Devon & Somerset
Fire & Rescue Authority

2022-23 FINAL

Annual Statement of Assurance

Contents

1   Introduction

1.1. The Devon and Somerset Fire and Rescue Authority (the Authority) functions within a clearly defined statutory and policy framework. The key documents setting this out are:

- Fire and Rescue Services Act 2004

- Civil Contingencies Act 2004

- Regulatory Reform (Fire Safety) Order 2005

- Fire Safety Act 2021

- Fire and Rescue Services (Emergencies) (England) Order 2007

- Localism Act 2011

- Accounts and Audit Regulations 2015

- Fire and Rescue National Framework for England 2018

- Health and Safety at Work etc Act 1974, and associated regulations

1.2 In addition, other key statutes include:

- Local Government Act 1972

- Local Government Finance Act 1988

- Local Government and Housing Act 1989

- Local Government Finance Act 1992

- Local Government Act 2003

1.3 Within this statutory framework, the Authority has three main responsibilities: to determine a strategic policy agenda for its area; set a budget to fund delivery of the policy agenda: and to undertake scrutiny to ensure that intended outcomes are being achieved efficiently, effectively and in accordance with statutory requirements. The Authority creates the organisational capacity to 'operationalise' these responsibilities through the Devon and Somerset Fire and Rescue Service (the Service), which is led by the Chief Fire Officer.

1.4 The Authority is required to:

- Ensure that there is a sound system of governance in place.

- Ensure that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for.

- Meet its duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.

- Prepare an annual governance statement in support of its Statement of Accounts in line with the Accounts and Audit (England) Regulations 2015. This sets out the measures taken to ensure appropriate business practice, high standards of conduct and sound governance.

- Publish an annual Statement of Assurance as required by The Fire and Rescue National Framework for England (May 2018). The statement should outline the way in which the Authority and its Fire and Rescue Service has had regard to the Framework for that period. Each Authority must also provide assurance to their community and to government on financial, governance and operational matters.

1.5 The Authority has agreed that the most appropriate way to meet both the National Framework and the Accounts and Audit (England) Regulations 2015 requirements is through the creation of one assurance report entitled 'Annual Statement of Assurance'. The Annual Statement of Assurance details the approach for how the Authority has developed and applied its governance framework in accordance with statutory responsibilities.

2   Identification and assessment of risk

2.1 The Authority has a statutory duty to produce a [Community Risk Management Plan](link) (CRMP). The CRMP covers the period 2022-2027 and sets out the key challenges and risks facing local communities and how the Authority intends to meet and reduce them. It demonstrates how protection, prevention and response activities have and will be used collectively to prevent and/or mitigate fires and other incidents. A full consultation process took place prior to development and publication of the CRMP.

2.2 The actions within this five-year strategic plan will be reviewed annually and the outcome published on the Service's website.

2.3 Since the launch of the Community Risk Management Plan in April 2022, the Service has developed Local Community Plans (LCPs) for each of the Service's fire stations. Each plan is unique to that station and incorporates information on community profiles which provides a comprehensive picture of a station's geographical area, risk, station availability and incident information that is informed by data.

2.4 The premise of the LCPs is to help stations to understand their local risk profile and to support planning and performance within the Service's key business areas, which will underpin the mitigation of risk and improve community safety. Further development of the plans is scheduled over the next 12 months, and the use of the interactive graphics and visualisation of data will assist management teams to obtain an insight into the effectiveness of the Service's core business activities, aiding informed decision making. The LCPs will be reviewed annually alongside the CRMP.

2.5 Understanding the risk of fire and other emergencies was rated as good by His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) in the 2022 report.

3   Prevention

3.1 The CRMP provides a high-level overview of the Service's prevention activities with the detail provided in the Prevention Plan 2021-2023.

3.2 Prevention activities include education in schools, interaction with children and young people through cadet schemes and through the Fire Setters team who work with young people who have a fascination with fire or have set fires.

3.3   The Road Safety team have delivered Learn to Live presentations in schools and colleges throughout Devon and Somerset, Biker Down presentations and attended events to promote road safety.

3.4   In addition to supporting the National Fire Chiefs Council's national prevention campaigns, the Service delivered campaigns focused on drowning prevention, wildfire awareness and 'Save Safely', working with partners to support our communities to reduce their fire risk during the Winter months of the cost-of-living crisis. Our 'How to use a throwline' YouTube video is now used by Devon and Cornwall Police for their in-house staff training. The Service also shared its first partnership newsletter with messages subsequently appearing in partner newsletters and social media channels which helped to get our safety messages to the most vulnerable audiences.

3.5   Home fire safety checks are provided for those identified to be in our higher risk groups providing advice and ensuring that smoke alarms and other equipment are available. The home safety team work with over 500 partners to obtain referrals for home safety visits targeting those with risk factors such as mobility, disability and mental health issues. During 2022-23 19,987 home fire safety checks were completed.

3.6   The Service also ensures that safeguarding is in place where appropriate. The Service's Safeguarding Board was established in September 2022 to ensure that the Service proactively meets the needs of its communities and to drive timely and specific action to provide a sustained improvement in all aspects of safeguarding within the organisation. The new Safeguarding Manager joined the Service in December 2022 and is in the process of assessing current practice versus expected standards. This analysis will inform an improvement plan for the team.

3.7   The Service was rated as good at preventing fires and other risks in the 2022 HMICFRS report.

4   Protection

4.1   The CRMP provides a strategic high-level overview of the Service's approach to protecting people within the built environment through regulation and protection activities. The Service is the Enforcing Authority for the Regulatory Reform (Fire Safety) Order 2005 and a statutory consultee as part of the Building Regulations process.

4.2   The Risk Based Inspection Programme supports the identification and targeting of the highest risk buildings most likely to have vulnerable occupants through unfamiliarity and / or their mobility. Operational Crews and Specialist Fire Safety Inspectors carry out over 4,000 inspections each year. A proportional approach is taken utilising fire safety checks at normal risk buildings and fire safety audits at higher risk buildings that have the potential to cause significant harm and / or loss of life in the event of a fire. This proportional but targeted approach is demonstrated through a high level of unsatisfactory / non-compliance outcomes which allows the Service to improve the safety of occupants. The Service uses its full powers as an Enforcing Authority issuing formal notices as appropriate, including prosecuting those that knowingly allow dangerous fire safety standards, including putting profit before safety. On average, the Service brings four cases per year for prosecution with a 100% success rate of holding individuals and companies to account. Formal Notices such as enforcements, alterations and prohibitions are available to view on a public register on the Service's website.

4.3 A dedicated Fire Safety Helpdesk supports all members of the local community, provides compliance support for new and small businesses, provides technical advice and gives residents a voice to report fire safety concerns directly to a regulator. Any concerns or intelligence received are formally logged, assessed by a Fire Safety Inspector for appropriate action and when required, anonymity maintained. All fire safety concerns are assessed in conjunction with the Duty Fire Safety Manager and actioned as appropriate based on life risk.

