OVERVIEW & SCRUTINY COMMITTEE

CAMBRIDGESHIRE & PETERBOROUGH FIRE AUTHORITY
Working together to improve community safety

Date:Thursday, 06 October 2022

14:00hr

Fire Authority Headquarters
[Venue Address]

AGENDA

Open to Public and Press

1. **Apologies for absence and declarations of interest**

Guidance on declaring interests is available at
http://tinyurl.com/ccc-conduct-code

2. **Minutes and Action Log**

Minutes - 21 April 2022

2b. **Action Log - October 2022** 5 - 6

3. **Petitions and Public Questions**

OVERVIEW

4. **IRMP Performance Measures** 7 - 16

5. **Fire Authority Programme Management Monitoring Report** 17 - 30

AUDIT

SCRUTINY

The Overview & Scrutiny Committee comprises the following members:

For more information about this meeting, including access arrangements and facilities for people with disabilities, please contact

Councillor Sebastian Kindersley (Chair)   Councillor Simone Taylor (Vice-Chair) Councillor Andrew Bond and Councillor Scott Warren Councillor Ian Gardener Councillor John Gowing Councillor Mac McGuire   Councillor Catherine Rae

Clerk Name:	Daniel Snowdon
Clerk Telephone:	01223 699177
Clerk Email:	daniel.snowdon@cambridgeshire.gov.uk

Fire Authority
Overview and Scrutiny Committee

Minutes - Action Log

This is the updated action log as at 6 October 2022 and captures the actions arising from the most recent Overview and Scrutiny Committee meetings and will form an outstanding action update to Members on the progress on compliance in delivering the necessary actions.

Minute No.	Report Title	Action to be taken by	Action	Comments	Status
Minutes of the April 2022 Committee					
29	IRMP Performance Measures	ACFO	Members requested that the year be included on the bar charts and trend data be included within the report.	**Update 6 October 2022** Year to be included on annual reports and trend data included as and when available on all reports.	**Completed**
		ACFO	Members sought further information regarding partnership working with mental health services. Memorandum of Understanding with EEAST has been entered into and would be shared with the Committee.	**Update 6 October 2022** Memorandum of Understanding circulated to Committee Members via email on 24 September 2022.	**Completed**

TO:	Overview and Scrutiny Committee
FROM:	Assistant Chief Fire Officer (ACFO) – Jon Anderson
PRESENTING OFFICER(S):	Assistant Chief Fire Officer (ACFO) – Jon Anderson
	Telephone: 07711 444201
	Email: jon.anderson@cambsfire.gov.uk
DATE:	6 October 2022

INTEGRATED RISK MANAGEMENT PLAN PERFORMANCE MEASURES

1.   Purpose

1.1   The purpose of this report is to provide the Overview and Scrutiny Committee with our performance against our Integrated Risk Management Plan (IRMP) performance measures.

2.   Recommendation

2.1   The Committee is asked to note the contents of the performance report in Appendix 1 which covers the first quarter of the year, 1 April to 30 June 2022. The Committee is asked to make comment as they deem appropriate.

3.   Risk Assessment

3.1   **Political** - The IRMP process, outlined in the Fire and Rescue National Framework for England, requires the Authority to look for opportunities to drive down risk by utilising resources in the most efficient and effective way. The IRMP has legal force and it is therefore incumbent on the Authority to demonstrate that its IRMP principles are applied within the organisation.

3.2   **Economic** - The management of risk through a proactive preventable agenda serves to not only reduce costs associated with reactive response services but also aids in the promotion of prosperous communities.

3.3   **Legal** - The Authority has a legal responsibility to act as the enforcement agency for the Regulatory Reform (Fire Safety) Order 2005. As a result, ensuring both compliance with and support for business to achieve are core aspects of the fire and rescue service function to local communities.

4.   Equality Impact Assessment

4.1   Due to the discriminative nature of fire, those with certain protected characteristics are more likely to suffer the effects. Prevention strategies aim

to minimise the disadvantage suffered by people due to their protected characteristic; specifically, age and disability.

5.   Background

5.1   The IRMP is a public facing document covering a four year period and represents the output of the IRMP process for Cambridgeshire and Peterborough. The document reviews the Service's progress to date and highlights initiatives that may be explored to further improve the quality of operational service provision and importantly in balance, further reduce the level of risk in the community.

5.2   The integrated risk management process is supported using risk modelling. This is a process by which performance data over the last five years in key areas of prevention, protection and response is used to assess the likelihood of fires and other related emergencies from occurring; we term this 'community risk'. This, together with data from other sources, such as the national risk register and our business delivery risks, is then used to identify the activities required to mitigate risks and maximise opportunities. Measures are then set to monitor and improve our performance.

5.3   Previously we have determined our attendance standards based on to what we believe we are being mobilised at the point of call received. This can mean that the data held in the attendance times may not be accurate as a call of a house fire may be a false alarm. In call year 2022/23, commencing 1 April 2022, we started to record our attendance times on the confirmed incident that we attended to remove this inaccuracy.

BIBLIOGRAPHY

Source Document	Location	Contact Officer
IRMP 2020 - 24	Hinchingbrooke Cottage Brampton Road Huntingdon	Jon Anderson 07711 444201 jon.anderson@cambsfire.gov.uk

## Overview and Scrutiny Committee – IRMP Performance Review 2022/23 Quarter 1

The Service will respond to the most serious incidents within an average of 9 minutes in urban areas and 12 minutes in rural areas for the first fire engine in attendance. 95% of incidents in the authority area will be responded to within 18 minutes for the first fire engine in attendance. Most serious incidents are defined as fires, rescues from water and road traffic collisions.

Attendance times – first pump – most serious incidents – urban area within 9 minutes.

Call Year to Date ▼ -6.1%
07:41 07:13

Rolling 5 Years ▼ -2.6%
07:42 07:52 07:47 07:29 07:30
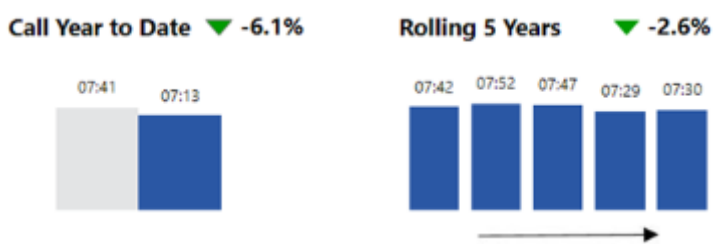
This quarter the Service is responding to the most serious incidents in urban areas in 07:13. This is nearly 2 minutes quicker than the 09:00 measure.

Attendance times – first pump – most serious incidents – rural area within 12 minutes.

Call Year to Date ▼ -2.0%
12:05 11:51

Rolling 5 Years ▼ -0.6%
12:16 12:26 12:18 12:20 12:12
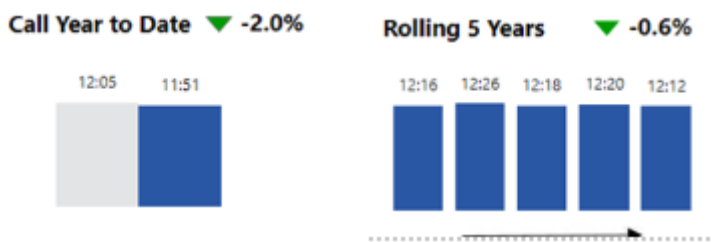
The Service has performed well against rural attendance times and at 11:51, have performed 9 seconds quicker than the 12 minute measure.

Attendance times – first pump – all incidents within 18 minutes on 95% of occasions

Call Year to Date ▼ -0.8%
96.6% 95.8%

Rolling 5 Years ▲ 1.1%
94.6% 94.7% 94.7% 95.5% 95.6%
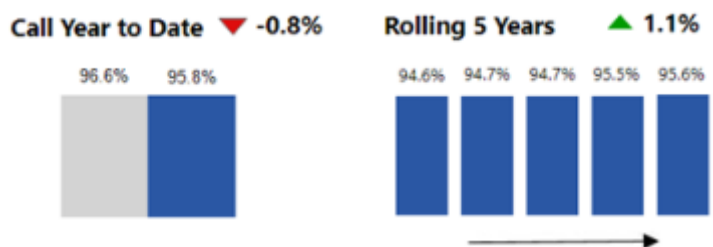
The Service continues to exceed this measure of 95% by 0.8% which is a slight increase on the same time last year, but a slight improvement on the 12 month rolling average.

The Service will be monitoring the following areas to ensure that effective decisions are made regarding the targeting of resources:

- The number of primary and secondary fires,

- The number of associated deaths and injuries from fire,

- The number of people killed and seriously injured on Cambridgeshire roads,

- The number and type of special services that we attend,

- The diversity of job applicants and employees.

Total Fires

Call Year to Date ▲ 8%   Rolling 5 Years ▲ 4%

513   552

2311
1843   2047   1645   1915
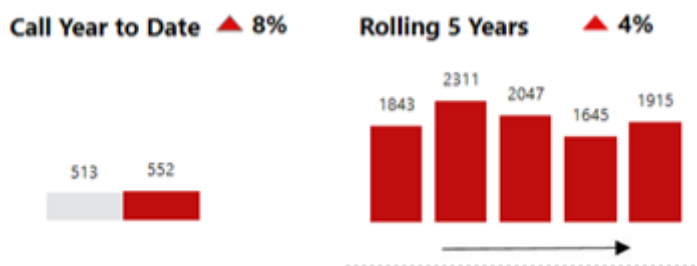
These is a slight increase to the same period last year.

South Cambridgeshire has seen a slight increase in total fires (particularly deliberate stack fires and accidental private garden sheds) with 86 fires this quarter compared to 52 fires last year.

Primary Fires

Call Year to Date ▲ 15%   Rolling 5 Years ▼ -2%

208   239

909   933   955   805   895
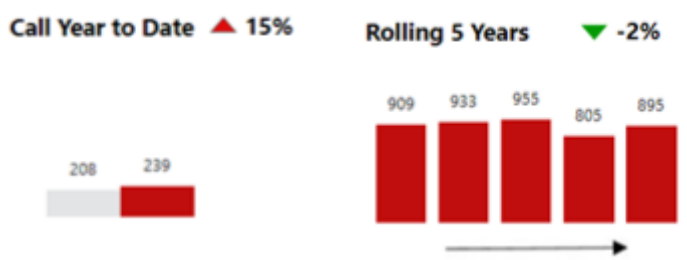
There has been a 15% increase on last year, however the rolling 5 year figure is down by 2%.

Secondary Fires

Call Year to Date ▼ -1%

300   296

Rolling 5 Years ▲ 11%

877   1327   1062   807   974
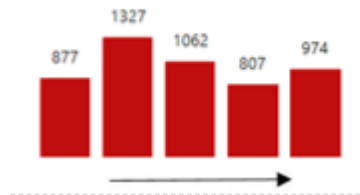
There has been a marginal decrease in secondary fires in this quarter compared to the same period last year. The rolling 5 year average is up by 11%.

Fire Deaths

Call Year to Date

0   0

Rolling 5 Years ▲

2   4   1   5   5

There have been no fire deaths in the first quarter of this year.

Fire Casualty

Call Year to Date ▼ -40%

Report chart

15   9

Rolling 5 Years ▼ -3%

38   73   47   43   37
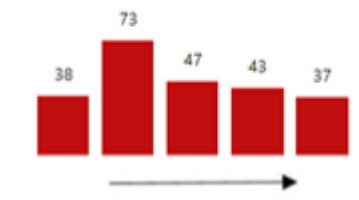
The service has seen a decrease this quarter (eight people) compared to the previous year (fifteen people). These eight injuries occurred at seven separate incidents. Four people were sent to hospital (one serious and three slight injuries), three people received first aid at scene and one person was precautionary check recommended.

Road traffic collisions attended

Call Year to Date ▼ -8%

77 71

Rolling 5 Years ▼ -19%

471 470 388 346 381

We have attended 71 road traffic collisions in this call year to date, this is slightly lower than the same period last year.

People killed or seriously injured in road traffic collisions

Call Year to Date ▼ -68%

97 31

Rolling 5 Years ▼ -1%

358 424 375 353 356
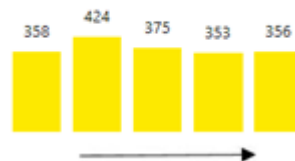
The police data has been received for April and May 2022 but it is too early in the month for July data, which is why the quarter figures (31) look that much lower compared to last year (97).

Special service incidents attended

Call Year to Date ▲ 6%

321 341
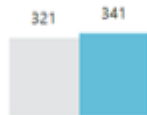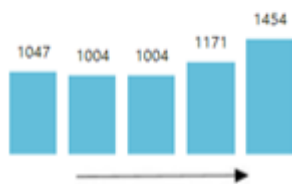
We have attended 341 special services incidents this year to date. This is a 6% increase on the same period last year.

Rolling 5 Years ▲ 39%

1047 1004 1004 1171 1454

The largest contributors to this are an increase in co-responding and assisting other agencies, making safe, effecting entry/exit and other rescue/release of persons. We have also seen a slight increase in animal rescues.

Applicant diversity over a rolling 5 year period

Applicant Diversity over a rolling five year period		
Female	**Female and Operational**	**Black, Asian and Minority Ethnicity**
2022 — 31.2% ▲ 0.6%	2022 — 16.5% ▲ 1.4%	2022 — 9.5% ▲ 3.3%
2018 — 30.6%	2018 — 15.1%	2018 — 6.2%
Declaring themselves LGBT	**Declaring a Disability**	**Declaring Other Religion/Belief**
2022 — 3.9% ▼ -0.2%	2022 — 3.2% ▲ 0.3%	2022 — 4.2% ▲ 0.8%
2018 — 4.1%	2018 — 2.8%	2018 — 3.4%

The number of applicants remains significantly reduced year on year (285 this year, 565 last year). This remains due to a lack of wholetime applicants this year, but also a dramatic decrease in professional support applications (127 this year, 391 last year).

9.5% of applicants overall declare as being from a black and minority ethnic community (8.2% of on-call applicants and 11% of support applicants). 3.7% of all recruits in the year declared as being from BAME backgrounds (2.9% (one person) of on-call recruits and 6.3% (one person) of professional support recruits).

31.2% (89 people) of all applicants were female. 16% of on-call applicants were female and this translated through to the proportion of on-call new recruits who were female being 15% (five people). Overall, 16% of new operational recruits were female (six people). Exactly 50% of support new recruits were female (eight people). Overall, 25.9% of all new recruits were female.
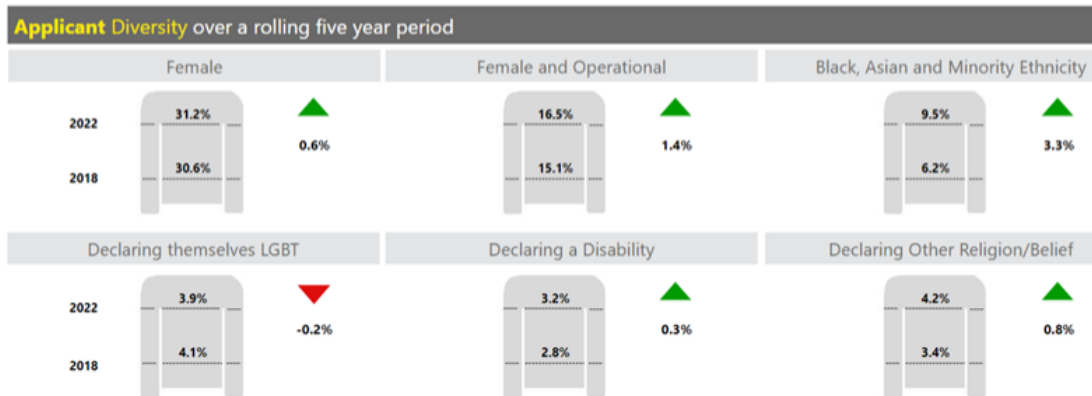
3.2% (nine people) of all applicants declared a disability; this translated to 1.9% of all new recruits (one new member of professional support staff).

4.2% (twelve people, down slightly from 5.7% last year) of all applicants declared an 'other' religion/belief. However no new recruits in the period declared an 'other' religion/belief.

7.4% of all new recruits declared identifying as LGBT.

Workforce Diversity
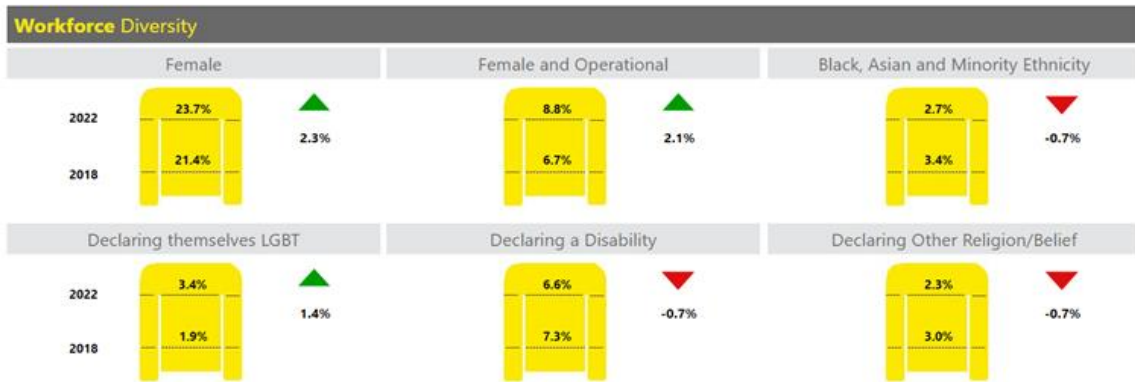
The Service Full Time Equivalent (FTE) workforce at 31 March 2022 was 538.2 compared to 573.4 last year. Head count by main job is 627 (down from 642 last year; the reductions come from the wholetime and professional support areas).

The proportion of staff from black and minority ethnic communities remains 2.7% (20 people) down from 2.9% (22 people) last year. There is one less manager from a BAME background this year compared to last year (lost from wholetime).

23.7% (175 people) of the workforce overall is female; 8.8% of the operational workforce (44 people, breaking down as 8.4% of the wholetime workforce and 9.1% of the on-call workforce). 23.6% of all managers are female (5.8% (eleven people) of operational managers are female; seven wholetime and four on-call. This is up from 4.7% (nine people) year on year.). 81% of Combined Fire Control (CFC) managers are female (up from 78% last year and is now more aligned to the proportion of female staff in CFC). 57.8% of managers in support are also female.

3.4% (25 people) of the workforce declare identifying at LGBTQIA+ up from 2.8% (21 people) last year.

We will be working to support businesses to ensure compliance with the fire safety order and we monitor this through:

The number of non-domestic fires

Year to date
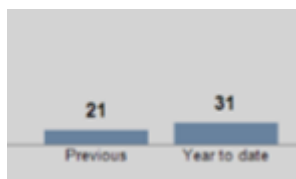
Rolling 5 years

There has been an increase this quarter to 31 compared to 21 in the same period last year.

There have been four fires in factory/warehouses and three fires in hospitals recorded in this quarter compared to none last year. The main cause of these fires has been faulty fuel supply, fault in equipment or overheating.

119 106 116 101 119
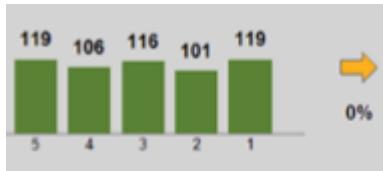
No fire related casualties this quarter.

The rolling 5 year data shows that the figures are largely stable and consistent.

The number of business engagements identified through our risk based audit programme

Year to date
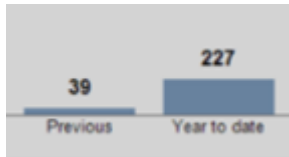
There have been 227 business engagements carried out by the watches in quarter 1 compared to 39 last year.

39 Previous **227** Year to date

Rolling 5 year

830 759 573 54 594
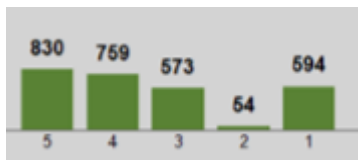
To ensure that delivery of value for money for communities, the Service will monitor:

Collaborations and the benefits that these bring the Service, partners and communities.

The Service continually monitor collaborations to ensure that they are continuing to deliver benefits to the Service or communities. Collaborations will cease if they are not delivering the benefits as required. The Service actively seeks to collaborate and over the past year have entered new collaborations.

Savings achieved through improved business practices. These may be financial savings and/or more efficient ways of working.

The Service looks to use technology to automate business processes and deliver improvements using technology. Work is delivered through the digital strategy to achieve these. Work has also been conducted to look at spend and identify ways to reduce these, as well as engagement with suppliers to jointly look at ways to reduce the impacts of increased costs of goods. The Service continually evaluates activities to ensure that they are delivering the anticipated benefits and that making best use of our resources. The Service has also been engaged in reviewing finances and considering financial business continuity plans due to the predicted future budgetary pressures that will be faced.

TO: Overview and Scrutiny Committee

FROM: Deputy Chief Executive Officer - Matthew Warren

PRESENTING OFFICER(S): Deputy Chief Executive Officer - Matthew Warren

                                        Telephone - 07768 023436
                                        Email - matthew.warren@cambsfire.gov.uk

DATE: 6 October 2022

FIRE AUTHORITY PROGRAMME MANAGEMENT – MONITORING REPORT

1.   Purpose

1.1   The purpose of this report is to provide the Overview and Scrutiny Committee with an update against the projects for 2022/23.

2.   Recommendation

2.1   The Committee is asked to note the Programme Status Report, as of September 2022, attached at Appendix 1.

3.   Risk Assessment

3.1   **Political/Economic/Legal** – successful achievement of agreed corporate priorities is at risk if the Authority does not have a robust and structured programme and project management governance framework to support the effective prioritising of investment decisions and the allocation, management and control of resources required to achieve them.

4.   Background

4.1   To support the Service in its strategic planning process, the IRMP action plan for the financial year 2022/23 has been drafted to mitigate the risks posed to the Service achieving its vision and the opportunities that could be pursued to ensure the vision is realised.

4.2   The planning process for this considers the Service's key stakeholders who have been identified as;

- Citizens of Cambridgeshire and Peterborough,
- All employees,
- Senior leadership team,
- Fire Authority,
- Regional fire and rescue services,
- Partners,

- Home Office and other government stakeholders.

4.3 Each year the action plan for the forthcoming financial year is reviewed to take account of changing risks and opportunities posed to the Service and considers external factors.

4.4 Having identified the desired outcomes, potential projects and activities required to achieve these are evaluated and prioritised, taking into account any projects from the current financial year that will need to continue into the next to be completed.

4.5 The evaluation criteria focus on the following areas;

- Benefits realisation – outlining the key benefit areas and how they can be achieved,

- Technical complexity – focusing on the complexity of the technical solution,

- Financial implications – including the estimated time and costs for project implementation and post project operational support,

- Business impact – covering the impact on key stakeholders and the organisation,

- Risks – the extent of risk exposure facing the organisation,

- Opportunities – potential opportunities for business development.

4.6 This identifies the Type 3 and Type 2 projects that will be given priority in the Business Development Programme for the coming financial year. This will be kept under review and consideration will be given by the Programme Board to suspending existing projects and bringing forward the start of other projects, dependent on the prevailing business and strategic priorities. The primary focus of the Programme Board is to ensure resources across the Service are balanced appropriately.

5.   Progress Report on Corporate Projects 2022/23

5.1 The status of projects linked to delivery of corporate priorities is shown at Appendix 1.

BIBLIOGRAPHY

Source Document	Location	Contact Officer

Programme Status Report	Fire Service HQ Hinchingbrooke Cottage Huntingdon	Matthew Warren 01480 444619 matthew.warren@cambsfire.gov.uk

Type 3 (High)

Projects	Issues	Successes	Project Performance	
P108 Replacement ICCS & Mobilising Solution **Project Sponsor: Matthew Warren** **PM: Nicky Hoad** **Completion Date: Contract Award October 2019** **Go Live TBC** **Overall status: Red due to timescales**	Amount of annual leave throughout the summer in France has meant key supplier personnel have been unavailable which has caused some delays to activities. Outstanding issues around <u>IP crossover</u> on network between CFRS/SFRS and Hunt Groups on PSTN lines needed for Station End Equipment. Possible move for supplier from Oracle to SQL may cause delays. Awaiting confirmation from supplier on, if and when, this will go ahead and timescales. Awaiting access details and credentials to enable us to carry out both internal and external health checks required for DCS.	Two further visits planned to supplier in France. First visit w/c 12 September to drive forward outstanding issues and second visit at end of September. Refresher training carried out w/c 28 August in person and positive feedback received. DCS installation by Airwave booked for w/c 19 September for four weeks. Temporary testing certificate received from Home Office to allow testing to commence once installed. Majority of data returned to supplier.	**Board** (green) **Team** (green) **Budget** (green) **Risk** (red) **Controls** (green) **Timescales** (red)	

P137 Review of Operations **Project Sponsor: Chris Strickland** **Project Manager: Stuart Smith** **Project Manager/Lead Simon Thompson** **Completion Date: Phase 1 High Level Business Cases - May 22** **Phase 2 Detailed Business Cases – Deviation Report being drafted** **Overall status: Green**	No current issues to report.	Initial timescales of completion for project requested to be extended. Project brief being updated to clearly show the two sides of the project, service improvement and financial contingency planning. 21 workstreams remain in the service improvement section of the project. Good progress being made on a number of key workstreams including operational degradation, data for categorisation and training days. Focus for Project Manager is working on the financial contingency business continuity plan ready for Fire Authority. Focus on communications – ongoing face to face engagement and embedding further focus group alongside regular update communications.	**Board**	Reporting direct to COAG
			Team	
			Budget	
			Risk	
			Controls	
			Timescales	Deviation report being compiled

Projects	Issues	Successes	Project Performance	
P135 Finance System Software Replacement Project **Project Sponsor: Matthew Warren** **Project Manager: Ursula Bird** **Completion dates: October 2023** **Overall status: In planning**	Conflicting priorities / annual leave may impact the planned timescales. (Go live now expected October 2023.)	Completed market research and business analysis i.e. mapping of requirements and user stories. Project Board agreed to go to full tender.	**Board**	
			Team	
			Budget	
			Risk	
			Controls	
			Timescale	
P140 Microsoft 365 implementation and cultural change **Project Sponsor: John Fagg** **Project Manager: TBC** **Completion date: 2 years; first three months scoping the tools to be delivered, two months in planning the roll out 19 months dedicated to the roll out and cultural change activities to achieve the project objectives.** **Overall status : In planning**		Looking to recruit project manager for two years to deliver this cultural change. Job evaluation being written and expect advert to go out towards end of September. Project Manager will look at the business needs and work with stakeholders to identify those toolkits within 365 that will deliver the maximum benefits.	**Board**	
			Team	
			Budget	
			Risk	
			Controls	
			Timescales	

P111 Day Crewed Shift System Project		End Project Report in process of being drafted and will be presented to September Programme Board.	Board	
Project Sponsor: Jon Anderson			Team	
PM: Danny Kelly			Budget	
Completion date: Negotiations/Sign collective agreement July 2019			Risk	Agreement in CFRS, but delay regionally with FBU
Implementation – Start of End date for agreement TBC			Controls	
Status: Amber			Timescales	Proposed Agreement was by June 2021
P126 Huntingdon Relocation	Keeping a close eye on water discharge application which requires approval (part of planning conditions) due to lead times provided by supplier.	Supplier still working towards building handover date of 26 September.	Board	
Project Sponsor: Matthew Warren				
Project Manager: Jodie Houseago		Training building work progressing well, moved handover date back a week (now 30 September) to allow for resolution to shipment delay issues and power to be on. This does not have any knock-on effects for our transition timelines.	Team	
Completion date:				
Planning phase – August 2021	Network supplier has withdrawn previously issued completion date for a live site connection but now work is scheduled for this week and next.		Budget	
Build completion - September 2022			Risk	
Move – Decemebr 22				
Status: Green				
	Issue identified today (6 September) regarding power on site but prioritising activity to resolve this ASAP.	Regular monthly onsite meeting on 5 September saw the introduction of an informal snagging walk around to allow CFRS to provide initial feedback on the completed		
P126 Huntingdon Relocation cont.			Controls	

		room types. Successful site visit as able to see progression in completed room types and prompted further plans. Majority of Project Managers time currently spent working through multiple information requests/ queries which are coming in from various sources as well as planning transition. High level transition plan has been approved at Board, Project Manager now working up lower level detail. The build stage of the project will be coming to an end (end of September) and the commissioning stage will then commence. This will see ICT and Property fitting out the site, ready for occupation.	**Timescales**	Build completion September 2022 but still on track to complete overall as originally planned project end date of December 2022.

P122 Training Centre Review Project Sponsor: Wayne Swales Project Manager: Vicky Best Completion date: 1-year trial to commence Project Closure: Review of Trial - TBC Status: Amber	Training Centre instructors continue to work to the existing collective agreement. Ongoing negotiation with FBU has taken place and proposed shift is being taken to Brigade Committee, regional and national FBU for sign off. This will have been completed by 6 October when we will know outcome. Reporting on the project remains paused until there is an outcome from the on-going negotiations.	Proposed new shift system with updates to collective agreement have been agreed in principle with FBU and Training Centre instructors. Has been agreed at Brigade Committee. Being taken to region 15/16 September then Executive Committee 6 October.	**Board**	
			Team	
			Budget	
			Risks	
			Control	
			Timescale	Date set for agreement 14 June.
P133 Review the Ways of Working Project Sponsor: Matthew Warren Project Manager: Clare Hesselwood Phase 1 Completion – 31 March 2022 Survey Returns 17 January 2022 (support) 24 January 2022 (operational)		End Project Report on Agenda.	**Board**	
			Team	
			Budget	
			Risk	
			Controls	

			Timescales	
Evaluation period 31 January 2022 **Report/Briefing 31 March 2022** **Status: Project closing.**				

Type 2 Projects

Project	Issues	Successes	Project Performance	
P138 On-Call Initiatives Project Sponsor: Simon Newton Project Manager: Kevin Andrews **Five separate workstreams Completion** **13.5 Ladders Q1 2022 - complete Co-Responding Q2 2022- ESR on Agenda Papworth to Cambourne Q1 2022 - Closed Crewing Q2 2022 Business Hub Q2 2022** **Status: Green**	·	**Review minimum crewing** Options appraisal scored with key stakeholders and recommendation completed for sign off. **Papworth Fire Station Move to Cambourne** Completed – Station upgraded and staff moved over to new location. Minor station improvements remaining and Papworth site being decommissioned under business as usual. **Co - Responding** Completed – Littleport and Soham stations both live and have attended co-responding calls in their communities. Policies and procedures updated and published on SharePoint. The lead for co-responding and working to bring on Cambourne, Kimbolton and Sawston under business as usual.	**Board**	Not required. Project Manager reports directly to Project Sponsor.
			Team	For each Workstream.
			Budget	Specific to each workstream.
			Risk	Risk – Capacity of digital teams and conflicting priorities with P137 work and On-call Payment and On-call Recruitment development. Industrial action and action short of strike may impact capacity and service delivery.

On-Call initiatives cont.		**Pilot Scheme Remote Working Spaces** Following successful proof of concept trial, proposal paper has been composed and a recommendation submitted for approval to make the remote working agreement business as usual to be rolled out to current staff and promoted to improve recruitment and diversity across our On-Call workforce, ensuring On-Call sustainability.	**Control**	
			Timescales	Specific to each workstream.
P125 ICU **Project Sponsor: Simon Newton** **Project Manager: John Tyrrell** **Completion Date: TBD** **Implementation TBD** **Overall status: In Planning/** **Project Paused**		July 2022 – this will form part of the wider fireground technology project that will kick off following ICCS and Mobs Go Live so not a priority to invest in this now.	**Board**	
			Team	In planning
			Budget	TBC
			Risk	
			Controls	
			Timescales	More work required on OA.

Glossary

Business as usual (BAU)
Business Intelligence & Performance team – (BIP)
Cambridgeshire Fire & Rescue Service (CFRS)
Chief Officers Advisory Group (COAG)
Combined Fire Control (CFC)
Community Fire Risk Management Information System (CFRMIS)
Community Fire Safety (CFS)
Comprehensive Spending Review (CSR)
Direct Communication Server (Airwave) – (DCS)
Emergency Services Mobile Communications Programme (ESMCP)
End Stage Report (ESR)
Emergency Services Network (ESN)
Factory Acceptance Testing (FAT)
Heads of Groups (HofG)
Incident Command Unit (ICU)
Integrated Risk Management Plan (IRMP)
Learning & Development (L&D)
On Call (OC)
Project Manager (PM)
Public Switched Telephone Network (PSTN)Service Action Notes (SAN)
Site Acceptance Testing (SAT)
D/TBC)
Training Centre (TC)
User Acceptance Testing (UAT)
Whole-time (W/T)

Library:CFRS
Document Name: Programme_Board_-_Business_Development_Status_Report. REFERENCE ONLY
Document #: 85817 – Moved to Sharepoint May 2021.
Author: JACKIE.WATSON

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CAMBRIDGESHIRE AND PETERBOROUGH FIRE AUTHORITY

FINAL Annual internal audit report 2021/22

20 September 2022

THE POWER OF BEING UNDERSTOOD
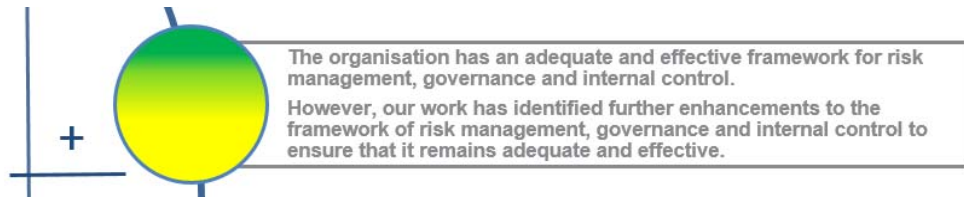AUDIT | TAX | CONSULTING

RSM

THE ANNUAL INTERNAL AUDIT OPINION

This report provides an annual internal audit opinion, based upon and limited to the work performed, on the overall adequacy and effectiveness of the organisation's risk management, control and governance processes. The opinion should contribute to the organisation's annual governance reporting.

The opinion

For the 12 months ended 31 March 2022, the head of internal audit opinion for Cambridgeshire and Peterborough Fire Authority is as follows:

The organisation has an adequate and effective framework for risk management, governance and internal control.

However, our work has identified further enhancements to the framework of risk management, governance and internal control to ensure that it remains adequate and effective.

Please see appendix A for the full range of annual opinions available to us in preparing this report and opinion.

It remains management's responsibility to develop and maintain a sound system of risk management, internal control and governance, and for the prevention and detection of material errors, loss or fraud. The work of internal audit should not be a substitute for management responsibility around the design and effective operation of these systems.

Scope and limitations of our work

The formation of our opinion is achieved through a risk-based plan of work, agreed with management and approved by the overview and scruitiny committee, our opinion is subject to inherent limitations, as detailed below:

- internal audit has not reviewed all risks and assurances relating to the organisation;

- the opinion is substantially derived from the conduct of risk-based plans generated from a robust and organisation-led risk register. The risk register and related assuranes are one component that the board takes into account in making its annual governance statement (AGS);

- the opinion is based on the findings and conclusions from the work undertaken, the scope of which has been agreed with management / lead individual;

- where strong levels of control have been identified, there are still instances where these may not always be effective. This may be due to human error, incorrect management judgement, management override, controls being by-passed or a reduction in compliance;

- due to the limited scope of our audits, there may be weaknesses in the control system which we are not aware of, or which were not brought to our attention; and

- our internal audit work for 2021/22 has continued to be undertaken through the operational disruptions caused by the Covid-19 pandemic. In undertaking our audit work, we recognise that there has been some impact on both the operations of the organisation and its risk profile; and our annual opinion should be read in this context.

FACTORS AND FINDINGS WHICH HAVE INFORMED OUR OPINION

Overview

Our Governance opinion has been informed specifically through our continued attendance at the Overview & Scrutiny Committee, as well as elements of our audits which reviewed reporting and data arrangements (for example Key Financial Controls and Sickness Absence)

Our Risk Management opinion has also been informed by our risk-based approach to individual assignments and attendance at the Overview & Scrutiny Committee.

During the year we have completed five assurance assignments, from which the Authority could take positive assurance (three substantial assurance and one reasonable assurance) these being:

- **Human Resources – Wellbeing Strategy – Substantial Assurance**
- **Key Financial Controls – Substantial Assurance**
- **CFRMIS - Collection and Update of Risk Information – governance, planning and staff training – Substantial Assurance**
- **Capital Projects – Training Centre – Reasonable Assurance**
- **Training Centre Resourcing – Reasonable Assurance**

We issued the following two reports where we concluded that the Authority could only take **partial assurance**:

Asset and Fleet Management System - Partial Assurance

We found there to be adequate controls in place with respect to schedule of works, including a planned maintenance date populated within Miquest and confirmed, from our sample of assets, that barcodes were present to allow scanning of assets for inventories. In addition, governance arrangements were in place to manage asset and equipment issues.

However, we identified a number of weaknesses that needed to be addressed. We found that processes could be improved in relation to utilising the asset management system. Miquest provided fields to be populated, such as asset cost, end of life, station location and purchase dates, however these were not being fully utilised or consistently populated. This posed a risk in being able to manage the Authority's assets and could impact appropriate budgetary decisions. In addition, the Authority did not have an Asset Management Policy in place to define the roles and responsibilities with regards to asset management, furthermore there was no central guidance on how the Authority purchased, tested and maintained their assets.

Sickness Absence Management - Partial Assurance

Our review noted a number of areas of good practice operating effectively at the Authority, including roles and responsibilities being clearly documented and defined, regular reporting and discussion of sickness absence levels throughout the organisation from the Area Commanders up through to the Chief Officers Advisory Group, an Employee Assistance Programme being in place, as well as staff being referred to Occupational Health in a timely manner, and sickness absence being recorded on the payroll system accurately.

However, our review also noted a number of areas where improvements could be made to further strengthen the control environment. These included compliance with sickness absence procedures, with exceptions identified regarding the completion of return to work meetings, maintaining a contact log, and properly recording actions against trigger points. Our testing also noted cases where doctors' notes were either not on file or did not cover the entire absence period. Additionally, COVID-19 was confirmed to have impacted the delivery of training, with no absence management training delivered since 2019.

A summary of internal audit work undertaken, and the resulting conclusions, is provided at appendix B.

Topics judged relevant for consideration as part of the annual governance statement

Based on the work we have undertaken on the Authority's system on internal control, we consider that the issues identified above within the partial assurance reviews above should be areas that are considered by the Authority to be flagged as significant control issues when drafting the Annual Governance Statement (AGS), along with any actions already taken to address the issues identified.

THE BASIS OF OUR INTERNAL AUDIT OPINION

As well as those headlines previously discussed, the following areas have helped to inform our opinion. A summary of internal audit work undertaken, and the resulting conclusions, is provided at appendix B.

Acceptance of internal audit management actions

Management have agreed actions to address all of the findings reported by the internal audit service during 2021/22.

Implementation of internal audit management actions

Taking account of the issues identified through our work, in our opinion Cambridgeshire and Peterborough Fire Authority has demonstrated **reasonable progress** in implementing agreed management actions.

Working with other assurance providers

In forming our opinion we have not placed any direct reliance on other assurance providers.

OUR PERFORMANCE

Wider value adding delivery

As part of our client service commitment, during 2021/2022, we have issued four emergency services sector briefings within our progress reports presented to the Audit Committee tailed below. We will continue to share our briefings with you during 2022/2023.

Area of work	Areas covered
Emergency Services – Sector Update: June 2021	The briefing paper provides a useful source of insight into recent developments and publications affecting the sector and provided further insight into the following areas: • Cyber Crime; • Code of Ethics for fire and rescue services; • Home Secretary to strengthen Police and Crime Commissioner role; and • The annual assessment of fire and rescue services.
Emergency Services – Sector Update: August 2021	The briefing paper provides a useful source of insight into recent developments and publications affecting the sector and provided further insight into the following areas: • Climate change risk: A guide for Audit and Risk Assurance Committees; • Risk Appetite – it's slippery; • Community Risk Management Planning; and • Fire Protection Learning Portal.
Emergency Services – Sector Update: November 2021	The briefing paper provides a useful source of insight into recent developments and publications affecting the sector and provided further insight into the following areas: • Cyber and information security; • ESG (Environmental, Social & Governance); and • Protection Fire Standard.
Emergency Services – Sector Update: March 2022	The briefing paper provides a useful source of insight into recent developments and publications affecting the sector and provided further insight into the following areas: • RSM and CIPFA Public Procurement Webinar; • Strengthening resilience: lessons learnt from the impacts of the pandemic; and • Analysis of non-fire incidents.

Best Practice	Shared best practice across the sector through our work.
Sector Experience	We have also made suggestions throughout our audit reports based on our knowledge and experience in the emergency services sector to provide areas for consideration.
Briefings	Issued non-sector specific briefings to all of our clients.
Procurement	The organisation has been invited to our RSM and CIPFA Public Procurement Webinars. These are a series of procurement and contract management network webinars offering expert advice on EU and UK public sector procurement legislation and practice. These monthly webinars include an update on current developments in public procurement as well as a more detailed discussion on a selected topical area.

Conflicts of interest

RSM has not undertaken any work or activity during 2021/22 that would lead us to declare any conflict of interest.

Conformance with internal auditing standards

RSM affirms that our internal audit services are designed to conform to the Public Sector Internal Audit Standards (PSIAS).

Under PSIAS, internal audit services are required to have an external quality assessment every five years. Our risk assurance service line commissioned an external independent review of our internal audit services in 2021 to provide assurance whether our approach meets the requirements of the International Professional Practices Framework (IPPF), and the Internal Audit Code of Practice, as published by the Global Institute of Internal Auditors (IIA) and the Chartered IIA, on which PSIAS is based.

The external review concluded that RSM 'generally conforms* to the requirements of the IIA Standards' and that 'RSM IA also generally conforms with the other Professional Standards and the IIA Code of Ethics. There were no instances of non-conformance with any of the Professional Standards'.

* The rating of 'generally conforms' is the highest rating that can be achieved, in line with the IIA's EQA assessment model.
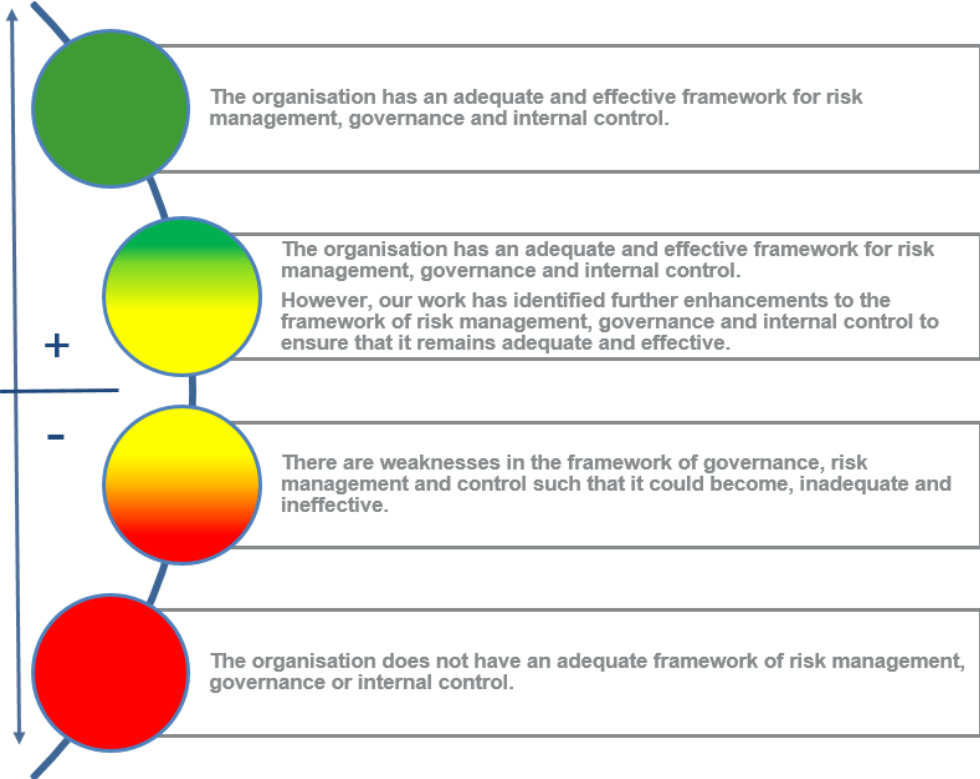
Quality assurance and continual improvement

To ensure that RSM remains compliant with the PSIAS framework we have a dedicated internal Quality Assurance Team who undertake a programme of reviews to ensure the quality of our audit assignments. This is applicable to all Heads of Internal Audit, where a sample of their clients will be reviewed. Any findings from these reviews are used to inform the training needs of our audit teams.

Resulting from the programme in 2021/22, there are no areas which we believe warrant flagging to your attention as impacting on the quality of the service we provide to you. In addition to this, any feedback we receive from our post assignment surveys, client feedback, appraisal processes and training needs assessments is also taken into consideration to continually improve the service we provide and inform any training requirements.

APPENDIX A: ANNUAL OPINIONS

The following shows the full range of opinions available to us within our internal audit methodology to provide you with context regarding your annual internal audit opinion.

Annual opinions	Factors influencing our opinion
The organisation has an adequate and effective framework for risk management, governance and internal control.	The factors which are considered when influencing our opinion are:
The organisation has an adequate and effective framework for risk management, governance and internal control. However, our work has identified further enhancements to the framework of risk management, governance and internal control to ensure that it remains adequate and effective.	• inherent risk in the area being audited; • limitations in the individual audit assignments; • the adequacy and effectiveness of the risk management and / or governance control framework; • the impact of weakness identified; • the level of risk exposure; and • the response to management actions raised and timeliness of actions taken.
There are weaknesses in the framework of governance, risk management and control such that it could become, inadequate and ineffective.	
The organisation does not have an adequate framework of risk management, governance or internal control.	

APPENDIX B: SUMMARY OF INTERNAL AUDIT WORK COMPLETED 2021/22

All of the assurance levels and outcomes provided above should be considered in the context of the scope, and the limitation of scope, set out in the individual assignment report.

Assignment	Assurance level	Actions agreed		
		L	M	H
Asset and Fleet Management	Partial Assurance [●]	2	4	0
Sickness Absence Management	Partial Assurance [●]	1	4	0
Human Resources – Wellbeing Strategy	Substantial Assurance [●]	1	0	0
Key Financial Controls	Substantial Assurance [●]	2	0	0
Capital Projects – Training Centre	Reasonable Assurance [●]	2	1	0
Follow Up	Reasonable Progress [●]	0	7	0
CFRMIS - Collection and Update of Risk Information – governance, planning and staff training	Substantial Assurance [●]	3	0	0
Training Centre Resourcing	Reasonable Assurance [●]	1	0	0

APPENDIX C: OPINION CLASSIFICATION

We use the following levels of opinion classification within our internal audit reports, reflecting the level of assurance the board can take:
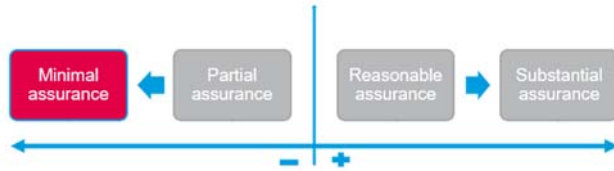
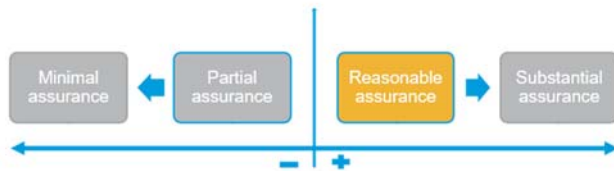|	
Minimal assurance (highlighted) ← Partial assurance — Reasonable assurance → Substantial assurance	Taking account of the issues identified, the authority cannot take assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied or effective. Urgent action is needed to strengthen the control framework to manage the identified risk(s).
Minimal assurance ← Partial assurance (highlighted) — Reasonable assurance → Substantial assurance	Taking account of the issues identified, the authority can take partial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied or effective. Action is needed to strengthen the control framework to manage the identified risk(s).
Minimal assurance ← Partial assurance — Reasonable assurance (highlighted) → Substantial assurance	Taking account of the issues identified, the authority can take reasonable assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective. However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified risk(s).
Minimal assurance ← Partial assurance — Reasonable assurance → Substantial assurance (highlighted)	Taking account of the issues identified, the authority can take substantial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

YOUR INTERNAL AUDIT TEAM

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The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Actions for improvements should be assessed by you for their full impact. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

Our report is prepared solely for the confidential use of Cambridgeshire and Peterborough Fire Authority, and solely for the purposes set out herein. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights from RSM UK Risk Assurance Services LLP for any purpose or in any context. Any third party which obtains access to this report or a copy and chooses to rely on it (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

This report is released to you on the basis that it shall not be copied, referred to or disclosed, in whole or in part (save as otherwise permitted by agreed written terms), without our prior written consent.

We have no responsibility to update this report for events and circumstances occurring after the date of this report.

RSM UK Risk Assurance Services LLP is a limited liability partnership registered in England and Wales no. OC389499 at 6th floor, 25 Farringdon Street, London EC4A 4AB.

Cambridgeshire and Peterborough Fire Authority

Internal Audit Progress Report

6 October 2022

This report is solely for the use of the persons to whom it is addressed.
To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no
responsibility or liability in respect of this report to any other party.

RSM

Contents

1   Key messages

This report below provides a summary update on progress against each plan and summarises the results of our work to date. The reports finalised since the last Committee are highlighted in **bold** below.

Progress against the internal audit plan 2021/22 and 2022/23

Assignment	Status	Actions agreed			Opinion Issued
		L	M	H	
2021/22					
Capital Projects - Training Centre	**Final**	**2**	**1**	**0**	**Reasonable Assurance**
Follow Up	**Final**	**0**	**7**	**0**	**Reasonable Progress**
CFMIS - Collection and Update of Risk Information	**Final**	**3**	**0**	**0**	**Substantial Assurance**
Training Centre Resourcing	**Final**	**1**	**0**	**0**	**Reasonable Assurance**
2022/23					
Risk Management	**Final**	**1**	**0**	**0**	**Substantial Assurance**
Debrief Following Complex Incidents	**Final**	**0**	**2**	**0**	**Reasonable Assurance**
GDPR	To commence 23 September 2022				
System Ownership Governance	To commence 20 October 2022				

Assignment	Status	Actions agreed			Opinion Issued
		L	M	H	
Integrated Risk Management Planning Framework	To commence 14 November 2022				
Key Financial Controls	To commence 15 November 2022				
ICCS and Mobilising System	To commence 26 November 2022				
Governance	To commence 29 November 2022				
Follow Up	To commence 21 March 2023				

Appendix A – Other matters

Annual Opinion 2022/23

The Overview and Scrutiny Committee should note that the assurances given in our audit assignments are included within our Annual Assurance report. The Committee should note that any negative assurance opinions will need to be noted in the annual report and may result in a qualified or negative annual opinion.

Changes to the audit plan

Since the last Overview and Scrutiny Committee, we were requested to postpone the System Ownership Governance due to staff absence at the organisation. This is now due to commence on 20 October 2022.

Information and briefings

We have recently issued our Emergency Services benchmarking of internal audit findings 2021/22

At the assignment level, this benchmarking provides:

- a comparison of the numbers of actions agreed;

- the assurance opinions provided across the sector in our client base; and

- a summary of those key areas where high priority internal audit management actions were agreed.

This paper provides a benchmark for our individual clients, to self-assess themselves against all of our fully outsourced emergency services internal audit clients.

The benchmarking data provided in this report is based on all of the internal audit assurance reports we have issued to our emergency services clients during the audit year 2021/22. This will provide you with a useful snapshot of your organisation's performance against others in the sector.

Quality assurance and continual improvement

To ensure that RSM remains compliant with the IIA standards and the financial services recommendations for Internal Audit we have a dedicated internal Quality Assurance Team who undertake a programme of reviews to ensure the quality of our audit assignments. This is applicable to all Heads of Internal Audit, where a sample of their clients will be reviewed. Any findings from these reviews being used to inform the training needs of our audit teams.

The Quality Assurance Team is made up of; the Head of the Quality Assurance Department (FCA qualified) and an Associate Director (FCCA qualified), with support from other team members across the department. This is in addition to any feedback we receive from our post assignment surveys, client feedback, appraisal processes and training needs assessments.

Appendix B – Executive summaries and action plans (High and Medium only) from finalised reports

EXECUTIVE SUMMARY – CAPITAL PROJECTS – TRAINING CENTRE

Why we completed this audit

As part of the approved 2021/22 annual audit plan for Cambridgeshire and Peterborough Fire Authority (the Authority), we carried out a review of Capital Projects in relation to the Training Centre, to provide assurance over the control framework in place.

Work to relocate and create modernised facilities for both the Monks Wood Training Centre and Huntington Fire Station has been ongoing for a number of years within the Authority. These were initially managed via two separate projects: In relation to the Huntingdon Fire Station, the Authority aimed to consolidate all Huntingdon sites into one location, this included the Fire Station, Training Centre and Service Headquarters. This project proceeded until July 2016 when the Police and Crime Commissioner asked that the project be cancelled as there were other ways of achieving the merging of hubs, without developing a new site. As a result of this decision the project was stopped.

In August 2018, the Police and Crime Commissioner made an offer for the Authority to lease sufficient land space to build a bespoke multi complex Training Centre. This project proceeded through to an initial planning stage. However, in March 2020 the Authority were informed that this was no longer an option to develop the Training Centre. As such, both projects were closed down and the current Training Centre project was initiated to proceed with plans to relocate the Fire Station and the Training Centre to the originally planned St. Johns site.

As part of our review, we considered the adequacy of the procurement and contract management arrangements in respect of the Training Centre, as well as review of the project's governance structure and approval process. We also considered the adequacy of processes in relation to financial management and oversight, the process for identification and approval of contract variations and controls in place in relation to project risk management, as well as any project oversight controls in place.

Conclusion

Our review noted a number of areas of good practice operating effectively, including procurement and contract management arrangements; project risk management and oversight controls; and project monitoring and reporting throughout the governance structure.

However, our review noted some areas where improvements could be made to further strengthen the control environment including one medium and two low priority actions. The medium priority action included ensuring that all project documentation is fully signed and up to date including the Training Centre contract, Project Brief is up to date, and the DPIA assessment.

2

Internal audit opinion:

Taking account of the issues identified, the Authority can take reasonable assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified risk(s).

Key findings

We identified the following weaknesses, leading one medium and two low priority management actions being agreed:

Contract Approval

The Training Centre project has been ongoing since 2013, this is when the initial tender process was carried out where Artisan was selected as the contractor. The Authority have approved continued use of the same contractor throughout the project and the most recent approval in relation to the use of Artisan was agreed in March 2020. We obtained a copy of the contract in place with Artisan and were able to confirm that this was dated 2020. However, the contract had not been signed or dated by either party, which provides a risk that the organisation may not be able to utilise clauses within their contract, should any issues arise with delivery, due to lack of signature. However, during discussions with the Deputy Chief Executive, we were verbally advised that the contract was signed by both parties; therefore, we have raised an action to retain and have evidence of signed contracts. **(Medium)**

We noted the following controls to be adequately designed and operating effectively:

Procurement and Contract Management Arrangements

We were able to evidence that the Fire Authority and Project Board approved the continued use of Artisan as the contractor for the Training Board project; a Skype consultation was conducted on 30 March 2020, and the decision was approved by Councillor Kevin Reynolds, Fire Authority Chairman on 6 April 2020.

The main contractor Artisan subcontract packages of the project and carry out competitive tenders for these which the Authority is informed of. These packages, including items such as a new sprinkler system and new cubicle installation are recorded within a spreadsheet. Discussions with the Project Manager identified that this role (Project Manager) was employed in June 2021, and prior to this, there was a lack of formal audit trail in place in relation to the Training Centre.

3

The organisation then implemented a new process to log and record any activity in relation to the project, from June 2021, therefore we have not agreed any further actions required in this area. It was also confirmed with the Project Manager that the project had not had any completed packages post June 2021.

Financial Management

Project finances are reported and monitored through the highlight report which is produced by the Project Manager, reviewed by the Deputy Chief Executive, and is provided to the Project Board and the Fire Authority on a monthly basis. A payment schedule is in place and payments are made in line with the agreed schedule but still require approval in line with the delegated authority. Prior to each invoice being raised by Artisan, the Authority assigns a Quantity Surveyor to confirm the completion of work to the agreed standard.

Approval of Contractor Work

A payment schedule is in place in relation to project finances and payments are made in line with an agreed schedule. During interviews with the Project Manager, it was identified that as part of the payment process, the Quantity Surveyor periodically undertakes site visits to check that works are being undertaken as expected, and in line with the schedule, prior to each invoice being raised by Artisan. The Quantity Surveyor and Project Manager also undertake a monthly site walk to again check the progress of work.

Lessons Learnt

The Service maintain a spreadsheet to document lessons learnt which are identified throughout the project to be considered for later stages or future projects.

Contract Variations

The Service maintain a change log for all variations to the Training Centre project documenting any changes in scope and the date that these changes were agreed. We sample tested five variations recorded on the change log, to confirm that proposals were produced, reviewed, and approved in line with the delegated authority, and we were able to evidence that in all instances, the correct process had been adhered to.

It was confirmed by the Project Manager that there are no contingencies in place in relation to the budget for the Training Centre project, and we were therefore able to evidence that all variations had been reviewed and approved by the Project Sponsor, as per the scheme of delegation.

Project Risk Management

We were able to evidence that a risk and Issues log is maintained, which features in the highlight report presented to Project Board and Fire Authority. Review of the risk and issues log evidenced the following:

- A total of 15 risks had been identified against the project, with the highest rated risk (one) classified as amber.

4

- Each risk provided a full risk description as well as a categorisation to work streams, type of impact and the date identified.
- Risks were assigned a RAG status based on probability and impact.
- Each risk had been assigned a risk owner and accountable actionee.
- Risk mitigation activities had been documented for all risks, as well as target completion dates.
- All risks had been reviewed within the previous month (February).
- All open risks were still within their completion target dates.
- Risks had also been assessed and assigned a risk score based on successful mitigation activities.

Review of the highlight report provided to both Project Board and the Fire Authority evidenced that all risks scoring 10 or above (one) had been documented, highlighting the risk description, risk owner, impact type, current score, post mitigation score, mitigation activities, target completion date and actionee. Corresponding meeting minutes evidenced that the documented risk had been verbally highlighted to the Board also; however, as the risk mitigation is progressing as planned and does not currently require any escalation, no further discussion or scrutiny was required.

Project Oversight Controls including contractor review

It was confirmed by the Project Manager that monthly on-site meetings are held between Artisan and the Project Manager and Project Officer. We reviewed progress reports and the corresponding meeting minutes from October and December 2021 and the corresponding meeting minutes to confirm that the progress made by the contractors had been reviewed and scrutinised, where applicable.

In both instances, we were able to evidence that the contractor progress had been reported as progressing well, or ahead of schedule. We were also able to evidence that an action tracker was in place, should any issues in relation to progress need to be captured and escalated. Review of the progress reports also identified that in both instances, progress reported was either in line with, or ahead of the projected performance requirements.

Performance Monitoring and Reporting

The highlight report provided to the Fire Authority and Project Board on a quarterly basis includes performance information in relation to contractor performance and project progression.

Review of the highlight report provided to both Project Board and the Fire Authority evidenced that the following information is presented:

- Project Managers summary: a high-level review of the overall project progression and any issues or concerns to be highlighted
- Budget status: a table highlighting each budget areas actual to planned total spend, this is also RAG rated to ensure concerns are clear
- A list of activities completed during the last period, categorised by workstream
- A list of activities to be completed during the next period, categorised by workstream
- Project risk updates: a review of review all risks scoring 10 or above, and any other risks that the Project manager deems to require attention. We were also able to obtain the corresponding meeting notes and evidenced that each report item had been discussed at the Board meeting.

As the project is currently progressing as planned, and no notable issues had been highlighted within the reports, we were unable to evidence any documentation of scrutiny with regards to performance, due to this not being required. However, meeting notes fully capture any required actions from discussions held, as well as action dates and owners. We were also able to evidence that actions were revisited at the beginning of every meeting to

obtain updates in relation to progression. Although there were no matters highlighted for escalation, we were able to evidence that in all three meeting instances, discussions in relation to the highlight report had been held, and where any questions had been raised, these had either been answered, or raised for action.

Assessment of Benefits

Expected benefits which the Authority hope to realise through the completion of the Training Centre project are defined within the project brief document. Review of the project brief document evidenced that four key benefits had been defined:

1. Improved working conditions for staff as premises will be of adequate size.

2. Premises will be accessible to all.

3. Premises will have enhanced environmental performance.

4. Premises has sufficient Training area for Station staff and Training centre staff.

For each benefit, measurements of success had also been documented. However, as all the identified benefits would be as a result of the completed project, reporting against these measurements was not yet in place.

2. DETAILED FINDINGS AND ACTIONS

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Contract Approval		
Control	The structure in place to manage the project is a dedicated Project Board which reports into the Fire Authority meeting. The Fire Authority re-approved the project in March 2020, having reviewed an approval report and project brief. The project brief documents certain elements of the service specification including the governance structure to be adhered to throughout the project. More technical aspects of the service specification are defined within an addendum to the Artisan contract. At each monthly Project Board and Fire Authority meeting a highlight report is presented which includes information on all aspects of the project, such as finance, performance and risk. The Deputy Chief Executive presents a streamlined version of the report to the Fire Authority.	**Assessment:** **Design** ✓ **Compliance** ✕
Findings / Implications	We obtained a copy of the contract in place with the Training Centre contractor and were able to confirm that this was dated 2020. However, the contract had not been signed or dated by either party, which provides a risk that the organisation may not be able to utilise clauses within their contract, should any issues arise with delivery, due to lack of signature. However, during discussions with the Deputy Chief Executive, we were advised that the contract was signed by both parties; therefore an action has been raised to retain and have available signed contracts. Review of the contract, evidenced that the following elements had been documented: • Full details of both parties the agreement is between, including business names and addresses • Contract definitions and interpretations, and the rules of interpretation (for example, where the words include(s) or including are used, they are deemed to have the words "without limitation" following them • The conditional agreement, deposit requirements, and planning requirements • Clauses in relation to disputes, notices, no representation, and rescission • Confidentiality and third-party rights • Entire agreement, agreement for sale • Noise suppression and access roadworks agreements • Title and title guarantee clauses • Completion and completion date clauses.	

Contract Approval

We were also able to evidence that the Project Brief documented the following elements of the service specification including the governance structure to be adhered to throughout the project:

- Overview and background of the project
- Key project objectives
- Three phases of the project approach and what these phases entail
- High level scope of the project
- Documented procurement approach
- Key constraints
- Key deliverables
- Key benefits of the project and measurements of success
- Stakeholder list detailing job title and affected area, and any potential conflicts identified
- Indicative costs, planned staff time, project funding and timescales
- DPIA screening.

The Project Brief documented that formal approval had been received by the Fire Authority in March 2020. However, review of the document identified that whilst the DPIA screening questions had been completed, this had not been signed or dated; providing a risk that a full audit trail is not in place to ensure adherence to GDPR regulation. Further to this, the project brief itself had not been reviewed or updated since April 2020, providing a risk that the brief does not contain any up-to-date iterations of the contract.

We were able to evidence that the governance structure for the project had been documented within the Project Organisation document. This detailed the project organisation structure, providing clear routes of escalation; and detailed each members name and area of responsibility. The Project Organisation document had been signed off by the Board in July 2020 and reviewed by the Project Officer in September 2021.

| Management Action 1 | The Authority will provide evidence that the Training Centre contract is signed and dated by both parties.

The Authority will ensure that the Project Brief is up to date, and the DPIA assessment has been fully completed, dated and signed. | **Responsible Owner:**

Matthew Warren – Deputy Chief Executive

Jodie Houseago – Project Manager | **Date**

31 March 2022 | **Priority:**

Medium |

EXECUTIVE SUMMARY – FOLLOW UP

Background

We have undertaken a review to follow up on progress made to implement the previously agreed high and medium management actions from the following audits:

- Fleet Management – Policies and Procedures (1.20/21)

- Governance – Fire Authority (2.20/21

- Procurement Proactive Processes (3.20/21)

- Risk Management (4.20/21)

- Key Financial Controls (5.20/21)

- Follow Up (6.20/21)

- Estates and Property Maintenance (7.20/21)

The management actions considered in this review comprise of 27 medium priority actions. The focus of this review was to allow management to take assurance that all medium priority actions previously agreed during these reviews have been adequately implemented.

Conclusion

Taking account of the issues identified in the remainder of the report and in line with our definitions set out in Appendix A, in our opinion the Service has demonstrated **reasonable progress** in implementing agreed management actions.

Of the 27 management actions followed up, we were able to confirm that 17 had been fully implemented and three had been superseded. In the remaining 7 instances (all medium priority), actions had not been fully implemented. We have restated and agreed revised actions which are detailed in section two of this report.

2

Progress on actions

The following table includes details of the status of each management action:

Implementation status by review	Number of actions agreed	Status of management actions				
		Impl. (1)	Impl. ongoing (2)	Not impl. (3)	Superseded (4)	Completed or no longer necessary (1) + (4)
Fleet Management – Policies and Procedures (1.20/21)	2	0	0	2	0	0
Governance – Fire Authority (2.20/21)	2	1	0	0	1	2
Procurement – Proactive Processes (3.20/21	4	2	0	0	2	4
Risk Management (4.20/21)	4	4	0	0	0	4
Key Financial Controls (5.20/21)	3	2	0	1	0	2
Follow Up (6.20/21)	10	6	1	3	0	6
Estates and Property Management (7.20/21)	2	2	0	0	0	2
Total	**27**	**17**	**1**	**6**	**3**	**20**

3

EXECUTIVE SUMMARY – CFRMIS – COLLECTION AND UPDATE OF RISK INFORMATION

Why we completed this audit

A review of the Community Fire Risk Management Information System (CFRMIS) was undertaken to review the processes in place for ensuring risk information in CFRMIS is accurate and planned across the Service to avoid any duplication.

The Authority use the CFRMIS system to manage fire prevention and protection activities within a single interface whether it be Community Fire Safety (CFS), for example house visits, Technical Fire Safety (TFS), focusing on fire safety in high-risk premises/areas and Operational Premises Intelligence (OPS), concentrating on inherent risks of premises or Fire Investigation.

The Authority has policies and associated procedures in place which sets out how the Service utilises CFRMIS, including what risk information should be captured within the system and timeframes, and responsibilities of those completing the activities. The Authority are regularly updated on any CFRMIS / risk information issues via the Fire Protection Monthly Managers Meetings. Dashboards from the CFRMIS, providing performance updates are displayed on screen and reviewed during each meeting.

As part of this audit, we have undertaken a survey with a sample of ten staff to determine how comfortable staff are in using the system. The results of the survey can be found within the CFRMIS Survey Results section of this report.

Conclusion

During our review, we noted well designed processes were in place around the input of information as part of Operational Premises Surveys and Reviews, and Community Fire Safety work where our walkthrough's identified inspections were adequately completed on the system with limited options for free text, ensuring accurate data entry. We further noted that target dates/timeframes relating to the risk information and the monitoring of overdue jobs were being recorded within CFRMIS, ensuring that high risk and outstanding jobs were being prioritised.

Areas for improvement were noted with respect to procedures and guidance and actions raised during the FP meetings. This included overdue review of Policies and action owners and deliverable dates not being defined to monitor and deliver actions.

Internal audit opinion:

Taking account of the issues identified, the authority can take substantial assurance that the controls upon which the organisation relies to manage this area are suitably designed, consistently applied and effective.

Key findings

We have identified the following areas as well-designed and effective:

Timetables

Timetables for identifying work programmes have been defined within the SOP for the Risk Based Audit Programme (RBAP) Policy. Dashboards have been set up on the CFRMIS system which detail progress against allocated jobs for each area of the system. This includes how many jobs (for Fire Protection Audits, SSRI Surveys etc.) have been carried out and how many are outstanding for the calendar year, broken down by stations/teams as relevant. These deadlines are displayed on the stations Dashboards to track progress and deliverable dates which is a live view of delivery. In addition, Dashboards are reviewed at the monthly FP meetings to monitor performance of key deadlines.

Through review of the RBAP Policy, we confirmed that section five outlines the Audit / visit frequency for premises, which includes Fire Safety Inspections for Care Homes, Hospital type premises, block of flats, Hostels, Hotels, Licensed premises, heritage buildings, HMOs and houses converted into flats.

Through review of the Dashboards within CFRMIS, we confirmed that this included live information on progress against planned jobs (visits, audits, reviews etc.) for the year, which is broken down by stations and teams as relevant. The Dashboard further included outstanding inspections, which are rated high, medium or low, ensuring the jobs are prioritised. We found that during our walkthrough of CFRMIS, the Authority were appropriately managing their jobs within the required timescales, for example, there were no jobs overdue for Community Fire Safety at Ely Station.

Allocation of Jobs and Data Quality

The Authority has a yearly allocation process, back end of the calendar year, where they go through what is due per timetable and allocate jobs to relevant crew / watches to look at the coming year. The allocation process starts in December to allow for any changes in priorities and these are discussed during the Fire Protection Meetings. In addition, a number of standard reports have been developed within CFRMIS to aid the improvement and clean-up of data in the system, including identifying any duplications and missing data, such as addresses for new buildings or vulnerable persons details. These reports are reviewed by the CFRMIS Administrator on a weekly basis.
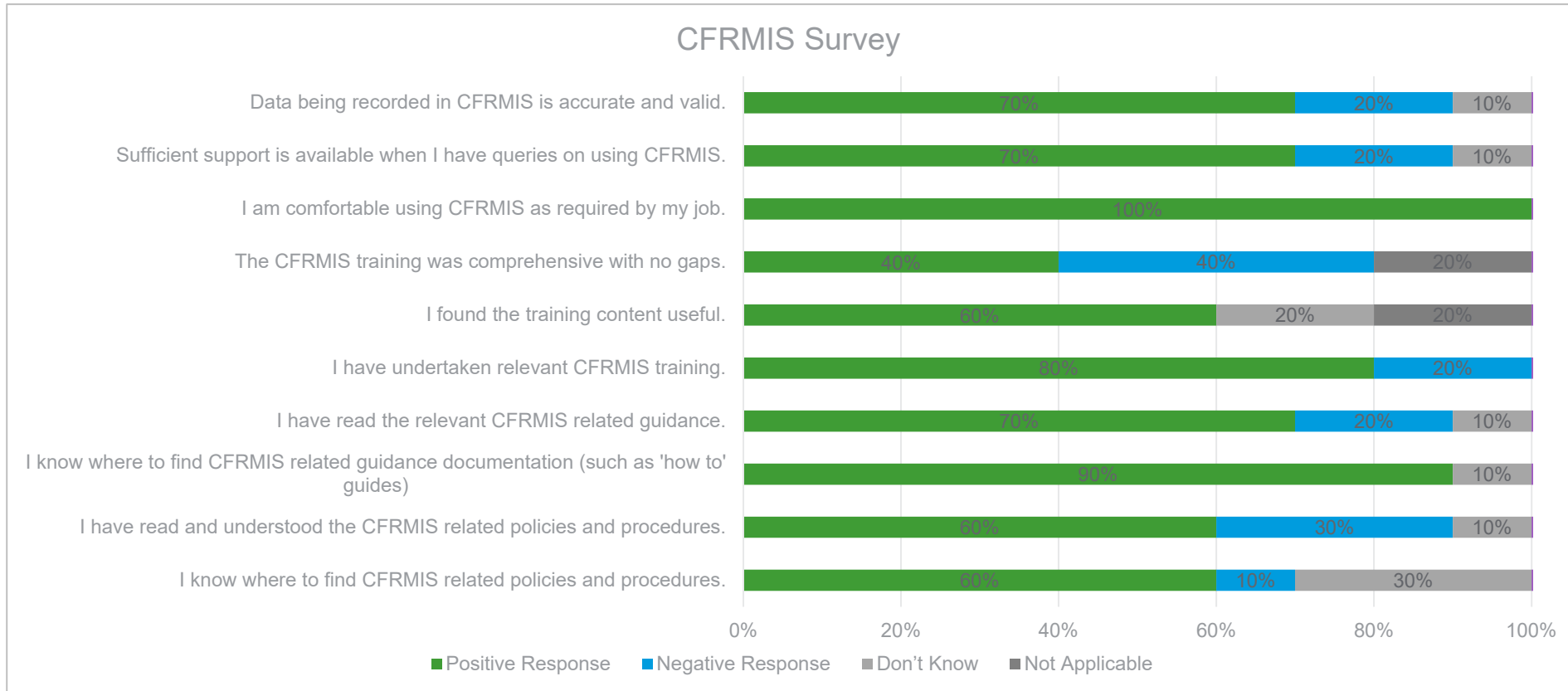
3

We reviewed the December 2021 and January 2022 Fire Protection meeting minutes and confirmed that allocations were being reviewed for the year. We further reviewed the CFRMIS Dashboards and noted that there were a number of anomaly reports available with respect to key/common data quality issues that could be run to address issues in the system and ensure data is up to date and accurate, such as a report on duplicate UPRNs and missing Community Safety Officer Watch codes.

We were informed that there is limited risk of duplications of jobs within CFRMIS as the system will identify any duplications and will therefore not allow for another job to be created. In addition, through review of the system, we found that there was limited free text, therefore further reducing the risk of data errors. We have found, through discussions with the CFRMIS Administrator, there are some manual quality checks required, which include the Basic Land Property Units (BLPU) Match check. The New RBAP is updated directly from AddressBase Premium, which is an Ordinance Survey national gazetteer of all UK postal addresses. Due to there being a significant number of new buildings with no post codes assigned, the CFRMIS Administrator maintains a spread sheet of all the unmatched properties. Through review of the CFRMIS BLPU Match spreadsheet, we confirmed that either, comments were provided as to the status of each building, or a completion note was made to confirm amendments were made accordingly.

We have agreed three **low** priority management actions as a result of weaknesses with compliance with the established controls. Further details are provided in the detailed findings and actions section in the report.

CFRMIS SURVEY RESULTS (10 STAFF)

A survey regarding use/awareness of the CFRMIS system and associated documentation was undertaken amongst staff who use the system. This predominantly included Watch Managers, Crew Managers, Firefighters and Administrators.

CFRMIS Survey

Question	Positive Response	Negative Response	Don't Know	Not Applicable
Data being recorded in CFRMIS is accurate and valid.	70%	20%	10%	
Sufficient support is available when I have queries on using CFRMIS.	70%	20%	10%	
I am comfortable using CFRMIS as required by my job.	100%			
The CFRMIS training was comprehensive with no gaps.	40%	40%		20%
I found the training content useful.	60%		20%	20%
I have undertaken relevant CFRMIS training.	80%	20%		
I have read the relevant CFRMIS related guidance.	70%	20%	10%	
I know where to find CFRMIS related guidance documentation (such as 'how to' guides)	90%		10%	
I have read and understood the CFRMIS related policies and procedures.	60%	30%	10%	
I know where to find CFRMIS related policies and procedures.	60%	10%	30%	

Legend: ■ Positive Response ■ Negative Response ■ Don't Know ■ Not Applicable

To note:

Whilst some surveyed staff had not read the procedures/guidance and training was sometimes found to be incomprehensive and not useful, we found during our review that the CFRMIS system was intuitive for completing reviews, with a lockdown of forms (where only specific options can be selected) and mandatory fields where appropriate. Despite this, further training/guidance would be beneficial to ensure all staff are comfortable in using the system and ensure there are no gaps in training.

5

EXECUTIVE SUMMARY- TRAINING CENTRE RESOURCING

Why we completed this audit

A review of the Training Centre was undertaken to allow the Authority to take assurance over the controls in place relating to changes required to the Training Centre. The review focussed on the work undertaken by the Service to identify how they are going to resource the Training Centre to provide the best services and considered both the current model, alongside the proposed new model and the two elements of people and premises.

Building work commenced in September 2021 on the new training facility and fire station in Huntingdon and work is anticipated to take around a year to complete, with the station being occupied by staff by early 2023. The budget for the project is just over £10.5 million. The project involves building a modern, purpose-built training centre and new community fire station at St John's Park, north of Huntingdon.

In addition, throughout 2021 the Service began negotiations with the Fire Brigades Union (FBU) on a collective agreement to replace the current shift system in place within the Service Training Centre. This was following the findings of the Training Review project and from feedback from instructors working the current system which highlighted the health and wellbeing of instructional staff and the system not being flexible nor resilient. The Authority's Area Commander led the initial discussions with the FBU alongside Group Commander. The FBU response to the Area Commander on the 17 December 2021, confirmed that the final draft of the proposed Training Centre shift system had been received and circulated to all branches, who were asked to hold meetings, discuss the document and vote on whether to accept or reject proposed shifts. At the conclusion of the voting, the position of the branches (and therefore the FBU brigade Committee) was to reject the proposal and therefore, the Training Centre shift system is now on hold whilst ongoing negotiations take place for the proposed new working pattern. A revised Collective Agreement for the proposed shift pattern was sent to FBU in July and is currently under negotiation, therefore no timescales can be provided as to when the project will reconvene due to being dependent upon FBU interactions.

The Authority has established Project Boards for both the Huntingdon Relocation and the Training Centre Shift Pattern Review. Project Highlight reports are presented at each meeting and provides updates on progress, budgets, risks and issues which requiring addressing.

Conclusion

During our review, we noted well designed processes were in place for achieving its objectives in delivering training. This included project briefs clearly defining how the Authority will deliver training through its people and premises, benefits identified from the old model to the new model, with clear measures set out for monitoring each benefit post completion. In addition, we noted consistent project monitoring and reporting throughout. However, a revised Collective Agreement for the proposed shift pattern is currently under negotiation and as such no timescales can be provided as to when the project will reconvene.

Internal audit opinion:

Taking account of the issues identified, the Authority can take reasonable assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the area.
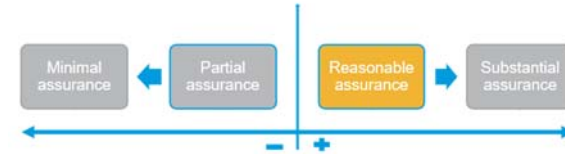
Key findings

We have identified the following areas as well-designed and effective:

People

Training Centre Shift Pattern Review Project Brief

The Authority created a Training Centre Review Project Brief on the 21 October 2019 which detailed an assessment of the current training centre and a proposal of a new Training Resourcing Centre which would address current restraints with training. The Project Brief further details clear objectives, outline of the solutions and project approach, scope, constraints / assumptions, interfaces, key deliverables, key benefits, key stakeholders, affordability, timescales and issues and risks.

The Huntingdon Training Centre currently provides operational training including all on call new recruit courses. Currently Training provides assessment led delivery with limited scope to adjust course delivery to meet the full needs of all operational staff. It is currently staffed by 13 full time staff, including one Station Commander B, one Station Commander A, two support staff (one of whom is a secondment), eight Watch Commanders and one Group Commander. Instructors currently provide training in core hours during Monday to Friday, between 09:00 to 17:00 with some evening and weekend training provided using overtime.

The project brief sets out three objectives to address the issues with the current training model, as follows;

- To review current areas of operational training delivered by training centre to ensure they support future training needs across the organisation.
- Introduce a shift system that supports the delivery of training to all operational staff working across all duty systems within the current cost envelope of the training budget.
- Ensure TRaCS underpins operational training and is maintained appropriately, with formal process to ensure maintenance and currency of information.

3

Training Centre Shift Pattern Review - Outcomes and Benefits

The Project Brief document dated October 2019 describes the reasons for the project and what deliverables are required to achieve the project objectives. The document gives the expected business benefits, project approach, timelines and known risks and issues. The purpose is to allow the decision-making Board to assess whether the project has the justification to proceed to an agreed delivery point based on the information provided in the Project Brief as to the balance between the costs and the risks of undertaking the project against the benefits of doing so.

Through review of the Project Brief dated October 2019, we confirmed that four key benefits and measures for success has been identified. The benefits considered a sustainable model for training, resulting in the cost savings overtime, responding to changing risks both operational and community, broadening of skills and knowledge across the service and training content is current by using TRaCs within the training centre team. As all the identified benefits would be as a result of the completed project, reporting against these measurements was not yet in place.

Key Stakeholders

In 2021 the Service began negotiations with the Fire Brigades Union (FBU) on a collective agreement to replace the current shift system in place within the Service Training Centre. The Authorities Area Commander led the initial discussions with the FBU alongside Group Commander. During this time the FBU requested an Equality Impact Assessment be provided to support the shift proposal. This was provided to the FBU on the 14 June 2021. The Area Commander met virtually with the FBU on the 11 August 2021 to agree for the proposed system to be discussed with staff to allow for scheduled meetings to commence and the new collective agreement to be reviewed alongside the FBU and key stakeholders. At the last meeting held on the 18 October 2021, the Area Commander stated the Service position and final draft copy of the new Training Centre collective agreement was shared with the FBU to be taken to its membership and committee.

The FBU responded to the Area Commander on the 17 December 2021, confirming the final draft of the proposed Training Centre shift system was received and circulated to all branches, who were asked to hold meetings, discuss the document and vote on whether to accept or reject proposed shifts. At the conclusion of the voting, the position of the branches (and therefore the FBU brigade Committee) was to reject the proposal. FBU Cambridgeshire noted in the letter to the Area Commander, that the decision may cause issues with the planning and delivery of training in 2022. To avert any potential disruption to training, the FBU recommend that Cambridgeshire Fire and Rescue Services (CFRS) amends the proposal and re-submit it for further consideration by members. Through discussions with the Area Commander, we found that the Training Centre shift system has been placed on hold due to further discussions with the FBU. A meeting with the FBU has been scheduled to discuss further. In addition, a revised Collective Agreement for the proposed shift pattern was sent to FBU in July 2022 and is under negotiation, therefore no timescales can be provided as to when the project will reconvene due to being dependent upon FBU interactions. We have therefore not raised an action as this is currently in progress.

We have confirmed that Project Deviation reports have been completed highlighting reasons for the non-deliverables, consequences if action is not taken, revised timescales and Project Manager Recommendations. It was recommended that the project is paused until an outcome of negotiations is reached with the FBU and was subsequently approved by the Project Board.

Premises

Huntingdon Relocation Project Brief

The work to relocate and create modernised facilities has been ongoing for some years under the heading of two other projects, Huntingdon Hub and Monks Wood Training Centre. The two projects have now been closed down and has been superseded by the Huntingdon Relocation Project to proceed with plans to relocate the Fire Station and the Training Centre to the originally planned St. Johns site.

A Project Brief document for the Huntingdon Relocation was created in March 2020. The Project Brief describes the reasons for the project and what deliverables are required to achieve the project objectives. The document gives the expected business benefits, project approach, timelines and known risks and issues.

Through review of the Brief, we confirmed that it sets out how the Authority assessed the effectiveness and cost of the current working model, given the requirement to utilise external sites to deliver training.

The Brief describes the strategic fits, including identifying more energy efficient building(s) to run, in terms of environmental impact for heating, electricity and overall carbon footprint & economically in terms of energy costs, a reduction in maintenance costs and day to day operating costs, therefore positively impacting on costs from the current training arrangements model to the proposed training arrangements. In addition, it was noted within the Project Brief that funding is to come out of the property development reserves and the sale of the existing sites.

Outcomes and Benefits - Huntingdon Relocation

The Huntingdon Relocation Project Brief document dated March 2020 describes the reasons for the project and what deliverables are required to achieve the project objectives. The document gives the expected business benefits, project approach, timelines and known risks and issues. The purpose is to allow the decision-making Board to assess whether the project has the justification to proceed to an agreed delivery point based on the information provided in the Project Brief as to the balance between the costs and the risks of undertaking the project against the benefits of doing so.

Through review of the Project Brief dated March 2020, we confirmed that four key benefits and measures for success has been identified, including improved working conditions for staff as premises will be of adequate size, premises will be accessible to all, premises will have enhanced environmental performance and premises has sufficient Training area for Station staff and Training centre staff. As all the identified benefits would be as a result of the completed project, reporting against these measurements was not yet in place.

We further noted that six objectives have clearly been defined within the brief, which outlines how the Authority will address the issues recognised with the current model. These include, scoping out the requirements for the Training Centre, engaging with Training Centre personnel; scoping out the requirements for the Fire Station, engaging with Fire Station personnel; completing the design and build of the new Fire Station and Training Centre, with associated facilities on an identified freehold site, in accordance with drawings and specification, outline requirements, planning permission and building control; procuring and let contract for construction build of the new Training Centre and Fire station; fully commission the premises for occupancy; and decommission the existing site.

Furthermore, we reviewed the Training Centre Collective Agreement between the Authority and Fire Brigades Union (FBU), which is currently being reviewed for approval. We confirmed that the agreements clearly sets out the revised system, including a minimum of eight instructors at Watch Commander Level; Training Instructor core working hours to be 08:15 to 17:15 Monday to Sunday over nine working days per fortnight; Training Instructors will be required to deliver training for one night (Monday to Thursday) every fortnight for a total of 3 hours; and Break times will align to Grey Book Conditions as a minimum standard. The agreement further considered the arrangements for accrued hours, recording of hours worked, pay, leave, sickness and work locations.

Project Boards

A Project Highlight report is presented to the Project Boards on a monthly basis for both the Training Centre Review Project and the Huntingdon Relocation Project and includes stats for each of the workstreams, updates on budgets, risks and issues and activities completed during the last meeting and activities to be completed in the next period of the project.

Through review of August, September and December 2021 Project Board meeting notes and Highlight Reports for the Training Centre Review Project and June, October and December 2021 Project Board meeting notes and Highlight Reports for Huntingdon Relocation Project, we confirmed that progress of the project is being discussed in detail with the Highlight report being reviewed at each meeting. We found that actions were being logged within the meeting notes for each meeting and action owners and deliverable dates defined for each action. In addition, Crew Commander performance measures were reviewed during the meetings.

We further noted that project deviation reports were being presented to the Boards for approval, for example the current consultation with the FBU regarding the proposed New Ways of Working for its members within the Training Centre Instructional Team has been progressing positively at a local level. However, notification of decision to support the proposed change to the new ways of working for Training Instructors was yet to be received from the FBU at a national level, therefore a 12-month trial was proposed in July 2021. This was subsequently rejected by the FBU and the project was put on hold until further discussions with the FBU. All decisions and approvals were noted within the meeting notes for full accountability.

Due to weaknesses in compliance with controls, we have agreed a further **low** priority management actions. Further details are provided in the detailed findings and actions section in the report.

EXECUTIVE SUMMARY – RISK MANAGEMENT

Why we completed this audit

This Risk Management audit, undertaken as part of the 2022/23 Internal Audit Plan, has been undertaken to assess the Authority's arrangements for the effective management of risk, including its strategy, risk registers, reporting and monitoring of risks through the governance structure.

The Authority has in place a Strategic Risk Register (SRR) which documents the high-level risks (and opportunities) which have been identified. They are assigned an inherent (pre-mitigation) score, a current score, after internal controls are noted and a post mitigation score following the identification of further mitigating actions.

A Tactical Risk Register (TRR) is also in place which details operational risks to the Service. These are dealt with in a similar manner to the Strategic Risk Register but are not assigned an inherent score. The Tactical Risk Register review process is designed to identify themes from across the organisation which require escalation to the Strategic Risk Register.

For each of the registers, risks and mitigating actions are assigned an owner. Progress against mitigating actions and any development in circumstances are noted against each risk as necessary. A Strategic Risk and Opportunity Management Plan (SRMP) and a Tactical Risk Management Plan (TRMP) are in place which supports the processes for managing the risks included on the registers.

Conclusion

Our review has determined that the key controls for risk management at the Authority are effective and enables risks to be identified, understood, communicated, managed and mitigated accordingly. A clear risk management strategy is in place and there is strong leadership from the Business Transformation Team in its implementation.

The review has highlighted a sense of ownership and consideration of risk throughout the organisation, particularly in relation to front line staff, where potential risks can be highlighted and escalated to the highest level. Clear risk registers have been established with their cause and effect well documented and managed.

Internal audit opinion:

Taking account of the issues identified, the Authority can take substantial assurance that the controls upon which the organisation relies to manage this area are suitably designed, consistently applied and effective.

Key findings

We have identified the following areas as well-designed and effective:

Policies and Procedures

We confirmed through review that the SRMP and TRMP provided a clear overview of the approach to risk management. The documents clearly and coherently described the definition and explanation of a risk, escalation processes and the relationship between the day-to-day operations of the organisation and its risks. We found that the process for quantifying (scoring) risk and its impacting factors were also clearly documented and that risk appetite, its definition and significance were also explained.

The specific processes for recording and escalating risks were outlined together with a detailed list of key risk responsibilities across the organisation. The TRMP set out a distinction between the management and ownership of strategic risk and tactical risk which focussed on the role of the Heads of Group who were ultimately responsible for its management.

We noted that both documents were up to date and published on the SharePoint document management site.

Training

We confirmed that risk management training was provided through several methods throughout the Service aimed at various roles dependent on their risk management responsibilities. They included the iLearn system and one to one training delivered at leadership days and through one-to-one development sessions for managers of individual projects. Each one was owned, monitored and delivered by the Head of Service Transformation. We noted that the status of each course subscriber on the iLearn platform was clearly presented on the system's dashboard so that expired or any necessary training could be monitored accordingly.

Through discussions with the IT Services Director, Head of On-Call Group Commander and Area Commander Operational Response, we established that the training provision was targeted and highly relevant, particularly as a newly appointed risk owner. Ongoing, update or refresher training was available through the Service Transformation Team, should it be required.

Through review, we also confirmed that the training slide packs were closely aligned with the risk management methodology. We found that the project management slides were appropriate to the role and that they offered an introduction to risk management, an overview of the methodology and the business context for carrying out the process. Importantly, the training documents signposted the Head of Service Transformation and their team as contact points for further guidance.

3

Risk Register Data Quality

Through sample testing and review we found that the data held within both the SRR and TRR was of a high standard and well maintained. Within both registers, we found that risk descriptions had been drafted in a clear and concise manner to adequately communicate cause and effect, controls and mitigations, inherent, current and post-mitigation risk scores had been identified and owners for risks and their actions had been assigned. The majority of risks were regularly reviewed having been annotated clearly with appropriate updates.

Assignment of Responsibilities

The Head of Service Transformation had been formally delegated the responsibility for the management of risk registers and the management of the overall process. This had been carried out through the SRMP and TRMP documents as well as a written job description. The role included oversight of the process as well as striving for continuous improvement across the organisation including improving awareness.

Additionally, we found that the responsibility for maintenance of the TRR had been formally assigned to the Heads of Group, but that the Head of Service Transformation would have a guiding and oversight role of that process to ensure its effectiveness. Specific wider responsibilities at Committee and management level were also defined within the SRMP and TRMP. Through our discussions, we also confirmed that the duties of the role of risk and action owners were well understood and communicated across the organisation. Each of the individuals confirmed that they felt well supported by the Transformation Team and the Head of Service Transformation. This support included regular risk update meetings, open communication channels and opportunities for further training, as discussed above.

Risk Identification and Escalation

In addition to the clearly defined processes within the SRMP and TRMP to identify and escalate risks our discussions confirmed that the Authority has in place an Integrated Risk Management Plan (IRMP). Through review, we found that this was underpinned by the 2022 IRMP planning document which is the extract of risks that need to be factored into the IRMP action plan for 2022/23. This action plan was renewed annually at management refresher sessions and monitored quarterly at Chief Officers Advisory Group (COAG) and Authority level. This ensured there was an opportunity for new, emerging and existing risks to be shared and considered across the leadership of the organisation. These are objectively considered by peers who are removed from the specific areas of responsibility which helped to ensure that risk scores and mitigations were measured and proportionate in accordance with the overall impact

Our discussions also confirmed that operational intelligence fed into the escalation process, through the submission and review of incident attendance reports, for example. This was seen as key to the successful management of risk. Recent examples of operational risks escalated to the SRR included increased likelihood of wildfires and considerations for the storage and use of electric vehicles.

Reporting and Governance

We confirmed that the SRR and TRR were well monitored through the governance structure and scrutinised accordingly. We confirmed that the SRR was reported regularly through quarterly meetings of the COAG, Policy and Resources Committee and Fire Authority through a standing agenda item. We found that specific discussion on risk was focussed on high and very high-rated risks, which were most relevant.

Wide ranging discussion was also held around the risk management process with references made to quarterly reviews at operational management level. We noted that members of each group were engaged and active in scrutiny, seeking responses and reassurance where necessary.

Due to a low number of data quality issues found in sample testing of the registers, we have agreed one **low** priority management action. Further details are provided in the detailed findings and actions section in the report.

EXECUTIVE SUMMARY – DEBRIEF FOLLOWING COMPLEX INCIDENTS

Why we completed this audit

A review of how the Authority perform a Debrief Following Complex Incidents was undertaken, as part of the internal audit plan for 2022/23. The purpose of the review was to allow the Authority to take assurance that arrangements have been put in place to debrief incidents and to identify and share lessons learnt.

In 2019/20 we performed on audit of this area which resulted in a reasonable assurance opinion, following a HMICFRS report which suggested that an effective system for staff to use learning and debriefs to improve operational response and incident command should be put in place. A further HMICFRS report has since been produced in 2021/22 which rated the Authority as 'good' in relation to the effectiveness category which covers operational response. Appendix B of this report contains further details of the status of the two management actions raised during the 2019/20 audit, of which one has been fully implemented and the other has been superseded as a result of the introduction of the Ops Assurance Plan 2022/23.

The process for operational learning is documented within the Ops Assurance Plan 2022/23, which has been developed in line with National Fire Chiefs Council (NFCC) Good Practice Guide for National Operational Learning (NOL) and the Joint Emergency Services Interoperability Programme (JESIP) Joint Organisational Learning (JOL) guidance.

The Authority has an Operational Support Group (OSG) which regularly reviews and drives learning from incidents, formally discussed at the Ops Assurance & Learning (OAL) meeting. In line with the Good Practice Guide, incident debriefs can be triggered based on risks identified but the Authority has three key debrief types as follows:

- Operational – RM14 (Informal Post Incident Debrief);
- Tactical – RM17 (Escalation from RM14); and
- Strategic / Structured – RM18 (Escalation from RM17).

Conclusion

Overall, we found that the Authority has appropriately designed and consistently applied controls to debrief and learn from operational, tactical and strategic incidents. This was evidenced by the regular discussion of learning and review of the Learning Outcomes Tracker at the OAL meeting. We noted the Ops Assurance Plan to be in line with relevant guidance and made available to staff. We confirmed that learning was shared through Service Action Notes and monitoring of compliance with review of learning information was being carried out through station inspections. The National Operational Guidance Implementation Meeting had also been established to facilitate the transfer of learning into training.

However, our sample testing identified that tactical debrief forms were not always fully completed and two incidents which had not yet been debriefed at the time of our review, were planned for August and September 2022 despite incidents occurring in April and June 2022 respectively, exceeding the four week guidance as stipulated by the NFCC Good Practice Guide.

Internal audit opinion:

Taking account of the issues identified, the Authority can take reasonable assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the area.
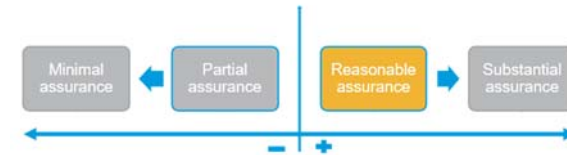
Key findings

We identified the following weaknesses resulting in the agreement of two 'Medium' priority management actions:

Tactical Debrief Completion

When a tactical debrief is triggered a template RM17 form is completed which includes an incident overview and any recommendations. Through review of a sample of five RM17s we identified that in one case the incident overview and recommendations section (including lessons identified) had not been included and the form was marked as incomplete.

There is a risk that unwanted events could reoccur if operational learning considerations are not documented as part of tactical debriefs. **(Medium)**

Timeliness of Strategic Debriefs

The Good Practice Guide states that formal debriefs should take place ideally within four weeks of the incidents occurring. We noted that the RM18s planned for debrief in August and September 2022 were several months in excess of four weeks after the incidents had occurred (April and June 2022).

If strategic debriefs are not carried out in a timely manner, then there is a risk that critical risks could materialise due to the time taken to share operational learning. **(Medium)**

We noted the following controls to be well-designed and applied:

HMICFRS Inspection

We reviewed the 2021/22 HMICFRS report and noted that the Authority had been rated as 'good' for all areas relating to the effectiveness category. We noted that the report outlined that the Authority makes e-Learning available to firefighters for major incidents, has improved its systems for learning and debriefing and has dedicated resources in place for communicating national operational guidance and lessons learned from national operational work.

Ops Assurance Plan

The Ops Assurance Plan is the key document for the debrief process. We confirmed through review of the Plan that it was approved by the Group Commander via version control, that the Plan was available on SharePoint and that it had been shared with staff via email in February 2022.

We compared the plan to the NFCC Good Practice Guide and noted clear alignment in areas such as the use of Blue, Red, Amber, Green (BRAG) ratings, the governance structure and the debrief process.

Roles and Responsibilities

Through review of the Ops Assurance Plan we noted that it set out how and when debriefs should be conducted as well as how learning would be managed through the Learning Tracker and via the OAL meeting. We confirmed that the roles and responsibilities of the members of the OSG were clearly documented.

We also confirmed that the Station Commander had been assigned as the Single Point of Contact (SPOC) through review of the National Operational Learning (NOL) database.

Trigger Points

We confirmed that the trigger points for debriefs are set out in the Ops Assurance Plan, we compared them with the NFCC Good Practice Guide and noted that the guidance states that structured debriefs should occur where risk is identified to have a critical impact or if there are learning points in relation to equipment and or procedures.

We confirmed that this was consistent with the Plan which set out in section two that the plan is designed using a risk-based approach to identify target areas.

Debrief Templates

JESIP provide a template debrief form targeted specifically for multi-agency learning. Through review of the Authority's RM14 (Informal Post Incident Debrief) and RM17 (Escalation from RM14) forms we confirmed that they were clearly aligned to the JESIP multi-agency learning guidance as they included capturing of information in relation to five key areas: co-locate, communicate, co-ordinate, understanding of risk and shared situation awareness.

We confirmed that the RM14 and RM17 forms captured key information such as the incident date, location, individuals involved, resources used, actions taken, notable practices and lessons learnt. We noted that this was not captured in the RM18 form but found this to be appropriate as the RM14 and RM17 forms are pre-requisites of the RM18. Through review of a separate PowerPoint presentation, we noted that Strategic debrief (RM18) was covered in terms of initial actions, incident management and lessons identified. In addition, details were noted as required such as time of call, type, location, appliance details and timeline of events.

4

OSG and OAL

We reviewed the OSG monthly progress log (this meeting is not formally minuted) and noted that it demonstrated regular review of actions relating to operational learning. We noted that key actions recorded on the log included updating of the Ops Assurance Plan and review of the station inspection programme.

We reviewed the OAL meeting minutes and corresponding reports for March and June 2022. We confirmed that the documentation evidenced review of learning from incidents and review of the Learning Outcomes Tracker. We also noted that there was senior leadership representation with the Deputy Head of Service who attended both meetings and was responsible for feedback of learning to the Chief Officers Advisory Group.

We identified that in March 2022 it was noted animal rescue related incidents was a key learning theme and the sessions had been undertaken to provide staff with additional training in this area.

Ops Excellence Meeting

The Ops Excellence Meeting focuses on review of operational performance information, which can lead to the identification of learning. We reviewed the Ops Excellence meeting minutes and corresponding reports for April and July 2022. We confirmed that the reports and the discussion recorded at both meetings evidenced review of learning from performance information and the identification of trends. We noted that in April 2022 it was highlighted that pump availability had been reduced due to hours being booked as unavailable.

We also confirmed that the Area Commander attended both meetings who is responsible for monitoring progress against the Integrated Risk Management Plan (IRMP).

Service Action Notes (SANs)

Learning relating to feedback, near misses and external updates are shared through SANs. We reviewed four examples of SANs dated between December 2021 and May 2022 and noted that they included briefing staff on updates to guidance and internal procedures, such as post-incident documentation. We confirmed that the SANs were available to staff on SharePoint and iLearn / Tracs.

Station Inspections

Station inspection visits are carried out internally which include review of learning data, such as compliance with SANs. Through review of a sample of five stations (Cambridge, Dogsthorpe, Soham, Thorney and Wisbech) we confirmed that in each case the inspection included the review of staff understanding and performance with regards to learning data.

We noted that in four cases no actions were required, but for the November 2021 Thorney inspection, an action was assigned in relation to further training for crews. We confirmed that this had been marked as implemented on the Station Assurance Inspections Tracker.

Incorporating Learning and Training

The Authority has in place a quarterly National Operational Guidance Implementation Meeting (NIT) which includes attendees from the OSG and the training team. Review of the March and May 2022 minutes and papers confirmed that the papers and minutes demonstrated that the NIT facilitated the implementation of learning from operations into training. In May 2022, we noted references to updating guidance-based incidents relating to lithium batteries, ETHANE, and fires in tall buildings.

We also reviewed papers summarising operational learning which were presented by the Area Commander to the Chief Officers Advisory Group in May 2022. We confirmed that learning included the implementation of an on-call support programme for working at height and improved interoperability with Cambridgeshire Police in relation to water rescue incidents.

Debrief Completion

Through review of the debrief documentation for a sample of five tactical debriefs from incidents which occurred between January and July 2022, we confirmed that each debrief was carried out on the date of the incident. We noted that an action plan was not required as the debriefs had not been escalated to the strategic level. We confirmed that each tactical debrief was available to staff on SharePoint.

We confirmed that an action plan linked to the one strategic debrief we reviewed had been incorporated into the learning outcomes tracker, which was assigned to owners and marked as completed. We reviewed training slides and confirmed that the learning had been fed into training. We also reviewed an all-staff communication which confirmed that the learning had been shared with key staff and noted that the strategic debrief was available to staff on SharePoint.

2. DETAILED FINDINGS AND ACTIONS

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Tactical Debrief Completion		Assessment:

| Control | Key incident debriefs are categorised within the Ops Assurance Plan as followed:

• Operational – RM14 – Informal Post Incident Debrief. This is completed after all incidents and is logged on the IRS national reporting system;
• Tactical – RM17 – if the Operational Support Group reviews an RM14 then an RM17 will be completed, or if a level two commander has taken over control at the incident; and
• Strategic – RM18 – this debrief is undertaken if the incident has six or more fire appliances in attendance, or if a Group Commander takes over control at the incident. | **Design** ✓

Compliance ✕ |

| Findings / Implications 1 | We reviewed a sample of five tactical debriefs from incidents which occurred between January and July 2022, this included multi-agency, cross border working and a debrief relating to an injury.

We confirmed that in four cases the tactical debrief appeared to be appropriate based on the trigger points noted in the Ops Assurance Plan. However, we noted that for one debrief (ref 18450), the incident overview and recommendations section had not been included and the form appeared as incomplete, we noted that this section includes the lessons identified.

There is a risk that unwanted events could reoccur if operational learning considerations are not documented as part of tactical debriefs. | | |

| Management Action 1 | The OSG will remind staff to ensure that RM17s are fully completed, where this is not complied with the OSG will require staff to recomplete the documentation as part of their review.

Management Update

1. Review the multiple forms on I-auditor and improve for the end user to design one Flexi officer form. Ideally to improve completion at incidents. *Pending Final version*
2. Improve the integration with STEP to support consistent reporting from the BIP teams *in progress*
3. Raise awareness of the RM17 tracker *Completed.*
4. Design and complete operational assurance training for all officers 2022. *Completed.* | **Responsible Owner**

OSG | **Date**

July 2023 | **Priority**

Medium |

	5. 2023 middle management days to include de-brief coaching and awareness session. (*dates planned for 2023 /pending)*			

Findings / Implications 2	Through discussions with management, we were informed that the volume of RM18 (strategic) debriefs was low. All RM17s are reviewed by the OSG and if key learning is picked up the OSG will escalate to an RM18. However, we found that incidents had not occurred that had yet been debriefed at the time of our review since January 2022 due to the risks identified not meeting the trigger points.			
	We reviewed a summary of debriefs from January to July 2022 and noted that of 17 RM17 debriefs, two had been escalated to RM18s which had been arranged for August and September 2022 (after our audit), we noted that the incidents occurred in April and June 2022, both exceeding the NFCC Good Practice Guide suggestion that debriefs should take place ideally within four weeks of the incident occurring.			
	We were advised by the Group Commander that the delays were likely due to key changes in processes and personnel. Additionally, elements of the process are still manual and require automation, which has been pushed back to 2023/24 because of a lack of IT resource.			
	If strategic debriefs are not carried out in a timely manner, then there is a risk that critical risks could materialise due to the time taken to share operational learning.			

Management Action 2	The OSG will review the reasoning behind the time taken to perform RM18s and take appropriate action to ensure that where possible they are conducted within four weeks of the incident. Where it is not possible to debrief within four weeks, justification will be formally documented to explain why.	**Responsible Owner**	**Date**	**Priority**
		Head of Operational Support	July 2023	Medium
	Management Update			
	1. **Major Incident de-brief notification project**: - a project to notify, streamline and integrate our operational learning systems. From initial call, RM14/17;s to learning outcomes. *pending (process map in place awaiting a software solution) this has been delayed due to other priorities at this time.*			
	2. Train a number of accredited de-briefers 2021 - under the CPLRF and college of policing qualification (currently 5 in place internally*) Completed*			
	3. Review the numbers of accredited de-briefers to consider support staff and other roles. And hold a course in 2023 if more are required. *pending*			

4. Design a shared service agreement to share resources of a cohort of shared de-briefers to support CFRS structured de-briefs. *(Via the regional operational assurance group trial in progress – agreement to be approved by CFO group)*

5. Operational Assurance and learning quarterly report, to track de-briefs *Completed*

6. De-brief review board (strategic review with AC operational support). *Completed*

7. BSG administrative support to help coordination and timings of structured de-briefs on behalf of OSG. *Completed.*

8. Control inform OSG of any 6 pumps and above incidents as part of their notification process. *Completed.*

9. Conflict to workloads for accredited de-briefers. to consider the value of adding structured de-briefs to the GC meeting agenda to discuss any potential conflicts of workloads and ensure accredited de-briefers can commit to dates. *not started.*

10. Introduce a structured report to capture learning for incident de-briefs and exercise de-briefs. *Completed.*

11. introduce a learning tracker to capture recommendations and actions from structured de-briefs. *Completed.*

12. De-brief and monitoring policy review 2023 (following implementation of number 1. de-brief notification project).

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TO: Overview and Scrutiny Committee

FROM: Scrutiny and Assurance Manager – Deb Thompson

PRESENTING OFFICER(S): Head of Media, Communication and Transparency
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DATE: 6 October 2022

Annual Review - Cambridgeshire and Peterborough Fire Authority Compliance with the Local Government Transparency Code

1.   Purpose

1.1   The purpose of this report is to provide the Overview and Scrutiny Committee with an (annual) update on and assurance of compliance with the Local Government Transparency Code.

2.   Recommendation

2.1   The Overview and Scrutiny Committee is asked to:

       Note the current position in terms of compliance and in particular the assurances given at Paragraph 7.4.

3.   Risk Assessment

3.1   **Economic** – The government believes that transparency is the foundation of local accountability and the key that gives people the tools and information they need to enable them to play a bigger role in society. It is also considered that the availability of data can also open new markets for local business, the voluntary and community sectors and social enterprises to run services or manage public assets.

3.2   **Political** – The Local Government Transparency Code was issued to meet the government's desire to place more power into citizens' hands to increase democratic accountability and make it easier for local people to contribute to the local decision making process and help shape public services.

3.3   **Social** – The government believes that in principle all data held and managed by local authorities should be made available to local people unless there are specific sensitivities for example, protecting vulnerable people or commercial and operational considerations. It encourages local authorities to see data as a valuable resource not only to themselves but their partners and local people.

3.4   **Equality Impact Assessment** – Completed at source.

4. Background

4.1   The Department for Communities and Local Government (DCLG) published a revised Transparency Code in February 2015 as a tool to embed transparency in local authorities and set out the minimum data that such authorities should be publishing, the frequency it should be published and how it should be published. The code can be found at Appendix 1.

4.2   Under this code local authority means a fire and rescue authority (constituted by a scheme under section 2 of the Fire and Rescue Services Act 2004 or a scheme to which section 4 of that Act applies).

4.3   In July 2015 a member-led review was undertaken, the objective of which was to provide assurance that the Authority was complying with the requirements of the code whilst also considering its wider approach to transparency. A number of recommendations to improve compliance were made by the review group which were accepted by the Overview and Scrutiny Committee and then the Authority in October 2015.

4.4   The redesigned Cambridgeshire Fire and Rescue Service (CFRS) website was launched on 15 February 2016. Prior to the launch a considerable amount of effort was expended to ensure the findings of the member-led review were incorporated into the design and the website now features a separate section for *Transparency* providing a central repository for all information demanded by the code. Under this section there are sub sections for Constitution of Fire Authority, Organisation Structure, Procurement, Expenditure, Senior Officer Pay, Assets, Grants and Trade Union Time. There is also a link to wider service documents that may be of interest to the public for example, the Annual Report and Statement of Assurance.

5. Requirements of the Local Government Transparency Code

5.1   Under the code the following information is to be published **quarterly**, not later than one month after the quarter to which the data and information is applicable:

- Expenditure exceeding £500;
- Government procurement card transactions; and
- Procurement information.

5.2   The following (applicable) information is to be published **annually**, not later than one month after the year to which the data and information is applicable;

- Local authority land;
- Grants to voluntary, community and social enterprise organisations;
- Organisation chart;
- Trade union facility;
- Senior salaries;
- Constitution;
- Pay multiple; and
- Fraud.

5.3 The following information is to be published once only:

- Waste contracts.

6. Compliance with the Requirements of the Trade Union (Facility Time Publication Requirements) Regulations 2017

6.1 In August 2018, the Service became aware, through the submission of a Freedom of Information request relating to Trade Union Facility Time, of a Statutory Instrument (SI) that detailed additional publication requirements. Full details of the SI can be found via the following link: The Trade Union (Facility Time Publication Requirements) Regulations 2017, Legislation.gov.uk

6.2 The then Information Governance Manager subsequently reviewed the publication requirements of the SI which are summarised below:

- Number of relevant trade union officials,
- Percentage of time spent on facility time (banded),
- Percentage of pay bill spent on facility time, and
- Paid trade union facility time activities.

6.3 The SI was discussed at the Overview and Scrutiny Committee in October 2018 where it was agreed that data from financial year 2018/19 onwards would be published. This review has found the Service to be compliant with the requirements of the SI as at the end of financial year 2021/22.

7. Compliance with the Code – October 2022

7.1 The last report of compliance was presented to this committee on 7 October 2021.

7.2 At the time of writing this annual review has found that the Service is currently fully compliant with the requirements of the Local Government Transparency Code with the exception of the areas identified at Paragraph 7.3 below.

7.3 Information to be published annually, not later than one month after the year to which the data and information is applicable:

- **Organisation chart** – The organisational chart on the website is the one used internally and is designed to remove hierarchy and show more of a 'one team' approach. This may be confusing for external audiences and to be fully compliant with the criteria listed under Paragraph 44 of Appendix 1 a more hierarchical design is required.

- **Senior salaries** – The data for salaries over £50,000 for financial year 2022/23 is missing.

7.4 Assurances have been given that the organisational chart will be amended and 'slimmed down' for publication on the website. The senior salaries data for financial year 2022/23 will also be integrated within it. This work is scheduled for completion by the end of October 2022 and will ensure compliance in those criteria.

7.5   Despite the gaps identified in this review, it is worthy of note that in addition to the requirements of the code (and the Public Sector Bodies Accessibility Regulations 2018), the Service continues to be proactive in communicating and where relevant, consulting with people across the county to enable it to develop and deliver to the high standards expected of it by the communities served. It publishes a range of documents and resources which it believes are likely to be of public interest and in an effort to be open and transparent about all areas of work. Further, CFRS is committed to listening to the public's opinions and views through appropriate consultations and use of social media and the media to understand public opinion but also to ensure proposals for change and further development of the Service are open and transparent.

BIBLIOGRAPHY

Source Documents	Location	Contact Officer
Local Government Transparency Code Review of CPFA Compliance with the Local Government Transparency Code Overview and Scrutiny Committee Minutes	Hinchingbrooke Cottage Brampton Road Huntingdon PE29 2NA	Hayley Douglas Head of Media, Communication and Transparency hayley.douglas@cambsfire.gov.uk

Department for
Communities and
Local Government

Local Government Transparency Code 2015

OGL

Contents

Part 1: Introduction

Policy context

1. This Code is issued to meet the Government's desire to place more power into citizens' hands to increase democratic accountability and make it easier for local people to contribute to the local decision making process and help shape public services. Transparency is the foundation of local accountability and the key that gives people the tools and information they need to enable them to play a bigger role in society. The availability of data can also open new markets for local business, the voluntary and community sectors and social enterprises to run services or manage public assets.

2. 'Data' means the objective, factual data, on which policy decisions are based and on which public services are assessed, or which is collected or generated in the course of public service delivery. This should be the basis for publication of information on the discharge of local authority functions.

3. Analysis by Deloitte[1] for the Shakespeare Review of Public Sector Information estimates the economic benefits of public sector information in the United Kingdom as £1.8 billion, with social benefits amounting to £5 billion. The study highlights the significant potential benefits from the publication of public data. And, local authorities and local people want to see published open data:

   - 80 per cent of those responding to a transparency survey[2] by the Local Government Association in September 2012 cited external accountability as a benefit, with 56 per cent citing better local decision making and democracy as a benefit

   - a survey of 800 members of Bedford's Citizens Panel[3] showed that 64 per cent of respondents thought it was very important that the council makes data available to the public and the public were most interested in seeing data made available about council spending and budgets (66 per cent)

   - research by Ipsos MORI[4] found that the more citizens feel informed, the more they tend to be satisfied with public services and their local authorities.

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[1] "Market Assessment of Public Sector Information", Deloitte, May 2013, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/198905/bis-13-743-market-assessment-of-public-sector-information.pdf

[2] "Local Government Transparency Survey 2012", LGA, December 2012, http://www.local.gov.uk/documents/10180/11541/Local_Government_Transparency_Survey_2012.pdf/dd4c24ed-20ba-4feb-b6eb-fea21e4af049

[3] "Citizens Panel Summer 2011 Survey Results Data Transparency" Bedford Borough Council, August 2011 (unpublished)

[4] "What do people want, need and expect from public services?", Ipsos MORI, 2010, http://www.ipsos-mori.com/DownloadPublication/1345_sri_what_do_people_want_need_and_expect_from_public_services_110310.pdf

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4. Therefore, the Government believes that in principle all data held and managed by local authorities should be made available to local people unless there are specific sensitivities (eg. protecting vulnerable people or commercial and operational considerations) to doing so. It encourages local authorities to see data as a valuable resource not only to themselves, but also their partners and local people.

5. Three principles have guided the development of this Code:

    - **demand led** – there are growing expectations that new technologies and publication of data should support transparency and accountability. It is vital that public bodies recognise the value to the public of the data they hold, understand what they hold, what their communities want and then release it in a way that allows the public, developers and the media to use it

    - **open** – provision of public data should become integral to local authority engagement with local people so that it drives accountability to them. Its availability should be promoted and publicised so that residents know how to access it and how it can be used. Presentation should be helpful and accessible to local people and other interested persons, and

    - **timely** – the timeliness of making public data available is often of vital importance. It should be made public as soon as possible following production even if it is not accompanied with detailed analysis.

6. This Code ensures local people can now see and access data covering (annex A summarises the publication requirements specified in this Code):

    - **how money is spent** – for example, all spending transactions over £500, all Government Procurement Card spending and contracts valued over £5,000

    - **use of assets** – ensuring that local people are able to scrutinise how well their local authority manages its assets[5]. For example, self-financing for council housing – introduced in April 2012 – gave each local authority a level of debt it could support based on the valuation of its housing stock. This Code gives local people the information they need to ask questions about how their authority is managing its housing stock to ensure it is put to best use, including considering whether higher value, vacant properties could be used to fund the building of new affordable homes and so reduce waiting lists. The requirement in paragraphs 38 to 41 builds on existing Housing Revenue Account practices[6]

    - **decision making** – how decisions are taken and who is taking them, including how much senior staff are paid, and

    - **issues important to local people** – for example, parking and the amount spent by an authority subsidising trade union activity.

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[5] Nationally, local authorities' estate (all forms of land and buildings) is estimated to be worth about £220 billion.
[6] The Housing Revenue Account (Accounting Practices) Directions 2011 require that local authorities' annual statement of accounts include disclosure of the total balance sheet value of the land, houses and other property and the vacant possession value of dwellings within the authority's Housing Revenue Account, https://www.gov.uk/government/publications/the-housing-revenue-account-directions-2011.

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7. Local authorities are encouraged to consider the responses the Government received[7] to its consultation and look to go further than this Code by publishing some of the data proposed by respondents, in line with the principle that all data held and managed by local authorities should be made open and available to local people unless there are specific sensitivities to doing so.

8. Fraud can thrive where decisions are not open to scrutiny and details of spending, contracts and service provision are hidden from view. Greater transparency, and the provisions in this Code, can help combat fraud. Local authorities should also use a risk management approach with strong internal control arrangements to reduce the risk of any payment fraud as a result of publishing public data. Local authorities should refer to the Chartered Institute of Public Finance and Accountancy Code of Practice on Managing the Risk of Fraud and Corruption[8]. Annex B provides further information on combating fraud.

Application

9. This Code is issued by the Secretary of State for Communities and Local Government in exercise of his powers under section 2 of the Local Government, Planning and Land Act 1980 ("the Act") to issue a Code of Recommended Practice (the Code) as to the publication of information by local authorities about the discharge of their functions and other matters which he considers to be related. It is issued following consultation in accordance with section 3(11) of the Act.

10. The Code does not replace or supersede the existing legal framework for access to and re-use of public sector information provided by the:

- Freedom of Information Act 2000 (as amended by the Protection of Freedoms Act 2012)

- Environmental Information Regulations 2004

- Re-use of Public Sector Information Regulations 2005

- Infrastructure for Spatial Information in the European Community (INSPIRE) Regulations 2009, and

- sections 25 and 26 of the Local Audit and Accountability Act 2014[9] which provide rights for persons to inspect a local authority's accounting records and supporting documentation, and to make copies of them.

11. This Code does not apply to Police and Crime Commissioners, for whom a separate transparency framework applies.

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[7] https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/266815/Transparency_Code_Government_Response.pdf (see paragraph 37)
[8] http://www.cipfa.org/services/counter-fraud-centre/code-of-practice
[9] See the Accounts and Audit Regulations 2015 (S.I. 2014/234) for details of when and how those rights may be exercised.

12. This Code only applies to local authorities in relation to descriptions of information or data where that type of local authority undertakes the particular function to which the information or data relates.

13. The Code applies in England only.

Definitions

14. In this Code:

"local authority" means:

- a county council in England

- a district council

- a parish council which has gross annual income or expenditure (whichever is the higher) exceeding £200,000

- a London borough council

- the Common Council of the City of London in its capacity as a local authority

- the Council of the Isles of Scilly

- a National Park authority for a National Park in England

- the Broads Authority

- the Greater London Authority so far as it exercises its functions through the Mayor

- the London Fire and Emergency Planning Authority

- Transport for London

- a fire and rescue authority (constituted by a scheme under section 2 of the Fire and Rescue Services Act 2004 or a scheme to which section 4 of that Act applies, and a metropolitan county fire and rescue authority)

- a joint authority established by Part IV of the Local Government Act 1985 (fire and rescue services and transport)

- a joint waste authority, i.e. an authority established for an area in England by an order under section 207 of the Local Government and Public Involvement in Health Act 2007

- an economic prosperity board established under section 88 of the Local Democracy, Economic Development and Construction Act 2009

- a combined authority established under section 103 of that Act

- a waste disposal authority, i.e. an authority established under section 10 of the Local Government Act 1985, and

- an integrated transport authority for an integrated transport area in England.

"a social enterprise"[10] means a business that trades for a social and/or environmental purpose and is a business which:

- o aims to generate its income by selling goods and services, rather than through grants and donations
- o is set up to specifically make a difference, and
- o reinvests the profits it makes for the purpose of its social mission.

"a small or medium sized enterprise" means an undertaking which has fewer than 250 employees.

"voluntary and community sector organisations" means a non-governmental organisation that is value-driven and which principally reinvests its surpluses to further social, environmental or cultural objectives.

Data protection

15. The Government believes that local transparency can be implemented in a way that complies with the Data Protection Act 1998. Where local authorities are disclosing information which potentially engages the Data Protection Act 1998, they must ensure that the publication of that information is compliant with the provisions of that Act. The Data Protection Act 1998 does not restrict or inhibit information being published about councillors or senior local authority officers because of the legitimate public interest in the scrutiny of such senior individuals and decision makers. The Data Protection Act 1998 also does not automatically prohibit information being published naming the suppliers with whom the authority has contracts, including sole traders, because of the public interest in accountability and transparency in the spending of public money.

16. For other situations where information held by local authorities contains public data which cannot be disclosed in a Data Protection Act compliant manner, the Information Commissioner's Office has published guidance on anonymisation of datasets, enabling publication of data which can yield insights to support public service improvement, whilst safeguarding individuals' privacy[11].

17. To ensure that published valuation information for social housing assets (see paragraphs 38 to 41) is not disclosive of individual properties, authorities are required to publish their valuation data at postal sector level, i.e. full 'outbound' code (first part of the postcode) and first digit of the 'inbound' code (second part of the postcode). This provides an average cell size of 2,500 households, which should be large enough to prevent identification of individual dwellings. However, in particular areas where the postcode sector gives a number of households below 2,500 the postcode level should be set higher, that is at postcode district level (e.g.PO1 ***).

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[10] https://www.gov.uk/set-up-a-social-enterprise
[11] http://ico.org.uk/for_organisations/data_protection/topic_guides/anonymisation

8

18. Local authorities should also make the following adjustment prior to publishing social housing valuation data in order to mitigate the possibility of identifying individual properties:

- Step 1 – for any given postcode sector where the number of occupied social housing properties in any valuation bands is less than a threshold of '10', authorities should merge that particular cell with the next lowest valuation band, and so on until the resultant merged cells contain at least '10' occupied social housing properties. However, if continued repetition of step 1 leads to the number of valuation bands applied to that postcode sector falling below the proposed minimum threshold of valuation bands as set out in paragraph 17, authorities should then apply step 2.

- Step 2 – authorities should merge the original (non-merged) valuation data for the relevant postcode sector with the valuation data with any adjoining postcode sectors which show the lowest number of socially rented properties. Then apply Step 1.

Licences

19. When using postcode data (for example, in connection with paragraphs 35 to 41), local authorities will need to assess their current licence arrangement with the Royal Mail with regards to the terms of use of the Postcode Address File (PAF).

Commercial confidentiality

20. The Government has not seen any evidence that publishing details about contracts entered into by local authorities would prejudice procurement exercises or the interests of commercial organisations, or breach commercial confidentiality unless specific confidentiality clauses are included in contracts. Local authorities should expect to publish details of contracts newly entered into – commercial confidentiality should not, in itself, be a reason for local authorities to not follow the provisions of this Code. Therefore, local authorities should consider inserting clauses in new contracts allowing for the disclosure of data in compliance with this Code.

Exclusions and exemptions

21. Authorities should ensure that they do not contravene the provisions of sections 100A, 100B or 100F of the Local Government Act 1972.

22. Where information would otherwise fall within one of the exemptions from disclosure, for instance, under the Freedom of Information Act 2000, the Environmental Information Regulations 2004, the Infrastructure for Spatial Information in the European Community (INSPIRE) Regulations 2009 or fall within Schedule 12A to the Local Government Act 1972 then it is at the discretion of the local authority whether or not to rely on that exemption or publish the data. Local authorities should start from the presumption of openness and disclosure of information, and not rely on exemptions to withhold information unless absolutely necessary.

9

Timeliness and errors

23. Data should be as accurate as possible at first publication. While errors may occur, the publication of information should not be unduly delayed to rectify mistakes. This concerns errors in data accuracy. The best way to achieve this is by having robust information management processes in place.

24. Where errors in data are discovered, or files are changed for other reasons (such as omissions), local authorities should publish revised information making it clear where and how there has been an amendment. Metadata on data.gov.uk should be amended accordingly.

Further guidance and support

25. The Local Government Association has published guidance[12] on transparency (eg. technical guidance notes, best practice examples and case studies) to help local authorities comply with this Code.

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[12] http://www.local.gov.uk/practitioners-guides-to-publishing-data

Part 2: Information which must be published

Part 2.1: Information to be published quarterly

26. Data covered by this section includes:

- expenditure exceeding £500 (see paragraphs 28 and 29)
- Government Procurement Card transactions (paragraph 30), and
- procurement information (see paragraphs 31 and 32).

27. The data and information referred to in this Part (2.1) must be:

- first published within a period of three months from the date on which the local authority last published that data under the Local Government Transparency Code 2014[13] and not later than one month after the quarter to which the data and information is applicable

- published quarterly thereafter and on each occasion not later than one month after the quarter to which the data and information is applicable.

Expenditure exceeding £500

28. Local authorities must publish details of each individual item of expenditure that exceeds £500[14]. This includes items of expenditure[15], consistent with Local Government Association guidance[16], such as:

- individual invoices

- grant payments

- expense payments

- payments for goods and services

- grants

- grant in aid

- rent

- credit notes over £500, and

- transactions with other public bodies.

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[13] Under the Local Government Transparency Code 2014, local authorities were required to publish this data on the first occasion, not later than 31 December 2014 and quarterly thereafter.

[14] The threshold should be, where possible, the net amount excluding recoverable Value Added Tax.

[15] Salary payments to staff normally employed by the local authority should not be included. However, local authorities should publish details of payments to individual contractors (e.g. individuals from consultancy firms, employment agencies, direct personal contracts, personal service companies etc) either here or under contract information.

[16] http://www.local.gov.uk/practitioners-guides-to-publishing-data

29. For each individual item of expenditure the following information must be published:

- date the expenditure was incurred

- local authority department which incurred the expenditure

- beneficiary

- summary of the purpose of the expenditure[17]

- amount[18]

- Value Added Tax that cannot be recovered, and

- merchant category (eg. computers, software etc).

Government Procurement Card transactions

30. Local authorities must publish details of every transaction on a Government Procurement Card. For each transaction, the following details must be published:

- date of the transaction

- local authority department which incurred the expenditure

- beneficiary

- amount[19]

- Value Added Tax that cannot be recovered

- summary of the purpose of the expenditure, and

- merchant category (eg. computers, software etc).

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[17] This could be the descriptor that local authorities use in their accounting system providing it gives a clear sense of why the expenditure was incurred or what it purchased or secured for the local authority.
[18] Where possible, this should be the net amount excluding recoverable Value Added Tax. Where Value Added Tax cannot be recovered – or the source of the data being used cannot separate out recoverable Value Added Tax – then the gross amount should be used instead with a note stating that the gross amount has been used.
[19] Where possible, this should be the net amount excluding recoverable Value Added Tax. Where Value Added Tax cannot be recovered – or the source of the data being used cannot separate out recoverable Value Added Tax – then the gross amount should be used instead with a note stating that the gross amount has been used.

Procurement information

31. Local authorities must publish details of every invitation to tender for contracts to provide goods and/or services[20] with a value that exceeds £5,000[21, 22]. For each invitation, the following details must be published:

- reference number

- title

- description of the goods and/or services sought

- start, end and review dates, and

- local authority department responsible.

32. Local authorities must also publish details of any contract[23], commissioned activity, purchase order, framework agreement and any other legally enforceable agreement with a value that exceeds £5,000[24]. For each contract, the following details must be published:

- reference number

- title of agreement

- local authority department responsible

- description of the goods and/or services being provided

- supplier name and details

- sum to be paid over the length of the contract or the estimated annual spending or budget for the contract[25]

- Value Added Tax that cannot be recovered

- start, end and review dates

- whether or not the contract was the result of an invitation to quote or a published invitation to tender, and

- whether or not the supplier is a small or medium sized enterprise and/or a voluntary or community sector organisation and where it is, provide the relevant registration number[26].

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[20] This includes contracts for staff who are employed via consultancy firms or similar agencies.
[21] The threshold should be, where possible, the net amount excluding recoverable Value Added Tax.
[22] Tenders for framework agreements should be included, even though there may be no initial value.
[23] This includes contracts for staff who are employed via consultancy firms or similar agencies.
[24] The threshold should be, where possible, the net amount excluding recoverable Value Added Tax.
[25] Where possible, this should be the net amount excluding recoverable Value Added Tax. Where Value Added Tax cannot be recovered – or the source of the data being used cannot separate out recoverable Value Added Tax – then the gross amount should be used instead with a note stating that the gross amount has been used.
[26] For example, this might be the company or charity registration number.

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Part 2.2: Information to be published annually

33. Data covered by this section includes:

    - local authority land (see paragraphs 35 to 37)

    - social housing assets (see paragraphs 38 to 41)

    - grants to voluntary, community and social enterprise organisations (see paragraphs 42 and 43)

    - organisation chart (see paragraph 44)

    - trade union facility time (see paragraph 45)

    - parking account (see paragraph 46)

    - parking spaces (see paragraph 47)

    - senior salaries (see paragraphs 48 and 49)

    - constitution (see paragraph 50)

    - pay multiple (see paragraphs 51 and 52), and

    - fraud (see paragraph 53).

34. With the exception of data relating to social housing assets (paragraphs 38 to 41), the data and information in this Part (2.2) must be:

    - first published within a period of one year from the date on which the local authority last published that data under the Local Government Transparency Code 2014[27] and not later than one month after the year to which the data and information is applicable

    - published annually thereafter and on each occasion not later than one month[28] after the year to which the data and information is applicable.

    The data on social housing assets (see paragraphs 38 to 41) must be published:

    - on the first occasion, not later than 1 September 2015 (based on the most up to date valuation data available at the time of publishing the information), then

    - in April 2016, and

    - every April thereafter.

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[27] Under the Local Government Transparency Code 2014, local authorities were required to publish this data on the first occasion, not later than 2 February 2015 and annual thereafter.
[28] In relation to parking account data, where the local authority's annual accounts have not been finalised, the authority should publish estimates within one month after the year to which the data is applicable and subsequently publish final figures as soon as the authority's accounts are finalised.

Local authority land

35. Local authorities must publish details of all land and building assets including:

- all service and office properties occupied or controlled by user bodies, both freehold and leasehold

- any properties occupied or run under Private Finance Initiative contracts

- all other properties they own or use, for example, hostels, laboratories, investment properties and depots

- garages unless rented as part of a housing tenancy agreement

- surplus, sublet or vacant properties

- undeveloped land

- serviced or temporary offices where contractual or actual occupation exceeds three months, and

- all future commitments, for example under an agreement for lease, from when the contractual commitment is made.

Information about the following land and building assets are to be excluded from publication:

- rent free properties provided by traders (such as information booths in public places or ports)

- operational railways and canals

- operational public highways (but any adjoining land not subject to public rights should be included)

- assets of national security, and

- information deemed inappropriate for public access as a result of data protection and/or disclosure controls (eg. such as refuge houses).

36. For the purposes of this dataset about local authority land (paragraphs 35 to 37), details about social housing should not be published. However, information about the value of social housing stock contained in a local authority's Housing Revenue Account does need to be published for the social housing asset value dataset (paragraphs 38 to 41).

37. For each land or building asset, the following information must be published together in one place:

- Unique Property Reference Number[29]

- Unique asset identity - the local reference identifier used by the local body, sometimes known as local name or building block. There should be one entry per asset or user/owner (eg. on one site there could be several buildings or in one building there could be several users floors/rooms etc – where this is the case, each of these will have a separate asset identity). This must include the original reference number from the data source plus authority code

- name of the building/land or both

- street number or numbers - any sets of 2 or more numbers should be separated with the '-' symbol (eg. 10-15 London Road)

- street name – this is the postal road address[30]

- post town

- United Kingdom postcode

- map reference – local authorities may use either Ordnance Survey or ISO 6709 systems to identify the location of an asset, but must make clear which is being used. Where an Ordnance Survey mapping system is used (the grid system) then assets will be identified using Eastings before Northings. Where geocoding in accordance with ISO 6709 is being used to identify the centre point of the asset location then that reference must indicate its ISO coordinates

- whether the local authority owns the freehold or a lease for the asset and for whichever category applies, the local authority must list all the characteristics that apply from the options given below:

  for freehold assets:
  o occupied by the local authority
  o ground leasehold
  o leasehold
  o licence
  o vacant (for vacant properties, local authorities should not publish the map reference or full address details, they should only publish the first part of the postcode[31]).

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[29] The Unique Property Reference Number (UPRN) is a unique twelve digit number assigned to every unit of land and property recorded by local government, this is a statutory obligation. The UPRN uniquely and definitively identifies every addressable location in the country. The numbers originate from Geo-Place (an OS and LGA joint venture).
[30] Local authorities should use the official postal address. Exceptionally, where this is not available, local authorities should use the address they hold for the asset.
[31] The first part of the postcode, or Outward Code, refers to the area and the district only, http://www.postcodeaddressfile.co.uk/products/postcodes/postcodes_explained.htm

for leasehold assets:

- o occupied by the local authority

- o ground leasehold

- o sub leasehold

- o licence.

for other assets:

- o free text description eg. rights of way, access etc[32].

- • whether or not the asset is land only (i.e. without permanent buildings) or it is land with a permanent building.

Social housing asset value

38. Local authorities must publish details of the value of social housing stock that is held in their Housing Revenue Account[33].

39. The following social housing stock data must be published:

- • valuation data to be listed at postal sector level[34] (e.g. PO1 1**), without indicating individual dwelling values, and ensuring that data is not capable of being made disclosive of individual properties, in line with disclosure protocols set out in paragraphs 15 to 18

- • valuation data for the dwellings using both Existing Use Value for Social Housing and market value (valued in accordance with guidance[35]) as at 1 April. This should be based on the authority's most up to date valuation data at the time of the publication of the information

- • an explanation of the difference between the tenanted sale value of dwellings within the Housing Revenue Account and their market sale value, and assurance that the publication of this information is not intended to suggest that tenancies should end to realise the market value of properties.

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[32] Where a local authority feels unable to verify rights of way information, for example, it should add a short narrative explaining why it is unable to identify and verify the information.
[33] All local housing authorities who hold housing stock are required to account for all income and expenditure in relation to that stock in a separate account which is called the Housing Revenue Account.
[34] The first part of the postcode, or Outward Code (which refers only to the area and the district only), and first digit of the second part of the postcode, or Inward Code (the number identifies the sector in the postal district). http://www.postcodeaddressfile.co.uk/products/postcodes/postcodes_explained.htm
[35] *Guidance for Valuers on Stock Valuation for Resource Accounting 2010* published by the Secretary of State for Communities and Local Government in January 2011, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/5939/1825886.pdf

40. The valuation data and information referred to in paragraph 39 must be published in the following format:

- for each postal sector level, the valuation data should be classified within set bands of value. Authorities must set their valuation bands within the general parameters set out in the table below, in light of the local characteristics of the housing market in their area, in order to ensure that valuation data published by all authorities is consistent and clear to understand:

Valuation Band Range	Intervening bands value
< £50,000 -£99,999	6 Bands of £10,000
£100,000 - £299,999	10 Bands of £20,000
£300,000 - £499,999	4 Bands of £50,000
£500,000 - £999,999	5 Bands of £100,000
£1,000,000 – £2,999,999>	5 Bands of £500,000

- authorities should ensure that any band should only include values that fall within the band parameters (i.e. not give a top value band). If that is the case, the lowest and highest band should be further disaggregated

- authorities should bear in mind that it is likely that the numbers of properties in the lowest and highest bands will be low, leading to potential disclosure problems. The protocol to address this issue is set out in paragraphs 15 to 18

- for each postal sector level, within the set band of value, the data should indicate:
  - o the total number of dwellings
  - o the aggregate value of the dwellings and their mean value, using both Existing Use Value for Social Housing and market value, and
  - o the percentage of the dwellings that are occupied and the percentage that are vacant

- authorities must publish the valuation data for both tenanted and vacant dwellings.

41. An example of how the data specified in paragraphs 39 and 40 could be presented is included at annex C.

Grants to voluntary, community and social enterprise organisations

42. Local authorities must publish details of all grants to voluntary, community and social enterprise organisations. This can be achieved by either:

- tagging and hence specifically identifying transactions which relate to voluntary, community and social enterprise organisations within published data on expenditure over £500 or published procurement information, or

- by publishing a separate list or register.

43. For each identified grant, the following information must be published as a minimum:

- date the grant was awarded

- time period for which the grant has been given

- local authority department which awarded the grant

- beneficiary

- beneficiary's registration number[36]

- summary of the purpose of the grant, and

- amount.

Organisation chart

44. Local authorities must publish an organisation chart covering staff in the top three levels of the organisation[37]. The following information must be included for each member of staff included in the chart:

- grade

- job title

- local authority department and team

- whether permanent or temporary staff

- contact details

- salary in £5,000 brackets, consistent with the details published under paragraph 48, and

- salary ceiling (the maximum salary for the grade).

Trade union facility time

45. Local authorities must publish the following information on trade union facility time:

- total number (absolute number and full time equivalent) of staff who are union representatives (e.g. general, learning and health and safety representatives)

- total number (absolute number and full time equivalent) of union representatives who devote at least 50 per cent of their time to union duties

- names of all trade unions represented in the local authority

- a basic estimate of spending on unions (calculated as the number of full time equivalent days spent on union duties by authority staff that spent the majority of their time on union duties multiplied by the average salary), and

- a basic estimate of spending on unions as a percentage of the total pay bill (calculated as the number of full time equivalent days spent on union duties by authority staff that spent the majority of their time on union duties multiplied by the average salary divided by the total pay bill).

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[36] For example, this might be the company or charity registration number.
[37] This should exclude staff whose salary does not exceed £50,000.

Parking account

46. Local authorities must publish on their website, or place a link on their website to this data if published elsewhere:

- a breakdown of income and expenditure on the authority's parking account[38, 39]. The breakdown of income must include details of revenue collected from on-street parking, off-street parking and Penalty Charge Notices, and

- a breakdown of how the authority has spent a surplus on its parking account[38,40].

Parking spaces

47. Local authorities must publish the number of marked out controlled on and off-street parking spaces within their area, or an estimate of the number of spaces where controlled parking space is not marked out in individual parking bays or spaces.

Senior salaries

48. Local authorities are already required to publish, under the Accounts and Audit Regulations 2015 (Statutory Instrument 2015/234)[41]:

- the number of employees whose remuneration in that year was at least £50,000 in brackets of £5,000

- details of remuneration and job title of certain senior employees whose salary is at least £50,000, and

- employees whose salaries are £150,000 or more must also be identified by name.

49. In addition to this requirement, local authorities must place a link on their website to these published data or place the data itself on their website, together with a list of responsibilities (for example, the services and functions they are responsible for, budget held and number of staff) and details of bonuses and 'benefits-in-kind', for all employees whose salary exceeds £50,000. The key differences between the requirements under this Code and the Regulations referred to above is the addition of a list of responsibilities, the inclusion of bonus details for all senior employees whose salary exceeds £50,000 and publication of the data on the authority's website.

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[38] A parking account kept under section 55 of the Road Traffic Regulation Act 1984 as modified by Regulation 25 of the Civil Enforcement of Parking Contraventions (England) General Regulations 2007.
[39] Local authorities should also have regard to both statutory guidance, *The Secretary of State's Statutory Guidance to Local Authorities on the Civil Enforcement of Parking Contraventions*, http://assets.dft.gov.uk/publications/tma-part-6-cpe-statutory-guidance/betterprkstatutoryguid.pdf, and non-statutory operational guidance, *Operational Guidance to Local Authorities: Parking Policy and Enforcement*, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/212559/parkingenforcepolicy.pdf
[40] Section 55 (as amended) of the Road Traffic Regulation Act 1984 sets out how local authorities should use a surplus on their parking account. Local authorities should breakdown how they have spent a surplus on their parking account within the categories set out in section 55.
[41] For the accounting year 2014-15, the Accounts and Audit (England) Regulations 2011 (Statutory Instrument 2011/817) remain applicable.

Constitution

50. Local authorities are already required to make their Constitution available for inspection at their offices under section 9P of the Local Government Act 2000. Local authorities must also, under this Code, publish their Constitution on their website.

Pay multiple

51. Section 38 of the Localism Act 2011 requires local authorities to produce Pay Policy Statements, which should include the authority's policy on pay dispersion – the relationship between remuneration of chief officers and the remuneration of other staff. Guidance produced under section 40 of that Act[42], recommends that the pay multiple is included in these statements as a way of illustrating the authority's approach to pay dispersion.

52. Local authorities must, under this Code, publish the pay multiple on their website, defined as the ratio between the highest paid taxable earnings for the given year (including base salary, variable pay, bonuses, allowances and the cash value of any benefits-in-kind) and the median earnings figure of the whole of the authority's workforce. The measure must:

   - cover all elements of remuneration that can be valued (eg. all taxable earnings for the given year, including base salary, variable pay, bonuses, allowances and the cash value of any benefits-in-kind)

   - use the median earnings figure as the denominator, which should be that of all employees of the local authority on a fixed date each year, coinciding with reporting at the end of the financial year, and

   - exclude changes in pension benefits, which due to their variety and complexity cannot be accurately included in a pay multiple disclosure.

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[42] Openness and accountability in local pay: Guidance under Section 40 of the Localism Act (February 2012), https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/5956/2091042.pdf

Fraud

53. Local authorities must publish the following information about their counter fraud work[43]:

- number of occasions they use powers under the Prevention of Social Housing Fraud (Power to Require Information) (England) Regulations 2014[44], or similar powers[45]

- total number (absolute and full time equivalent) of employees undertaking investigations and prosecutions of fraud

- total number (absolute and full time equivalent) of professionally accredited counter fraud specialists

- total amount spent by the authority on the investigation and prosecution of fraud, and

- total number of fraud cases investigated.

Part 2.3: Information to be published once only

Waste contracts

54. Local authorities must publish details of their existing waste collection contracts, in line with the details contained in paragraph 32. Local authorities must publish this information at the same time as they first publish quarterly procurement information under paragraphs 27, 31 and 32 of this Code.

Part 2.4: Method of publication

55. Public data should be published in a format and under a licence that allows open re-use, including for commercial and research activities, in order to maximise value to the public. The most recent Open Government Licence published by the National Archives should be used as the recommended standard. Where any copyright or data ownership concerns exist with public data these should be made clear. Data covered by Part 2 of this Code must be published in open and machine-readable formats (further information about machine-readable formats can be found in Part 3.2).

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[43] The definition of fraud is as set out by the Audit Commission in *Protecting the Public Purse*.
[44] S.I. 2014/899.
[45] For example, the Council Tax Reduction Schemes (Detection of Fraud and Enforcement) (England) Regulations 2013 gives local authorities the power to require information from listed bodies, during the investigation of fraud connected with an application for or award of a reduction under a council tax reduction scheme: http://www.legislation.gov.uk/uksi/2013/501/contents/made

Part 3: Information recommended for publication

56. Part 2 of this Code set out details of the minimum data that local authorities must publish. The Government believes that in principle all data held and managed by local authorities should be made available to local people unless there are specific sensitivities to doing so. Therefore, it encourages local authorities to go much further in publishing the data they hold, recognising the benefits of sharing that data for local people, more effective service delivery and better policy making. Part 3 of this Code sets out details of data that the Government recommends local authorities publish.

Part 3.1: Information recommended for publication

57. Data covered by this section includes:

- expenditure data (see paragraph 58)

- procurement information (see paragraphs 59 and 60)

- local authority land (see paragraph 61 and 62)

- parking spaces (see paragraphs 63 and 64)

- organisation chart (see paragraph 65)

- grants to voluntary, community and social enterprise organisations (see paragraphs 66 and 67), and

- fraud (see paragraph 68).

Expenditure data

58. It is recommended that local authorities go further than the minimum publication requirements set out in Part 2 and:

- publish information on a monthly instead of quarterly basis, or ideally, as soon as it becomes available and therefore known to the authority (commonly known as 'real-time' publication)

- publish details of all transactions that exceed £250 instead of £500. For each transaction the details that should be published remain as in paragraph 29

- publish all transactions on all corporate credit cards, charge cards and procurements, including those that are not a Government Procurement Card. For each transaction the details that should be published remain as set out in paragraph 30

- publish the total amount spent on remuneration over the period being reported on, and

- classify expenditure using the Chartered Institute of Public Finance and Accountancy Service Reporting Code of Practice to enable comparability between local authorities.

Procurement information

59. It is recommended that local authorities place on Contracts Finder[46], as well as any other local portal, every invitation to tender or invitation to quote for contracts to provide goods and/or services with a value that exceeds £10,000. For each invitation, the details that should be published are the same as those set out in paragraph 31.

60. It is recommended that local authorities should go further than the minimum publication requirements set out in Part 2 and publish:

   • information on a monthly instead of quarterly basis, or ideally, as soon as it is generated and therefore becomes available (commonly known as 'real-time' publication)

   • every invitation to tender for contracts to provide goods and/or services with a value that exceeds £500 instead of £5,000. The details that should be published are the same as those set out in paragraph 31

   • details of invitations to quote where there has not been a formal invitation to tender. The details that should be published are the same as those set out in paragraph 31

   • all contracts in their entirety where the value of the contract exceeds £5,000[47]

   • company registration number at Companies House

   • details of invitations to tender or invitations to quote that are likely to be issued in the next twelve months. The details that should be published are the same as those set out in paragraph 31

   • details of the geographical (eg. by ward) coverage of contracts entered into by the local authority

   • details of performance against contractual key performance indicators, and

   • information disaggregated by voluntary and community sector category (eg. whether it is registered with Companies House, Charity or Charitable Incorporated Organisation, Community Interest Company, Industrial and Provident Society, Housing Association, etc).

Local authority land

61. It is recommended that local authorities should go further than the minimum publication requirements set out in Part 2 and publish information on a monthly instead of annual basis, or ideally, as soon as it becomes available and therefore known to the authority (commonly known as 'real-time' publication). It is also recommended that local authorities should publish all the information possible on Electronic Property Information Mapping Service.

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[46] Documentation for all procurements valued at over £10,000 is stored on Contracts Finder for public viewing as part of government's transparency commitment. https://online.contractsfinder.businesslink.gov.uk/
[47] Where a contract runs into several hundreds of pages or more, a local authority should publish a summary of the contract or sections of the contract, if this would be more helpful to local people and businesses.

62. It is further recommended that local authorities also go further than the minimum publication requirements set out in paragraph 37 by publishing, alongside them in one place, the following information:

- size of the asset measured in Gross Internal Area (m^2) for buildings or hectares for land, in accordance with the Royal Institute of Chartered Surveyors Code of Measuring Practice. The Gross Internal Area is the area of a building measured to the internal face of the perimeter walls at each floor level. Local authorities using Net Internal Area (m^2) should convert measurements to Gross Internal Area using appropriate conversion factors[48] and state the conversion factor used

- services offered from the asset using the services listed in the Effective Services Delivery government service function list http://doc.esd.org.uk/FunctionList/1.00.html (listing up to five main services)

- reason for holding asset such as, it is occupied by the local authority or it is providing a service on the authority's behalf, it is an investment property, it supports economic development (eg. provision of small businesses or incubator space), it is surplus to the authority's requirements, it is awaiting development, it is under construction, it provides infrastructure or it is a community asset

- whether or not the asset is either one which is an asset in the authority's ownership that is listed under Part 5 Chapter 3 of the Localism Act 2011 (assets of community value) and/or an asset which the authority is actively seeking to transfer to the community

- total building operation (revenue) costs as defined in the corporate value for money indicators for public services[49]

- required maintenance - the cost to bring the property from its present state up to the state reasonably required by the authority to deliver the service and/or to meet statutory or contract obligations and maintain it at that standard. This should exclude improvement projects but include works necessary to comply with new legislation (eg. asbestos and legionella)

- functional suitability rating using the scale:
  - good – performing well and operating efficiently (supports the needs of staff and the delivery of services)
  - satisfactory – performing well but with minor problems (generally supports the needs of staff and the delivery of services)
  - poor – showing major problems and/or not operating optimally (impedes the performance off staff and/or the delivery of services)
  - unsuitable – does not support or actually impedes the delivery of services

- energy performance rating as stated on the Display Energy Certificate under the Energy Performance of Buildings (England and Wales) Regulations 2012 (as amended).

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[48] Local authorities are not expected to re-measure buildings. Research undertaken for the Scottish Government offers one method of converting Net Internal Area to Gross Internal Area and can be found at: http://www.scotland.gov.uk/Resource/Doc/217736/0121532.pdf
[49] http://www.nao.org.uk/wp-content/uploads/2013/02/2010-11-Estates-Management.pdf (See page 17).

Parking spaces

63. It is recommended that local authorities should publish the number of:

- free parking spaces available in the local authority's area and which are provided directly by the local authority, and

- parking spaces where charges apply that are available in the local authority's area and which are provided directly by the local authority.

64. Where parking space is not marked out in individual parking bays or spaces, local authorities should estimate the number of spaces available for the two categories in paragraph 63.

Organisation chart

65. It is recommended that local authorities should go further than the minimum publication requirements set out in Part 2 and publish:

- charts including all employees of the local authority whose salary exceeds £50,000

- the salary band for each employee included in the chart(s), and

- information about current vacant posts, or signpost vacancies that are going to be advertised in the future.

Grants to voluntary, community and social enterprise organisations

66. It is recommended that local authorities should go further than the minimum publication requirements set out in Part 2 and publish information on a monthly instead of annual basis where payments are made more frequently than a single annual payment, or ideally, as soon as the data becomes available and therefore known to the authority (commonly known as 'real-time' publication).

67. It is further recommended that local authorities publish information disaggregated by voluntary and community sector category (eg. whether it is registered with Companies House, charity or charitable incorporated organisation, community interest company, industrial and provident society, housing association, etc).

Fraud

68. It is recommended that local authorities should go further than the minimum publication requirements set out in Part 2 and publish:

- total number of cases of irregularity investigated

- total number of occasions on which a) fraud and b) irregularity was identified

- total monetary value of a) the fraud and b) the irregularity that was detected, and

- total monetary value of a) the fraud and b) the irregularity that was recovered.

Part 3.2: Method of publication

69. The Government endorses the five step journey to a fully open format:

One star	Available on the web (whatever format) but with an open license
Two star	As for one star plus available as machine-readable structured data (eg. Excel instead of an image scan of a table)
Three star	As for two star plus use a non-proprietary format (eg. CSV and XML)
Four star	All of the above plus use open standards from the World Wide Web Consortium (such as RDF and SPARLQL21)
Five star	All the above plus links an organisation's data to others' data to provide context

70. The Government recommends that local authorities publish data in three star formats where this is suitable and appropriate[50], alongside open and machine-readable format, within six months of this Code being issued.

Shehla Husain
A Senior Civil Servant in the Department for Communities and Local Government

Department for Communities and Local Government
27 February 2015

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[50] Statistical data, lists etc should be capable of being published in this format but others (eg. organisation charts) may be more difficult.

Annex A: Table summarising all information to be published

Information title	Information which must be published	Information recommended for publication
Expenditure exceeding £500	Quarterly publication Publish details of each individual item of expenditure that exceeds £500, including items of expenditure, consistent with Local Government Association guidance, such as: • individual invoices • grant payments • expense payments • payments for goods and services • grants • grant in aid • rent • credit notes over £500 • transactions with other public bodies. For each individual item of expenditure the following information must be published: • date the expenditure was incurred • local authority department which incurred the expenditure • beneficiary • summary of the purpose of the expenditure • amount • Value Added Tax that cannot be recovered • merchant category (eg. computers, software etc).	• Publish information on a monthly instead of quarterly basis, or ideally, as soon as it becomes available and therefore known to the authority (commonly known as 'real-time' publication). • Publish details of all transactions that exceed £250 instead of £500. For each transaction the details that should be published remain as set out in paragraph 29. • publish the total amount spent on remuneration over the period being reported on. • classify purpose of expenditure using the Chartered Institute of Public Finance and Accountancy Service Reporting Code of Practice to enable comparability between local authorities.

Information title	Information which must be published	Information recommended for publication
Government Procurement Card transactions	Quarterly publication Publish details of every transaction on a Government Procurement Card. For each transaction, the following details must be published: • date of the transaction • local authority department which incurred the expenditure • beneficiary • amount • Value Added Tax that cannot be recovered • summary of the purpose of the expenditure • merchant category (eg. computers, software etc).	• Publish all transactions on all corporate credit cards, charge cards and procurements, including those that are not a Government Procurement Card. For each transaction the details that should be published remain as set out in paragraph 30.
Procurement information	Quarterly publication Publish details of every invitation to tender for contracts to provide goods and/or services with a value that exceeds £5,000. For each invitation, the following details must be published: • reference number • title • description of the goods and/or services sought • start, end and review dates • local authority department responsible. Quarterly publication Publish details of any contract, commissioned activity, purchase order, framework agreement and any other legally enforceable agreement with a value that exceeds £5,000. For each contract, the following details must be published: • reference number • title of agreement • local authority department responsible	Place on Contracts Finder, as well as any other local portal, every invitation to tender or invitation to quote for contracts to provide goods and/or services with a value that exceeds £10,000. Publish: • information on a monthly instead of quarterly basis, or ideally, as soon as it is generated and therefore becomes available (commonly known as 'real-time' publication) • every invitation to tender for contracts to provide goods and/or services with a value that exceeds £500 instead of £5,000 • details of invitations to quote where there has not been a formal invitation to tender • all contracts in their entirety where the value of the contract exceeds £5,000

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Information title	Information which must be published	Information recommended for publication
	- description of the goods and/or services being provided - supplier name and details - sum to be paid over the length of the contract or the estimated annual spending or budget for the contract - Value Added Tax that cannot be recovered - start, end and review dates - whether or not the contract was the result of an invitation to quote or a published invitation to tender - whether or not the supplier is a small or medium sized enterprise and/or a voluntary or community sector organisation and where it is, provide the relevant registration number.	- company registration number at Companies House - details of invitations to tender or invitations to quote that are likely to be issued in the next twelve months - details of the geographical (eg. by ward) coverage of contracts entered into by the local authority - details of performance against contractual key performance indicators - information disaggregated by voluntary and community sector category (eg. whether it is registered with Companies House, charity or charitable incorporated organisation, community interest company, industrial and provident society, housing association, etc).
Local authority land	Annual publication Publish details of all land and building assets including: - all service and office properties occupied or controlled by user bodies, both freehold and leasehold - any properties occupied or run under Private Finance Initiative contracts - all other properties they own or use, for example, hostels, laboratories, investment properties and depots - garages unless rented as part of a housing tenancy agreement - surplus, sublet or vacant properties - undeveloped land - serviced or temporary offices where contractual or actual occupation exceeds three months - all future commitments, for example under an agreement for lease, from when the contractual commitment is made.	Publish information on a monthly instead of annual basis, or ideally, as soon as it becomes available and therefore known to the authority (commonly known as 'real-time' publication). It is also recommended that local authorities should publish all the information possible on Electronic Property Information Mapping Service. Publish the following additional information: the size of the asset measured in Gross Internal Area (m^2) for buildings or hectares for land, in accordance with the Royal Institute of Chartered Surveyors Code of Measuring Practice. The Gross Internal Area is the area of a building measured to the internal face of the perimeter walls at

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Information title	Information which must be published	Information recommended for publication
	However, information about the following land and building assets are to be excluded from publication: • rent free properties provided by traders (such as information booths in public places or ports) • operational railways and canals • operational public highways (but any adjoining land not subject to public rights should be included) • assets of national security • information deemed inappropriate for public access as a result of data protection and/or disclosure controls (eg. such as refuge houses). Information on social housing is also excluded from this specific dataset. For each land or building asset, the following information must be published together in one place: • Unique Property Reference Number • Unique asset identity - the local reference identifier used by the local body, sometimes known as local name or building block. There should be one entry per asset or user/owner (eg. on one site there could be several buildings or in one building there could be several users, floors/rooms etc – where this is the case, each of these will have a separate asset identity). This must include the original reference number from the data source plus authority code • name of the building/land or both • street number or numbers - any sets of 2 or more numbers should be separated with the '-' symbol (eg. 10-15 London Road) • street name – this is the postal road address • post town	each floor level. Local authorities using Net Internal Area (m^2) should convert measurements to Gross Internal Area using appropriate conversion factors and state the conversion factor used • the services offered from the asset, using the services listed in the Effective Services Delivery government service function list http://doc.esd.org.uk/FunctionList/1.00.html (listing up to five main services) • the reason for holding asset such as, it is occupied by the local authority or it is providing a service in its behalf, it is an investment property, it supports economic development (eg. provision of small businesses or incubator space), it is surplus to the authority's requirements, it is awaiting development, it is under construction, it provides infrastructure or it is a community asset • whether or not the asset is either one which is an asset in the authority's ownership that is listed under Part 5 Chapter 3 of the Localism Act 2011 (assets of community value) and/or an asset where the authority is actively seeking transfer to the community • total building operation (revenue) costs as defined in the corporate value for money indicators for public services

Information title	Information which must be published	Information recommended for publication

	• United Kingdom postcode
	• map reference – local authorities may use either Ordnance Survey or ISO6709 systems to identify the location of an asset, but must make clear which is being used. Where an Ordnance Survey mapping system is used (the grid system) then assets will be identified using Eastings before Northings. Where geocoding in accordance with ISO 6709 is being used to identify the centre point of the asset location then that reference must indicate its ISO coordinates
	• whether the local authority owns the freehold or a lease for the asset and for whichever category applies, the local authority must list all the characteristics that apply from the options given below:
	  for freehold assets:
	   o occupied by the local authority
	   o ground leasehold
	   o leasehold
	   o licence
	   o vacant (for vacant properties, local authorities should not publish the full address details and should only publish the first part of the postcode)
	  for leasehold assets:
	   o occupied by the local authority
	   o ground leasehold
	   o sub leasehold
	   o licence
	  for other assets:
	   o free text description eg. rights of way, access etc.
	• whether or not the asset is land only (without permanent buildings) or it is land with a permanent building.
		• required maintenance - the cost to bring the property from its present state up to the state reasonably required by the authority to deliver the service and/or to meet statutory or contract obligations and maintain it at that standard. This should exclude improvement projects but include works necessary to comply with new legislation (eg. asbestos and legionella)
		• functional suitability rating using the scale:
		   o good – performing well and operating efficiently (supports the needs of staff and the delivery of services)
		   o satisfactory – performing well but with minor problems (generally supports the needs of staff and the delivery of services)
		   o poor – showing major problems and/or not operating optimally (impedes the performance off staff and/or the delivery of services)
		   o unsuitable – does not support or actually impedes the delivery of services
		• energy performance rating as stated on the Display Energy Certificate under the Energy Performance of Buildings (England and Wales) Regulations 2012 (as amended).

Information title	Information which must be published	Information recommended for publication
Social housing asset value	Annual publication Publish details on the value of social housing assets within local authorities' Housing Revenue Account. Information to be published using the specified value bands and postal sector: • total number of homes • the aggregate value and mean value of the dwellings for both existing use value (social housing) and market value, and • percentage of homes that are vacant and that are tenanted. Information to be published at a general level: • an explanation of the difference between the tenanted sale value of homes within the Housing Revenue Account and their market sale value, and • an assurance that the publication of this information is not intended to suggest that tenancies should end to realise the market value of properties. Other residential tenanted properties that the authority may hold within their General Fund are excluded from this specific dataset, as is information on other building assets or land that local authorities hold within their Housing Revenue Account.	
Grants to voluntary, community and social enterprise organisations	Annual publication Publish details of all grants to voluntary, community and social enterprise organisations. This can be achieved by either: • tagging and hence specifically identifying transactions which relate to voluntary, community and social enterprise organisations within published data on expenditure over £500 or published procurement information, or • by publishing a separate list or register.	• Publish information on a monthly instead of annual basis where payments are made more frequently than a single annual payment, or ideally, as soon as the data becomes available and therefore known to the authority (commonly known as 'real-time' publication).

Information title	Information which must be published	Information recommended for publication
	For each identified grant, the following information must be published as a minimum: • date the grant was awarded • time period for which the grant has been given • local authority department which awarded the grant • beneficiary • beneficiary's registration number • summary of the purpose of the grant • amount	• information disaggregated by voluntary and community sector category (eg. whether it is registered with Companies House, charity or charitable incorporated organisation, community interest company, industrial and provident society, housing association etc).
Organisation chart	Annual publication Publish an organisation chart covering staff in the top three levels of the organisation. The following information must be included for each member of staff included in the chart: • grade • job title • local authority department and team • whether permanent or temporary staff • contact details • salary in £5,000 brackets, consistent with the details published for Senior Salaries • salary ceiling (the maximum salary for the grade).	Local authorities should publish: • charts including all employees in the local authority whose salary exceeds £50,000 • the salary band for each employee included in the chart(s) • information about current vacant posts, or signpost vacancies that are going to be advertised in the future.
Trade union facility time	Annual publication Publish the following information: • total number (absolute number and full time equivalent) of staff who are union representatives (including general, learning and health and safety representatives) • total number (absolute number and full time equivalent) of union representatives who devote at least 50 per cent of their time to union duties • names of all trade unions represented in the local authority	

Information title	Information which must be published	Information recommended for publication
	• a basic estimate of spending on unions (calculated as the number of full time equivalent days spent on union duties multiplied by the average salary), and • a basic estimate of spending on unions as a percentage of the total pay bill (calculated as the number of full time equivalent days spent on union duties multiplied by the average salary divided by the total pay bill).	
Parking account	Annual publication Publish on their website, or place a link on their website to this data published elsewhere: • a breakdown of income and expenditure on the authority's parking account. The breakdown of income must include details of revenue collected from on-street parking, off-street parking and Penalty Charge Notices • a breakdown of how the authority has spent a surplus on its parking account.	
Parking spaces	Annual publication Publish the number of marked out controlled on and off-street parking spaces within their area, or an estimate of the number of spaces where controlled parking space is not marked out in individual parking bays or spaces.	Local authorities should publish the number of: • free parking spaces available in the local authority's area and which are provided directly by the local authority, and • parking spaces where charges apply that are available in the local authority's area and which are provided directly by the local authority. Where parking space is not marked out in individual parking bays or spaces, local authorities should estimate the number of spaces available for the two categories.

Information title	Information which must be published	Information recommended for publication
Senior salaries	Annual publication Local authorities must place a link on their website to the following data or must place the data itself on their website: • the number of employees whose remuneration in that year was at least £50,000 in brackets of £5,000 • details of remuneration and job title of certain senior employees whose salary is at least £50,000 • employees whose salaries are £150,000 or more must also be identified by name. • a list of responsibilities (for example, the services and functions they are responsible for, budget held and number of staff) and details of bonuses and 'benefits in kind', for all employees whose salary exceeds £50,000.	
Constitution	Annual publication Local authorities must publish their Constitution on their website.	
Pay multiple	Annual publication Publish the pay multiple on their website defined as the ratio between the highest taxable earnings for the given year (including base salary, variable pay, bonuses, allowances and the cash value of any benefits-in-kind) and the median earnings figure of the whole of the authority's workforce. The measure must: • cover all elements of remuneration that can be valued (eg. all taxable earnings for the given year, including base salary, variable pay, bonuses, allowances and the cash value of any benefits-in-kind) • use the median earnings figure as the denominator, which should be that of all employees of the local authority on a fixed date each year, coinciding with reporting at the end of the financial year • exclude changes in pension benefits, which due to their variety and complexity cannot be accurately included in a pay multiple disclosure.	

Information title	Information which must be published	Information recommended for publication
Fraud	Annual publication Publish the following information: • number of occasions they use powers under the Prevention of Social Housing Fraud (Power to Require Information) (England) Regulations 2014, or similar powers • total number (absolute and full time equivalent) of employees undertaking investigations and prosecutions of fraud • total number (absolute and full time equivalent) of professionally accredited counter fraud specialists • total amount spent by the authority on the investigation and prosecution of fraud • total number of fraud cases investigated.	Local authorities should publish: • total number of cases of irregularity investigated • total number of occasions on which a) fraud and b) irregularity was identified • total monetary value of a) the fraud and b) the irregularity that was detected, and • total monetary value of a) the fraud and b) the irregularity that was recovered.
Waste contracts	One-off publication Local authorities must publish details of their existing waste collection contracts, in line with the details contained in paragraphs 32 of the Code, at the point they first publish quarterly contract information under Part 2 of this Code.	

Annex B: Detecting and preventing fraud

Tackling fraud is an integral part of ensuring that tax-payers money is used to protect resources for frontline services. The cost of fraud to local government is estimated at £2.1 billion a year. This is money that can be better used to support the delivery of front line services and make savings for local tax payers.

A culture of transparency should strengthen counter-fraud controls. The Code makes it clear that fraud can thrive where decisions are not open to scrutiny and details of spending, contracts and service provision are hidden from view. Greater transparency, and the provisions in this Code, can help combat fraud.

Sources of support to tackle fraud include:

Fighting Fraud Locally, The Local Government Fraud Strategy (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/118508/strategy-document.pdf), was drafted by the National Fraud Authority and CIPFA (the Chartered Institute of Public Finance and Accountancy). The document calls for the adoption of a tougher approach to tackle fraud against local authorities. The strategy is part of a wider collaboration on counter fraud and is the local authority contribution to the national fraud strategy – *Fighting Fraud Together* (https://www.gov.uk/government/publications/nfa-fighting-fraud-together) which encompasses both the public and private sectors response to fraud in the UK.

Local authorities should use a risk management approach with strong internal control arrangements to reduce the risk of any payment fraud as a result of publishing public data. Local authorities should refer to the *Chartered Institute of Public Finance and Accountancy Code of Practice on Managing the Risk of Fraud and Corruption* (http://www.cipfa.org/services/counter-fraud-centre/code-of-practice). The document sets out a step by step toolkit to tackling fraud: identifying and understanding your fraud risks and potential exposure to fraud loss; assessing current resilience to fraud; evaluating the organisation's ability to respond to potential or identified fraud; and developing a strategy. Developing an anti-fraud culture is an important part of improving resilience; the benefits of improving resilience to fraud include reduced exposure to fraud and an organisation that is better able to identify attempted frauds or vulnerabilities.

The National Fraud Authority have produced a guide on procurement fraud, *Procurement Fraud in the Public Sector*, (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/118460/procurement-fraud-public-sector.pdf) which deals with the whole process, from bidding during the pre-contract award phase through to false invoicing in the post-contract award phase.

There are some specific steps local authorities can take to prevent procurement fraud. These might include:

- only accepting requests for changes to supplier standing data in writing

- seeking confirmation from the supplier that the requested changes are genuine, using contact details held on the vendor data file or from previous and legitimate correspondence; and not contacting the supplier via contact details provided on the letter requesting the changes

- ensuring that there is segregation of duties between those who authorise changes and those who make them

- only authorising changes when all appropriate checks have been carried out with legitimate suppliers and only making the changes when the proper authorisations to do so have been given

- maintaining a suitable audit trail to ensure that a history of all transactions and changes is kept

- producing reports of all changes made to supplier standing data and checking that the changes were valid and properly authorised before any payments are made

- carrying out standard checks on invoices before making any payments, and

- regularly verifying the correctness of standing data with suppliers.

Annex C: Social housing asset data to be published

Postal Sector	Valuation Band Range	Intervening bands	Dwellings value					Tenure status	
			Total number social housing dwellings	EUV-SH Values		Market Values		% occupied dwellings	% vacant dwellings
				Total	Average	Total	Average		
PO1 1**	<£50,000 - £99,999	<£50,000							
		£50,000 - £59,999							
		£60,000 - £69,999							
		£70,000 - £79,999							
		£80,000 - £89,999							
		£90,000 - £99,999							
	£100,000 - £299,999	£100,000 - £119,999							
		£120,000 - £139,999							
		£140,000 - £159,999							
		£160,000 - £179,999							
		£180,000 - £199,999							
		£200,000 - £219,999							
		£220,000 - £239,999							
		£240,000 - £259,999							
		£260,000 - £279,999							
		£280,000 - £299,999							
	£300,000 - £499,999	£300,000 - £349,999							
		£350,000 - £399,999							
		£400,000 - £449,999							
		£450,000 - £499,999							
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		£1,500,000 - £1,999,999							
		£2,000,000 - £2,499,999							
		£2,500,000 - £2,999,999							
		£3,000,000>							

TO: Overview and Scrutiny Committee

FROM: Deputy Chief Executive Officer - Matthew Warren

PRESENTING OFFICER(S): Deputy Chief Executive Officer - Matthew Warren

                                    Telephone - 01480 444619
                                    Email - matthew.warren@cambsfire.gov.uk

DATE: 6 October 2022

DRAFT ANNUAL GOVERNANCE STATEMENT 2021/22

1.   Purpose

1.1   The purpose of this report is to provide the Overview and Scrutiny Committee with a draft Annual Governance Statement (AGS) for 2021/22 for scrutiny and comment.

2.   Recommendations

2.1   In accordance with the current Cambridgeshire and Peterborough Fire Authority Terms of Reference, the Committee is asked to;

       (a) Scrutinise the AGS, attached at Appendix 1 and make comment as appropriate,

       (b) Recommend to the Authority that the AGS is approved for external publication.

3.   Risk Assessment

3.1   **Legal** – the Authority has a responsibility to comply with the Accounts and Audit Regulations 2015 (as amended), as well as having regard to the requirements of the Delivering Good Governance in Local Government Framework 2016 (CIPFA/SOLACE). The AGS sets out how we comply with the legislation and framework and identifies any areas for improvement in the coming year.

4.   Background

4.1   The Accounts and Audit Regulations 2015 (as amended) set out requirements relating to the Authority's systems of internal control and the annual review and reporting of those systems.

4.2   The regulation requires all local authorities to have a sound system of internal control, which includes how risks are managed. Additionally, all local authorities must conduct a review of their internal control effectiveness at least annually. Following this review, the Authority must approve an AGS that accompanies the Statement of Accounts.

5. Governance

5.1 Governance is about doing the right things, in the right way, for the right people, in a timely, inclusive, open, honest and accountable manner. Good governance underpins good performance, stewardship of public money and public engagement; ultimately, good governance enables good outcomes for citizens and service users.

5.2 The CIPFA/SOLACE framework provides a structure on how local authorities approach governance and guidance on the structure and layout of an AGS which we have incorporated where appropriate in the production of Appendix 1.

5.3 The framework sets out the following governance requirements that an authority must ensure are in place;

- Its policies are implemented in practice,

- Its values and ethical standards are met,

- Laws and regulations are complied with,

- Required processes are adhered to,

- Financial statements and other published information are accurate and reliable,

- Human, financial and other resources are managed effectively and efficiently,

- High quality services are delivered efficiently and effectively.

5.4 In order to meet the framework, local authorities are expected to do the following;

- Review the existing arrangements against the framework,

- Maintain a local code of governance including arrangements for ensuring its on-going application and effectiveness,

- Prepare an AGS in order to report publicly on the extent to which they comply with their own code on an annual basis, including how they have monitored the effectiveness of their governance arrangements in the year and on any planned changes in the next period.

5.5 Since the last AGS, CIPFA has published a guidance bulletin concerning the closure of the 2021/22 financial statements. In December 2021, the Department for Levelling-up, Housing and Communities (DLUHC) announced an intention for the following dates to apply for the 2021/22 accounts and audit process in England;

- 31 July - publication of the unaudited statement of accounts,

- 30 November - publication of the audited statement of accounts.

5.6   If publication is not possible by these dates then the Accounts and Audit Regulations 2015 (as amended), require several actions to be taken.

5.7   The bulletin also states that authorities should continue to consider the impact of the COVID-19 pandemic on their governance arrangements. The Service has been cognisant of both the financial and pandemic reporting requirements in the production of its AGS.

BIBLIOGRAPHY

Source Documents	Location	Contact Officer
Delivering Good Governance in Local Government Framework 2016 (CIPFA/SOLACE) Accounts and Audit Regulations 2015 (as amended) CIPFA Financial Management Code 2019 CIPFA Bulletin 10	Hinchingbrooke Cottage Brampton Road Huntingdon	Matthew Warren 01480 444619 matthew.warren@cambsfire.gov.uk

ANNUAL GOVERNANCE STATEMENT 2021/22

1. Scope of Responsibility

The Authority is responsible for ensuring that its business is conducted in accordance with the law and proper standards and that public money is safeguarded, properly accounted for and used economically, efficiently and effectively. The Authority also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having due regard to a combination of economy, efficiency and effectiveness.

In discharging this overall responsibility, the Authority is also responsible for putting in place proper arrangements for the governance of its affairs and facilitating the effective exercise of its functions that includes ensuring a sound system of internal controls is maintained throughout the year and that arrangements are in place for the management of risk. In exercising this responsibility, the Authority also relies on the Chief Fire Officer to support the governance and risk management processes.

The Authority has approved and adopted a code of corporate governance, which is consistent with the principles of the Delivering Good Governance in Local Government Framework 2016 (CIPFA/SOLACE). A copy of the code is on our website at:

 http://www.cambsfire.gov.uk/documents/FA_-_Code_of_Governance.pdf

This statement explains how the Authority has complied with the code and meets the requirements of Accounts and Audit (England) Regulations 2015 (as amended) in relation to the publication of a statement of internal control.

2. The Purpose of the Governance Framework

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

The system of internal controls is a significant part of that framework and is designed to manage risk to a reasonable and foreseeable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal controls is based on an ongoing process designed to identify and prioritise the risks to the achievement of the Authority's policies, aims and objectives, evaluate the likelihood of those risks being

realised and the impact should they be realised and to manage them efficiently, effectively and economically. The governance framework has been in place at the Authority for the 12 months ending 31 March 2022 and the Head of Internal Audit opinion was:

- The organisation has an adequate and effective framework for risk management, governance and internal control;

- However, our work has identified further enhancements to the framework of risk management, governance and internal control to ensure that it remains adequate and effective.

3.   The Governance Framework

The key elements of the systems and processes that comprise the Authority's governance arrangements include:

- A vision that clearly sets out our purpose and to which the Authority's objectives and priorities are directly related.

- The Authority's core objectives and priorities are set out in its Integrated Risk Management Plan (IRMP). The IRMP is focused over a period of four years and details an action plan after consideration of our vision, excellence statements and risks and opportunities. The actions within the plan are monitored and managed by the Programme Board.

- The Authority's core objectives cascade through departmental and group plans to individual performance management plans. In addition, they set out the key activities and related targets for each group and the measure of success that will evidence achievement of these. For each activity target start and finish dates and lead officers are identified. This document becomes, in effect, the action plan for the work of that group. These plans are then further refined into station and team plans.

- Arrangements for establishing clear channels of communication with all sections of the community and other stakeholders, ensuring accountability and encouraging open consultation.

- Programme and project management embedded throughout the Service to ensure effective implementation of strategic projects and efficiency gains are realised and recorded.

- Strategy Boards for property and ICT which oversee both areas owing to the significant on-going expenditure in both areas.

- An Annual Report/Statement of Assurance which looks back at the previous year to see how we performed and details priorities for the current year.

- A continuous performance cycle that focuses on objectives and the introduction of new business critical projects, whilst managing business as usual. The system seeks

to manage conflicts of resources, whilst updating objectives to reflect the revised priorities.

- Having embedded arrangements for whistle blowing and for receiving and investigating complaints from the public.

- Ensuring the Authority's financial management arrangements conform to the governance requirements of the CIPFA Statement on the Role of the Chief Financial Officer in Local Government (2016).

- A partnership strategy designed to ensure all partnership activities are appropriate and will contribute to the Authority's key objectives.

- Performance management reviews undertaken quarterly highlighting performance against the agreed targets.

- A system of internal control which comprises a network of policies, procedures, reports and processes. These arrangements clarify the Authority's vision, objectives, priorities, risk management arrangements, performance management processes and financial controls and aim to ensure compliance with relevant laws and regulations, internal policies and procedures and that expenditure is lawful.

- An integrated risk management strategy and framework that ensure effective management of strategic, programme and project risks.

- Identification of the Authority's business continuity function and responsibilities with regard to the Civil Contingencies Act and preparation of business continuity plans.

- Clear scheme of delegation that sets out the roles and responsibilities of the executive, non-executive, scrutiny and Officer functions together with protocols for effective communication.

- Arrangements for developing, communicating and embedding codes of conduct, defining standards of behaviour for Members and staff.

- The financial management of the Authority and the reporting of financial management to the Policy and Resources Committee.

- The performance management framework of the Authority and the reporting of performance management to the Overview and Scrutiny Committee. This receives regular performance indicator reports and undertakes the core functions of an audit committee, as identified in CIPFA's Audit Committees: Practical Guidance for Local Authorities and Police (2018).

- An internal quality assurance function that targets areas of risk and recommends improvement measures. This function also considers legislation compliance annually.

- Accreditation by the British Standards Institute for Business Continuity, Information Security, Health and Safety and Environmental Management.

More specifically, the Authority's internal financial control is exercised through:

- A written scheme of delegation from the Authority to Officers.

- A scheme of financial management which includes financial regulations governing how Officers conduct financial affairs and contract regulations which detail fully the responsibilities of Officers in ensuring that contract procedures comply with legal requirements, achieve value for money, promote public accountability and deter corruption.

- A comprehensive budgeting system.

- An Overview and Scrutiny Committee, which has responsibility for performing scrutiny reviews on key projects and issues.

- The submission of quarterly budgetary control reports to the Policy and Resources Committee.

- The production of annual local performance indicators which are reviewed by Heads of Group and the Chief Officer Group.

4. Review of Effectiveness

The Authority has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of the effectiveness of the system of internal control is informed by the work of the internal auditors and the managers within the Authority who have responsibility for the development and maintenance of the governance environment and also by comments made by the external auditors in their annual audit letter and other reports, other review agencies and inspectorates.

In this regard the Authority retains, contractually, the internal audit services of RSM Risk Assurance Services LLP to provide an independent appraisal function to review and report on the effectiveness of the systems of internal controls within the Authority. The internal audit team works to defined professional standards, particularly those promulgated by CIPFA in its Code of Practice for Internal Audit in Local Government. The Internal Audit Plan is prepared on the basis of a formal risk assessment and the internal auditor reports directly to the Authority via the Overview and Scrutiny Committee on both the proposed plan and the main outcomes of audit work.

The external auditor reports and delivers plans and an annual letter to the Authority via the Overview and Scrutiny Committee.

A full review of the Authority's strategic risk strategy, process and register has been undertaken. The reviewed strategy and policy have been approved by the Policy and Resources Committee.

Our internal auditors have carried out sufficient audit work to draw a reasonable conclusion on the adequacy and effectiveness of the Authority's governance arrangements.

We have been advised on the implications of the result of the reviews of the effectiveness of the governance framework and a plan to address weaknesses and ensure continuous improvement of the system is in place.

Progress made against Governance Issues identified in 2020/21

- **CFRMIS – Collection and Update of Risk Information** following the HMICFRS Review (partial assurance) –the Authority received a follow up audit report in September 2022 giving substantial assurance that the controls upon which it relies to manage this area are suitably designed, consistently applied and effective.

- **Human Resources – Training, Recording and Competency System** (partial assurance) – improve currency of training policies and review schedule cognisant of national guidance and best practice controls. Reasonable progress has been made with five of the eight agreed management actions being completed. Work continues to fully implement the remainder.

Significant Governance Issues for 2021/22

- **Asset and Fleet Management System** – the auditors found that processes could be improved in relation to utilising the asset management system for example, fully and consistently populating data fields. There was no asset management policy in place to define the roles and responsibilities within asset management and no central guidance on how the Authority purchased, tested and maintained its assets. The Service now has a strategy and Fleet Management Plan in place to mitigate the risks of not being able to manage its assets and any potential budgetary decisions.

- **Sickness Absence Management** – although several good practices were found, the auditor felt that further improvements could be made to strengthen the control environment. These included monitoring of compliance with sickness absence procedures (without exception) and consideration of refresher training in absence management. The latter has not been delivered since 2019, due in part, to the impact of the pandemic. The Service has since revised, consulted on and agreed a sickness policy. When this is launched, training will be provided.

5. Other Considerations

The Authority will continue to take action to deal with governance issues relating to:

- Progression with the build of a new training centre and community fire station at St John's in Huntingdon to include all aspects of project construction, spend and disposal options for the current site.

- Progression with wider property portfolio collaboration opportunities.

- Monitoring the progress of central government consultations into fire sector reform and public inquiry's into events that affect the emergency services for example, Grenfell Tower and Manchester Arena and be prepared to act on the outcome(s) once known.

- Producing a Financial Business Continuity Plan to prepare for any budget pressures including but not limited to national pay awards above 2%. The Authority, in partnership with the Service, will continue to liaise with Government regarding fairer funding formulas.

- Prepare resilience plans for any industrial action that may result from national pay negotiations failing.

6.   Post Coronavirus (COVID-19) Pandemic Arrangements

The pandemic has had a significant impact on the organisation, how it operates, its risk profile and associated activities. The wellbeing of all staff remains of paramount importance to the Authority and although physical Authority meetings have been permitted since early 2021, the Service undertook a phased return to 'business as usual' and commenced a ''ways of working' project to ensure learning and experiences from the pandemic inform how it moves forward efficiently and effectively.

Although there have been no significant changes to longer term priorities, strategies and plans in this reporting period, the Authority remains flexible in its approach to operational resilience and arrangements to deal with service demand in a changing local and national situation.

7.   Conclusion

Based on the opinion of the Head of Internal Audit and our own ongoing work, we are satisfied that our arrangements for governance, risk management and control are adequate and effective.

We propose over the coming year to take steps to address the above matters to further enhance these arrangements and will monitor the implementation and operation of improvements.

