial Services and Treasurer, Ian Cotter		
Date	May 2019		
Overall judgement	Excellent Best practice arrangements exist, no outstanding issues, high confidence		Best practice arrangements exist, no outstanding issues, high confidence
	Good X Good confidence, no major issues or failings, action plan		Good confidence, no major issues or failings, action plan in place
	Fair		No major failings occurred or predicted, key issues exist, action plan in place, some cause of concern exists
	Poor		Failings have occurred or are likely to occur, considerable issues exist, known weaknesses, considerable areas of concern
Supporting Information	External Audit (KPMG) – 2017-18 Annual Audit Letter Internal Audit (Gateway Assure) - Key Financial Controls Audit 2017-18		
Basis of judgement	The Financial Regulations for the Authority were reviewed, and formally approved by the Authority in February 2018. To support the revised regulations the overarching Financial Management Policy Statement, which was also reviewed and revised, sets out our approach to ensuring the sound financial management and control of the assets and finances of the Authority and Service.		

The Financial Management Policy Statement is supported by a number of operating procedure documents covering areas such as ordering and payments, budget responsibility, income and debt recovery, petty cash, anti-fraud, corruption and anti-bribery, procurement cards, unofficial funds and contracts and procurements.

The Medium-Term Finance Plan (MTFP), developed with Members, is updated annually as part of the budget setting process. The latest document was approved by Members in February 2019. The MTFP sets out the strategic financial context of the Authority and how it plans to balance its revenue and capital budget requirements over the next four years, making effective use of its reserves and balances. Further work is being undertaken through the Emergency Cover Review to identify further savings to help with balancing the budget in the longer term.

The Authority is kept informed of and takes an active role in the financial management of the Service. The Finance & Governance Committee receive financial performance reports at each if its meetings and is kept informed of other financial issues as they arise. On each occasion the Committee meet, a Member seminar session is delivered to inform, update and/or provide knowledge and training to Members on subject specific issues, enhancing Member involvement during committee meetings and business.

The statutory final accounts for 2017-18 were produced and audited during 2018 and were presented to the Finance & Governance Committee in July 2018, in accordance with the new statutory faster closedown timetable. The Authority received a clean audit report from KPMG, our then external auditors, and a favourable value for money judgement. We are now in the process of completing the statutory final accounts for 2018-19. This will be the first audit carried out by our new auditors, Deloitte LLP. We have been working closely with Deloitte LLP since the autumn of 2018 to ensure a smooth transition process. Their interim audit work was completed in February 2019 and no areas of concern were raised. The Finance team have progressed well with the production of the draft financial statements.

Gateway Assure Ltd, our contracted internal auditor, reported on the Key Financial Controls Audit for 2017-18 and concluded 'Adequate' controls were in place, with no substantial weaknesses identified and only a small number of minor recommendations. All of the minor recommendations were addressed during 2018. Due to other audit work and timescales the 2018-19 Key Financial Controls Audit has been delayed until Quarter 1 for 2019-20, and this audit will be carried out by South West Audit Partnership, our new internal auditors from April 2019.

By the end of 2017-18 we had achieved 97% of the targets in our Efficiency Plan 2016-17 to 2019-20. We have a Value for Money (VFM) framework, and throughout our priorities and KLOE's within the Service Delivery Plan, all Heads of Departments are developing their VFM evaluation criteria based on KPI's and corporate targets. Our

Key Assurance Statements

business case process is now embedded and includes an assessment of VFM, capturing any efficiencies expected, for inclusion on our efficiency and savings register which has been developed in line with the NFCC proforma template.

We continue to ward against the threat of financial fraud. Weekly updates include, on occasion, reminders about whistleblowing and our fraud and bribery procedures, alerting staff about their role and responsibilities, and any relevant procedure they need to follow. Like most organisations we are subject to email scams and procurement card scams are becoming more frequent. We remind staff to remain vigilant at all times.

There are no significant issues arising from the application of this policy that are not already detailed in the Service delivery action plan or in the strategic risk register.



Policy Statement	Asset Management		
Director	Assistant Chief Fire Officer (ACFO) Byron Standen		
Date	May 2019		
Overall judgement	Excellent Best practice arrangements exist, no outstanding issues, high confide		Best practice arrangements exist, no outstanding issues, high confidence
	Good	X	Good confidence, no major issues or failings, action plan in place
	Fair		No major failings occurred or predicted, key issues exist, action plan in place, some cause of concern exists
	Poor		Failings have occurred or are likely to occur, considerable issues exist, known weaknesses, considerable areas of concern
Supporting Information	Integrated Property Asset Management Plan 2018-22 (IPAMP) Integrated Fleet Asset Management Plan 2018-21 (IFAMP) ICT Road Map 2018-23 Procurement Plan 2018-22 Health and Safety BS18001 Audit Health and Safety Assurance Statements HMG 'Basket of Goods'		

Basis of judgement

Assets are managed within a single directorate to ensure that the respective departments are integrated in planning and delivery, thereby achieving efficient and effective ways of working. Medium term plans are in place for property and fleet assets, Information Communications Technology (ICT) and procurement to ensure that capital and revenue budgets are used in line with organisational priorities and risks and are aligned to the requirements of the MTFP and the Community Safety Plan.

Combined, these plans ensure VFM is realised as far as reasonably practical for these asset classes across each stage of their life cycle. However, a corresponding supporting medium-term plan for equipment is in development and is required to provide a holistic planning framework. Once established the directorate will be able to identify areas of further value in the delivery of best value and secure improvement across all the asset base. Plans are reviewed on an annual basis to ensure they remain relevant, capture changes in technology and best practice, and drive continual improvement.

Through a systematic approach of premises inspection, all workplaces are assessed for safety and suitability on a six-monthly basis and any findings are escalated and resolved by the Service departments as appropriate. Furthermore, professional building surveys are undertaken to ensure the needs of our diverse workforce are met in a cost-effective manner.

Risk assessments, undertaken by competent staff, are in place for all Service equipment and are reviewed systematically based on the level of risk and the requirements and recommendations of manufacturers. The risk assessments are supplied to end-users in conjunction with equipment operating instructions to ensure safety in operation. Where appropriate initial and refresher training is provided and individual competence in the use of equipment is confirmed.

The Service is compliant with all current relevant statutory and regulatory requirements such as Lifting Operations and Lifting Equipment Regulations and Provision and Use of Work Equipment Regulations for equipment, Asbestos Management, Gas and Electrical Safety and Management of Contractors for premises and the Transport Act, Road Traffic Act and Driver and Vehicle Standards Agency for fleet.

Having met the standards and criteria for the British Standard Occupational Health and Safety Assessment Series 18001 across the organisation, the Service is one of the few fire and rescue services to have been awarded certification. Work is currently underway to detail an action plan to meet the standards of ISO 45001.

To ensure that compliance against the standards and duties is recorded in a timely and accurate manner, the Service currently uses several management information systems, to track and record asset maintenance and

provide reports to assure that standards are being met and maintained; or the initiate action to achieve the required standard. However, the legacy systems are not fully compatible creating additional work in the management of the information being held. Whilst this issue is being actively managed through additional governance, it is an inefficiency in the system. To resolve the matter, the legacy asset management systems will be replaced in 2019-20 by a single future-proofed system.

End-user feedback is sought and monitored through the operational effectiveness database and outcomes used to improve future procurement, purchasing, delivery, maintenance and disposal of assets. This system, coupled with input from supporting co-ordinating groups, provides a single source of current and accurate information on the suitability of our assets and allows the dynamic review of provision and use.

Active monitoring of action plan and project progress is in place, supported by the tracking of delivery and management through the Sycle performance management tool. Internal audits have highlighted areas of improvement which are being delivered in a timely manner ahead of agreed deadlines. Further audits are programmed for 2019-20 to ensure the respective areas of assets and procurement are effective and efficient.

Whilst key processes are in place and the planning approach to managing premises, fleet, equipment and ICT is linked to the strategic planning process, work is required to ensure that it meets the principles of BSI Publicly Available Specification 55-1:2008, which is an internationally recognised standard setting out the specification for an effective asset management system.

Following the Royal Institution of Chartered Surveyors (RICS) guidance for Public Sector Property Asset Management, a condition survey of the property assets was undertaken in 2016 to establish a common baseline. This work was used to inform the capital programme within the MTFP. To enable currency of assessment, effective long-term planning and provide assurance of safe workplaces, the Service has RICS qualified building surveyors who undertake annual premises inspections. The findings, coupled with those from Health & Safety inspections, inform the immediate, medium and longer-term capital and revenue budget planning process through the Integrated Premises Asset Management Plan. To complement this work, a whole Service strategic estates review has been completed to establish departmental needs over the next five to ten years. This has allowed for more innovative thinking in service delivery in areas such as training.