4.4 The Protection teams work closely with partners such as the local authority housing team, NHS and the Care Quality Commission to ensure that residents are kept safe in residential flats, hospitals and care homes. They will also work closely with the Prevention Team undertaking joint work as appropriate, the most recent example being during the Building Risk Review, inspecting all High-rise residential blocks with Home Fire Safety Technicians also attending and offering Home Fire Safety Visits.

4.5 The Protection Team is trained and developed in line with the National Fire Chiefs Council Competence Framework for Fire Safety Regulators including additional qualifications for specialist roles such as fire engineering. In addition, and in line with the wider sector recommendations, senior inspecting officers and managers are also undertaking third party accreditation with the Institution of Fire Engineers and the Contextualized Auditors Register.

4.6 An effective fire and rescue service will identify and assess the full range of foreseeable fire and rescue risks its community faces. It should target its fire prevention and protection activities to those who are at greatest risk from fire and make sure fire safety legislation is being enforced. When the public calls for help, it should respond promptly with the right skills and equipment to deal with the incident effectively. The Service's overall effectiveness was assessed as good in the 2022 HMICFRS report with a rating of good for protecting the public through fire regulation. However, the report identified that the Service needs to be better at undertaking quality assurance and evaluation of Prevention and Protection activities. An action plan is in place to address this, and quality assurance and evaluation officers have been appointed to identify and support future improvements.

5   Response and Resilience

5.1 The CRMP provides a high-level overview of the Service's response arrangements.

5.2 The Service was rated as good at responding to fires and other emergencies and responding to major and multi-agency incidents in the 2022 HMICFRS report.

5.3 Response plans are in place for different incident types to ensure that the most effective response is provided to an emergency call. Fire Control can also apply 'Dynamic Mobilising' to revise the response plan by adding or removing resources depending upon the information that they receive. If the response is changed this is recorded on the incident along with the rationale for that decision.

5.4 Processes are in place to ensure that crews have access to the most up to date operational risk information on their mobile data terminals.

5.5 Through its Training Academy, the Service has enabled the delivery of quality assured training to its staff to improve safety and overall effectiveness. The quality of operational training is assured via a combination of Operational Assurance feedback from incidents and attended assurance visits from Flexi Duty Officers to on-call and wholetime station training sessions.

5.6 Development Firefighters training is assured via the Service's main provider, Bridgwater and Taunton College, and the associated OFSTED assessment. This will be supplemented in April 2023 with a training quality assurance framework, to include a sampling strategy focused around the 'Operational licence' skills which include Breathing Apparatus, Driving, Incident Command System, Maritime, Casualty Care, Safety at Height and Confined Spaces, Water Rescue and Fitness.

5.7 Training delivery continues to be aligned to National Operational Guidance via eLearning training packages and practical training sessions. Confirmation of learning is achieved via knowledge checks after each eLearning package and the Station Maintenance of Skills programme ensures that practical training covers the necessary training specifications via associated lesson plans.

5.8 The Service continues to explore new ways of delivering training. The successful roll out of locally delivered Incident Command Training is an example of improved efficiency in training delivery with less time spent travelling to location and training hours being utilised in more succinct delivery. This model of delivery reduces the impact on the environment by reducing the number of vehicles travelling to training events and also shortening these journeys.

5.9 The Service currently has 522 operational personnel qualified to command incidents at varying levels.

5.10 The Academy currently delivers localised Incident Command System (ICS) assessments to maintain skills and competence for Level 1 Commanders in addition to the ICS related content on the e-learning portal available to stations. The Service's Joint Emergency Services Interoperability programme (JESIP) 3rd Edition Awareness online learning package was launched in September 2022 as an annual requirement and by 23 May 2023 had been completed by 96.7% of eligible staff.

5.11 Level 2 and 3 Commanders are revalidated every 2 years with 95% of the scenarios used based on an area or risk in Devon or Somerset. All Level 2 and 3 Incident Command Acquisition courses are Skills for Justice Accredited and aligned to National Operational Guidance. Level 2 and 3 Commanders also attend a multi-agency JESIP course every 3 years.

5.12 As the Service continues to work to align to National Operational Guidance, the new Level 4 ICS Acquisition course will be implemented in May 2023.

5.13 The Service has a physical fitness policy and four dedicated fitness advisors in post to support firefighters to attain and maintain the fitness standards that are required. Firefighters are also supported by three fitness advocates who provide an additional fitness role and are qualified to a minimum of a Level 2 gym instructor. A data management system is used to provide assurance that fitness requirements are being met, reviewed, and evaluated. Compliance data is reported to Strategic Safety Committee.

Over the Border Mutual Aid Arrangements

5.14 Sections 13 and 16 of the Fire and Rescue Services Act 2004 allow mutual assistance arrangements to be agreed with neighbouring Services to improve resilience and capacity in border areas. The Authority has in place contractual agreements with neighbouring fire and rescue authorities for response to incidents requiring their support.

5.15 In addition to sections 13 and 16, there is a partnership agreement between the Authority and Dorset and Wiltshire and Hampshire and Isle of Wight Fire and Rescue Services to provide a common, networked mobilising system with the principle of ensuring that the response mobilised to an incident is always the nearest and most appropriate resource(s) based upon travel time and attributes (i.e. having the necessary skills or equipment) to deal with the incident. This Networked Fire Services Partnership (the Partnership) also has the benefit of providing business continuity so that in the event of one control room experiencing a high volume of calls or being unable to function, either of the other two control rooms can conduct all of their emergency business, including call handling, mobilising resources, and supporting incidents. The Service is currently working with the Partnership to review its mobilising system requirements.

5.16 An Information Governance Partnership Group meets regularly to review the governance procedures and monitor current and emerging risks to the information that the Partnership system holds. A risk remediation plan is in place to ensure that security risks are managed effectively and there is an annual IT health check for assurance. The external system supplier is responsible for remediating any high-risk vulnerabilities. This supports the Authority's compliance with the Airwave Code of Connection, and the upcoming Emergency Services Network which is due to replace the Airwave service.

5.17 The Partnership has committed to scoping further collaboration opportunities that will support all three Services in achieving increased effectiveness and efficiency as well as sharing and developing good practice. The Partnership is currently expanding the mobilising solution to include Kent Fire and Rescue Service formally including them as a fully functioning fourth partner fire and rescue service. The inclusion of Kent Fire and Rescue Service will expand the resilience of the current mobilising system and backups, as well as offer financial efficiencies.

Civil Contingencies

5.18 The Emergency Planning Team is the primary means through which the Service meets the Authority's obligations in the Civil Contingencies Act 2004 and elements of the Fire Services Act 2004.

5.19 Effective arrangements are in place to collaborate with partners through Local Resilience Forums and other national, regional and local networks dealing with resilience and emergency and contingency planning arrangements. This includes collaboration with the South-West Malicious Risk Working Group, Counter-Terrorism Police South-West, and other local and national constabularies (Devon & Cornwall Police, Avon and Somerset Police, British Transport Police and the Civil Nuclear Constabulary).

5.20 The Emergency Planning Team also works in close collaboration with the Service's National Interagency Liaison Officers (NILO) Team in respect of risk, response and contingency arrangements for key events or sites of sensitivity (local and critical national infrastructure, hazardous materials etc).

National Resilience

5.21 National Resilience comprises of several specialist capabilities, funded and assured by the Government via the Home Office. The Service hosts the following capabilities from a wide range of stations.
- Urban Search and Rescue (USAR).
- High Volume Pumping.
- Enhanced Logistics Support.
- Mass Decontamination.
- Marauding Terrorist Attack Specialist Response (MTA).
- Flood Rescue.

5.22 In line with the Joint Emergency Services Interoperability Principles, the NILO cadre supports collaborative working with key partner organisations. NILOs provide specialist advice about the Service's operational capability and capacity to partners and supports both the planning for intelligence led operations and the response to dynamic incidents.

5.23 Whilst the national planning assumption is for a 'lite' Marauding Terrorist Attack team to be in place in Devon and Somerset, the Service leadership supported by the Fire Authority have increased capability above this minimum provision and has trained additional responders in both Plymouth and Exeter to help improve attendance times and casualty outcomes.

5.24 This Marauding Terrorist Attack capability has been established to support specialist emergency service response alongside Police and Ambulance responders in response to a marauding terrorist attack incident within the Authority area or, under National Mutual Aid, to any other location within the UK as requested. The overall aim is to save life, and the two main strands of fire and rescue support during this type of incident are for casualty care and fire hazards management.

5.25 The Marauding Terrorist Attack capability is made up of two key groups, NILO qualified officers who would adopt the command role and Specialist Response Team Operatives. Both groups undergo specialist training for responding to the Marauding Terrorist Attack threat.

5.26 With strategic funding support from the Service, the Hazardous Materials capability has invested in a set of Raman (laser) and Infrared spectroscopy chemical identification equipment for the Service. This equipment will bridge the gap between the existing hazard classification field testing capability of hazmat advisers in the Service and the National Resilience Detection Identification and Monitoring capability that is hosted in the South-West Region by Avon Fire and Rescue Service. This will enable swifter resolution of incidents involving unknown chemical substances and reduced disruption to the community.

Collaborative and Partnership Working

5.27 The Service continues to strengthen its partnership working with other fire and rescue services, blue light services, local authorities, community groups and other organisations by working to common objectives at the local, regional and national level. The improvement of prevention and protection work is a major priority, and the Service also contributes to wider community objectives identified in Local Area Agreements where appropriate.

5.28 Collaborative working continues to grow through the South-West Emergency Services Collaboration (SWESC). The SWESC Forum meets every six months and has set three regional priorities that will drive improvement at local (organisational) level. The Authority Chair leads this meeting, supported by the Chief Fire Officer who manages the arrangements.

5.29 At a tactical level the Collaboration and On Call Support Team are key stakeholders at both the SWESC partnership and South-West Fire Sector working group. A dedicated police collaboration Sergeant is available to liaise with on joint initiatives with Devon & Cornwall Police.

5.30 The Service continues to share good practice and to scope areas of joint improvement. Community Responders (the dual role of a firefighter and special constable) are now permanent shared roles and are an example of innovative working where shared learning and comparison of benefits with other shared roles is undertaken.

5.31 The Authority has a formal partnership agreement in place with South Western Ambulance Service to provide a co-responder medical response (an initial medical provision to stabilise casualties in life-threatening emergencies prior to the arrival of the ambulance service). Work is continuing to review training, procedures, and equipment, with the goal of improving clinical governance as well as improving efficiency and effectiveness. This work is being done collaboratively with South Western Ambulance Service and other fire and rescue service colleagues across the South-West Fire Sector, for both clinical governance and the co responding memorandum of understanding.

5.32 Through an arrangement known as Operation Braidwood, the Service also continued to support South Western Ambulance Service until the end of March 2023 by providing Firefighters to drive ambulances and support medical intervention.

Fleet, Equipment and Water Supplies

5.33 A Fleet and Equipment Strategy is in place and being refreshed for 2023-2028. This incorporates adherence to relevant legislation and the National Fire Chiefs Council Best Practice Manual for the maintenance of Fire Service Vehicles.

5.34 Under the Fire and Rescue Services Act, the Service has a duty to secure water. Adopting the National Guidance Document for provision of water for fire-fighting purposes (2017), the Service operates a risk-based approach for the 66,000 hydrant management and maintenance requirements.

Service Improvement and Assurance

5.35 In accordance with the Authority's commitment to public and staff safety, the Operational Assurance team ensures that all learning submitted nationally is positively utilised to review current Service ways of working, implement Service improvements where necessary and to raise awareness across the Service. National and regional learning is fed in and out of the Service via several different pathways which include:

- National Operational Learning.

- Joint Organisational Learning.

- Coroner's Regulation 28 - Prevention of Future Death reports.

- Health and Safety Executive recommendations.

- Local Resilience Forum debriefing focus group.

- South-West Regional Operational Assurance Group.

5.36 The Operational Assurance team is a key stakeholder in a number of these groups which enables the Service to play a vital role in ensuring that all learning received drives positive organisational change in a timely manner. The team also strives to promote a culture where all internal learning and best practice, identified from a variety of activities linked to operational response, is shared, and communicated in a way that supports self-development and organisational improvement, including regular updates on internal social media, a dedicated intranet repository for employees to use, and via posters and printed media for stations.

5.37 A process has been developed to enable the effective management of identified learning and outcomes identified through:

- Operational monitoring and feedback.

- Debriefing incidents and training exercises.

- National and regional learning.

- Audit and engagement with all key stakeholders within the Service.

6. People and Culture

6.1 The Service's People Strategy was due for review and refresh in 2022. An updated Strategy will need to be developed.

6.2 Corporate commitments to equality, diversity and inclusion are set out in the Community Risk Management Plan. The Service has a process in place to ensure that potential equality impacts are identified and mitigated when preparing or reviewing policies and procedures. The process is called Equality Risks and Benefits Analysis and it helps the Service to deliver better services and working practices as well as ensuring compliance with the Public Sector Equality Duty. It sits within a broader assessment, the People Impact Assessment. Besides equality impacts, this assessment also includes impacts on people in relation to wellbeing, data protection, health & safety and safeguarding.

