

**BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY
BUCKINGHAMSHIRE FIRE AND RESCUE SERVICE**



Director of Legal & Governance, Graham Britten
Buckinghamshire Fire & Rescue Service
Brigade HQ, Stocklake, Aylesbury, Bucks HP20 1BD
Tel: 01296 744441

Chief Fire Officer and Chief Executive

To: The Members of the Overview and Audit Committee

31 October 2022

**MEMBERS OF THE PRESS
AND PUBLIC**

Please note the
content of Page 2
of this Agenda Pack

Dear Councillor

Your attendance is requested at a meeting of the **OVERVIEW AND AUDIT COMMITTEE** of the **BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY** to be held in **MEETING ROOM 1, BUCKINGHAMSHIRE FIRE AND RESCUE SERVICE HEADQUARTERS, STOCKLAKE, AYLESBURY, BUCKS, HP20 1BD** on **WEDNESDAY 9 NOVEMBER 2022 at 10.00 AM** when the business set out overleaf will be transacted.

Yours faithfully

A handwritten signature in black ink that reads 'Graham Britten'.

Graham Britten
Director of Legal and Governance

Health and Safety

There will be extremely limited facilities for members of the public to observe the meeting in person, therefore a recording of the meeting will be available after the meeting at the web address provided overleaf.

Chairman: Councillor Carroll

Councillors: Adoh, Bagge, Chapple OBE, Darlington, Exon, Hussain, Stuchbury and Waite



MAKING YOU SAFER



To observe the meeting as a member of the Press and Public

The Authority supports the principles of openness and transparency. To enable members of the press and public to see or hear the meeting this meeting will be livestreamed. Please visit: <https://www.youtube.com/channel/UCWmIXPWAscxpL3vIiv7bh1Q>

The Authority also allows the use of social networking websites and blogging to communicate with people about what is happening, as it happens.

Adjournment and Rights to Speak – Public

The Authority may adjourn a Meeting to hear a member of the public on a particular agenda item. The proposal to adjourn must be moved by a Member, seconded and agreed by a majority of the Members present and voting.

A request to speak on a specified agenda item should be submitted by email to gbritten@bucksfire.gov.uk by 4pm on the Monday prior to the meeting. Please state if you would like the Director of Legal and Governance to read out the statement on your behalf, or if you would like to be sent a 'teams' meeting invitation to join the meeting at the specified agenda item.

If the meeting is then adjourned, prior to inviting a member of the public to speak, the Chairman should advise that they:

- (a) speak for no more than four minutes,
- (b) should only speak once unless the Chairman agrees otherwise.

The Chairman should resume the Meeting as soon as possible, with the agreement of the other Members present. Adjournments do not form part of the Meeting.

Rights to Speak - Members

A Member of the constituent Councils who is not a Member of the Authority may attend Meetings of the Authority or its Committees to make a statement on behalf of the Member's constituents in the case of any item under discussion which directly affects the Member's division, with the prior consent of the Chairman of the Meeting which will not be unreasonably withheld. The Member's statement will not last longer than four minutes. Such attendance will be facilitated if requests are made to enquiries@bucksfire.gov.uk at least two clear working days before the meeting.

Statements can be read out on behalf of the Member by the Director of Legal and Governance, or the Member may request a 'teams' meeting invitation to join the meeting at the specified agenda item.

Where the Chairman of a Committee has agreed to extend an invitation to all Members of the Authority to attend when major matters of policy are being considered, a Member who is not a member of the Committee may attend and speak at such Meetings at the invitation of the Chairman of that Committee.

Questions

Members of the Authority, or its constituent councils, District, or Parish Councils may submit written questions prior to the Meeting to allow their full and proper consideration. Such questions shall be received by the Monitoring Officer to the Authority, *in writing*, at least two clear working days before the day of the Meeting of the Authority or the Committee.

OVERVIEW AND AUDIT COMMITTEE

TERMS OF REFERENCE

Overview

1. To review current and emerging organisational issues and make recommendations to the Executive Committee as appropriate.
2. To comment upon proposed new policies and make recommendations to the Executive Committee as appropriate.
3. To review issues referred by the Authority and its other bodies and make recommendations to those bodies as appropriate.
4. To make recommendations to the Executive Committee on:
 - (a) the Electronic Services Delivery Plan;
 - (b) the Brigade Personnel Strategy;
 - (c) Levels of Incident Response;
 - (d) the Corporate Risk Management Policy;
 - (e) the Authority's Information Policy; andother such policies and procedures as are required from time to time
5. To consider and make recommendations to the Authority on the Annual Treasury Management Strategy.

Audit

1. To determine the internal and external audit plans and the Internal Audit Strategy
2. To determine the Internal Audit Annual Plan and Annual Report (including a summary of internal audit activity and the level of assurance it can give over the Authority's governance arrangements).
3. To consider and make recommendations on action plans arising from internal and external audit reports, including arrangements to ensure that processes which deliver value for money are maintained and developed.
4. To consider and make recommendations to the Executive Committee on reports dealing with the management and performance of the providers of internal audit services.
5. To consider and make recommendations on the external auditor's Annual Audit Letter and Action Plan, relevant reports and the report to those charged with governance.
6. To consider specific reports as agreed with the Treasurer, Internal Audit, Monitoring Officer, Chief Fire Officer, or external audit and to make decisions as appropriate.
7. To comment on the scope and depth of external audit work and to ensure it gives value for money.
8. To oversee investigations arising out of fraud and corruption allegations.

9. To determine Insurance matters not delegated to officers, or another committee.
10. To consider and determine as appropriate such other matters as are required in legislation or guidance to be within the proper remit of this Committee.

Governance

1. To:
 - (a) make recommendations to the Authority in respect of:
 - (i) variations to Financial Regulations; and
 - (ii) variations to Contract Standing Orders.
 - (b) receive a report from the Chief Finance Officer/Treasurer when there has been any variation to the Financial Instructions in the preceding twelve month period.
2. To determine the following issues:
 - (a) the Authority's Anti-Money Laundering Policy;
 - (b) the Authority's Whistleblowing Policy; and
 - (c) the Authority's Anti Fraud and Corruption Policy.
3. To determine the Statement of Accounts and the Authority's Annual Governance Statement. Specifically, to consider whether appropriate accounting policies have been followed and whether there are concerns arising from the financial statements or from the audit that need to be brought to the attention of the Authority.
4. To consider the Authority's arrangements for corporate governance and make recommendations to ensure compliance with best practice.
5. To monitor the Authority's compliance with its own and other published standards and controls.
6. To maintain and promote high standards of conduct by the Members and co-opted members of the Authority.
7. To assist Members and co-opted members of the Authority to observe the Authority's Code of Conduct.
8. To advise the Authority on the adoption or revision of a code of conduct.
9. To monitor the operation of the Authority's Code of Conduct
10. To deal with cases referred by the Monitoring Officer.
11. To advise on training, or arranging to train Members and co-opted members of the Authority on matters relating to the Authority's Code of Conduct.
12. To monitor the operation of any registers of interest, of disclosures of interests and disclosures of gifts and hospitality in respect of officers or Members

Risk

1. To monitor the effective development and operation of risk management and corporate governance within the Authority.

2. To consider reports dealing with the management of risk across the organisation, identifying the key risks facing the Authority and seeking assurance of appropriate management action.

Employees

1. To be a sounding board to help the Authority promote and maintain high standards of conduct by employees of the Authority.
2. To advise the Executive Committee on the adoption or revision of any policies, codes or guidance:
 - (a) regulating working relationships between members and co-opted members of the Authority and the employees of the Authority;
 - (b) governing the conduct of employees of the Authority; or
 - (c) relating to complaints; andother such policies and procedures as are required from time to time.
3. To monitor the operation of any such policies, codes or guidance mentioned at 2 above.
4. To comment on the training arrangements in connection with any of the above.

General

1. To make such other recommendations to the Executive Committee on the issues within the remit of the Overview and Audit Committee as required.
2. To review any issue referred to it by the Chief Fire Officer, Treasurer, or Monitoring Officer, or any Authority body within the remit of these terms of reference.
3. To consider such other matters as are required in legislation or guidance to be within the proper remit of this Committee.
4. To commission reports from the Chief Fire Officer, the Internal Audit Service, the Monitoring Officer, or such other officer as is appropriate, when the Committee agrees that such reports are necessary.
5. To support the Monitoring Officer and the Treasurer in their statutory roles and in the issue of any guidance by them.
6. To receiving reports from the Monitoring Officer in his/her statutory role or otherwise relating to ethical standards and deciding action as appropriate.
7. To respond to consultation on probity and the ethical standards of public authorities.

AGENDA

Item No:

1. Apologies

2. Minutes

To approve, and sign as a correct record the Minutes of the meeting of the Overview and Audit Committee held on 20 July 2022. **(Pages 9 - 20)**

3. Matters Arising from the Previous Meeting

The Chairman to invite officers to provide verbal updates on any actions noted in the Minutes from the previous meeting.

4. Disclosure of Interests

Members to declare any disclosable pecuniary interests they may have in any matter being considered which are not entered onto the Authority's Register, and officers to disclose any interests they may have in any contract to be considered.

5. Questions

To receive questions in accordance with Standing Order SOA7.

6. RIPA Policy (Minute OA39 - 090316)

To note that there has been no covert surveillance conducted by officers since the last meeting of the Committee.

7. Closing - Audit Results Report (verbal update)

To receive a verbal update.

8. 2021/22 Compliments, Concerns and Complaints

To consider Item 8 **(Pages 21 - 30)**

9. Internal Audit Reports

(a) Update on Progress of Audit Recommendations

To consider Item 9a (Pages 31 - 46)

(b) Update on the 2022/23 Annual Audit Plan

To consider Item 9b (Pages 47 - 50)

10. Procurement Strategy 2022-2026 and Review of Standing Orders relating to Contracts

To consider item 10 (Pages 51 - 84)

11. Corporate Risk Management

To consider item 11 (Pages 85 - 104)

12. Operational Assurance Improvement Plan (OAIP)

To consider item 12 (Pages 105 - 126)

13. Grenfell Infrastructure Update (September 2022)

To consider item 13 (Pages 127 - 142)

14. His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) - Buckinghamshire Fire and Rescue Service (BFRS) Improvement Plan Update: September 2022

To consider item 14 (Pages 143 - 162)

15. Prevention Improvement Plan - Update Two

To consider item 15 (Pages 163 - 170)

16. 2021-22 Annual Performance Monitoring Report

To consider item 16 (Pages 171 - 196)

17. Treasury Management Performance 2022/23 - Quarter 2

To consider item 17 (Pages 197 - 204)

18. Exclusion of Press and Public

To consider excluding the public and press representatives from the meeting by virtue of Paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972, as the Appendices contain information relating to the financial or business affairs of a person (including the Authority); and on these grounds it is considered the need to keep information exempt outweighs the public interest in disclosing the information.

19. Local Pensions Board Update

To consider item 19 (**Pages 205 - 208**)

20. Forward Plan

To note Item 20 (**Pages 209 - 210**)

21. Date of Next Meeting

To note that the next meeting of the Overview and Audit Committee will be held on Wednesday 15 March 2023 at 10am.

If you have any enquiries about this agenda please contact: Katie Nellist (Democratic Services Officer) – Tel: (01296) 744633 email: knellist@bucksfire.gov.uk



Buckinghamshire & Milton Keynes Fire Authority

Minutes of the Meeting of the OVERVIEW AND AUDIT COMMITTEE of the BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY held on WEDNESDAY 20 JULY 2022 at 10.00 AM.

Present: Councillors Adoh, Bagge, Carroll, Chapple OBE, Darlington, Exon, Hussain, Stuchbury and Waite

Officers: J Thelwell (Chief Fire Officer), M Osborne (Deputy Chief Fire Officer), G Britten (Director of Legal and Governance), M Hemming (Director of Finance and Assets), M Hussey (Principal Accountant), C Bell (Head of Protection, Assurance and Development), A Carter (Head of Technology, Transformation and PMO), K Nellist (Democratic Services Officer) and S Gowanlock (Corporate Planning Manager)

Remotely: S Harlock (Internal Audit Manager, Buckinghamshire Council), A Prestige (Internal Audit, Buckinghamshire Council), A Hussain (Deputy Director of Finance and Assets) and A Stunell (Head of Human Resources)

Apologies: None.

The Vice Chairman, Councillor Hussain, welcomed Members to the Overview and Audit Committee Meeting of the Buckinghamshire & Milton Keynes Fire Authority and advised that although members of the public were allowed to attend and observe in limited numbers, the meeting was being recorded and a copy would be uploaded onto the Authority's YouTube channel.

<https://www.youtube.com/channel/UCWmIXPWAscxl3vliv7bh1Q>

The Vice Chairman also welcomed Councillor Adoh who had been nominated by Councillor Rouse to act as a substitute at today's meeting. Councillor Adoh was appointed as a new Member onto the Authority by Buckinghamshire Council on 14 July in place of Councillor Irwin.

OA01 ELECTION OF CHAIRMAN

(Councillor Hussain in the Chair)

It was proposed and seconded that Councillor Carroll be elected Chairman of the Committee for 2022/23.

RESOLVED –

That Councillor Carroll be elected as Chairman of the Committee for 2022/23.

(Councillor Carroll in the Chair)

OA02 APPOINTMENT OF VICE CHAIRMAN

It was proposed and seconded that Councillor Hussain be appointed Vice Chairman of the Committee for 2022/23.

RESOLVED –

That Councillor Hussain be appointed Vice Chairman of the Committee for 2022/23.

OA03 MINUTES

RESOLVED –

That the Minutes of the meeting of the Overview and Audit Committee held on Wednesday 16 March 2022, be approved, and signed by the Chairman as a correct record.

OA04 MATTERS ARISING FROM THE PREVIOUS MEETING

None.

OA05 DISCLOSURE OF INTERESTS

There were no disclosures of interest.

OA06 QUESTIONS

A Member asked about an incident that had taken place in Milton Keynes the day before, a large fire that involved houses and a children's nursery. The fire had taken a long time to get under control and the Member wanted to know if there had been the right number of appliances able to respond in a timely way.

The Deputy Chief Fire Officer advised that he was in the process of putting together a full briefing regarding all the incidents that had taken place during yesterday's extremely hot weather, and it would be sent to Members today. There were two simultaneous major incidents declared, plus three other significant fires and two road traffic collisions. Nationally the country was very stretched, but the Service's crews coped magnificently with what they had and did a phenomenal job. The Milton Keynes incident was brought under control quite rapidly from what they were presented with when they arrived. The crews were assisted by our partners at Thames Valley Police, South Central Ambulance Service, Milton Keynes Council and the water company.

Members asked to put on record their thanks for the hard work of all firefighters and staff working yesterday.

OA06 RIPA POLICY (MINUTE OA39 – 090316)

The Director of Legal and Governance advised Members that the Authority was the enforcing authority investigating potential breaches of fire safety legislation and confirmed that in the last reporting period,

no covert surveillance under the Regulation Investigatory Powers Act 2000 had been undertaken.

RESOLVED –

To note that there had been no covert surveillance conducted by officers since the last meeting of the Committee.

OA07 INTERNAL AUDIT REPORT - FINAL AUDIT REPORTS

The Internal Audit Manager advised Members that this report was the finalised internal audit report for the Asset Management System processing mapping review. A finding in the 2020/21 Asset Management System audit found some processes were not documented, and this work was undertaken to map those processes. From the work undertaken, there were eight new recommendations to help further improve the control framework.

Work was being progressed to ensure that the approved 2022/23 plan was being delivered, and regular discussions were being held with the Director of Finance and Assets to monitor progress.

A Member asked how the Service calculated what equipment needed to be replaced and also how it was budgeted for.

The Director of Finance and Assets advised that there was a rolling replacement programme, and equipment was replaced in accordance with manufacturers recommendations around lifecycle replacement. The equipment budget was fairly consistent year on year, and also with collaboration, equipment was able to be purchased more efficiently.

RESOLVED –

That Members note the final audit reports for FY 2021/22

OA08 INTERNAL AUDIT REPORT – 2021/22 ANNUAL AUDIT REPORT

The Internal Audit Manager advised Members that this was the Annual Audit Report which outlined the internal audit work undertaken for the year ending 31 March 2022. This report provided an opinion on the adequacy and effectiveness of the control environment, detailing any incidences of significant control failings or weakness. The Account and Audit Regulations required the Authority to maintain an adequate and effective internal audit service in accordance with proper internal audit practices. The Chartered Institute of Public Finance and Accountancy (CIPFA) Public Sector Internal Audit Standards (PSIAS), set out proper practice for Internal audit, which required the Chief Internal Auditor (CIA) to provide a written report to those charged with governance, to support the Annual Governance Statement (AGS) which included an opinion on the overall adequacy and effectiveness of the Authority's control environment. The effectiveness of the control environment was

achieved through a risk based plan of work which was agreed with senior management and approved by this Committee.

The Chief Internal Auditor's opinion for the year 2021/22 based on the audit work undertaken, combined with experience and knowledge of the previous year's performance and the current climate in which the Authority was operating, was 'reasonable'. The Authority had continued to demonstrate a robust and effective internal control and risk management environment.

A Member asked if the lessons learned had been brought together for the Blue Light Hub, and if the Authority were to undertake a similar project in the future, would it have confidence sharing the risk with other services etc.

The Director of Finance and Assets advised that there would be a comprehensive report coming to a future Committee meeting looking at all the lessons learned. The report would be a backward looking evaluation as to what happened and would help any future projects.

RESOLVED –

That Members note the progress on the Annual Internal Audit Plan

OA09

ANNUAL GOVERNANCE STATEMENT 2021/22

The Director of Legal and Governance advised Members that the purpose of this report was to gain approval for the Annual Governance Statement 2021/22 to be signed off by the Chairman of the Authority and the Chief Executive, for adoption of the Statement of Accounts. It was in the format to reflect the Chartered Institute of Public Finance and Accountancy (CIPFA) and the Society of Local Authority Chief Executives and Senior Management (SOLACE) guidance. Although CIPFA had not, as in the previous two years, issued specific guidance that Annual Governance Statements should reflect the impact of Covid-19, the draft Annual Governance Statement for 21/22 still reflected the continued impact of Covid-19 on the Authority, as the Service's Pandemic Recovery Group did not cease operation until 1 April 2022.

The Director of Legal and Governance advised Members that there was an addition to Appendix B – Significant Governance Issues to be addressed in 2022/23 which was in response to a standard enquiry made by the external auditors on how the Authority monitors fraud and money laundering. Having reviewed the current policies, it was noted that they had not been reviewed since 2018. A proposed form of wording was circulated to Members in advance of the meeting. The proposal was to add another issue to be addressed in 2022/23:

3.	Issue	Action Plan	Lead Officer	Target Date
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	Counter-Fraud and Corruption and Anti Money Laundering Polices	Both policies were last reviewed in 2018. It would be good practice for these to be reviewed by officers and Members of the Overview and Audit Committee during the financial year 2022-23.	Director of Finance and Assets	31 March 2023
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RESOLVED –

1. That the Annual Governance Statement 2021/22 be approved.
2. That the progress on the implementation of recommendations of the previous Annual Governance Statement (Appendix A to the Annual Governance Statement) be noted.
3. That the priorities for 2022/23 (Appendix B to the Annual Governance Statement) be agreed, subject to the amendment above.

OA10 CORPORATE RISK MANAGEMENT

The Corporate Planning Manager advised Members that the report reflected any changes and updates made to the Corporate Risk Register since the last meeting. The risk register had been regularly reviewed by officers and also by Lead Members where individual risks fell within their areas of reference. Following feedback from Lead Members, a risk trend indicator had been added to Appendix 1, and although the risk scores and RAG statuses had not changed, there was upward pressure on two of the risks.

With regard to the staff availability risk, there were some positive developments, particularly regarding the current recruitment campaign to increase the number of firefighters. There were 31 candidates approaching the final stages of the recruitment process for wholetime firefighters, and 58 transferee applications in response to an advertisement for competent wholetime and on call firefighters. However, the risk remained at red rag status due to continuing risk of loss of existing operational staff to other fire and rescue services, in particular, London Fire Brigade, who were still actively recruiting. The Service was also experiencing difficulties in filling some specialist support roles, such as vehicle technicians for workshops. Also, due to the current position in relation to the national firefighter pay negotiations. On the 18 July, the Fire Brigade Union’s (FBU) Executive Council voted unanimously to reject the employers’ 2% pay offer

following consultation with its members. In doing so, they signalled their intention to develop their case for a higher settlement, including preparations for strike action.

The Chief Fire Officer advised Members that a 2% offer was tabled by the employers to the Fire Brigade Union (FBU) but was rejected unanimously. In the last thirteen years, firefighters have had an increase of 13.5%, an average of 1% per year. The issue with firefighter pay had been building for a number of years. Firefighters, back office, and control staff were falling behind other public sector workers. Unless a renewed offer, of a substantial nature was tabled, the Chief Fire Officer expected there would be industrial action from the FBU this year. The root cause of the firefighter strike was lack of investment and the ability of Fire Authorities to pay. This Authority would be capped at 2% in terms of precept rises, and the ability to pay anything above that would mean a reduction in service. The Chief Fire Officer felt that firefighter's pay needed to be underwritten by the government now and in the future. There was the same issue with Control staff in terms of recruitment, and the majority of the underspend within the budget was mainly attributed to not being able to recruit back office staff, mainly due to pay.

The Chief Fire Officer advised Members that this Service had reduced its workforce by 35% in the decade of austerity but had not reduced the number of fire engines, and this workforce had stepped up every time to cover those shortfalls. The Service's response to multiple simultaneous incidents the previous day, was a prime example of this. Staff turning in for duty, cancelling arrangements, getting alternative childcare to respond to the issues, demonstrated their commitment to their communities.

It was agreed that the Chief Fire Officer should draft a cross party letter to the government regarding the need to fund a proper pay rise for fire staff (firefighters, control and back office staff).

The Corporate Planning Manager advised Members that the financial risk score and RAG status could potentially be raised due to the significant inflationary pressures in relation to fuel and energy costs and the potential for a higher than budgeted outcome to the annual staff pay settlement. The budget set in February 2022 included provision for a 2% settlement. The incremental cost of every additional 1% was around £200k per annum. There was also continuing uncertainty over the future of some central government grant funding.

The Director of Finance and Assets advised Members that as already discussed, the Service has had massive workforce cuts over the last numbers of years, but last year, the Authority started to reverse that trend. Members approved the £5 increase in council tax, and that allowed twenty wholetime staff to be added to the establishment. The

inflation pressures were now threatening that. Even if the Authority was to get the option of a £5 increase again, £5 was around 7% so would still be under the inflationary increase.

The Director of Finance and Assets advised Members that as part of his national role, he was surveying all fire and rescue services to ask what their inflationary pressures were, and this would be put to the government.

It was agreed that the outcomes from this survey would be shared with the Committee Members once it was completed.

In answer to a question, the Director of Finance and Assets, advised Members that, inflation, energy prices peaks and troughs should become clearer over the next few months. When there was a fuel crisis, the government prioritised emergency services and he would ask the same question regarding gas and electric supplies.

A Member asked whether, given that the Authority has one of the lowest precepts in the country, this was an advantage or disadvantage.

The Director of Finance and Assets advised that it was a different playing field across different services. Not only were there different precepts, but different council tax bases. It worked in the Authority's favour last year as the £5 increase was only offered to those authorities in the lowest quartile.

The Corporate Planning Manager advised Members that regarding the information and security risk, officers remained particularly vigilant and the Service's email security ranking against the Southeast Government Warning Advisory and Reporting Point (SEGWARP) criteria had improved due to additional measures applied by the ICT team. This was important as it was one of the major routes hackers used to gain access to systems using methods such as phishing.

Regarding other risks, the position was more stable. The Covid-19 resurgence risk had been rising up the news agenda, with increases in infection rates nationally, but this does not appear to be presenting quite the same level of risk to life as with the earlier strains of the virus. There was nothing to add regarding the McCloud Sargeant pensions risk, but it continued to be monitored.

A Member asked whether, that although the Authority had a Climate Change Strategy, the impact of climate change was properly reflected on the Corporate Risk Register.

The Corporate Planning Manager advised Members that what they saw on the Corporate Risk Register, was the very top of the risk pyramid, and below that, the Directorate level registers covered a number of different risks, and climate change was on the Prevention, Response and Resilience Register focussing on the potential for service failure

and the failure to protect people from risks associated with climate change; however it was agreed that the issue would be revisited in the next iteration of the Corporate Risk Register.

RESOLVED –

1. That the status on identified corporate risks at Annex C be reviewed and approved.
2. That comments be provided to officers for consideration and attention in future updates / reports.

OA11

TREASURY MANAGEMENT PERFORMANCE 2021/22

The Principal Accountant presented the Treasury Management Performance report for the financial year 2021/22. The accrued interest earned was £42k, which was £12k higher than the budget set for the same period. In terms of investments, as at 31 March 2022, the Authority had £16.6m invested in various counterparties including, banks, building societies, money market funds and current accounts. An action from the last meeting was to include credit ratings for each counterparty and these were included within this report.

The Principal Accountant advised Members that in May 2022, the Authority paid a PWLB loan due to be repaid following the maturity of the loan. The value of the loan was £620k and did not impact the revenue budget. The Bank of England's Monetary Policy Committee (MPC) had increased the base rate three times since the last meeting. From 0.75% in March, to 1% in May and most recently 1.25% in June. The next review date was 4 August 2022, and the treasury advisors were projecting the base rate to increase to 1.50%.

The Principal Accountant advised Members that when setting the budget for 2022/23, a prudent approach was taken by keeping it at £30k as there were five investments made prior to the first of the five base rate increases in December 2021 and a further two investments made between December 2021 and June 2022 which were all below the current base rate of 1.25%. These investments would be maturing over the next six months. For 2023/24 budget setting, a provisional increase in the investment budget by £70k had been added, this would bring the budget to £100k. This would be monitored during 2022/23 to ensure the figure was achievable during 2023/24.

RESOLVED –

That the Treasury Management Performance 2021/22 report be noted.

OA12

HER MAJESTY'S INSPECTORATE OF CONSTABULARY AND FIRE AND RESCUE SERVICES (HMICFRS) – BUCKINGHAMSHIRE FIRE AND RESCUE SERVICE (BFRS) IMPROVEMENT PLAN UPDATE: MAY 2022

The Head of Technology, Transformation and PMO advised Members that the second HMICFRS inspection took place in mid-2021. Following the inspection findings, an action plan was created to track progress

and supporting evidence against the recommendations and areas for improvement. The Service was making progress against the action plan, two more items had started and were on track and one new item had moved to on hold/delayed since the last period.

The Head of Technology, Transformation and PMO advised Members that the key focus was around the two cause of concerns which related to Prevention and Equality Diversity and Inclusion (EDI). The Prevention Improvement Plan feeds the HMICFRS plan and was being presented today and showed the progress that was being made. At the Authority meeting on the 15 June, the EDI objectives year 2 update was presented. This showed the achievements in year 2 and the objectives for the coming year. Some highlights to capture were the Service achieved the Ministry of Defence Employer Recognition Scheme Silver Award and now had recently achieved the Gold Award; supporting with Fire and Wellness referrals from sponsor households who had applied to house Ukrainian families seeking refuge; and officers continued to work on the responses from the employee Culture Survey which had a great take up of 75%.

The focus for the next quarter was to build evidence and complete actions in preparation for a mini reinspection in late Autumn.

A Member stated it was great to see the plan, and that there was evidence of progress in the recommendations and areas of improvement, but to what extent could assurance be given that the plan, when delivered, would confirm in the mini inspection that the Service had made progress. It was all good, but would it deliver a change of rating from HMICFRS.

The Head of Technology, Transformation and PMO advised that when liaising with the HMICFRS Service Liaison Lead, officers continued to share what the Service was doing, and also ask for feedback as to whether the Service was heading in the right direction. The assurance received was that the Service was heading in the right direction.

The Chief Fire Officer advised Members that he and the Chairman had recently met Matt Parr (HMICFRS Inspector for London and South Central Region), and his feedback was the Service was making good progress.

RESOLVED –

That the Committee note the updated HMICFRS - BFRS improvement plan: May 2022

OA13 PREVENTION IMPROVEMENT PLAN – UPDATE ONE

The Head of Technology, Transformation and PMO advised Members that this report presented the first Prevention Improvement Plan update, since the evaluation report and improvement plan was presented to Members in November 2021. In summary, work to address the HMICFRS Prevention cause of concern was prioritised over other areas within the Prevention Improvement Plan, although the highlight report and dashboard demonstrate that work was also progressing in most other areas.

The highlight report demonstrated that seven recommendations had been completed, although significant recruitment initiatives to fill vacancies within the team had affected progress against some of the delivery periods originally identified.

A revised Prevention Strategy had been drafted and initial consultation within core teams completed. The strategy would now progress through consultation processes for final approval. A new station planning process had been introduced which utilised the local risk information provided for service delivery areas in benchmarking reports and local area profiles. External board attendance had been reviewed ensuring all external boards, where the Service was listed as a statutory agency, were attended, along with those strategic boards relevant to the Service's sphere of influence, and Station level communication of prevention activity had improved. The use of prevention notice boards and regular meetings had been introduced to provide support and focus on delivery against key prevention objectives.

In terms of risks, the primary objective over the last period had been to ensure capacity in the prevention team to deliver the Service's objectives. There had been significant recruitment activity, which was progressing well. There was now only one vacancy, and the team were receiving the appropriate training to deliver their roles effectively.

A Member felt that having local risk assessments on Prevention was progress, so staff were aware of the challenges around the station in terms of the operating model. When stations and crews were moved around, was it integrated with the local risk assessments was there any need for cross training or back filling to make it work.

The Head of Technology, Transformation and PMO advised the benefit was that risks had been documented. Previously it was based on a site specific risk assessment of the area, but now it was documented, anyone at the station could read the pack. Also, as crews attended incidents, they were presented with risk information on a data terminal in the appliance, which gave them real time, latest information.

RESOLVED –

The Committee note the Prevention Improvement Plan highlight report May 2022, attached as Appendix 1

OA14 FORWARD PLAN

The Chairman brought the Forward Plan for future Overview and Audit Committee meetings to the attention of Members.

RESOLVED –

That the Forward Plan be noted.

OA15 EXCLUSION OF PRESS AND PUBLIC

To consider excluding the public and press representatives from the meeting by virtue of Paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972, as the Appendix contains information relating to the financial or business affairs of a person (including the Authority); and on these grounds it is considered the need to keep information exempt outweighs the public interest in disclosing the information.

OA16 EXEMPT MINUTES

Members received an update from the Director of Finance and Assets in respect of a matter arising from the exempt minutes.

RESOLVED –

That the Exempt Minutes of the meeting of the Overview and Audit Committee held on Wednesday 16 March 2022, be approved, and signed by the Chairman as a correct record.

OA17 DATE OF NEXT MEETING

The Committee noted that the date of the next Overview and Audit Committee meeting would be held on Wednesday 9 November 2022 at 10.00am.

THE CHAIRMAN CLOSED THE MEETING AT 12.00 PM.

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: 2021/22 Compliments, Concerns and Complaints

Lead Member: Councillor Gary Hall

Report sponsor: Graham Britten, Director of Legal and Governance

Author and contact: Station Commander Suzanne Connolly

sconnolly@bucksfire.gov.uk

Action: Noting

Recommendations: That the report be noted.

Executive summary:

The purpose of this report is to:

- Compare concerns, complaints, and compliments data across the three years 2019/20; 2020/21 and 2021/22.
- Advise of any corrective action taken to reduce or remove problems that led to a complaint being made.
- Identify opportunities to improve public perception of the services Buckinghamshire Fire and Rescue Service provides.

It includes details of the complaints that were upheld, corrective action taken to reduce or remove the problem and improve public satisfaction with the services we provide.

Financial implications: Whilst there are costs associated with investigating complaints, the cost associated with corrective action continues to be small as issues of liability are thoroughly investigated and, if appropriate, referred to the Authority's insurance provider. Reserves are held in the event of a serious incident occurring.

Risk management: The public are encouraged to report concerns or complaints and, if required, are given assistance to do so. Processes are in place to ensure that concerns and complaints are rigorously investigated, resolved as quickly as possible and, wherever possible, to the satisfaction of the complainant.

During the complaint investigation personal data is retained to enable the investigating officer to keep in contact with the complainant. A Data Protection Impact Assessment has been completed to ensure that no aspect of the

investigations is privacy intrusive. When the investigation is complete and sufficient time has passed to confirm no further action is required, all personal data is removed, and the anonymised data is retained to consider any patterns of risk. If a complaint is upheld and actions to prevent a similar incident occurring cannot be put in place immediately, the need for a risk treatment will be recorded in a project or department risk register and may be escalated to the corporate risk register. These risk registers are reviewed frequently.

Legal implications: Under section 25 of the Local Government Act 1974 the Authority is subject to the jurisdiction of the Local Government and Social Care Ombudsman (LG&SCO).

The LG&SCO has the power to investigate complaints where there has been:

- Maladministration causing injustice;
- A failure to provide a service that it was the public body's function to provide;
- There was a total failure to provide such a service.

Complaints will not be investigated by the LG&SCO until a complainant has exhausted a local authority's internal complaints procedure

Privacy and security implications: Responses to the After the incident survey (ATI) are anonymised so no privacy risks or issues are raised.

Duty to collaborate: The Policing and Crime Act 2017 requires the Authority to keep opportunities for collaboration with the police and ambulance services under review. Complaints could arise from any of several business projects, processes, or procedures. Many of these have been developed in collaboration with other fire and rescue services or other partner agencies. During development and through to implementation, these are risk and impact assessed to reduce incidents that may lead to complaints arising. The LG&SCO can treat the actions of third parties as if they were actions of the Authority, where any such third-party arrangements exist (Local Government Act 1974, section 25(6) to 25(8)). This means the Authority keep responsibility for third party actions, including complaint handling, no matter what the arrangements are with that party.

Health and safety implications: Any actual or potential health and safety implications are considered during the investigation of a complaint and reported in line with current procedures.

Environmental implications: There is neutral effect from the recommendations.

Equality, diversity, and inclusion implications: Any actual or potential equality, diversity, and inclusion implications are considered during the investigation of a complaint.

The ATI survey is structured to enable user experiences to be stratified and compared across a range of protected characteristics including ethnicity, gender, age, and long-standing limiting illness / disability.

Consultation and communication: Monitoring of user experiences of our emergency services performance and the reporting of findings contributes to the identification of potential opportunities to improve the efficiency and effectiveness of our core emergency response, prevention, and protection processes.

In line with the recommendations in the LG&SCO Guidance, '[Effective Complaint Handling for Local Authorities](#)' (revised and published 8 October 2020), this report is submitted annually to this committee and available to the public in the interests of openness and transparency.

Background papers: The last report was made to the Overview and Audit Committee on 10 November 2021: <https://bucksfire.gov.uk/documents/2020/07/item-16-2019-20-compliments-concerns-and-complaints.pdf/>

Appendix	Title	Protective Marking
1	Compliments, Concerns and Complaints received 2020/21 – 2021/22	None

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Appendix 1

Compliments, Concerns and Complaints received 2019/20 – 2021/22

1. Purpose

This purpose of this report is to:

- compare compliments, concerns, and complaints data across the three years 2019/20, 2020/21 and 2021/22.
- advise of any corrective action taken to reduce or remove problems that led to a complaint being made.
- identify opportunities to improve public satisfaction with the services the Authority provides.

It includes details of the complaints that were upheld, corrective action taken to reduce or remove the problem and improve public satisfaction with the services we provide.

2. Scope

As the numbers of compliments, concerns and complaints received directly from the public is low, data from the annual service-user satisfaction survey 'After the Incident' is also included, to capture the perceptions of those experiencing an incident in the home or in non-domestic premises.

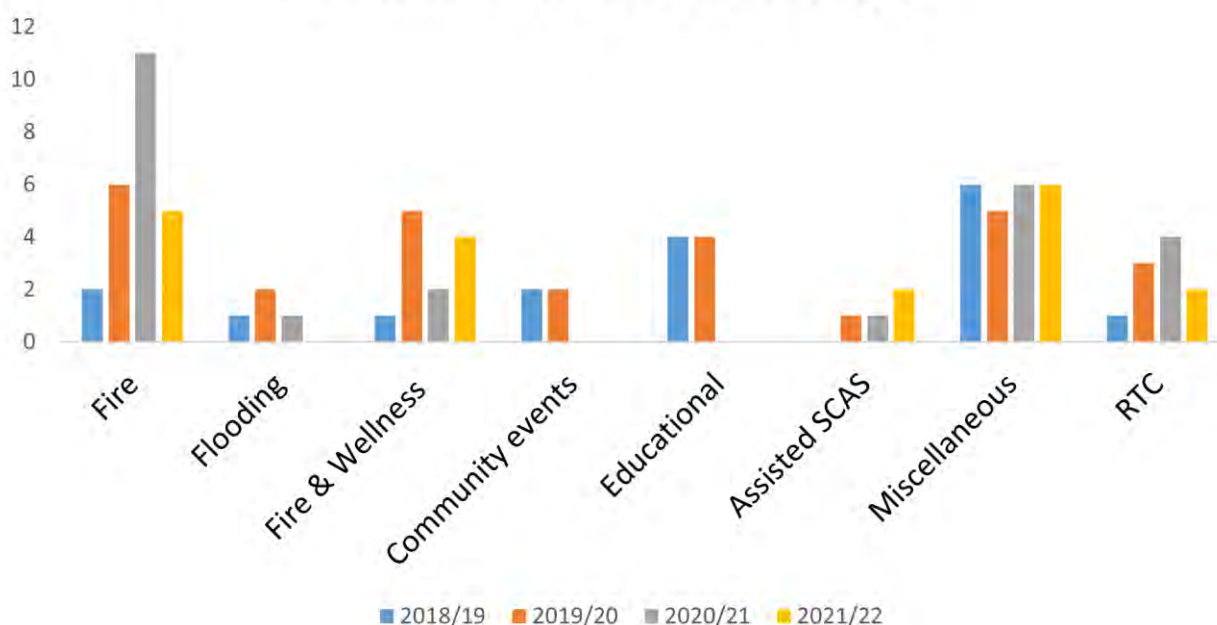
3. Compliments

2019/2020 - 28 compliments

2020/2021 - 25 compliments

2021/2022 - 19 compliments

Compliments 2018/19 - 2020/21



Appendix 1

4. Concerns and complaints

There were no complaints arising from an information security incident and no complaints were investigated by the Local Government & Social Care Ombudsman (LG&SCO) or the Information Commissioner, during this reporting period.

2019/2020 There were 17, concerns/complaints five of which were upheld:

- Inappropriate use of social media which could be seen as bringing the Authority into disrepute. – *All employees reminded that social media cannot be used to present personal views whilst representing the Authority.*
- An Authority employee driving a badged vehicle was seen speaking on a mobile phone whilst driving. – *This was referred as a disciplinary investigation.*
- An officer failed to attend an appointment for a fire and wellness visit – *Officer fell sick, and we were unable to make contact to advise the resident and reschedule the appointment.*
- A complainant stated that a uniformed firefighter approached him at his place of work and threatened him. – *This was found to be a family dispute. However, as the firefighter was in uniform, this was referred as a disciplinary investigation.*
- Following a visit by our contractors coming to collect scrapped vehicles, it was found that batteries had been put in the wrong place resulting in “sparking” which could have resulted in a fire. – *The procedure had changed under a new contract and the extant procedural document did not reflect this. This procedure has since been rewritten.*

2020/2021 There were 24, concerns/complaints five of which were upheld:

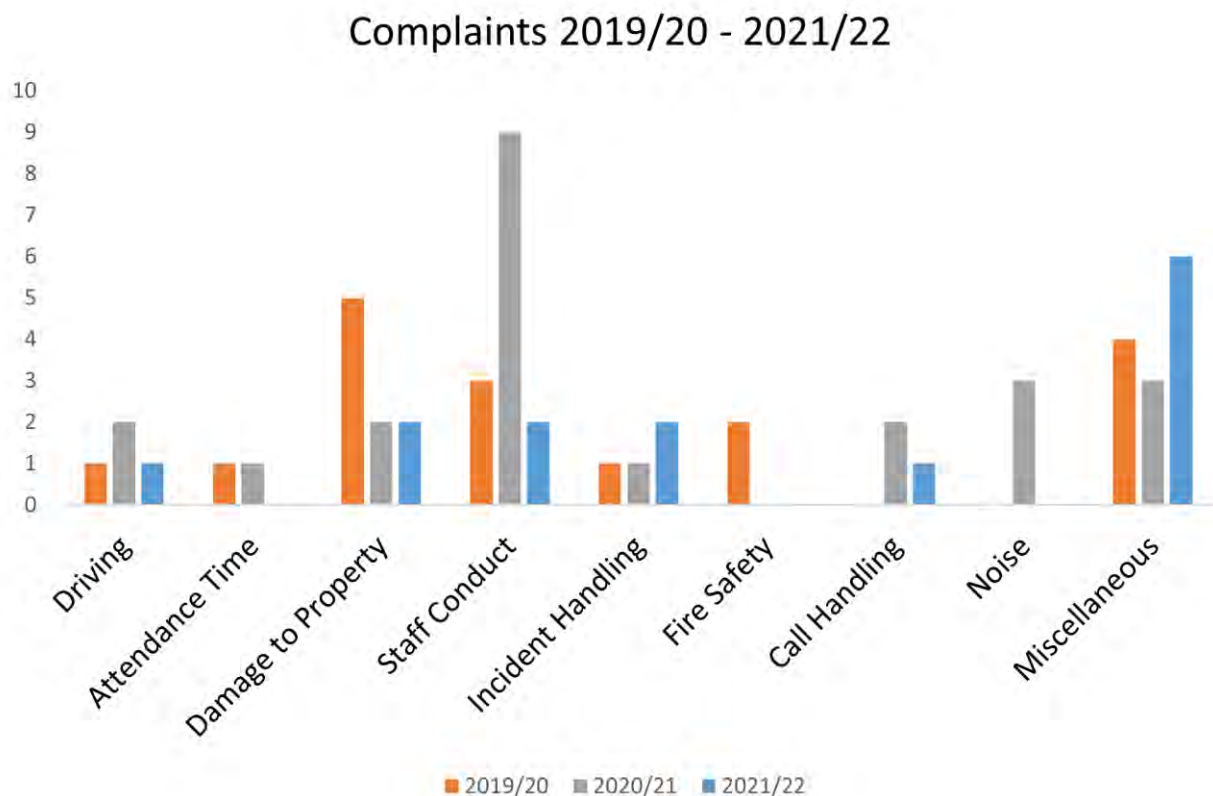
- Damage to a neighbouring property driveway by a fire appliance following a house fire – *cost of repair of damage paid under a settlement agreement.*
- Complaint from neighbour regarding training at a Fire Station on a Sunday – *training continued, but every effort was made to keep the noise to a minimum.*
- A member of the public was not happy with the way a member of staff spoke to them when ringing regarding smoke detectors – *a letter of apology was sent explaining the situation.*
- Damage to car when taking action to avoid a fire appliance on blue lights – *Insurance claim.*
- A vehicle accident involving a fire appliance – *Insurance claim.*

2021/2022 There were 14 concerns/complaints 2 of which were upheld:

- Smoke entered neighbouring property whilst training within an empty property – *Crews to notify neighbours of use of smoke during training exercises in empty properties.*
- Catering food rubbish from large scale exercise was placed in business recycling bin without permission. As a result refuse providers refused collection

Appendix 1

- Ensure all rubbish from future large-scale exercises is disposed of in the correct manner.



5. After the incident - Customer satisfaction survey 2019/20 - 2021/22

The Authority continues to subscribe to the annual confidential survey which measures the satisfaction of members of the public who have experienced an incident in the home or in a non-domestic dwelling. The questionnaires are returned to an independent social research practice¹ who analyse the returns and publish the results annually.

The survey runs from 1 April to 31 March each year and the report compares Buckinghamshire Fire and Rescue Services' (BFRS) performance with previous years and other fire and rescue services (FRS) participating in this national survey. The surveys capture respondent perceptions of FRS performance across the following areas:

- The incident;
- Initial contact with the FRS;
- At the scene;
- Information and advice;
- Overall service;
- Previous experience;

Respondents are also invited to make an overall assessment of satisfaction with the service provided.

¹ <https://www.ors.org.uk/>

Appendix 1

These surveys are a good indication of how well the community is served when an incident occurs, and a useful supplement to the compliments, concerns, and complaints, received from other sources, to provide a broader range of feedback.

Table 1 Domestic incidents 2019/20 – 2021/22

Domestic	2019/20	2020/21	2021/22
Respondents	140	207	144*
Very Satisfied	97%	94%	94%
Fairly Satisfied	2%	4%	3%
Neither Satisfied nor Dissatisfied	1%	2%	1%
Fairly dissatisfied	0	0	1%
Total Satisfied:	99%	98%	97%

*15 of which were completed online.

The list below is some of the comments submitted by people completing the survey of incidents in the home:

- Arrival was very efficient as a baby was locked in the home alone.
- Arrived promptly, were very calm and reassuring as I had never called FRS before.
- Communication and reassuring us all especially with 7 children, 4 of which are disabled and a 3-month-old.
- Communication and speed of response.
- Exemplary. Given the hour (3am) and a false alarm, I appreciated that disturbance was kept to the minimum.
- Firefighters were professional and non-judgemental.
- I am 89 and they made sure I was safe and reassured me until my son arrived.
- Put a new smoke alarm in.
- The team kept us informed. Were very polite and professional. Feel incredibly lucky to have these people looking after us.

Appendix 1

Table 2 Non-domestic incidents 2019/20 – 2021/22

Non-Domestic	2019/20	2020/21	2021/22
Respondents	128	106	72
Very Satisfied	91%	94%	92%
Fairly Satisfied	9%	5%	7%
Very Dissatisfied	0%	1%	1%
Total:	100%	99%	99%

The list below is some of the comments submitted by people completing the survey of incidents in non-domestic properties:

- All very professional and efficient. Unlike the gas engineer who caused the false alarm!
- Although turned out to be a false alarm, were very thorough in checking the building to make sure it was ok to bring the team back inside.
- Inspecting officer followed up with a drop in call.
- Quickly installed large fans to disperse the smoke quickly. Excellent communication from the officer in charge.
- The fire was when the premises were empty. A bin was smouldering to the extent the fire alarm went off. The FRS took the bin outside to extinguish it, rather than damage the property inside for which we are grateful.
- When asked what was going on the FRS was extremely helpful to talk to the pupils and reassure them that all was ok. It was nice to see the FRS on site had time to talk to some of the pupils, many thanks for all your help.

Overview of Key Findings

- Overall user satisfaction with the emergency service received from BFRS has remained consistent over time, ranging between 95% and 100% for the domestic survey and 96% and 100% for the non-domestic survey over a ten-year period.
- A lower level of response to the Domestic survey was received in 2021/22 compared with the previous year (144 v 207). Overall satisfaction levels remained high.
- A lower level of response to the non-Domestic survey was received in 2021/22 compared with the previous year (72 v 106). Also, there was a fall-off in the very satisfied category (92% v 94%).
- Benchmarking – not enough FRS' took part in the survey for a benchmarking report to be produced for 2021/22.

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: 9 November 2022

Report title: Internal Audit Report – Update on Progress of Audit Recommendations

Lead Member: Councillor David Carroll

Report sponsor: Mark Hemming – Director of Finance and Assets

Author and contact: Maggie Gibb – Internal Audit Manager,
Maggie.Gibb@buckinghamshire.gov.uk, 01296 387327

Action: Noting.

Recommendations: That the progress on implementation of recommendations be noted.

Executive summary: The purpose of this paper is to update Members on the progress of the implementation of audit recommendations made as at 10 October 2022.

Any further progress against outstanding recommendations will be verbally presented to the Overview and Audit Committee on 9 November 2022.

In total there are 96 recommendations to report on the status of which are classified as follows:

Implemented – 62/96 (65%)

In-progress - 5/96 (5%)

Past Due date (In-progress) – 29/96 (30%)

Internal Audit continues to actively monitor implementation of all outstanding recommendations throughout the year.

Financial implications: The audit work is contained within the 2022/23 budget.

Risk management: There are no risk implications arising from this report.

Legal implications: There are no legal implications arising from this report.

Privacy and security implications: There are no privacy and security implications arising from this report.

Duty to collaborate: Not applicable.

Health and safety implications: There are no health and safety implications arising from this report.

Environmental implications: There are no environmental implications arising from this report.

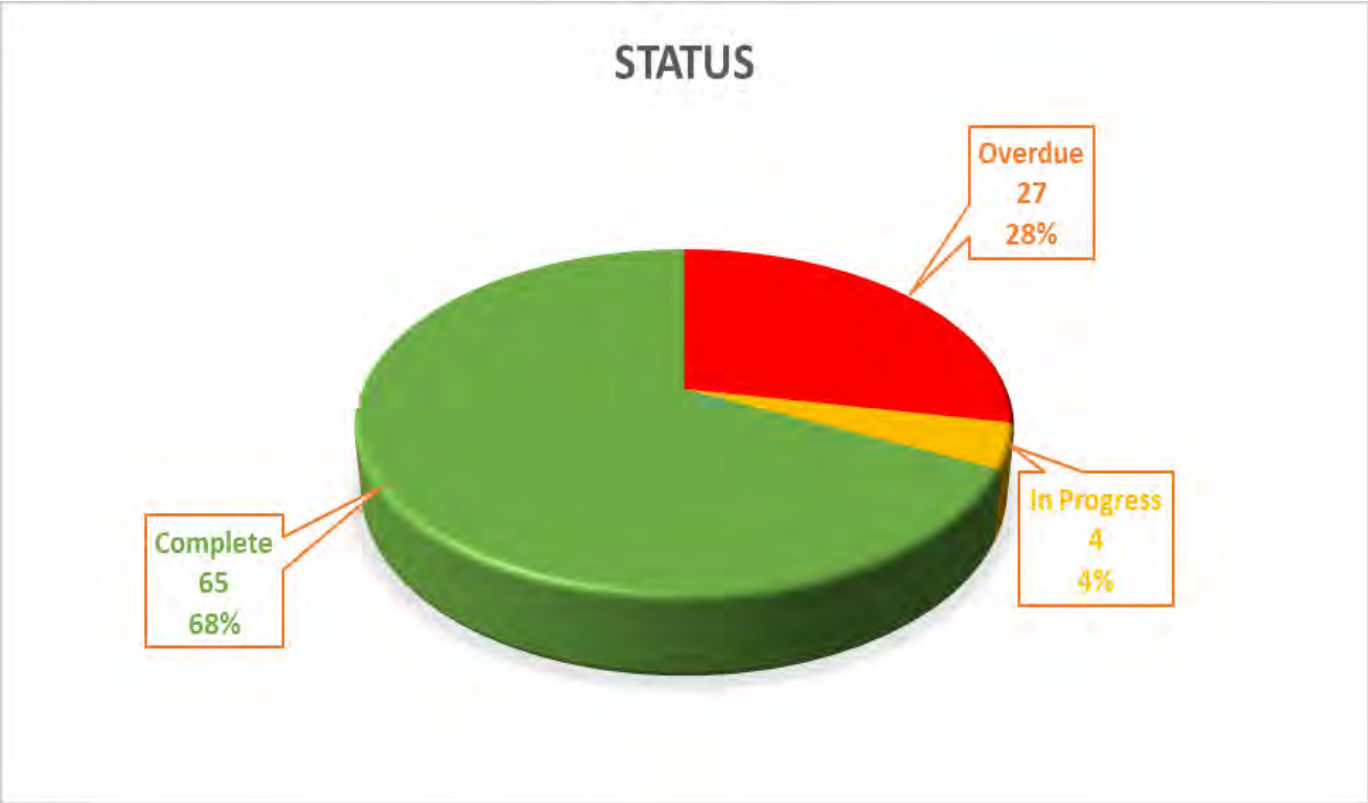
Equality, diversity, and inclusion implications: There are no equality and diversity implications arising from this report.

Consultation and communication: Not applicable.


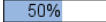
Background papers:



Appendix	Title	Protective Marking
A	Status of Audit Recommendations – October 2022	Not applicable


Appendix A – Status of Audit Recommendations

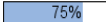




BMKFA Overdue Audit Actions

Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
BMKFA 2021 2110 Asset Management System (5) Recording of Assets – Overdue tests	<p>Finding: Fire crews must undertake regular stock checks and tests of equipment at fire stations and on appliances (vehicles). The frequency of these tests and inventory checks depends on the individual asset's testing schedule, usually dictated by the PIT number assigned to the asset. Results of tests and inventory checks should be recorded on Redkite by crews using either a handheld scanner or computer.</p> <p>Review of the report of tests due at Beaconsfield Fire Station run from Redkite found that 286 of the 288 tests listed had passed the due date as of 12 November, with one due date listed as being 13 February 2014 and 118 listed as having due dates of 2019 or earlier.</p> <p>A similarly high number of overdue tests were noted for Aylesbury Fire Station as of 3 November 2020. All 179 tests were overdue when viewed against the listed due date. Through discussion with the Station Commander, we were unable to establish whether these tests had been carried out or whether this was a system issue or data quality issue.</p> <p>A sample of 20 assets listed on Redkite was examined to confirm whether equipment tests and inventory checks were carried out promptly and accurately recorded on Redkite. The period covered was from November 2019 to November 2020. Of the 20 assets tested:</p> <ul style="list-style-type: none"> In 11 cases, assets were not tested in line with the frequency required by tests loaded onto Redkite. In four cases, the most recent test was not carried out within a timely manner of the previous test. In one case, no inventory checks or tests had been carried out since March 2018. In two other cases, an inventory was carried out promptly. However, no tests were carried out on the equipment since 2018 or earlier. In one of these cases, the most recent test was listed as being carried out in October 2014. One asset was not found during an inventory check. <p>Risk: If tests are not carried out periodically and promptly in line with the testing schedule loaded into Redkite for the asset, there is a risk that defective or missing equipment is not detected, increasing the risk that equipment is obsolete or unsafe or that stock levels are not sufficient.</p> <p>Action: Review of testing frequencies and recording of all equipment on Red Kite. Additional training for the operational crew in the recording of tests.</p>	30-Jul-2021	High Priority	Station Commander Research & Development		<p>Update from Station Commander Research & Development 17/10/2022:</p> <p>A review of all equipment manuals published to the internal intranet has been completed. Training on uploading / amending existing pages on intranet has now been completed. New/updated equipment manuals will be uploaded to intranet by the end of Oct 2022. Work has started on reviewing the equipment manuals shared across the Thames Valley (Resilience Direct) which are either in use in BFRS or need adding to the BFRS intranet and once complete these will be added to the intranet.</p> <p>The review of the equipment manuals has included the checking and verifying of information contained including the testing frequencies of equipment.</p>
BMKFA 2122 2215 Blue Light Hub Post Project Evaluation (2) Governance Framework -	<p>Finding The Executive Committee report from 15 September 2021 states, "The West Ashland build is now complete. The final account, including retention fees, is yet to be finalised. The Authority will also be looking to recover some of the increased costs from the professional design team. The forecast variance for West Ashland total project costs is expected to be offset by additional capital receipts and contributions which will result in a net variance of circa £1m against the forecast expenditure and risks previously reported to Committee".</p>	30-Sep-2022	High Priority	Director of Finance & Assets		<p>Update from Director of Finance and Assets 17/10/2022:</p> <p>Following further internal discussion, the updated process will be incorporated into the updated Property Strategy covering 2023 to 2028. The new due date for this audit action will</p>

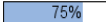


Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
Amount of Contingency	<p>As stated on 19 September 2018 Executive Committee meeting minutes, "There was no contingency originally as the planned BIM process would not have required any. This is now allocated at £100k given that a number of the adverse variance issues have already presented themselves in the period since construction began and are therefore accounted for elsewhere in this document."</p> <p>The contingency allocated of £100k is <1% of the initial £13.1145m budget. The January 2020 Learning Points created by the former Director of Finance and Assets indicates that "Every major public sector construction project overspends. Include a general contingency of at least 15%".</p> <p>Risk If the contingency is not adequate, there is a risk that insufficient funds are available for the project delivery. This could result in reputational damage and/or financial loss.</p> <p>Action The contingency value for future projects will be set at a level much greater than 1% of the overall value. Guidance on setting an appropriate level of contingency will be added to updated budget/project management guidance.</p>					now become 31 March 2023.
BMKFA 2122 2215 Blue Light Hub Post Project Evaluation (10) 2018/19 Follow Up Recommendations – Risk Registers	<p>Finding Additionally, risk registers should include all present risks. We reviewed each risk in the Project Risk Registers and Transition Activities Risk Register obtained and did not identify any specific risks relating to poor performance of the HUB.</p> <p>Risk If all relevant risks are not included within a risk register, there is a risk that further preventative actions are not identified to mitigate the risk in a timely manner, leading to an increased likelihood of the event occurring/escalating.</p> <p>Action Recommendations from this audit regarding risk to be incorporated into future major projects. This will be reflected in updated budget/project management guidance.</p>	30-Sep-2022	High Priority	Director of Finance & Assets		<p>Update from Director of Finance and Assets 17/10/2022:</p> <p>Following further internal discussion, the updated process will be incorporated into the updated Property Strategy covering 2023 to 2028. The new due date for this audit action will now become 31 March 2023.</p>
BMKFA 1819 1947 Project Management BLH (2) The Hub Performance	<p>Finding During the Audit it was confirmed that the HUB have had difficulties with technical support; which has had an impact of the timeliness of design work, changes or updates and which in turn has led to delays in providing information that is required by Kingerlee – the construction firm. The Quantity Surveyor maintains a schedule of delays caused by the HUB and the associated costs. It was confirmed that any financial implications that arise as a result of the HUB's poor performance could potentially be recoverable. However Audit found that whilst these potentially recoverable costs are reflected in the Budget Monitoring Financial Statements, they are not separately identified as attributable to any party as this will be the subject of negotiation between all parties depending on final outcomes at the conclusion of construction. The risk of HUB poor performance has been recorded in the risk register.</p> <p>It was confirmed that the Director for the HUB Professional Services has been made aware of potentially recoverable costs and the issues that were causing poor performance have been addressed.</p> <p>Risk Where the impact of poor performance is not completely and accurately reflected in the budget and/or risk register, this may lead to project overspend as the budget will not be forecasting all expected costs.</p> <p>Action The necessary actions to deal with potential financial loss arising from delays on the part of HUB</p>	31-Oct-2019	Medium Priority	Director of Finance & Assets		<p>Update from Director of Finance and Assets 17/10/2022:</p> <p>The claims specialist has completed their initial high-level report. Further work will now be undertaken to substantiate the value of the claim.</p>


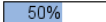
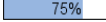
Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
	<p>have already been addressed during 2018 and a significant improvement has been seen. The current delay in the construction programme (5-6 weeks) has not altered for some months.</p> <p>Both the HUB and Kingerlee have a responsibility to mitigate any delay as much as possible and with some 8 months of construction still to take place at the time of writing (Feb 2019) they must both maintain the opportunity to do so.</p> <p>Only at post construction and during the period when the final account will be negotiated and agreed, will any financial loss due to delays or failures be attributed.</p> <p>The Director of HUB's parent company (Integral UK Ltd) has been in discussions with both DFA and Property Manager and he is well aware of the potential claim the Authority may have in due course.</p> <p>The financial statements produced by the QS do show all costs (i.e. worst case) but do not at this stage set out which potentially claimable costs are attributable to which parties.</p> <p>The Authority's officers will continue to maintain dialogue with senior representatives at both the HUB and Kingerlee over any potential situation (either worsening or improving) that may lead to a claim.</p>					
BMKFA 2021 2115 Core Financial Controls (2) Payroll – Flow of information from HR to Payroll during Leaver and Change of Role processes 36	<p>Finding:</p> <p>Following a leaver's notification receipt, HR enter leaver data on iTrent, with a Leaver notification email then sent to the Payroll mailbox. This process should be completed swiftly and before the Payroll cut-off date to ensure that recurring payments to the leaver are promptly removed.</p> <p>Examination of a sample of 10 employees who left the Fire Authority's employment between April and November 2020 found that four leaver notifications were received by Payroll after the leave date. Three of these were received after the payroll cut off for that month. In one case this led to the creation of an overpayment.</p> <p>Discussion with the Payroll and Benefits Manager established that the Leaver process changed during 2019-20. Line managers no longer advised Payroll directly of Leavers. The amended process involves line managers advising HR and HR passing Leaver information on to Payroll. Following iTrent permission changes, Payroll can no longer process Leavers if HR does not have the capacity to or in the event of late leavers after the Payroll cut-off.</p> <p>The result of these process changes is that information reaches Payroll last, sometimes after the employee has already left the organisation, reducing Payroll's ability to address the risk of overpayments. To mitigate overpayments, Payroll manually adjusts pay within the record whilst it is still live. Payroll is more reliant on manual intervention and affects their timeliness in reporting to HMRC.</p> <p>Examination of a sample of ten On-Call and Overtime payments made to staff between April and November 2020 found one case where a request was submitted via email. This was due to a discrepancy with a change in role and a change in Terms and Conditions for the employee.</p> <p>Not all of the necessary managers were involved in this process, and contractual changes were not communicated effectively. This resulted in an overpayment. Corrective action was taken by the employee's line manager and Payroll.</p> <p>Risk:</p> <p>If Payroll is not provided with complete and timely information to process Leavers and role changes, there is a risk that Leavers and pay implications of role changes are not actioned on iTrent before Payroll being run, leading to the creation of an overpayment and financial loss to the Fire Authority.</p> <p>Action:</p> <p>End to end process mapping will be undertaken across HR, Payroll and the Resource Management Team in order to identify areas where processes can be streamlined, and all control weaknesses can be addressed.</p>	31-May-2022	Medium Priority	Head of Human Resources		End to end process mapping has been completed and the draft process maps are currently being reviewed.


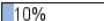
Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
BMKFA 2021 2119 GDPR (4) Retention and Destruction	<p>Finding: The Records Retention and Disposal Information Asset Register procedure states that information stewards are responsible for ensuring the timely archiving and/or destruction of records and advising the Information Owners where it is believed a retention timescale should be amended following legislation or business needs. The Information Governance and Compliance Manager is responsible for maintaining and reviewing records management processes. The retention schedules for departments and stations are defined within the ROPA. The Authority relies on stewards to ensure that electronic data is disposed of per the retention schedule. However, there is no mechanism in place to ensure this takes place.</p> <p>Risk: If no adequate processes are in place to ensure lawful retention schedules and/or destruction of electronic records, there is a risk of accidental and/or unlawful alteration, destruction, or authorised personal data disclosure.</p> <p>Action: Agreed. A mechanism to review data disposals inline with the retention schedules will be formalised and monitored.</p>	31-Dec-2021	Medium Priority	Director of Legal & Governance		<p>Update from Director of Legal & Governance, 10/10/2022:</p> <p>Awaiting confirmation of scoping and costs from the preferred provider of a bought-in solution</p>
BMKFA 2021 2120 Resource Management System (2) Joiners, Movers and Leavers Policy/Procedure	<p>Finding: The Authority does not have a formalised user access management process outlining the processes/controls when a user joins, moves or leaves the organisation and the relevant user access requirements. We noted that:</p> <ul style="list-style-type: none"> When a joiner or mover requires new access or a change in access, a ticket is raised in the Vivantio service desk. Within this ticket, a 'child ticket' is sent to the Resource Management Team (RMT) to create/amend the user's access. This ticket does not capture sufficient information for the RMT operator to provide access. Often users will be provided access and then request further access as this has not been initially provided. Therefore, access being granted is an iterative process. The lack of information on the ticket reduces the effectiveness of the audit trail. Previously, when a user left the organisation, residual access could be left on the account, this is due to there being no formal procedure when revoking access. The process has slightly changed whereby an operator will look at the user account to check what access they have before removing it. <p>Risk: Unauthorised access to company resources may lead to loss and compromise of data.</p> <p>Action: A review of the processes will be undertaken, supported by the end-to-end process mapping within the Internal Audit Plan for 2021-22.</p>	31-Dec-2021	Medium Priority	Group Commander Resourcing & Projects		<p>Update from Group Commander Resourcing & Projects:</p> <p>I have been the new Group Commander within resourcing since May 2021. All processes and procedures have been developed over the past year with existing staff and an array of new staff.</p> <p>To be marked as complete pending evidence of updates processes.</p>
BMKFA 2021 2120 Resource Management System (3) Generic	<p>Finding: We inspected the user account list on FSR and noted that seven generic accounts exist on the FSR application as follows:</p> <ul style="list-style-type: none"> Five of these accounts have the username 'bucks_demoffX' where X is a number between 1-5. The use and rationale of these accounts was not provided by management; 	31-Dec-2021	Medium Priority	Group Commander Resourcing & Projects		<p>Update from Group Commander Resourcing & Projects:</p> <p>An internal Bucks Fire project gets underway in Jan 2022, this project will work closely with FSR</p>

Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
Accounts	<ul style="list-style-type: none"> One account with the username 'rmtcrashtestdummy' which similarly, was not rationalised; One account has the username 'usardog'. It was noted that this account is created for the canine unit that the Urban Search and Rescue (USAR) team utilise. It was further noted that the 5 'demoffX' accounts had never logged into FSR, the 'crashtestdummy' account was last accessed in May 2020. <p>Risk: There could be a loss of accountability of user performed actions. Unauthorised access to company resources may lead to loss and compromise of data.</p> <p>Action: A review of user accounts to be undertaken and redundant generic accounts to be removed.</p>					<p>reference permissions within FSR. Current and required permissions will be both reviewed and created. As part of this work redundant generic accounts will be reviewed along with a change management process. Once it's been established what user permissions we require these permissions will be reviewed as appropriate or highlighted through change control.</p> <p>Action on-going Jan/Feb 2022</p> <p>Resource Management Team (RMT) are working closely with FSR regarding additional permissions and new user accounts/role profiles. Work started in Jan 2022 and we are on target to complete by end of March 2022.</p>
BMKFA 2021 2120 Resource Management System (4) Change Management - Testing	<p>Finding: The vast majority of change controls are operated by the Vendor. Irrespective, an internal change control process exists at the Authority. Changes are to be raised through the Vivantio service desk by a change initiator and must include key information However, we noted that:</p> <ul style="list-style-type: none"> The Authority does not have access to a test environment for FSR; Changes are developed and tested by the Vendor; Functional requirements and subsequent tender review for the application highlighted a question over access to a test environment to perform user acceptance testing (UAT) when a change is being made to the application; Changes pass through over 1000 automated tests that are ran on the application to ensure that the change does not impact anything on the application, the change then has specific testing to ensure it is performing the functionality as per the design. The Authority does not obtain any assurance from the vendor surrounding the change management process and is thus wholly reliant on the vendor for this. <p>Risk: There is a risk that implementation of changes which are not aligned with business requirements and/or impact on the continued operation of the production application. Implementation of developments containing bugs or not matching the business' requirements.</p> <p>Action: Change management process to be reviewed and fully documented (see also Finding 5).</p>	31-Dec-2021	Medium Priority	Group Commander Resourcing & Projects	99%	<p>Update from Group Commander Resourcing & Projects:</p> <p>This is constantly evolving due to the flexible approach to all crewing within BFRS. The service has a Managing Business Change procedure which has to be adhered to.</p> <p>Action to be closed following receipt of Managing Business Change procedure.</p>
BMKFA 2021 2120 Resource Management System (5) Change Management	<p>Finding: All changes are required to pass through the change management process with a request for change (RfC) document completed for each change. The Authority was unable to provide any documentation around the selected changes for inspection. Therefore, we were unable to determine if the change management process had been followed for the selected changes. This included cost benefit analysis and CAB minutes of discussion.</p>	31-Dec-2021	Medium Priority	Group Commander Resourcing & Projects	10%	Due to a change of personnel the revised date for this action is now December 2021.

Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
– