Item 24-45 Appendix B





Policy Statement	Asset Management		
Director	Assistant Chief Officer – Director of Service Support		
Date	June 2024		
Overall judgement	Outstanding		High levels of confidence. Best practice arrangements exist, no outstanding issu
	Good	х	Good confidence, no major issues or failings.
	Adequate		Confident position. Some areas of strengthening required, with action plans in plans
	Requires Improvement		No major failings occurred or predicted. Key issues exist with some minor areas of concern. Improvement plan in place.
	Inadequate		Failings have occurred or are likely to occur. Considerable issues exist with known weaknesses and areas of concern. Improvement plans yet to be developed.
Supporting Information	Environmental Sustainability Strategic Asset Managemen ISO55001 Accreditation Integrated Premises Asset M Integrated Fleet Asset Mana Integrated Equipment Asset ICT Strategy 2021-2024	Stra t Plai dana geme Mana and 4 d 450 ss IC	gement Plan 2021-28 ent Plan 2019-24 agement Plan 2020-25 year procurement planning document 01 Audits T and Assets

	Asset Management Assurance Supporting Statements National Fire Chiefs Council (NFCC) Savings Register
Basis of judgement	The Service has a Strategic Asset Management plan which sits beneath the Strategic Assessment of Risk (SAR), the Medium-Term Financial Plan (MTFP) and the Community Safety Plan (CSP). This is supported by a suite of strategies, which include an Asset Management Strategy, incorporating premise, fleet and equipment, and an Environmental Sustainability Strategy. Medium term delivery plans, along with the Service Delivery Plan, safeguards their delivery and ensure that capital and revenue budgets are used in line with Service priorities and risk. Furthermore, the Service also has an ICT Strategy, the delivery of this is captured through a delivery plan and along with the Service Delivery Plan.
	Delivery plans are reviewed on an annual basis, to ensure they remain relevant, capture changes in risk, technology and best practice, and drive continual improvement. All plans were reviewed and updated in 2023/24 to ensure currency and effective forward planning. Combined, these plans ensure that value for money (VFM) is realised as far as reasonably practical for these assets across each stage of their life cycle.
	Estates, Fleet & Equipment and Supplies are managed within the Assets department, which is part of the Service Support directorate. This ensures that the respective departments are integrated in planning and delivery, thereby achieving efficient and effective ways of working.
	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 ISO 45001, across the organisation, the Service is one of the few Fire and Rescue Services to have been awarded certification.

To ensure that compliance against the standards and duties, for the management of our assets, is recorded in a timely and accurate manner, the Service implemented Bluelight ProCloud in 2021, as their asset management system. This system tracks and records asset maintenance and provide reports to assure that standards are being met and maintained or the initiation of action to achieve the required standard. Whilst embedded, the Service is continuing to strengthen Bluelight Procloud across the organisation and is also leading a sector group, made up of other FRS's who use the system along with the supplier. This is to support the development of the system and to share practise.

End-user feedback across our assets is sought and monitored through the Operational Effectiveness database, with 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 plans and project progress is embedded across the teams, supported by the tracking of delivery and performance through the Sycle performance management tool, which is overseen at department and directorate meetings, along with through the Service Delivery team. The Service's Internal audit strategy and annual audit programmes provides further assurance of arrangements. During the 2022/23 programme these audits included, fixed assets, corporate procurement plan and energy management and this year included cyber security arrangements, pcard and fuel cards as well as business continuity.

The Service has key processes in place and appropriate planning to manage premises, fleet, and equipment, which is linked to the strategic planning process. Over the past few years work has been undertaken to ensure that, in line with the Fire Authority's Asset Management Policy, the Assets function meets the principles of ISO 55001, as this is an internationally recognised standard setting out the specification for an effective asset management system. Following the successful stage 1 assessment undertaken by BSI in January 2023, the Service went through the full accreditation process in May 2023, securing the ISO55001 accreditation. To maintain this accreditation the Service is now audited by BSI on a six-monthly basis. Furthermore, to as part of the accreditation process the Service is required to undertake a set of audits annually against this accreditation and these are delivered by internal staff who have been appropriately trained. Through these, assurance of the Service's approach is achieved and or actions are identified to strengthen provisions.

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 2020, to establish a financial baseline for the seven-year estate's capital programme and the MTFP. Furthermore, to ensure currency of assessment, effective long-term planning and provide assurance of safe workplaces, the Service has a RICS qualified senior building surveyor who is available to ensure that Service processes align to the RICS guidance. This is further strengthened by the two further senior building surveyors, with memberships to the Chartered Institute of Builders, and Chartered

Architectural Technologists. This provides the Service with a range of knowledge and expertise within its Estates team for staff who undertake annual premises inspections.