6.3 The Employers Network for Equality & Inclusion benchmarked the Service against Talent, Inclusion, Diversity & Equality and awarded the Service a Silver Award in September 2022.

6.4 In September - October 2021 HMICFRS conducted its second-round full inspection of the Service, with the final report published in July 2022. HMICFRS's assessment of the people pillar remained the same as at the previous inspection, Requires Improvement. HMICFRS was satisfied that the Service had made enough progress for the cause of concern related to fitness testing of staff to be discharged. However, a new cause of concern was raised related to culture and behaviour. Whilst the report recognised the commitment of the Executive Board and senior leaders to address this concern, more work needed to be done. An action plan to address this concern was developed and submitted to HMCFRS by 31 August 2022. Progress in delivering this action plan is monitored by the Service's HMI Governance Board, Executive Board and by the Fire Authority with updates published as part of the Fire Authority papers.

6.5 Since September 2022 the following progress has been made:

- An Equality, Diversity and Inclusion Commission has been established, which includes representation from representative bodies, staff support groups and service leaders.
- All inappropriate material has been removed from Service premises.
- An eLearning package on Diversity and Inclusion has been completed by 96% of the workforce and is now a required annual assessment.
- Values, behaviours and ethics have been the subject of facilitated discussion sessions for middle managers and above, and for all staff via training presentations delivered within departments. In addition to this, new optional performance and conflict training for managers has been made available via the eLearning portal.
- Mandatory questions on bullying, harassment and discrimination have been added to Personal, Performance, Development Reviews.
- Work is ongoing to raise awareness of psychological safety with the aim to improve safety and wellbeing in the workforce, ensuring that individuals feel safe to learn, contribute and challenge. The 'It's ok, it's not ok' campaign which outlines appropriate and inappropriate behaviour has been rolled out and work continues to build capability in challenging unethical and inappropriate behaviour.
- A confidential reporting line has been established.
- Questions on culture and ethics are now included in the recruitment and selection processes and all standard Service presentation templates have a slide on values, expected behaviours and ethics.
- The Executive Board approved the business case to implement Freedom to Speak Up Guardians.
- Level 3 investigations are now investigated by an external body.
- Learning from other services around positive culture has been identified and discussed with the senior management team. A specific piece of work has also been undertaken to review the recommendations from the London Fire Brigade Independent Culture Review, the Independent review into the standards of behaviour and internal culture of the Metropolitan Police Service and HMICFRS's Values and culture in fire and rescue services report to identify themes, triangulate to the Service's Cause of Concern action plan and identify new actions for implementation.

Commitment to Health & Safety

6.6 The Authority recognises and accepts its responsibility for the health, safety and welfare of its employees and others who may be affected by its activities.

6.7 Detailed health, safety and welfare arrangements are set out in Service policies developed to take account of relevant legislation and guidance, including the Health and Safety Executive's HSG65 methodology. The policies provide staff with relevant and comprehensive information on the risks they face, and the preventative, and protective measures required to control them. They also identify the roles and responsibilities of duty holders who have a responsibility to ensure that measures are implemented.

6.8 Procedures are in place to report all safety events, allocate an investigator and where required make recommendations for corrective action to be completed. The Health and Safety team operate a business partnering model with the Service Delivery Response Groups, liaising with Health and Safety Points of Contact. This approach supports proactive management of ongoing safety event investigations and wider safety management systems. In addition, raising awareness of positive safety culture is delivered during Watch Manager, Station Manager and Group Manager development sessions.

6.9 Significant improvements to the critical messaging process have been made with greater assurance now available that staff read and understand risk critical messages and apply the required changes.

6.10 Systems for monitoring the effectiveness of the Service's Health and Safety Management procedures are in place; this includes the following proactive and reactive monitoring:
- air sampling on station of diesel engine exhaust emissions;
- legionella testing;
- provision of accident and near miss incident data to the Strategic Safety Committee;
- annual completion of premises Health, Safety and Welfare Assessment Report Forms;
- annual review of fire risk assessments for Service premises; and
- a means to fully audit the Service's Health and Safety management systems.

6.11 The Service has a Strategic Safety Committee which meets quarterly to monitor the health, safety and welfare of employees as per section 2(7) of the Health and Safety at Work Act 1974. All representative bodies (trades unions) recognised by the Authority, i.e. the Fire Brigades Union, the Fire and Rescue Services Association, the Fire Officers Association and UNISON, are invited to sit on this committee.

6.12 The Authority's People Committee receives regular reports on the Health, Safety and Wellbeing of the Service. These reports help the committee to monitor and scrutinise performance in these areas on behalf of the Authority.

6.13 The Health and Safety Manager attends the National Fire Chiefs Council Health & Safety meetings and chairs the regional National Fire Chiefs Council Health & Safety meetings.

6.14 An independent review of the Service's safety management system, compliance, safety culture, and health and safety resource and structure has been completed. Generally, the Service's Safety Management System was found to be broadly compliant to ISO45001 (an international standard for health and safety at work) and to Managing for Health and Safety (HSG65); recommendations were made to improve existing systems. The findings of the safety culture survey have been triangulated with the HMICFRS Cause of Concern action plan to identify additional actions required. The Health & Safety team structure is currently being reviewed. These recommendations and actions identified will be progressed through 2023-24.

6.15 Close monitoring of risk assessments has been established to ensure that the Service has relevant risk assessments that are suitable and sufficient. Work is underway to align the operational risk assessments with National Operational Guidance. This work will reduce the number of risk assessments by linking them to operational scenarios.

6.16 In June 2022, occupational exposure as a firefighter was classified as "carcinogenic to humans" (Lancet, 2022). This classification followed a 2020 report by the University of Central Lancashire (UCLan) which aimed to investigate rates of cancer and other diseases in UK firefighters; understand the long-term health effects of fire contaminants; and find ways to reduce exposure to contaminants in fire and rescue service work. In February 2023, the Service established a Contaminants working group, who are now working to develop and embed appropriate solutions to address the recommendations made by UCLan. Progress will be monitored by Portfolio Board and Strategic Safety Committee.

6   Governance

7.1 The Authority has approved and adopted a Code of Corporate Governance, consistent with the principles of the Chartered Institute of Public Finance and Accountancy (CIPFA) / Society of Local Authority Chief Executives framework "Delivering Good Governance in Local Government". A copy of the Code is on the Authority's website or can be obtained from the Clerk to the Authority. This Annual Statement of Assurance explains how the Authority has complied with the Code.

7.2 The Authority's governance arrangements have the following key elements:

(1)   The Authority was constituted under the Devon and Somerset Fire and Rescue Authority (Combination Scheme) Order 2006. The Authority has strategic responsibility for discharging fire and rescue authority functions for the combined area with the day-to-day responsibility resting with the Chief Fire Officer and other Officers within the Executive Board.