Chris Strickland
Chief Fire Officer and Chief Executive
Date: 3 November 2022

Councillor E Murphy
Chair Cambridgeshire and Peterborough Fire Authority
Date: 3 November 2022

REVIEW OF CAMBRIDGESHIRE AND PETERBOROUGH FIRE AUTHORITY CONSULTATION WITH REPRESENTATIVE BODIES

To:	Overview and Scrutiny Committee
Date:	6 October 2022
From:	Overview and Scrutiny Review Group
Purpose:	To present the findings of the review of Cambridgeshire and Peterborough Fire Authority Consultation with Representative Bodies
Recommendations:	The Committee is asked to;

      (a) Consider and note the contents of this report,

      (b) Approve the recommendation at Paragraph 12.1,

      (c) Discuss and agree suggestions to take forward to the next Authority meeting (Paragraph 12.2),

      (d) Approve the recommendation at Paragraph 12.3.

Officer Contact		**Member Contact**	
Name:	Deb Thompson	Name:	Councillor Mac McGuire
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EXECUTIVE SUMMARY OF FINDINGS

Theme	Paragraph	Positive Findings	Neutral Findings	Negative Findings	Recommendation
Part A - Background	1 - 3				
Part B – Findings					
Background	4	People at the centre Union membership through personal choice.	Three distinct unions.		
What is the Joint Consultative Committee?	5	Clearly defined terms of reference. Promotes openness and transparency.			
Evolution of the Joint Consultative Committee	6	Structure and format changed as required.		Meetings ceased in 2017.	
Current Position	7	Member-led review instigated.	No issues raised despite lack of meetings.	No meetings for prolonged period.	
Meetings with Representative Bodies/Key Stakeholders	8	Positive attitude of all representative bodies.	Difficult for FRSA to meet in normal working hours.	No change in FBU position.	
Other Considerations/Influencers	9	Legally compliant. Positive inspection findings.	No best practice examples. Limited response to research request.		
Conclusions	10				
Options	11		Three available.		
Recommendations	12				

PART A - BACKGROUND

1.   Introduction

1.1   This review is being undertaken to satisfy the Fire Authority that its consultation with representative bodies is legally compliant and offers the most effective and productive way to allow dialogue on issues and concerns between the Service, members and representative bodies whilst promoting transparency and openness. Whilst this review contributes to all four excellence statements it is predominantly focussed on people.

1.2   The review mentions but does not extensively comment on existing consultation and negotiation forums between officers and the representative bodies.

1.3   The review was undertaken by Councillors Mac McGuire and John Gowing.

2.   Review Objectives

2.1   The objectives of the review were to:

- Research best practice in the sector,

- Interrogate internal governance evidence and specifically those documents relating to the evolution of the current way in which the Authority consults with representative bodies,

- Provide the Authority with assurance that it is legally compliant and has an effective and efficient governance structure that reflects best practice in sector,

- Comment and make recommendations on its findings as appropriate.

3.   Methodology

3.1   The terms of reference for this Member-led review set out the key lines of enquiry, which were:

- Understand the existing governance arrangements and any historic influencers,

- Identify other means by which consultation and dialogue is achieved,

- Research best practice in sector,

- Assure the Authority that it is legally compliant.

3.2   The report does not comment on any related influencers or methods of consultation outside of the Authority, but does consider how the Authority monitors any need to change how it consults with representative bodies.

3.3   Both members of the Review Group are currently appointed to the Joint Consultative Committee (JCC). In order to (re) familiarise themselves with the evolution and work of the committee, background research was carried out and informal meetings were held with several key individuals (the Chief Officer Group, Monitoring Officer, Fire Brigades Union, Fire and Rescue Service Association and UNISON representatives). It also periodically discussed the progress of the review with other members of the Overview and Scrutiny Committee, including those new members appointed to the Authority after the elections in May 2021, to garner their views.

3.4   Any member of the Overview and Scrutiny Committee wishing to review evidence not specifically included in this report or requiring further information should contact the Scrutiny and Assurance Manager who will make the necessary arrangements.

3.5   The remainder of this report sets out the findings from the review.

PART B – FINDINGS

4.   Background

4.1   Cambridgeshire Fire and Rescue Service (CFRS) is a complex organisation with a range of statutory and community duties. To enable the Authority to meet its statutory obligations, strategic priorities and operational needs it currently operates from 28 fire stations across the county, 27 of which are operational. Management, professional support services and the UK's first Combined Fire Control (CFC) are all based at Service Headquarters in Huntingdon.

4.2   At the time of writing the establishment is 242 wholetime firefighters (including principal officers) and 250 (full time equivalent) on-call firefighters who are mobilised across Cambridgeshire, Peterborough and Suffolk by 36 staff operating within the CFC. Essential operational and business support functions are provided by 138 full time employees that work in professional support service roles.

4.3   The number and locations of the stations, management structures and staffing model are routinely reviewed to ensure CFRS delivers a service that continues to be effective and efficient within the constraints of the budget available each year.

4.4   People are at the centre of the organisations vision. This is an ambitious statement which CFRS aspires to meet in future. It includes people in the community and CFRS employees in terms of training, development, health, safety and wellbeing.

4.5   Membership of a representative body is an individual decision for each employee and although subscriptions are managed through payroll, membership status is not shared with management or anyone else. Within Cambridgeshire, there are three representative bodies;

- Fire Brigades Union (FBU),

- Fire and Rescue Service Association (FRSA; formerly Retained Firefighters Union or RFU), and

- UNISON.

5.   What is the Joint Consultative Committee?

5.1   The Joint Consultative Committee (JCC) is a Fire Authority committee that has clearly defined terms of reference including membership, scheduling and procedural arrangements. Its purpose has always been to act as a consultative body rather than a forum for negotiation, allowing dialogue on issues and concerns between the Service, members and representative bodies to promote transparency and openness.

6.   Evolution of the Joint Consultative Committee

6.1   The Review Group found evidence that, in October 2014, the then Monitoring Officer presented a report to the Fire Authority asking them to approve amended terms of reference for two committees, one of which was the Joint Consultative Committee. At that time, for unknown reasons, the JCC had not met for several years and the then Authority Chairman wished members to consider reinstating the JCC to provide a forum in which recognised trade unions could engage in discussions with members on matters of interest. In the month prior to the Authority meeting, a steer had been requested from the then Policy Committee regarding the membership composition and other matters. The existing membership was five Authority members and two trade union representatives from each of the three unions. It was proposed that membership be expanded to seven Authority members including the Chairman and Vice Chairman, making it more representative of the political groups.

6.2   The recommendations were approved by the Authority (Minute 81 of the Fire Authority meeting held on 9 October 2014 refers).

6.3   At this time the JCC was scheduled to meet a few days before the Fire Authority meeting to consider items on that agenda; the two inaugural meetings were held on 9 February 2015. At the meeting in May 2015, cognisant of recent ministerial statements and the stance taken by the then Department of Communities and Local Government, the Service representatives, asked if both the FBU and UNISON would be agreeable to hold joint, rather than separate, meetings with the RFU moving forward. Whilst the UNISON representative was immediately agreeable, the FBU responded formally (Minute 6 of the JCC meeting held on 18 May 2015 refers; link to paragraph 6.7 below).

6.4   In addition it had also become clear that the procedural arrangements agreed in October 2014, when the JCC was reintroduced, were not working. Therefore, at the JCC meeting on 16 May 2016 the current Monitoring Officer presented a report to the committee requesting their approval to make changes which they felt would enhance the ability of the JCC to discuss appropriate matters of importance to all parties in a more structured and timely way. Key changes were:

- Increased frequency of meetings from quarterly to six times a year,

- Agenda to be determined by the Monitoring Officer replicating arrangements for all other Fire Authority meetings and bringing about a degree of independence and rigour, and

- Timings no longer linked to Fire Authority meetings. This would afford representative bodies reasonable time to raise issues and bring considered agenda items forward for discussion.

6.5   The JCC approved the recommendations made and changes to the terms of reference were subsequently approved by the Authority (Minute 177 of the Fire Authority meeting held on 19 May 2016 refers. Minute 4 of the JCC meeting held on 16 May 2016 and Minute 2 of the JCC meeting held on 23 November 2016 refer).

6.6   At the same JCC meeting (May 2016), the then FBU Regional Secretary reiterated national policy that FBU officials could not sit at the same meeting table as RFU officials without penalty. He did, however, state he was willing to facilitate workshops to navigate discussion on matters that would affect both the FBU and RFU (Minute 4 of the JCC meeting held on 16 May 2016 refer; these Minutes were agreed as an accurate record at the JCC meeting held on 23 November 2016).

6.7   Despite the improvements brought about by the changes in scheduling and formatting, the Review Group found that the refusal of the FBU to attend joint FBU/RFU meetings meant that two separate meetings to discuss the same agenda items continued to be necessary.

6.8   It was felt by the then Chairman of the Authority that holding two separate meetings did not reflect the inclusive 'One Team Behaviours' ethos of the Service, nor did it constitute a good use of time, effort and resources. The Review Group found evidence that at the meeting held on 12 January 2017, the FBU challenged the joint format of the meeting and after an adjournment two separate meetings were held (in order not to waste the meeting time left available). (Minute 1 of the JCC meeting held on 12 January 2017 refers). Scheduled meetings continued to be held and the Review Group found evidence that meetings took place on 22 February, 2 June and 19 July 2017 although it is clear from the related documents that these meetings only took place because not all three representative bodies were in attendance.

6.9   The last formal meeting of the JCC was held on 7 September 2017. Although apologies were received from the UNISON representative on this date, the minutes (Minute 2) state that the then FBU representatives again questioned the format of the meeting and, on receiving an affirmative that it would be a joint meeting, referred those present to the minutes of the meeting in May 2016 (paragraph 6.6 above refers) when the visiting FBU Regional Secretary asserted that the FBU could not sit at the same table as RFU representatives without penalty. They then withdrew from the meeting. This was seen as regrettable by the members present. The FBU responded that this was not a national issue, it was a local resolution caused by its membership.

6.10   Although no formal evidence of a local resolution from the membership has been provided, written confirmation of the FBU position was received after the September 2017 meeting and is attached at Appendix 1.

7.   Current Position

7.1   After the meeting held on 7 September 2017, the last documented interaction of the JCC was an informal meeting on 18 July 2018 when three members met with the then FBU Chairman and the Assistant Chief Fire Officer. There was no evidence that the outcomes of this meeting (finding a mutually agreeable way forward within two weeks and determining the frequency of any meetings) were progressed. This is believed to be due, in part, to a change in key personnel.

7.2   The terms of reference for the JCC still form part of the constitutional suite of documents of the Fire Authority and meetings continue to be scheduled six times per annum. The Review Group were made aware that as no way forward for a joint meeting to be held had been found, scheduled meetings are cancelled with a message that, should any representative bodies wish to raise an issue with members, they may contact the Scrutiny and Assurance Manager who will endeavour to arrange a meeting. Since July 2018, to the best of the Review Group's knowledge, no issues have been raised and no meetings have been requested by any of the representative bodies.

7.3   As a consequence, the Overview and Scrutiny Committee agreed that a member-led review would be conducted in consultation with representative bodies - specifically the JCC - to find a way forward. This work was started in 2019 but suspended during the pandemic and elections in May 2021. The findings are presented to the Overview and Scrutiny Committee today.

8.   Meetings with Representative Bodies/Key Stakeholders

8.1   The Review Group met with the three representative bodies separately. All meetings were virtual, positive and cordial. The key points from each are highlighted below.

8.2   Meeting with the Fire Brigades Union Representative

8.2.1   The Review Group met with George White, a wholetime operational firefighter, who is also the current FBU Brigade Secretary for Cambridgeshire. The position of FBU Brigade Chairman within Cambridgeshire is vacant and Mr White is assisted on FBU matters by a Brigade Organiser, Callum Hodgkin, who is also a wholetime operational firefighter.

8.2.2   Although predominantly not directly involved in the matter detailed in paragraph 6, Mr White did acknowledge the difficulties with the JCC. He reiterated they were outside of his control and that, although the JCC is a non-executive decision-making forum, it is still considered formal while he felt an informal method of consultation would be better. He also felt that recent, more dynamic issues, such as the COVID-19 risk assessments, would have benefitted from having this forum available.

8.2.3   He requested that the following be considered as part of the review;

- Improved communication channel(s) between representative bodies and Fire Authority Members generally, not just the JCC,

- Regular meetings between representative bodies and the Fire Authority would be massively useful,

- In the absence of a current facility, consider a mechanism whereby representative bodies could speak or have input at Fire Authority meetings, and

- Include a session with representative bodies in any member induction programme.

8.3   Meeting with Fire and Rescue Service Association Representative

8.3.1   The Retained Firefighters Union (RFU) was established in 1976 to promote and protect the interests of retained firefighters across the UK whilst incorporating a no strike policy at the heart of the organisation. It believes that over the past four decades it has fought for members rights and jobs in a professional, constructive and balanced manner using the power of argument, rather than the argument of power. It changed its name to FRSA on 1 July 2018 as part of an evolution, rather than a revolution, to ensure the organisation is viewed as the forward thinking, outward looking, progressive representative body it always has been. As part of its inclusive ethos, wholetime and CFC employees join by choice.

8.3.2   The Review Group met with Mark Milner, an on-call firefighter and FRSA representative.

8.3.3   He was aware that nationally there are fire and rescue services holding joint FBU/FRSA meetings with members and officers.

8.3.4   At the time of the meeting, Mr Milner felt that the JCC was biased towards the FBU concerns and would need assurance that the FRSA would be heard in future forums. He felt that there was a consensus that senior management were not listening to the FRSA – such as with COVID-19 risk assessments.

8.3.5   He felt that it was often difficult for FRSA representatives to meet during normal working hours, and although previous JCC members had met outside of the scheduled meetings, this was the exception. Overall, he felt that the Service was fragmented with poor communications and this was reflected in the (demise) of the JCC.

Review Group comment: The Service ambition is to have a fully engaged workforce and employee engagement surveys were undertaken in 2015 and 2019 with a pulse check in 2017. At that time the data suggested that 66% of the workforce were 100% engaged which is about 22% higher than the national average across emergency services. CFRS will be undertaking another employee engagement survey late 2022.

8.4   Meeting with UNISON Representative

8.4.1   The Review Group met with Kevin James, Community Safety Officer – Safeguarding and UNISON representative.

8.4.2   Whilst appreciating the reasons given for the inability to meet, Mr James was fully supportive of a joint JCC meeting. He felt that the JCC should meet regardless of the number of agenda items as this would allow dialogue. Although not sighted on the views of the FBU representative, Mr James also made similar comments about interaction with members to those given at paragraph 8.2.3.

8.4.3   Since the drafting of this report Mr James has left CFRS; there is currently no UNISON representative within the organisation.

8.5   Meetings with Key Stakeholders

8.5.1   The Assistant Chief Fire Officer (ACFO) spoke on behalf of the Chief Officers Group. They believe most Cambridgeshire firefighters are FBU members. This puts them in a position of professional disagreement with FRSA members due to the respective union policies on strike action. Cambridgeshire FBU representatives are also bound by nationally agreed issues such as pay and the expansion of role maps. Many of the nationally agreed issues have a significant organisational impact and they, plus a myriad of other more localised issues, need to be negotiated to assess the level of such impact(s).

8.5.2   The ACFO provided the Review Group with details of formal and informal meetings held between the Service and all three representative bodies in which consultation and negotiation on operational matters of national and local importance take place. He believes the Service has a generally positive relationship with representative bodies and noted that recent inspections by external bodies had found examples of regular engagement and evidence of negotiation to resolve concerns (duty system changes), as well as evidence of feedback influencing changes within the organisation (On-Call Standby Policy).

8.5.3   Overall, he stated that the Service feels frustrated that the Authority is not able to hold joint JCC meetings as separate meetings were not reflective of the organisational values and behaviours, nor did they represent an efficient use of time.

8.5.4   The Monitoring Officer believes that for any JCC meetings to be meaningful and effective they should be structured in line with the other Fire Authority committees; agendas allow for the membership to prepare for the meeting and informed discussion on matters of importance to all parties.

9.   Other Considerations/Influences

9.1   The Review Group considered the following areas it felt had an influence on the JCC.

9.2   **Legal** – The Authority must ensure it is constituted and operates in accordance with the requirements of the Local Government and Housing Act 1989 and the Local Government Act 1972. Changes to the way in which the JCC operated (see paragraph

6) did not alter the Authority's compliance with legal requirements, rather, changes sought to ensure governance arrangements were robust and appropriate.

9.3   **Inspections** - Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) inspected the Service in 2018, 2020 (COVID-19) and 2021. In the latest inspection report, the Service was judged to be 'good' across all three key strands of efficiency, effectiveness and people. The Review Group scrutinised the reports further and found commentary that staff and representative bodies had told HMICFRS inspectors that the Service had a positive working culture where staff understand values and required behaviours. The 2021 inspection included a statement that '*the Service continues to have well-defined values that are understood by staff. Behaviours that reflect service values are shown at all levels across the Service. Our staff survey, conducted as part of this inspection, indicates that 98.3 percent of respondents (284 of 289) are aware of the Service's statement of values'.*

The Review Group noted that the next tranche of inspections has been scheduled and CFRS is expecting theirs in March 2023.

9.4   **National documents** – Whilst conducting this review, the Review Group had an awareness of the 2013 'Facing the Future' review by Sir Ken Knight, the 2016 Thomas Review, the 2018 Fire and Rescue National Framework for England, the National Fire Chiefs Council People Strategy and the 2021 State of Fire and Rescue – the Annual Assessment of Fire and Rescue Services in England.

9.5   **Other fire and rescue services** – Whilst interviewing other organisations was outside of the review's scope, the Review Group conducted open source research, primarily on other fire and rescue service websites and by requesting information directly via the National Fire Chiefs Council Workplace Forum about meetings between representative bodies and members; 989 individuals saw the post and seven commented. Of those, none met with members directly, although two stated that all their representative bodies met with a senior officer to discuss all matters formally and informally in regular, minuted meetings.

Review Group comment: There are stark differences across the sector and therefore it is felt that there is no best practice in this matter. Instead each organisation should facilitate what best suits their needs and values.

9.6   **Governance** - The Review Group were satisfied that the governance structure in place ensures members are informed about matters that affect CFRS employees. Further, it found evidence that the Fire Authority has been appropriately involved in decision making and sighted on key aspects of the JCC through democratic processes.

9.7   **Horizon scanning** – There are several significant challenges facing the sector in the short to medium term including funding mechanisms and pay pressures. In order to meet these challenges and their potential impacts, forward planning by management and the Authority and effective, two-way communication with all employees will be fundamental.

10.   Conclusions

10.1 In light of all the evidence and findings, the Review Group wish to draw the following conclusions;

- Fire Authority members welcome consultation with representative bodies,

- Representative bodies welcome consultation with Fire Authority Members,

- FRSA and UNISON representatives are content to sit at the same table as FBU representatives,

- The FBU's position on the holding of joint meetings is largely based on an FBU National Conference Resolution passed over 20 years ago,

- Historically, the JCC has worked when separate meetings were scheduled,

- The current 'stalemate' position has resulted in the JCC not formally meeting for four and a half years without any apparent detriment,

- No requests to meet with members have been recieved from any of the representative bodies during the absence of the JCC,

- Whilst there is no standard or best practice regarding consultation with representative bodies across the sector, there are examples of joint meetings taking place,

- The cultural change journey within CFRS is ongoing with authentic evidence of adherence to the values and behaviours found,

- There are several challenges facing the sector that will potentially have significant local impacts and navigation through them will require openness, transparency and two-way communication.

11. Options

11.1 In light of all the evidence and findings, the Review Group consider the following options available to the Authority;

- **Option 1** - Continue to schedule (and cancel JCC meetings) whilst working with representative bodies to find a way forward, enabling them all to sit at the same table at the same meeting,

- **Option 2** - Schedule separate FRSA/UNISON meetings and FBU meetings with members,

- **Option 3** - Dissolve the JCC and put in place clearly defined, alternative routes of two-way communication between the Fire Authority and representative bodies that suit the organisational values and behaviours.

12.   Recommendations

12.1   The Review Group, recognising that the FBU position on joint meetings will not change, feel that the only realistic option to resolve the 'stalemate' whilst adhering to organisational values and behaviours and move forward is **Option 3**.

12.2   As there are other members of the JCC that were not directly involved in this review and that approval of the above recommendation would necessitate a change to the Authority constitution, the Review Group suggest that the full Authority membership should agree the most suitable routes of communication, for example, routing written communications through the Fire Authority Chair and requesting meetings with specific members through the Monitoring Officer.

12.3   Cognisant of the comments made by the representative bodies at paragraph 8, it is further recommended that whenever a member induction programme is held, time is allocated for a session with representative bodies. In the interim, consideration should be given to including a session at the next available member seminar. The purpose of these sessions would be to introduce key post holders, inform members about the work of their respective unions and highlight key issues.

BIBLIOGRAPHY

Source Documents	Location	Contact Officer
Various	Hinchingbrooke Cottage Brampton Road Huntingdon	Deb Thompson Deb.thompson@cambsfire.gov.uk 07775731629

THE FIRE BRIGADES UNION - CAMBRIDGESHIRE

"The Voice Of The Frontline Professionals"

To: **JCC Chair Cllr Kevin Reynolds**   **Date: 20.09.17**
CC: **ACFO Rick Hylton**
         FBU Regional Secretary, Riccardo La Torre

Re: FBU National Policy with regards to RFU

Dear Cllr Reynolds,

Following on from recent JCC meetings, we are now in a position to furnish you with the information you requested regarding the Fire Brigades Union Policy upon the sitting on committees with the RFU.

We apologise for the delay in acquisition of this information, however we wished to be fully secured in our position before relaying. We are now in that position following a robust investigation of FBU policy to conclude, our position was accurately relayed to you.

Please find below details of the FBU National Conference Policy from 2002:

77. RETAINED FIRE FIGHTERS UNION

This Conference acknowledges the non-recognition of the Retained Firefighters Union on the National Joint Council and other Committees, and now call upon all Brigade Officials to give notice to Chief Fire Officers, Firemasters and Fire Authorities that in future they will not sit on Committees with representatives of the Retained Firefighters Union.

GLOUCESTERSHIRE

This resolution was voted upon by FBU National Conference delegates in 2002. The resolution passed and therefore became FBU National Policy.

To double affirm this position we conducted a thorough review of policy since 2002 to ensure this had not been superseded. Exactly as relayed to both management and the JCC, formal Safety Committees are the only exemption to this policy, following a subsequent Conference Policy passed May 2017 providing for that exemption.

However to triple affirm this position and we contacted the Vice President of the Fire Brigades Union regarding the matter.

We are now in receipt of a response which again confirms our position that FBU policy stands in line with the resolution from 2002, which we have shared with you above.

Therefore after triple confirming our national policy on this matter we are assured that the position we shared with you was accurate and up to date.

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THE FIRE BRIGADES UNION - CAMBRIDGESHIRE

"The Voice Of The Frontline Professionals"

We hope you therefore accept why as FBU Officials we are disinclined to acquiesce your request to break our unions national policy, sit on a local consultation forum with the RFU and immediately trigger internal union disciplinary procedures for Martin and I. We trust you accept that is an unreasonable expectation.

We note that as the new Chair of the JCC, you wish to change the position of the previous JCC chair, who introduced a mutually agreed workable solution in terms of two meetings.

However you place the FBU Brigade Officials in an impossible impasse outside of our control with this change. In doing so you knowingly remove our ability to formally consult with the Fire Authority as was the previously expressed desire.

A workable solution still exists if you can agree to facilitate two separate meetings in the same format as before. We share we are still willing and able to work to that format to resolve the matter.

It was the FBU who proposed establishing the Joint Consultation Committee to assist and facilitate joint consultation. Years on we still await to see a single agenda point raised by the RFU representatives. However as Chair it is your prerogative to determine your priorities. In such challenging times we hope to be able to work together to secure a flexible solution that leaves neither of us subject to internal disciplinary procedures.

We hope this satisfies your request. If you need any further information then please do not hesitate to contact us.

Yours sincerely

FBU Cambridgeshire

OVERVIEW & SCRUTINY COMMITTEE WORK PROGRAMME

MEETINGS 2022/23

Date	Meeting Time	Venue
2022		
Thursday 6 October	1400 hours	SHQ
2023		
Thursday 19 January	1400 hours	New Shire Hall
Thursday 20 April	1400 hours	SHQ

WORK PROGRAMME 2022/23

Thursday 6 October 2022			
Time	**Agenda Item**	**Member/Officer**	
	Minutes of Overview and Scrutiny Committee Meeting 21 April 2022		6 July 2022 meeting cancelled
	Action Log		
4	**Overview** IRMP Performance Measures	ACFO/Head of Service Transformation	
5	Fire Authority Programme Management – Monitoring Report	Deputy Chief Executive Officer	Brought forward from 6 July 2022
6	**Audit** Annual Internal Audit Report 2021/22	RSM	Member comments (report circulated via email 15 July 2022)
7	Internal Audit Progress Report	RSM	
8	**Scrutiny** Annual Review of CPFA Compliance with the Local Government Transparency Code	Head of Media, Communication and Transparency	Annual
9	Draft Annual Governance Statement 2021/22	Deputy Chief Executive Officer	Annual
10	Member-led Review CPFA Consultation with Representative Bodies	Councillors McGuire and Gowing	

Time	Agenda Item	Member/Officer	
	Work Programme 2022/23	Chair	

Thursday 19 January 2023			
Time	**Agenda Item**	**Member/Officer**	
	Minutes of Overview and Scrutiny Committee Meeting 6 October 2022		
	Action Log		
	Overview IRMP Performance Measures	ACFO/Head of Service Transformation	
	Audit External Audit Completion Report 2021/22	BDO	
	Internal Audit Progress Report	RSM	
	Scrutiny TBC		**Extant** - Member-led Review of Estates, Property Management and Capital Programme Councillors Gardener and Gowing
	Work Programme 2022/23	Chair	

Thursday 20 April 2023			
Time	**Agenda Item**	**Member/Officer**	
	Minutes of Overview and Scrutiny Committee Meeting 19 January 2023		
	Action Log		
	Overview IRMP Performance Measures	ACFO/Head of Service Transformation	
	Fire Authority Programme Management – Monitoring Report	Deputy Chief Executive Officer	
	CFRS Cyber Security Update Report	Head of ICT and OHU	Annual
	Audit Annual Internal Audit Report 2022/23	RSM	
	Internal Audit Strategy 2023/24	RSM	
	Internal Audit Progress Report	RSM	
	Scrutiny TBC		
	Work Programme 2022/23	Chair	