The findings of the senior building surveyors work, coupled with information from Health & Safety inspections and ISO 50001 audits, inform the immediate, medium, and longer-term capital and revenue budget planning process through the Integrated Premises Asset Management Plan. As part of the on-going strategic assessment of the estate, the Service commissions external auditors, 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 & Audit Committee.

To complement this work, a whole Service strategic estates review continues to establish departmental needs over the longer term. This has allowed for more innovative thinking in service delivery in areas such as training and estate rationalisation. Planning is also informed by the Environmental Sustainability strategy, which aims to reduce our impact on the environment through reductions in carbon emissions, single use plastics and sustainable procurement. This in turn will drive efficiencies in energy and fuel use thereby reducing the pressures on the revenue budgets across the Service. In line with corporate risk management and effective business continuity planning, alternatives such as photovoltaic panels and LED lighting are included within capital budgeting.

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 remain as business as usual. This has led to opportunities to collaborate with the police, local authorities, and the Defence Infrastructure Organisation. The Service currently shares estate with the police at Christchurch, 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.

To achieve efficient, effective, and economic purchasing, the Service has a four-year procurement activity planning document, setting out the strategy for acquiring goods, services and works, along with the procurement plan, which details how the Service will further strengthen its procurement practises. The procurement approach encompasses the whole cycle from identification, purchasing, contract management and disposal. The Service has increased the capacity within the procurement team to enhance the strategic positioning of the procurement function and in response to capacity of the team, however this will be further reviewed aligned to the legislation changes due to take effect in October 24.

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, which is aligned to the NFCC Strategic Categories. The Asset and ICT departments work closely with procurement to ensure value for money through the whole-life cost analysis approach. A value for money and savings 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 was achieved through active participation in the Home Office 'Basket of Goods' survey, where the Service was shown to be at or below the national average for all items checked.

The Service holds a single and comprehensive register for all existing contracts, which is in line with the General Data Protection Regulations. All contract information is published on our external website, providing transparency to the public, suppliers, and other agencies. Furthermore, the Service has a Modern Slavery statement, which is published on our website and includes a social value assessment for all procurements. This is reviewed annually.

The Service continues to actively participate in collaborating with national partners, including the NFCC, Devon and Somerset, Kent and West Midlands Fire and Rescue Services, and Southwest Police Procurement, 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 strategy and delivery plan was reviewed in 2021 and provides a five-year plan for the direction of ICT, both in service delivery and technology and software management. This strategy is linked to the SAR, the CSP, the MTFP and organisational plans to exploit the opportunities arising from the development of Microsoft Office 365 and Team's functionality. To ensure currency in a rapidly changing environment his strategy 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 Projects & Business Relationship Manager plays a key role in ensuring continued 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, particularly Office 365.

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. The threat to cyber security remains a strategic risk due to the nature of the risk. However, this has reduced the risk through improved firewalls, automatic system patching, use of monitoring systems, and a planned removal of unsupported technology. The ICT structure and architecture are designed to ensure that cyber resilience is maintained and supports business continuity planning assumptions. The effectiveness of the pre-planning work for ICT was proven through the change of working protocols during the Covid19 pandemic.

The Service is fully engaged with the Emergency Services Mobile Communication Programme, with the Director of Community Safety being the Service's strategic lead. The Service was one of the first organisations nationally to

	achieve the Code of Connection security standard for the Emergency Services Network (ESN), and has identified, developed, and implemented unique user cases for the product. The use of ESN for station end equipment continues although further development of the ESN has been significantly delayed from a national perspective for a variety of reasons.			





Policy Statement	Corporate Governance		
Director	Deputy Chief Fire Officer		
Date	June 2024		
Overall judgement	Outstanding		High levels of confidence. Best practice arrangements exist, no outstanding issues.
	Good	х	Good confidence, no major issues or failings.
	Adequate		Confident position. Some areas of strengthening required, with action plans in place.
	Requires Improvement		No major failings occurred or predicted. Key issues exist with some minor areas of concern. Improvement plan in place.
	Inadequate		Failings have occurred or are likely to occur. Considerable issues exist with known weaknesses and areas of concern. Improvement plans yet to be developed.
Supporting Information	Corporate Governance Policy Assurance Supporting Document		

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. A new code of ethics has been adopted by 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. A central record is in place to record this induction, training and seminars provided to all Members. Following the streamlining of the Authority and its governance arrangements; the Local Government Association reviewed the efficiency and effectiveness of these revised arrangements. An action plan was agreed following this peer review and has now been fully discharged by Members.
	The Authority has five key priorities and the development and performance against these are overseen and scrutinised by Members on a quarterly basis. Priorities one, two and three, are reviewed at the four Local Performance & Scrutiny (LPS) Committee meetings with Priority four and five at the Finance & Audit Committee. Planning and performance arrangements are well structured at strategic, tactical, and operational levels and are systematically monitored throughout the Service. The performance reports at these meetings provide details on the effectiveness and efficiency of the Service as well as looking at how the Service is supporting and developing its people. At six-monthly intervals, the Authority receive a progress presentation against all five priorities, with an Annual Report being published each September. Members are also able to further scrutinise the performance of the Service through regular seminars, workshops and Member/Officer working groups.
	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 as agreed in the corporate governance policy. This assessment 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. Strategic risks are transparently recorded and reviewed by Members on a quarterly basis.
	The Corporate Governance Policy incorporates information management arrangements and the Authority is fulfilling its legal responsibilities under the General Data Protection Regulations and Freedom of Information 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 & Audit Committee. Requirements under the Transparency Code 2015 are fulfilled and reviewed regularly.

Information security management processes are increasingly aligned to the International Standards Organisation (ISO) 27001 but not accredited to it. An Information Governance Group is well established and manages information risks. 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. Although good progress and controls are in place, the Service is constantly reviewing its approach, alongside our Local Resilience Forums and taking into account intelligence and guidance from the 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 & Audit Committee. The Service has good cyber security arrangements and has now achieved the Cyber Essentials standard.

The Service has robust and resilient Business Continuity arrangements that are aligned to industry best practice (The Business Continuity Institutes Good Practice Guidelines (2018). Arrangements are aligned to national and local risk and an annual horizon scan is undertaken to identify further risks and threats and supports the identification of the annual business continuity programme of work.

An internal Communications and engagement delivery plan is in place. Engagement and communication processes are well structured, regular, and well received by staff as confirmed by regular staff surveys. Externally, all Service priorities including prevention, protection and recruitment are promoted through planned social media campaigns, which are targeted where needed as well as reactive messaging which includes press releases, press statements and enquiries.

The Service is a signatory to several 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.





Policy Statement	Financial Management		
Director	Head of Financial Services and Treasurer		
Date	June - 2024		
Overall judgement	Outstanding		High levels of confidence. Best practice arrangements exist, no outstanding issues.
	Good	x	Good confidence, no major issues or failings.
	Adequate		Confident position. Some areas of strengthening required, with action plans in place.
	Requires Improvement		No major failings occurred or predicted. Key issues exist with some minor areas of concern. Improvement plan in place.
	Inadequate		Failings have occurred or are likely to occur. Considerable issues exist with known weaknesses and areas of concern. Improvement plans yet to be developed.
Supporting Information	Financial Management Policy Assurance Supporting Document		
Basis of judgement	The Financial Regulations for the Authority are monitored on a regular basis to ensure accuracy. Any amendments are subject to Fire Authority approval; the last revisions were mainly confined to updating the financial limits in the regulations and these were formally approved by the Authority in June 2021. To support the regulations the overarching Financial Management Policy Statement sets out our approach to ensuring the sound financial		

management and control of the assets and finances of the Authority and Service. The current Policy Statement was approved by the Authority in February 2024.

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, anti-fraud, corruption and anti-bribery, procurement cards, unofficial funds and contracts and procurements.

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. The Anti-fraud, Bribery and Corruption policy document has been reviewed and updated.

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 2024 and covers the financial years 2024-25 to 2027-28. 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 life of the MTFP. The Plan incorporates our Reserves Strategy that shows how we are making effective use of available reserves and balances. Considerable work has been carried out through the Resourcing and Savings Programme (RSP) over the past few years to identify savings, and future work programmes are underway to ensure financial sustainability.

The Authority is kept informed of and takes an active role in the financial management of the Service. Members seminars are held at appropriate times to update Members on the Services financial position and future plans. The Finance & Audit Committee receives quarterly financial performance reports and is kept informed of other financial issues as they arise.

The audited statutory final accounts for 2021-22 and 2022-23 are scheduled to be formally approved at the Finance & Audit Committee in July 2024. The period of delay has been due to the triennial pension valuation report issued during the completion of the external audit review, which led to a requirement to update the content of the accounts. The Authority published the unaudited accounts for 2023-24 prior to the deadline of 31 May 2024, and the final audit review work by our new external auditors Bishop Fleming is due to commence in August 2024.

Our internal auditors, SWAP, completed two scheduled financial management audits in 2023-24 covering 'Payroll' which received a "Substantial" assurance rating and 'Procurement and Fuel Cards' which received a "Adequate" rating. Treasury Management activity is guided by our Annual Treasury Management Strategy, which is approved by the Authority in February each year. Members are updated on performance through six-month and annual reports. Quarterly investment and borrowing performance updates are also presented to Finance & Audit Committee.

We continue to refine our business case processes and strengthen our approach to value for money (VFM), by developing and enhancing our comprehensive VFM framework, tool, and dashboard for each Service priority.

These changes help to ensure that we continue to demonstrate effective use of the resources available to us and help us to better understand and consistently quantify our costs and cashable savings, non-cashable savings, areas of cost avoidance and wider societal savings generate by our work. We were graded as 'Outstanding' for Efficiency by His Majesty's Inspector of Constabulary and Fire and Rescue Service in our most recent full Service inspection.
Procurement activity is managed in line with our Contract and Procurement Standing Orders and our internal procurement procedures. Fundamental legislative changes to the Procurement Act are due to be implemented in October 2024, and the Service is currently preparing for this with policies and procedures being revised. SWAP completed an internal audit review of our 'Corporate Procurement Plan' in Q4 of 2022-23 and provided a 'Substantial' assurance rating.
Good contract management arrangements are in place and all of our contracts are managed through a national Procurement Database. This information can be accessed by suppliers and the public via our website. We have processes in place to capture savings and efficiencies, arising from procurement activity, and these feed into our wider value for money arrangements and the National Fire Chiefs Council savings register.
Social value is a priority for the Service and strengthening our approach is a key feature within our strategies and procurement plan 2022-2026. The Procurement Team are working to embed social value into our procurement process, as part of the wider ongoing changes that are imminent. The Services standard terms and conditions include a clause on Modern Slavery and there is a standard pass/fail question in our Standard Selection Questionnaire. The Service has a published Modern Slavery statement which is formally approved by the Fire Authority annually.





Policy Statement	People Policy		
Director	Assistant Chief Officer - Director of People Services		
Date	June 2024		
Overall judgement	Outstanding		High levels of confidence. Best practice arrangements exist, no outstanding issues.
	Good		Good confidence, no major issues or failings.
	Adequate	х	Confident position. Some areas of strengthening required, with action plans in place.
	Requires Improvement		No major failings occurred or predicted. Key issues exist with some minor areas of concern. Improvement plan in place.
	Inadequate		Failings have occurred or are likely to occur. Considerable issues exist with known weaknesses and areas of concern. Improvement plans yet to be developed.
Supporting Information	People Policy Assurance Supporting Document		
Basis of judgement	Following the launch of the Core Code of Ethics in May 2021 the Service took the decision to move away from our RESPECT values and behaviours framework. The implementation of the Core Code of Ethics was completed at the end of December 2021. The Code of Ethics has been built into relevant policies and procedures and is well embedded across the Service. Job applicants are encouraged to complete an ethical self-assessment tool to contextualise the		

behaviours in workplace scenarios and to ensure the ethical principles are a fundamental element of our organisational culture.

Following the publication of the Independent Culture Review of London Fire Brigade (LFB), the Service undertook a self-assessment against the report's recommendations and commenced its own internal review of culture. Subsequently following media interest in the Service, in early March 2023 the Chief Fire Officer commissioned our own Independent Review into our workplace culture. The resulting report was published in October 2023 alongside an initial management response. Comprehensive Culture Action and Delivery plans have been developed to ensure improvements are set in place, with robust governance arrangements to ensure progress is monitored and includes six monthly reporting to the Fire Authority's Finance & Audit Committee.

Supervisory and middle manager leadership programmes are in place which are augmented with additional management modules such as Managing Wellbeing and Performance. HR Business Partners and HR Central Services provide guidance and support to managers to ensure that staff perform their roles in accordance with our ethical principles. This programme is under review to ensure there was increased focus on leadership behaviours, as identified in our Independent Review.

The Service has an established Leaders Forums comprising of all strategic and middle managers. This Forum meets regularly to talk through key issues to gain wider understanding, insight, and ownership. The Forum has a comprehensive programme of development which has been developed through understanding the organisational development needs arising from the Strategic Assessment of Risk, staff surveys, and other organisational feedback. To support with our approach to leadership development managers attend a Colourworks workshop. Colourworks is a personal and team development tool using a simple and memorable four colour model to help people understand their style, their strengths and the value they bring to the team. During the course of 2023/24, in line with a recommendation from the HMICFRS values and behaviours in fire and rescue services, a 360 assessment tool was undertaken for senior leaders.

The Service is committed to workforce diversity and in support of this we have a corporate target to improve the diversity of our workforce as a whole, compared to the last five years. An Equality, Diversity and Inclusion strategy sets out our 3 and 5-year vision. Supporting these documents is an action plan that ensures we continually strengthen and improve our arrangements.

In order to better understand, engage with and support our communities our station risk profiles include community profiles to enable a more localised and tailored approach to further enhance community liaison and engagement. 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.

The Service operates open, fair and transparent recruitment and progression processes. A number of E Learning packages support our approach and include training and awareness on unconscious bias, the Equality Act, Inclusion in the Workplace as well as interview training. Our positive action work, led by our #BeOneOfUs campaign include 'have a go' sessions and buddy support via our staff networks.

A two-year strategic workforce plan is in place and is updated every two years in line with the refresh of our Strategic Assessment of Risk document. The plan identifies high level risks and opportunities with the actions to address these then included in department work plans. The approach to completion of department succession plans has been refreshed to align with the business case process. The succession plans are completed by Heads of Departments with support from their HR Business Partner on an annual basis and are reviewed to ensure future staffing issues are identified in a timely manner allowing for appropriate plans to be set in place. Retirement profiling for all staff groups is undertaken which enables us to predict future vacancies more accurately and thereby informs our recruitment, succession planning and business continuity needs. In support of this, managers have been provided with succession planning tools, such as the nine-box grid, so that they can consider the existing skills and talent within their teams. A talent management tool and a risk matrix are also used to identify key employees who may leave the Service so that we better understand the impact such vacancies would create enabling timely succession plans can be set in place.

The 1:1 review process provides the opportunity for Managers to ensure development discussions take place and individuals are supported in their developmental activities. Our 1:1 process is an individually tailored approach ensuring a discussion and appraisal takes place at least once a year between a member of staff and their line manager. The process focusses on wellbeing, performance, and development. The process also provides a mechanism where recognition can formally be given by all members of staff to other staff in recognition of good work or performance.

The 1:1 process was co-designed by Service staff and acts as a gateway to the Service's Crew and Watch Manager uniformed promotion process. The Service's promotion process for Crew and Watch Managers is aligned to the NFCC Leadership Framework and Code of Ethics and was originally designed in partnership with the leadership consultancy group, representative bodies and HR to promote fair promotion opportunities for all. Since its launch the process has undergone a number of reviews in response to staff feedback. A Learning and Development governance procedure is in place and sets out our approach to operational training competence and assessment. An annual training plan is regularly reviewed with progress monitored by the Head of Learning and Organisational Development and is reported to the Service Delivery Team (SDT) and TRCG.

The service has development pathways available for all staff and has a suite of development programmes. A virtual Learning Hub provides a one stop shop for staff to access learning materials. Separate coaching and mentoring are also in place to support staff development.

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 through our competence recording system. The system is well embedded and monitors the competence levels of all staff groups. A Quality Assurance Framework is in place to monitor training and assessment. An Incident Command Board oversees our approach to incident command.

Apprenticeships for Firefighter and Firefighter control have been applied to new recruits to ensure acquisition training is aligned to the national framework standards and to maximise a return on the apprentice levy. DWFRS are currently an accredited sub-contracting training provider to Bridgewater and Taunton college which is monitored under OFSTED requirements for compliance with registration applied through the RoATP (Register of Apprentice Training Providers). External colleges provide additional apprenticeships to support the development pathways for specialist corporate roles i.e., CIPD (HR) and AAT (finance).

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.

The Service has adopted the national firefighter fitness standards set out in the Fire and Rescue National Framework for England and has arrangements in place to ensure staff are supported by Health & Fitness Officers and Stationbased Physical Education Instructors to achieve and maintain these standards. Access to onsite gym facilities ensures staff have ample opportunity to access equipment to maintain fitness levels and a healthy lifestyle.

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 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.

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 modules have been set in place to support managers with managing the performance of their staff.

A bullying and harassment assurance framework sets out assurance objectives and actions to support staff to ensure they are confident in raising B&H issues. This sets out methods on which the Service seeks assurance on its objectives to ensure staff are aware of how to report or deal with any bullying issues or concerns. For example, through EDI training, procedures, staff survey, posters on station, Weekly Update, monitoring data, post case reviews, and Service Delivery Reports.

The Service has a range of procedures and processes both legislative and good practice that are available for all staff to provide flexible working opportunities to improve retention. Legislative procedures include the right to request flexible working, maternity leave with enhanced contractual maternity pay and supportive return to work plans for operational staff, shared parental leave and adoption leave.