(2)   During the 2022-23 financial year, the Authority comprised 26 Members appointed by the constituent authorities (Devon County Council, Somerset County Council, Plymouth City Council and Torbay Council). In addition, the Authority has appointed two "independent persons" as part of its arrangements for dealing with standards issues in accordance with the requirements of the Localism Act 2011 and recommendations made by the Committee on Standards in Public Life following its review of local government ethical standards.

(3)   The following governance structure operated during this reporting period:

- Resources Committee (7 Members)
- People Committee (7 Members)
- Audit & Governance Committee (9 Members)
- Community Safety Committee (7 Members)
- Appointments and Disciplinary Committee (4 Members)

(4)   The Authority approves its Strategic Policy Objectives annually. The focus of the committees is to scrutinise and monitor Service performance in achieving the Strategic Policy Objectives in the areas for which the committees are responsible. The full terms of reference for all Authority committees can be found here. The committee structure (including terms of reference) is subject to annual review but may also be amended in-year as required.

(5)   The Authority, committees, and the Executive Board are provided with high-level indicators and analytical reporting by exception, to ensure governance and oversight of service provision and performance.

(6)   The Audit & Governance Committee broadly operates in accordance with CIPFA's Position Statement: Audit Committees in Local Authorities and Police 2022. At its meeting on 26 September 2022, the Authority approved the appointment of two independent co-opted members to the Committee in accordance with the revised position statement on audit committees published by CIPFA in July 2022. The two independent co-opted members join the Committee in April 2023.

(7)   The Audit & Governance Committee provides an additional level of review and scrutiny of the Authority's internal and external audit arrangements, corporate governance and risk arrangements and financial statements. The Committee also has responsibility for discharging the Authority's member conduct arrangements as required by the Localism Act 2011 and monitors the operation of the Authority's strategy for the prevention and detection of fraud and corruption and policy and usage in relation to the Regulation of Investigatory Powers (RIPA) Act 2000.

(8)   The Authority has a constitutional governance framework which includes the following documents:

- Members and Officers Accountabilities, Roles and Responsibilities
- Standing orders
- Financial Regulations
- Treasury Management Policy
- Contract Standing Orders
- Scheme of Delegations
- Members Code of Conduct

- Protocol for Member / Officer Relations

- Policy on Gifts and Hospitality

- Scheme of Members Allowances

- Corporate Governance Code

- Confidential Reporting Policy (Whistleblowing" Code)

- Strategy on the prevention and Detection of Fraud and Corruption

- Code of Recommended Practice on Local Authority Publicity

(9) These documents, except for the Code of Recommended Practice on Local Authority Publicity (which is a national document issued by the Government under Section 4 of the Local Government Act 1986), are subject to review at least annually and are updated as and when necessary to reflect legislative change, organisational change or best practice to ensure they remain up-to-date and fit for purpose.

(10) Compliance with the seven principles of public life (the Nolan principles) form part of and underpin the Member Code of Conduct which the Authority is required to have by virtue of the Localism Act 2011. Service Officers are guided by the Service values and also the National Fire Chief Council's Code of Ethics

(11) The Treasurer is responsible for ensuring that effective financial stewardship is in place across the Service in conducting the business of the Authority. 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".

(12) The statutory functions of the Proper Financial Officer (as per Section 112 of the Local Government Finance Act 1988) and Monitoring Officers (as per Section 5 of the Local Government and Housing Act 1989) provide a source of assurance that the Authority's systems of governance and internal control are effective and being complied with.

(13) To ensure that the Authority understands the potential risks regarding funding, a number of scenarios are published within the Medium Term Financial Plan demonstrating the possible funding position for the next 5 years. This is published alongside the underpinning: Reserves Strategy; Capital Strategy; and the Community Risk Management Plan. An administrative oversight meant that the draft Reserves Strategy for 2022-23 was not presented to Resources Committee or subsequently published.

(14) It is a statutory requirement under the Accounts and Audit (England) Regulations 2015 for authorities to publish the financial results of their activities for the year. The 'Statement of Accounts', shows the annual costs of providing the Service and is determined by a Code of Practice published by CIPFA, which aims to give a "true and fair" view of the financial position and transactions of the Authority. The Treasurer is responsible for the approval of the Statement of Accounts prior to publication.

(15) To meet the requirements of the regulations, the draft Statement of Accounts is published by the end of September with the final audited Statement of Accounts published once the audit process has been completed.

(16) The 2022-23 External Audit provision was provided by Grant Thornton. The scope of the External Audit work includes the Accounting Statements, Whole of Government Accounts and a commentary on Value for Money arrangements. No significant issues have arisen to date from the External Audit work completed for the 2022-23 financial year.

(17) The Service's overall efficiency rating was Good in the 2022 HMICFRS report. The Service was assessed as being Good at making best use of its resources and requires improvement at making the service affordable now and in the future.

(18) On 23rd October 2020 the Authority supported the declaration of a Climate Emergency and agreed the Environmental Strategy. The Service has a green goal to be carbon net zero by 2030 and carbon positive by 2050. The Service's carbon footprint (scope 1 and 2 and an expended scope 3) have been developed and are reported in the statement of accounts.

(19) The Service's environmental action plan has been aligned to ISO14001 and commitment to the Emergency Services Environmental and Sustainability Charter. A Strategic Environmental Board has been established, an environmental policy and procedures have been published and the Service is maintaining and updating its environmental legislation and aspects register. An e-learning module on Environmental Matters has been launched for all staff.

(20) The Corporate Procurement Manager is responsible for review of all third-party expenditure and ensuring that the Service processes conform to UK Regulations and that the placement of new contracts or the use of existing contracts, is in line with legal obligations, including but not limited to the Public Contracts Regulations 2015, the Public Services (Social Value) Act 2012, the Modern Slavery Act 2015 and transparency commitments. The Procurement Team reviews third party expenditure and manages contracts above £20,000 in value.

(21) The Procurement Team is actively engaged in wider collaborative national and local procurement initiatives. On behalf of the National Fire Chiefs Council and the fire sector, the Procurement team have completed the procurement process for the National Fire Chiefs Council's Emergency Response Vehicles framework. The team is also responsible for ongoing contract management of the National Fire Chiefs Council's Respiratory Protective Framework.

(22) The Authority has a range of policies and procedures in place that govern its commercial activities – specifically, its approach to purchasing decisions and income generating activities within the context of its corporate social responsibilities and risk management. These policies and procedures include Financial Regulations; Contract Standing Orders; a Treasury Management Policy; a Capital Strategy; a Scheme of Delegations to Officers and a Disposal policy.

(23) Red One Ltd. was established in 2012 to allow the Authority to deliver commercial activities within the legislative framework that applies. This is a standalone company that manages its own affairs whilst reporting to the single shareholder, the Fire Authority. It is not managed by the Service.