As part of the on-going strategic assessment of the estate, the Service commissions external auditors, previously KPMG and now Deloitte LLP, to periodically revalue 20% of the estate by category over a five-year period. The outcomes are reported to Members through the Finance & Governance Committee.

Collaboration with partners in the public sector and the wider public is a key area for the Service. As a duty within the Policing and Crime Act 2017, the One Public Estate partnerships in Dorset and Wiltshire are now business as usual. This has led to opportunities to collaborate with the police, local authorities and the Defence Infrastructure Organisation. Work is ongoing with South West Ambulance Service Foundation Trust to develop joint premises proposals to meet respective strategic drivers.

The Service currently shares estate with the police at Bradford-on-Avon and Mere and share with the police and ambulance Service at Portland and Lyme Regis. Most sites are available for wider public use which has proved popular in many locations and with a wide range of charitable and voluntary groups. This strategy will further strengthen integration with the communities across the organisation and deliver better value from public assets.

To achieve efficient, effective and economic purchasing, the Service has a four-year procurement plan setting out the strategy for acquiring goods, services and works. The plan encompasses the whole cycle from identification, purchasing, contract management and disposal.

Through considered policy and procedures there is flexibility over procurement routes including undertaking our own procurements or using frameworks where appropriate to maximise VFM. This includes actively working in partnership to develop specifications and undertake collaborative procurement using the Future Procurement Plan which has been aligned to the NFCC Strategic Categories. The Asset department works closely with procurement to ensure value for money through the whole-life cost analysis approach. A value for money register is maintained by the Finance department to which the directorate submits all identified cashable or non-cashable savings.

Monitoring and benchmarking against other services is achieved through active participation in the Home Office 'Basket of Goods' survey. The Service is shown to be at or below the national average for all items checked. The Service has combined all existing contracts into one comprehensive register, in line with the new General Data Protection Regulations. All contract information is published on our external website and on the EU Supply Bluelight tendering portal providing transparency to the public, suppliers and other agencies.

The Service actively participates in the Fire Commercial Transformation Programme, collaborating with partners, including Devon and Somerset Fire and Rescue Service and the South West Police Procurement Department to procure our goods and services. Other procurements use national frameworks and professional buying organisations such as the Yorkshire Purchasing Organisation and Crown Commercial Services.

To effectively capture advancements in technology, the ICT Roadmap provides a five-year plan of the direction of ICT, both in service delivery and technology and software management. This Roadmap is linked to business plans,

Key Assurance Statements

organisational needs and the MTFP and is critically reviewed on an annual basis. All ICT work is managed through a centralised management system and monitored by the respective infrastructure, communication and business managers. The Business Relationship Manager plays a key role in ensuring engagement with the wider organisation and co-ordinating the delivery of business needs and drivers within the ICT team. This work is supported by trainers to maximise the use and potential of ICT systems.

To improve security of assets, policies and procedures are in place to ensure, as far as reasonably practicable, that physical assets remain safe and secure within Service premises and whilst in the public domain. This includes the use of identity cards and access permission to prevent unauthorised entry into buildings and a clear process to immediately report the loss of equipment or data. There is recognition of the increasing threat to cyber security which has resulted in the appointment of an Information Technology Security Officer. This role will support the existing structure and ICT architecture to ensure that cyber resilience is maintained and supports business continuity planning assumptions.

There are no significant issues arising from the application of this policy that are not already detailed in the Service delivery action plan or in the strategic risk register.



Policy Statement	Safeguarding		
Director	Deputy Chief Fire Officer (DCFO), Derek James		
Date	May 2019		
Overall judgement	Excellent Best practice arrangements exist, no outstanding issues, high confide		Best practice arrangements exist, no outstanding issues, high confidence
	Good X Good confidence, no major issues or failings, action plan in place		Good confidence, no major issues or failings, action plan in place
	Fair		No major failings occurred or predicted, key issues exist, action plan in place, some cause of concern exists
	Poor		Failings have occurred or are likely to occur, considerable issues exist, known weaknesses, considerable areas of concern
Supporting Information	Dorset, Bournemouth and Poole Safeguarding Adult Board Annual Report Section 11 Audit for Wiltshire Children's Safeguarding Board (WSCB)		
Basis of judgement	Our Safeguarding procedure and internal processes have been developed collaboratively to make sure there is alignment across local authorities and partner agencies. They are governed by a set of key principles and themes that are aligned to statutory responsibilities and best practice. This ensures that people who are at risk of abuse, harm, neglect and exploitation receive help and support in a way that is sensitive to their individual circumstances, is person centred and outcome focused.		

The key principles are:

- Empowerment, People are encouraged to make their own decisions (*making safeguarding personal).
- · Prevention, Take action prior to harm occurring.
- Proportionate, Response is appropriate to risk.
- Protection, Support for those in greatest need.
- Partnership, Engagement with local communities to prevent, detect and report abuse.
- Accountability, Transparency in delivering safeguarding of a quality that is worthy of scrutiny. i.e. courts, peer review etc.

*Making safeguarding personal focuses on the personalised outcomes desired by people with care and support needs.

Our procedures have been reviewed to make them clearer and easier to follow including bookmarking links and easy to follow flow charts. Additions to the procedure includes handling confidential information and Personal Information Sharing Agreement (PISA). PISA enables the legal and secure exchange of personal information between partner organisations that have a common obligation or desire to provide services within the community. The safeguarding referral form has been amended to reflect the update from the Care Act 2014 making safeguarding personal. The procedure is also reflective of the requirements associated with the Data Protection Act 2018 and the General Data Protection Regulations.

The Authority's policy and the Service's procedures adopts a 'whole system approach' to adult and children's safeguarding and they are reflective of our key principles. Safeguarding arrangements are delivered via a broad spectrum of activities including:

- Through support and promotion of both national and local safety campaigns
- Through specific intervention such as operational incidents, safe and well visits, fire setter programmes and other children and young people programmes
- Multi-agency training and awareness
- Through formal safeguarding arrangements, in partnership with local authority safeguarding teams and other key agencies.

By working closely with other agencies, we can utilise information sharing to keep vulnerable persons safe and to keep others safe, including Service staff.

Formal safeguarding arrangements are developed and delivered predominantly by the Safeguarding Lead who is responsible for supporting the organisation in its policy commitment to safeguarding and promoting the welfare of young people and adults at risk. The focus of the role is to provide professional, accessible and reliable advice and guidance to staff relating to safeguarding concerns and practice. This also includes making sure we conform to relevant legislation, that we reflect organisational and local authority policy and procedures and best practice to ensure continuous improvement through embedding safeguarding standards across the organisation. The role is also crucial in making sure that we develop and establish good working relationships with partner agencies and local authorities. This allows us to effectively raise safeguards with local services and arrange extra support for the referrals that do not meet the safeguard thresholds by knowing when to sign post and when to call 999. By arranging extra support, we are ensuring that the most vulnerable people in our area receive early intervention and support, with the aim of preventing the concerns from escalating, improving well-being as well as possibly saving money across the health and welfare system. A safeguarding information page is available on Connect (the Services intranet) where additional information and tool kits can be accessed.

To ensure organisational resilience, we have a Single Point of Contact (SPOC), Safeguarding Lead and Deputy Safeguarding Leads. Cover is available 24 hours a day, 365 days a year by the Duty Area Manager who is contactable through Fire Control. Area managers also give strategic management representation on all local Safeguarding Boards.

The Safeguarding Lead represents the Service on local subgroups and meetings where we are actively involved in safeguarding. This is predominantly through Multi Agency Risk Management meetings. We have an Authority level Safeguarding policy in place and effective Service wide reporting procedures which are supported by a clear training delivery plan which includes corporate induction and continuation training. These arrangements provide guidance to all staff and Service volunteers on how to recognise when a child or adult with needs for care and support may be experiencing harm, abuse or neglect. The Safeguarding Lead has also reviewed which staff roles within the organisation need to be Disclosure and Barring Service checked to ensure safer recruiting.

If a safeguarding concern is raised internally, the Safeguarding Lead and SPOC work in conjunction with the Local Authority Designated Officer (LADO) if the concern is for a child (under 18) as the LADO should be alerted to all cases in which it is alleged that a person who works with children has behaved in a way that has harmed or may have harmed a child or possibly committed a criminal offence against children or related to a child.

We also have representation on a self-neglect/hoarding panel which sets out the shared understanding across key

agencies of how we jointly respond to very serious situations of adult self-neglect. The aim is to prevent death or serious injury by ensuring there is a shared multi-agency understanding and recognition of issues involved in working with individuals who self-neglect and to make sure there is effective multi-agency working and practice in place which enables agencies to uphold their duty of care.

We have also worked with 'You Trust' which is a charity that supports vulnerable people working with a wide range of specialist areas from learning disabilities to mental health and domestic violence and abuse Services. Their aim is to raise awareness about domestic violence and abuse enabling communities to support each other during traumatic and difficult times. As part of this aim key staff have received training in domestic abuse and have become Domestic Abuse Champions so they can offer guidance to those experiencing domestic abuse.

The Safeguarding Lead is also active in supporting Safeguarding Adult Reviews which includes being involved in local homicide reviews which allows us to work collaboratively and to look at lessons that can be learnt to help prevent similar incidents from happening in the future. We also actively support local collaboration initiatives to make sure we can help to answer questions about how vulnerable people can protect themselves.

Contact has been made with all surrounding Fire and Rescue Service (FRS) Safeguarding leads as crews are increasingly attending calls outside of our service area. This is to ensure crews are aware that they should follow their own respective organisational procedures and the local FRS Safeguarding lead will direct any referrals as appropriate. The intention is to prevent confusion and any safeguarding concerns being missed. The Safeguarding Lead also meets with Devon and Somerset FRS, Hampshire FRS and Avon FRS Safeguarding Leads three to four times a year to share best practice. The meetings are useful, not only from the perspective of reviewing current practice, but also to remind us that the issues we face are common to us all.

We provide locality base evidence of what we are involved in and report progress and opportunities to Members through Local Performance and Scrutiny Committees on a quarterly basis. This is also reported to the Authority on a six-monthly and annual basis.

Safeguarding Adult Boards across Dorset, Bournemouth and Poole are required to complete an Annual Report each year to provide an overview and evaluation of work completed by each partner organisation throughout the year, in line with the Board's four strategic priorities. We continue to contribute to this report providing a critically reflective overview of our work using the Safeguarding Adults at Risk Audit Tool. The audit tool is a two-part process. Completion of a self-assessment audit followed by a Safeguarding Adult Board challenge and support event. This was from both a single agency perspective and multi-agency one, highlighting successes, and any challenges faced

and how we propose to resolve these in the year ahead. The feedback we received from this process was positive. We are in the process of completing assessments for Dorset, Poole and Bournemouth. We contributed to Swindon Adult Safeguarding Board Annual Report and more recently a Quality Assurance Self-Assessment.

Assurances have also been provided on recent financial abuse and domestic abuse audit reports to Swindon Local Safeguarding Adults Board. Quarterly reports are completed on performance headlines and emerging issues. The Board monitors the key performance information which helps demonstrate the effectiveness of the partnership's safeguarding activity. Each quarter focuses on a different topic.

A self-assessment questionnaire was also completed for Wiltshire Safeguarding Adults Board and in 2018 the report focussed on the Safeguarding Board Audit Panel (the Panel). Section 11 of the Children Act 2004 places duties on a range of organisations and individuals to ensure their functions, and any services they contract out to others, are discharged with regard to the need to safeguard and promote the welfare of children. During 2018 we contributed to a Section 11 Audit for Wiltshire Safeguarding Children's Board (WSCB). The audit ensures organisations take account of the need to safeguard and promote the welfare of children. WSCB launched a new Section 11 process with the intention that this would provide a more targeted and accurate picture of agency contributions to the safeguarding system. We were selected to take part in a deeper assessment with the focus on the Wiltshire part of the Service. This assessment was very helpful in enabling more detailed exploration of key areas and identifying some for further consideration. It was recognised that the Service is a signposting organisation and only about 5% of our work relates directly to children and young people. Youth work is where this is most relevant, and the discussion reassured us that staff working in this area are safe, appropriately trained, supervised and understand the boundaries in their work and contact with children and young people.

There was also evidence that the work done by the Safeguarding Lead to raise awareness of safeguarding is supporting the development of a culture where all staff can identify and share any concerns they have. The Panel were impressed by how the Service take their responsibilities seriously. In summary, the panel reported that where we encounter children, they were reassured this is done well and safely. No significant gaps were identified and the investment in the safeguarding lead role and line management by the Deputy Chief Fire Officer was commended as it evidences the high importance this area is given by the organisation.

Safeguarding Adults Boards (the Boards) are also committed to developing a more rigorous Line of Sight programme. This is to ensure that there is an improved connection between Board members and staff and that the Boards themselves are able to demonstrate awareness of issues associated with actual practice as well as

increasing the understanding of how partner organisations operate and how safeguarding adults is incorporated into their service provision. Each Board member undertakes, where possible, at least one-half day visit per year to a partner organisation observing and reviewing practice. The Service received a visit from the Boards voluntary sector representative. The resulting report that was presented to the Board gave a very positive account of our approach.

In conjunction with a local Safeguarding Learning and Organisational Development Advisor in the south of the Service area we have developed an interesting and well accepted e-learning package which has proven to be a great success. The feedback and buy-in from staff have been outstanding and this has resulted in programmed training that ensures that all key personnel dealing with young people and the public have carried out level 2 safeguarding training, and that this training is delivered consistently.

Assurances have been provided to Bournemouth and Poole Training & Workforce Development Sub-group to ensure Safeguarding Adults training that is delivered meets the needs of our employees and supports the Bournemouth, Dorset and Poole Multi-Agency Safeguarding Adults Policy and Procedures.

The Learning & Organisational Development Adviser and the Safeguarding Lead now meet two to three times a year to ensure we are meeting our stated training requirements and we continue to look at how we can improve the evaluation of the training that is delivered to ensure the consistency and application of our procedure in practice. This has also led to the Safeguarding Lead being invited onto a local authority group and invites to sessions to train the trainer which cover new learning and legal updates.

There are three levels of staff training. Level 1 - Corporate Induction and e-learning which is completed by all staff including volunteers and agency staff; Level 2 - Safeguarding Essentials bespoke training which is delivered by an external local authority practitioner to all front facing staff including area managers, Safe and Well advisers, youth intervention leads, station managers, Flexi-Duty Officers and Fire Setter advisors; and Level 3 - this is advanced CPD training delivered by external agencies. This is for youth intervention co-ordinators, the Service's SPOC (DCFO), Safeguarding Lead and Deputy Safeguarding Leads. Training includes Managing Allegations and Level 3 Child Protection Training, Legal Literacy and Safeguarding Adult Reviews.

Our e-learning safeguarding package supports our other means of training and allows us to monitor understanding. The training that has been put in place crucially serves to highlight that safeguarding is everyone's responsibility and keeps all staff up to date with changes such as modern slavery, forced marriage, female genital mutilation, child sexual exploitation and radicalisation. The Safeguarding Lead has also completed additional training, including Safeguarding Essential Training, Information Asset Owner training (storing of confidential information), Serious

Key Assurance Statements

Case Review, Managing Incident training, Managing Allegations, Hoarding and a Policies and Procedures workshop. Training has also been completed on General Data Protection Regulations as the safeguarding information we hold is some of the most sensitive that is held within the Service and is therefore recorded as 'Official Sensitive'.

We have also ensured that we work closely in partnership with South West Ambulance Service Foundation Trust (SWASFT) and the police forces that serve our area of responsibility. If either the ambulance service or the police visit a property and think that there is a fire risk, or some fire intervention is required, this goes to the Safe and Well Lead to disseminate and make sure it is managed internally and they also feedback any outcomes to the referring agency. Working with other agencies allows better access and management of fire risks for individuals with care and support needs and raises the awareness and training around identifying and managing fire risks in domestic dwellings and the built environment. The Safeguarding Lead has also worked closely with the named professional from SWASFT on hoax calls and frequent callers. This led to a monthly report of frequent callers being set up.

The Safeguarding Lead also contributes to the NFCC Safeguarding Co-ordination Workstream. The purpose of the workstream is to provide direction for the NFCC in relation to safeguarding children and adults at risk to ensure the NFCC complies with government legislation and guidance. This also supports the Service in aligning local and national policy.

There are no significant issues arising from the application of this policy that are not already detailed in the Service delivery action plan or in the strategic risk register.