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





Policy Statement	Prevention		
Director	Assistant Chief Fire Officer – Director of Community Safety		
Date	June 2024		
Overall judgement	Outstanding		High levels of confidence. Best practice arrangements exist, no outstanding issues.
	Good	х	Good confidence, no major issues or failings.
	Adequate		Confident position. Some areas of strengthening required, with action plans in place.
	Requires Improvement		No major failings occurred or predicted. Key issues exist with some minor areas of concern. Improvement plan in place.
	Inadequate		Failings have occurred or are likely to occur. Considerable issues exist with known weaknesses and areas of concern. Improvement plans yet to be developed.
Supporting Information	Prevention Policy Assurance supporting documentation		
Basis of judgement	Our Strategic Risk Assessment has identified an increasing need for engagement with individuals and households to reduce fatalities and serious injuries from fires, and to prevent unnecessary hospital stays. This assessment draws on local risk analysis through Station and Community profiling, focusing on the demographics and vulnerabilities of our communities. This enables us to better target high-risk individuals and households.		
	To achieve our goals, we are using our brand and reputation to enhance safety from fire incidents, road collisions, and to promote positive health choices. Our primary focus is on supporting the most vulnerable through targeted		

resource allocation. This includes Safe & Well visits, conducted by trained advisors or operational crews, which are personalised home visits addressing both health and fire risks. These visits are centred around the individual's needs, behaviours, and living environment.

Internally, we utilise incident data combined with Experian Mosaic data to pinpoint high-risk areas, collaborating with partner agencies for effective prevention services. Our partnerships have increased referrals, extending our support to more vulnerable individuals. We also provide safety advice and facilitate referrals through our Service website for community concerns.

We actively participate in national and local campaigns to raise awareness of fire risks, collaborating with partners to disseminate safety messages through various channels. Additionally, we have developed educational resources aimed at high-risk road users, supported by partnerships for casualty reduction and new initiatives. Our engagement extends to youth development programmes, including the "Dorset & Wiltshire Inspirational Education" initiative (DWISE), designed to promote healthier and safer lifestyles among children and young people.

Addressing arson remains a priority, involving partnerships with various agencies such as Youth Offending Services and the Police. Our School Education officers have developed virtual lessons to promote fire safety in future generations.

Safeguarding vulnerable individuals is integral to our work. We work closely with partners to ensure robust support systems are in place, with staff trained to identify and respond to safeguarding concerns promptly. Our involvement in local meetings and boards ensures a coordinated approach to safeguarding. We continue to adopt an integrated risk management approach encompassing prevention, protection, and response. This aligns with national standards to ensure effective risk assessment and proactive service delivery. Evaluating our interventions through a dedicated prevention evaluation framework helps us maintain service quality across diverse communities.

Our participation in the Southwest Emergency Services Collaboration Programme supports our commitment to data analytics and collaborative working. This initiative aims to integrate multi-agency data to enhance vulnerability assessment and early intervention strategies, promoting closer collaboration across emergency services and public health bodies.

In summary, we continue to enhance community safety through targeted engagement, strategic partnerships, and innovative approaches to risk management and data analytics.





Policy Statement	Protection		
Director	Assistant Chief Fire Officer – Director of Community Safety		
Date	June 2024		
Overall judgement	Outstanding		High levels of confidence. Best practice arrangements exist, no outstanding issues.
	Good	х	Good confidence, no major issues or failings.
	Adequate		Confident position. Some areas of strengthening required, with action plans in place.
	Requires Improvement		No major failings occurred or predicted. Key issues exist with some minor areas of concern. Improvement plan in place.
	Inadequate		Failings have occurred or are likely to occur. Considerable issues exist with known weaknesses and areas of concern. Improvement plans yet to be developed.
Supporting Information	Protection policy assurance supporting documentation		
Basis of judgement	We fully acknowledge 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 recognise our 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. We provide advice and support for businesses to discharge their legislative duties through web advice, social media, and involvement in business groups like the Chamber of commerce. We are also working to		

the NFCC/CQC memorandum of understanding to raise standards and reduce risk within care settings, Due to the progressive work that we have undertaken in this area we are now the NFCC Regional lead for the CQC. The Service offers, through its website, a number of alternative routes for people in the community to raise fire safety concerns they may have. Where concerns for safety are received, each is assessed, and an inspector is tasked to deal with the issue by the provision of advice by email or phone, a site visit or a multi-agency visit. Where we are not the enforcing agency for an enquiry, we refer to the primary enforcing agency.

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, including the Building Safety Act 2022, Fire Safety Act 2021 and the Fire Safety (England) Regulations 2022. This work has been 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 risk 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.

In line with the requirements of the Environment and Safety Information Act 1988 we publish and update a register of all enforcement action taken on premises. These are placed on the NFCC enforcement register. The Government's 'Focus on Enforcement' paper (2013) encourages a consistent approach to the advice given to businesses, and in the assessment of compliance. Having invested in a Prosecution Team we have taken the lead in steering the NFCC Enforcement working group. We employ various enforcement tools to bring conditions to an acceptable level, following our Enforcement Plan. The Enforcement Management Model is used to compare initial audit outcomes with the actions taken. More serious failures may result in formal enforcement action. Our procedural documents adhere to NFCC guidance.