(24) The Authority has taken legal advice to ensure compliance with legislative requirements and to ensure effective governance arrangements for Red One Ltd., which were enhanced in January 2018 by the appointment of independent non-executive directors. Governance arrangements were further enhanced in July 2018 by the adoption of revised Articles of Association, which strengthened the composition of the Board to include a mix of: Authority Member non-executive directors; independent non-executive directors; Service officer non-executive directors and company appointed executive directors. In June 2022 the Authority commissioned a revised governance review which will assess the degree of conformity to CIPFA's best practice guide on Local Authority owned companies and make recommendations on weaknesses; this review is in progress.

(25) The Authority's Audit & Governance Committee consider risks and, where necessary, audit concerns raised in relation to Red One Ltd., whilst the Resources Committee monitors financial performance on a quarterly basis.

(26) Project and programme arrangements are in place to ensure robust decision making for change activity. These arrangements include use of the HM Treasury Five Case model and monthly programme and portfolio boards with associated highlight reports to commission, initiate and manage projects. The Service is also in the process of determining a high-level target state that it will actively work towards over the next five years. This will allow any changes to be viewed in line with the longer term vision and aspirations of the Service. The Service also recognises that some change activity remains outside of this process and is reviewing lessons learned to improve the alignment of the management within the programme and project governance and that within business as usual activity.

(27) The effective management of risk is critical for the Service to ensure that it maintains services and continues to progress effectively towards achieving its strategic objectives. The risk management framework provides a structured way to deal with uncertainty which can help everyone in the Service to manage their area effectively.

(28) The Service risk registers are populated and reviewed periodically. This process in turn informs the corporate risk register. Risks are only escalated to the corporate risk register if they cannot be managed or mitigated at department level. The Service risk management framework includes the risk escalation and de-escalation process that ensures that risks are considered at appropriate levels within the Service.

(29) The corporate risk register is reviewed by Service management monthly (dependent on the level of risk) to ensure that risks to the Authority's strategic objectives and corporate plans are appropriately identified and managed, with cross reference to the national risk register where relevant. Horizon scanning supports deep dive risk identification and assessment. The corporate risk register is presented to the Audit & Governance committee every six months.

(30) The introduction of the SharpCloud software solution has facilitated greatly enhanced risk visualisation which has led to greater engagement across the Service in the effective management of risk. The use of SharpCloud has also significantly reduced labour intensive processes allowing more effective use of time in meeting with risk owners quarterly.

(31) The Authority maintains comprehensive insurance cover to support its management of organisational risk. The Authority is a member of the Fire and Rescue Indemnity Company (FRIC), the mutual protection provider that has 12 fire and rescue authority members and has completed its sixth year of operations culminating in surplus being achieved every year since it was formed. This is a significant result for FRIC and shows what can be achieved when fire authorities collaborate in an innovative and mutually beneficial manner. The surplus generated can be retained to support further improvements, drive better risk management and deliver lower costs for FRIC's members, or as is the case in 2022-23, returned to members.

(32) The Authority has a statutory responsibility to conduct business continuity as mandated in The Civil Contingencies Act 2004. The strategic business continuity policy sets out the corporate business continuity management structure and goals for business continuity assessment, training and exercising. The business continuity framework details how the Service will respond to specific disruptions. 36 tactical business continuity plans ensure that the Service is prepared for a range of threats and challenges. The Service embraces the principles of 'Plan, Do, Check, and Act' and aligns with aspects of the ISO: 22301 (Societal Security – business continuity management systems and requirements). The Business Continuity Manager is responsible for providing specialist advice and guidance on business continuity management issues, including the co-ordination, development, implementation and review of business continuity plans, processes and procedures.

(33) The Protective Security Group provides strategic oversight of the Service's approach to security of information, people and physical assets, aligned to the HMG Security Policy Framework.

(34) The Information Assurance Team restructured into an Information Governance function in May 2022 and now oversees three specialist disciplines: Information Security, Information Compliance and Records Management.

(35) Processes are in place to respond to Subject Access Requests and Freedom of Information requests. 85% of Subject Access Requests received were processed within the legislative timescale. Excluding the Freedom of Information requests that were withdrawn or declined, 93% were processed within the legislative timescale.

(36) The Authority complies with the Government's 'Local Government Transparency Code 2015' for releasing public data. The following arrangements are in place:
- A Freedom of Information Publication Scheme

- Publication of the annual statement of accounts

- Publication of all expenditure over £500

- Publication of all Government Procurement Card transactions

- Publication of Procurement Information

- Publication of land ownership

- Publication of Trade Union facility time

- Publication of a Pay Policy Statement including all senior employee salaries and pay multiple comparators

- Publication of fraud investigations

- Publication of Members' allowances and expenses

- Publication of External Audit reports

- Publication of all committee reports and minutes (other than those where a statutory exemption for publication applies).

The Service demonstrates compliance with this and other information legislation on the Service's [website](#).

(37) A robust governance framework has been implemented to manage oversight of delivery of the action plan to address the findings of the HMICFRS inspection report and Cause of Concern. This includes an HMI Governance Board which reports to Executive Board.

(38) Complaints or concerns about the Service received from a member of the public are managed in accordance with the Complaints policy. Where appropriate, complaints will be resolved informally as a concern. If the complainant is either not happy with the local resolution or if the complaint needs further investigation, it will be processed as a formal complaint. During 2022-23 the Service received 49 complaints and concerns. Of these, 13 were handled under the complaint process, 25 were successfully resolved as concerns and 11 were out of scope (such as civil, HR process or a police matter). Of the 13 complaints, six were dismissed, three have been partially upheld, three were unable to progress and one has been upheld. Numbers, themes and outcomes of complaints are monitored on dashboards which are regularly shared with the senior management team.

(39) The Service has received two Whistleblowing alerts during 2022-23, neither of which was upheld.

(40) The Authority participates in the biennial National Fraud Initiative; a review of the 2022 data matches is underway.

(41) The Authority has a process for internal auditing. The 2022-23 Internal Audit Plan set out the resource required for independent assurance activity to be completed by the Service's Audit and Review Manager and the Authority's shared service internal audit arrangements with Devon Audit Partnership. On 1 October 2022, the Authority became a member of Devon Audit Partnership as a full, voting partner meaning that they are now solely responsible for delivery of the internal audit plan. Devon Audit Partnership conforms to the governance requirements of the CIPFA Statement on the Role of the Head of Internal Audit in public service organisations.

(42) The internal audit plan is subject to regular review to ensure that it is prioritised according to corporate risk. Delivery of the plan is reported to the Executive Board and to the Audit & Governance Committee at scheduled meetings throughout the year.

(43) Agreed management actions designed to address the recommendations made by Internal Audit are monitored through the Service's assurance tracking process. The tracking process is in the process of being improved to pull actions from different sources into one point of access. The aim of this is to increase visibility of actions for lead managers and therefore efficiency and engagement in addressing them.

(44) Based on the completed audit work, the Head of Internal Audit's opinion on the adequacy and effectiveness of the Authority's internal control framework in 2022-23 is one of 'Limited Assurance'. This means that significant gaps, weaknesses or non-compliance were identified across the organisation. Improvement is required to the system of governance, risk management and control to effectively manage risks and ensure that strategic and operational objectives can be achieved. The auditors noted that work is already underway to address issues identified and therefore has the potential to positively impact the Opinion in 2023-24.

8 Future Improvements

8.1 The following areas for improvement remain the Service's key areas of focus throughout 2023-24:

- Further improving the organisational culture; this is the subject of the separate HMICFRS Cause of Concern Action Plan.

- Implementation of an Information Governance Framework that incorporates records management principles.

- Implementation of a more effective approach to information governance.

- Implementation of effective policy management.

- Ensuring that the Service's planning processes integrate performance, projects and risk so that all activity is aligned to the strategic objectives, vision and purpose.

- Improving the integrity of data to support the effective implementation of the performance framework and the systems supporting this.

- Aligning resources to risk and prioritising prevention and protection activity.

- Improving the Service's processes and systems for the management of assets.

- Responding to the requirements of the Environmental Act 2021 and other environmental legislation and working to achieve plans to be carbon neutral by 2030 and carbon positive by 2050.

- Ensuring that the Service has the appropriate resource, capacity, structure, health and safety management framework and assurance systems to ensure compliance with its statutory health and safety duties and to ensure that all staff, both uniformed and non-uniformed, are able to be healthy and safe at work when undertaking their duties.

- Ensuring the financial sustainability of the Service.

- Development of a refreshed People Strategy.

- Determine the future direction for digital services in consultation with the Fire Authority.

9   Conclusion

9.1   The Authority is satisfied that the systems and processes that are in place across the organisation fulfil the requirements of the Fire and Rescue National Framework for England.

9.2   The Authority's assurance arrangements have identified some areas for improvement in its governance, finance, and operational arrangements. The Authority is satisfied that the issues identified are appropriate and that steps are already in place to address them. The Audit & Governance Committee will receive updates on the implementation of the improvement areas set out in this document annually, through the updated action plan attached in Appendix A to this report. Where limited assurance internal audit reports have been received, updates on progress in delivery of these recommendations will be made via an annual report in November 2023 to Audit & Governance Committee. Internal Audit will also be tasked with focused follow up work in these areas where appropriate.

CHIEF FIRE OFFICER   **CHAIR, AUDIT AND GOVERNANCE COMMITTEE**

Identified Issue	Action Needed	Lead Officer	Update	Status
Information Governance Framework An Information Governance (IG) Framework that incorporates records management principles needs to be implemented across the Service.	• Develop new role profiles to ensure that the IG Team is structured to support delivery of the IG Framework. • Undertake selection processes to appoint staff into new roles and develop individual development plans to achieve full competency in new roles. • Develop and implement the IG Framework.	Head of Data, Digital & Technology	The IG Team restructured in May 2022. New roles are in place including Information Security Manager, Records Manager, Information Governance Officer and Information Governance Manager and Data Protection Officer. Informal development plans are in progress. The Information Governance Strategy and Framework remains to be developed.	Complete 2023-24 Q4
Information governance The approach to information governance is driven at department level rather than taking an enterprise approach to how information is managed across the Service. This leads to difficulty for employees easily finding accurate and up to date information when required. This also impedes the ability to lead to smarter working practices.	• As part of the Microsoft 365 (MS365) project, an enterprise wide approach to information management will be developed which will form the basis of the new Intranet.	Head of Data, Digital & Technology	A structural and strategic review of how the Service has implemented MS365 to date is being commissioned. Whilst this review is completed, implementation of retention policies within SharePoint and Teams is on hold. A data classification pilot test is in place to consider the content and value of the information held in emails and documents and this aligns to the Government classification scheme.	2024-25 Q3
Service Policy Management Improvements are required to ensure that the Service has an effective policy framework, effective document lifecycle	As part of the Microsoft 365 rollout: • Deliver new policy template repository with automated document management	Head of Data, Digital & Technology	The Policy Management System was accepted into Service in April 2022. Work continues to transition policies onto the new templates.	2024-25 Q3

Identified Issue	Action Needed	Lead Officer	Update	Status
management and compliance with the latest accessibility standards.	information reporting on the policy lifecycle. • Enable automatic publication of policies to the website to decrease the Freedom of Information (FOI) response burden. • Implement an improved mechanism to store documents to enable easier location by employees.		A performance dashboard of policies and procedures is in development. A review of which policies are open under the FOI is outstanding.	2023-24 Q2 2024-25 Q1
Planning, Performance and Continuous Improvement In order to ensure that all activity is aligned to the strategic objectives, vision and purpose, the Service's planning processes need to integrate with performance, projects and risk.	The planning and performance management framework that is currently under development needs to be finalised and rolled out.	Area Manager Corporate Planning, Analysis and Strategic Business Change	Planning and performance framework currently being reviewed to identify an appropriate model to take forwards.	2024-25 Q1
Data integrity Work has commenced to redesign the performance framework and to implement a system to support this. To ensure successful implementation, work is required to improve the integrity of data and to ensure proportionate and robust controls on data to: promote valid data at the point of capture; maintain up to date,	• Map the data requirements for the Service and where these are held. • Agree data owners. • Develop automated reporting.	Area Manager Corporate Planning, Analysis and Strategic Business Change / Head of Data, Digital & Technology	Data mapping has started and is ongoing. Data is being reviewed in terms of what is captured and how, and cleansed, as it is migrated from old to new systems. Key Performance Indicators (and the data underpinning them) aligned to the four service priorities are being developed.	2024-25 Q2

Identified Issue	Action Needed	Lead Officer	Update	Status
accurate records; enable the exploitation of external data sources, particularly in relation to location and premises data; and ensure consistency in reporting information.			The internal HMI team, Strategic Analysis Team and Information and Data Exploitation Team have significantly improved the quality of data reported externally and worked to ensure that internal data reporting aligns to the data reported externally.	
Aligning resources to risk and prioritising prevention and protection activity. We need to ensure that we allocate our resources for response, prevention and protection in a way that best reflects the risks to our communities, prioritising our prevention and protection work to prevent fires and other emergencies from occurring, but being able to respond when emergencies do happen.	• Review the Community Safety Plan to ensure that the most vulnerable communities are being prioritised through our prevention work. • Review the Service Delivery strategic plan to ensure that resources are deployed to support efficiency and effectiveness of all response, prevention and protection activity.	Area Manager Service Delivery - Community Safety / Ops Risk	The Community Safety Plan has been reviewed to ensure that we continue to target the most vulnerable members of society by using a triaged approach. The review has also confirmed that there are a number of data sources within the organisation that require analytical support to assure the Service that the triage approach is working. Based upon the recommendations of an external review, a revised approach is being adopted to improve the management of home fire safety visits until the Service is able to implement a new ICT system in 12-18 months' time. In addition, in order to allow the backlog of referrals for home fire safety checks to be addressed, the triage definitions are currently being reviewed and a proposal developed to more effectively manage the volume of referrals being received from external	2023-24 Q4

Identified Issue	Action Needed	Lead Officer	Update	Status
			partners. This will allow the Service to identify and focus its resource on the most vulnerable and high risk members of the community.