The Service Risk Based Inspection Plan (RBIP) commenced in April 2021 and ran until the end of March 2024 in line with the Community Safety Plan 2021-2024. It included a combination of premises selected based on their high-risk scores from a calculation matrix, inclusion of the Building Risk Review (BRR) list, or specific risks and anticipated poor levels of fire safety compliance. The Risk Based Intervention Programme (RBIP) 2024-2028 aligns with the Community Safety Plan and commenced on the 1 April 2024. The reference to 'inspection' has been replaced with 'intervention' to align with the revised NFCC risk-based methodology and to reflect the value of alternative methods of engagement with relevant premises and RP's.

Competent fire safety inspectors, as assessed against the guidance provided by the NFCC Competency Framework Document, conduct all audits and through enhanced fire safety training for our response crews, we are able to undertake Business Fire Safety Checks (BFSC) which improve our outreach to smaller businesses.

	In 2023, DWFRS implemented an approach to address unwanted fire signals, aiming to improve operational efficiency and effectiveness. A call challenge process was introduced for commercial premises, specifically between 08:00 and 18:00 each day, following the success of this initiative, from the 1 April 2024 the call challenge process has been extended to a 24hr period each day.
	We have well embedded partnership working processes in place and have developed positive relationships with other enforcing agencies such as Building Control and Local Authority Licencing. These partnerships facilitate the sharing of data and/or intelligence and allow us to undertake joint visits and consultations on premises to achieve common safety aims.
There are no significant is	sues arising from the application of this policy that are not already in mitigation.



DORSET & WILTSHIRE FIRE AND RESCUE AUTHORITY

Policy Statement	Response and Resilience			
Director	Assistant Chief Fire Officer – Director of Community Safety			
Date	June 2024			
Overall judgement	Outstanding		High levels of confidence. Best practice arrangements exist, no outstanding issues.	
	Good	х	Good confidence, no major issues or failings.	
	Adequate		Confident position. Some areas of strengthening required, with action plans in place.	
	Requires Improveme		No major failings occurred or predicted. Key issues exist with some minor areas of concern. Improvement plan in place.	
	Inadequate		Failings have occurred or are likely to occur. Considerable issues exist with known weaknesses and areas of concern. Improvement plans yet to be developed.	
Supporting Information	Response and Resilience policy assurance supporting document			
	 Resilience Resilience is all about being prepared and ready to handle emergencies effectively to ensure the safety of people. As a Category 1 Responder, we have a crucial role to play. In accordance with the Civil Contingencies Act, we collaborate with Local Resilience Forums (LRF) to ensure we are well-prepared for any emergency situation. Here is a breakdown of what we do: Risk Assessment: We evaluate the likelihood of emergencies occurring in our area and use this information to plan for contingencies. 			

- Emergency Plans: We create detailed plans to respond to emergencies and ensure smooth operations during incidents.
- Business Continuity: We establish arrangements to maintain essential business functions in case of unexpected disruptions.
- Public Information: We disseminate crucial information to the public regarding civil protection matters and have mechanisms in place to warn, inform, and advise them during emergencies.
- Collaboration: We share information with other local responders to enhance coordination and work together effectively.
- Cooperation: We cooperate with other local responders to ensure a coordinated and efficient response.

We take our responsibilities under the Civil Contingencies Act seriously and actively participate in both LRFs that cover our area. We have robust internal business continuity arrangements in place to fulfil our statutory obligations during large-scale emergencies. These plans undergo regular testing and enable us to effectively support the overall plans developed in partnership with the LRFs. The Director of Service Support serves as the deputy chair for both LRFs, with other officers supporting and leading the various sub-groups within the LRF as well as our territorial group managers contributing towards LRF business management meetings. This integration ensures that our plans and responses align with those of our partners.

To improve efficiency and effectiveness, our training managers actively participate in LRF training and exercising meetings, fostering a collaborative approach. Additionally, our Media and Communications Manager and wider team plays an active role in warning and informing groups within the LRFs, supporting various communication campaigns, such as the National Health Service winter flu campaign and the Met Office's 'Get Ready for Winter' campaign.

Regular risk meetings are held within each LRF to assess new and emerging risks and review existing ones. We actively attend the Risk Review Groups and contribute to risk assessments, particularly in our areas of expertise, such as hazardous materials and the associated training and exercise arrangements. LRF plans are designed to mitigate risks outlined in the Community Risk Register, and we actively engage with Category 1 and Category 2 Responders, as well as the third sector, to ensure an effective and integrated emergency management approach. We use the information gathered during this process to inform our own Community Risk Management Plan, prevention strategies, protection measures, business continuity efforts, and response plans.

Furthermore, we conduct an annual analysis to align the risks identified in our organisation's risk register with those outlined in the community risk registers owned by the LRFs. We also regularly review national risks and

those within the National Security Risk Assessment (NSRA) to ensure appropriate arrangements are in place, aligned with the LRFs.

To stay ahead of emerging threats, risks, and challenges, our Service Resilience team performs a horizon scan each year. This helps us assess the suitability of our arrangements and consider potential risks. We use the best practices recommended by the Business Continuity Institute to guide this review. Additionally, we underwent an internal audit in during 2023/24, which awarded our business continuity arrangements with substantial assurance.

We conduct a Biennial Strategic Assessment of Risk (SAR) to ensure our decision-making and planning remain up to date and reflective of the current operating environment. The SAR is developed through a comprehensive PESTLEO (Political, Economic, Social, Technological, Legal, Environmental, and Organisational) analysis that considers various information, data, and intelligence sources.

Response

Our Response and Resilience policy guides our activities in handling emergencies. We have fire engines and specialist vehicles operating from 50 fire stations across our Service. Over 80% of these vehicles are staffed by On-Call Firefighters.

We have response plans in place based on risk assessments, and our mobilisation controls and procedures align with the Network Fire Services Partnership. Our Fire Control can quickly allocate and mobilise resources based on real-time information received during a call.

We have Emergency Response Standards that set challenging targets for various types of incidents. These standards reflect research on fire survivability conducted by Exeter University. Our target response times include call handling, mobilisation, and travel time.

To reduce the risk of fires, we increase prevention activities for premises outside the 10-minute response time. This is managed through the Risk Based Inspection Programme for commercial premises and the Pinpoint system for domestic premises.

We monitor our performance in meeting response times and report to the Fire Authority. If response times are not met, we scrutinise incidents to learn and improve. We constantly work on minimising response times in rural areas and ensure the availability of operational resources through effective monitoring and planning.

	We are actively working to attract and retain On-Call firefighters. Our optimum On-Call availability across 2023/24 was 75.1%. We are aware of the challenges in recruiting and retaining On-Call firefighters in rural areas and have implemented measures to address this issue.			
	We gather site-specific risk information to assess risks during incidents. Strict governance and quality assurance processes are in place for this information. Operational crews can access risk information on Mobile Data Terminals and Risk Information Tablets. We also share risk information with other Fire and Rescue Services through Resilience Direct.			
	We have operational guidance documents aligned with National Operational Guidance and monitor NFCC Fire standards for alignment. Our Control Operators undergo training and are assessed against national standards.			
	Our incident command framework follows the levels outlined in National Operational Guidance. We provide multi-agency incident command training to support incident commanders. Our internal exercising procedure ensures our operational crews are prepared for foreseeable incidents.			
	Overall, we are committed to ensuring effective response and resilience in handling emergencies.			
There are no significant issues arising from the application of this policy that are not already in mitigation.				





Policy Statement	Health and Safety		
Director	Deputy Chief Fire Officer		
Date	September 2024		
Overall judgement	Outstanding		High levels of confidence. Best practice arrangements exist, no outstanding issues.
	Good	Х	Good confidence, no major issues or failings.
	Adequate		Confident position. Some areas of strengthening required, with action plans in place.
	Requires Improvement		No major failings occurred or predicted. Key issues exist with some minor areas of concern. Improvement plan in place.
	Inadequate		Failings have occurred or are likely to occur. Considerable issues exist with known weaknesses and areas of concern. Improvement plans yet to be developed.
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 this agenda's all- embracing nature, the Service has a well-established 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. Members are regularly appraised of the health and safety arrangements and any significant issues. The Finance & Audit Committee receive a quarterly performance overview of progress against the health and safety Key Line of Enquiry supported by a number of Key Performance Indicators.		

	To support the process of assurance an assurance framework has been long established that integrates the expectations set out in this policy. The assurance statement also aligns and supports the ISO 45001 for which the Service was fully accredited to in 2020 and undertakes six-monthly continual assessment audits to the health and safety standard. The assurance framework provides a means for a holistic annual assessment against this important agenda and is scrutinised by the Health and Safety Committee before being collectively approved by senior leaders. This approval process 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.			
	There is a good position established in terms of maintaining sound management controls and positive performance trends against key performance indicators. There are no significant issues or failing occurring or being predicted in terms of health and safety.			
There are no significant issues arising from the application of this policy that are not already in mitigation.				