The Service Delivery Strategic Plan is currently being reviewed. | 2023-24 Q4 |
| **Integrated Service Asset Register (Fleet and Operational Equipment)**
An integrated fleet and operational service asset register needs to be developed and embedded to ensure that all assets are effectively recorded and managed to provide consistent data to inform replacement plans and ensure operational assets are fit for purpose. | • Implement Phase 2 of the asset management implementation project. | Head of Fleet, Equipment and Procurement | Phase 2 (equipment) is complete and live. We are now progressing stage 3 which is introduction of app for station-based testing and equipment maintenance. End timescale for wider deployment will depend on extent of any feedback/bugs/fixes. Intended for the project to transfer to departments for end of the financial year 2023-24. | 2023-24 Q4 |
| **Further improving our Efficiency, Effectiveness and People arrangements**.
We need to deliver our statutory duties, add value through improved community outcomes and create a workplace where all employees are able to perform at their best. | • Effectiveness and Efficiency: Improve the performance management framework to ensure that all activities are aligned to corporate priorities to reduce duplication of effort and to performance manage the Service. | Director of Finance & Corporate Services | The planning and performance framework is currently being reviewed to identify an appropriate model to take forwards.

The action to identify key priorities and implement an improvement plan is considered to be closed. Work continues to fully establish the HR | 2024-25 Q1

Complete. |

Identified Issue	Action Needed	Lead Officer	Update	Status
	• People: Further to the external review of Human Resources and Organisational Development, identify key priorities and implement an improvement plan. • People: Implement the 'Safe To' intervention throughout the Service so that people feel included and feel safe to speak up, to learn, to contribute and to challenge		business partner model. Further work is required to address gaps in managers' knowledge and confidence which will feed into leadership development programmes. As part of the Safe To approach we have been embedding the principles of psychological safety and the link to personal safety through our Values, Ethics and Behaviours training package. This mandatory training is providing staff with the expectations of behaviour and encouraging discussions on this topic, supporting all staff to question and learn whilst creating a positive culture that is representative of the modern fire and rescue service. The Safe To concept and associated work is now considered to be part of business as usual. This will be ongoing work and will continue to be embedded. The broader programme to improve the Service's culture is captured within the HMICFRS Cause of Concern Action Plan.	Complete.

Environmental Strategy	The three main projects for	Head of	Work continues to deliver the	2024-25 Q4
The UK has a legislative commitment to be net zero (carbon neutral) by 2050. The Service will need to respond to the requirements of the Environmental Act 2021 and environmental legislation. The Service response will need to mitigate against changing environmental threats.	carbon reductions are: • Reducing electricity and gas consumption. • Introduction of vehicle telematics. • Alternatively fuelled vehicles and electric charging points. The environmental action plan will need to identify the full scope of carbon emissions and work with our suppliers and departments to develop a comprehensive carbon neutral plan.	Fleet, Equipment and Procurement.	environmental action plan. Achievements to date include: • Introduction of telematics for light/support vehicles. • Annual Reporting of Carbon footprint included in statement of accounts. • eLearning on environmental matters launched for staff. • Environmental policy and procedures published. • Environmental Strategic Board established. • Phase 1 of electric charging points complete with first 4 sites commissioned and introduction of first electric vehicles (EVs). • Energy efficiency feasibility study to be undertaken with Coreus April 23 across 10 sites and changes implemented to reduce energy use. • Planning for phase 2 electric vehicle charging infrastructure and EVs is in progress. Application for Low Carbon skills fund successful and heat decarbonisation plans due for completion at 13 sites by January 2024. Progressing plans for decarbonisation and energy efficiency at three sites using the Public Sector decarbonisation	

Identified Issue	Action Needed	Lead Officer	Update	Status
			scheme for commencing works March 2024 if successful.	
Health and Safety The Service needs to ensure that it has the appropriate resource, capacity, structure, health and safety management framework and assurance systems to ensure compliance with its statutory Health and Safety duties and to ensure that all staff, both uniformed and non-uniformed, are able to be healthy and safe at work when undertaking their duties.	Strategic health and safety improvement plan to be developed and implemented.	Head of Organisational Assurance	An independent (external) review of the Service's safety management system, compliance, safety culture, and health and safety resource and structure has been completed. The recommendations and action identified through this work will be progressed through 2023-24.	High priority actions to be completed 2024-25 Q2
Improving diversity across the Service including operational management and senior roles. There is a need to further develop contracts and career paths to support inclusivity ensuring that the Service has a workforce that reflects the communities that it serves.	Implement positive action such as direct entry (an NFCC project) supported by the 'Our Time' sponsorship programme.	Head of People Services	Direct Entry is still being developed through NFCC and the Service provides input/expertise in relation to that. Positive Action activities are always being considered and used wherever an opportunity is identified. The Service continues to facilitate a sponsorship programme for women called 'Our Time'. These activities are now considered to be business as usual.	Complete
Ensuring the financial sustainability of the Service. There is a need to ensure that the Service designs and	Implement the Target Operating Model and ensure that the underpinning plans meet the medium-term financial plan.	Chief Fire Officer		New action for completion 2024-25 Q1

Identified Issue	Action Needed	Lead Officer	Update	Status
implements a service delivery model and supporting infrastructure that is affordable and meets the needs of the communities that it serves.				
People Strategy There is a need to develop a refreshed People Strategy that is designed in collaboration with the workforce in line with the requirements of the Fire and Rescue National Framework for England 2018.	People Strategy to be developed.	Head of People Services		New action for completion 2024-25 Q2
Data, Digital & Technology The Service needs to determine the future direction for digital services in consultation with the Fire Authority.	Determine permanent leadership structure for the department. Develop the business case which will explore the possible delivery models for digital services for presentation to the Fire Authority.	Director of Finance & Corporate Services	The recommended way forward will go to the Fire Authority on 31 October 2023 which will be either to enter a partnership with DELT or reform internally.	New action for completion 2023-24 Q3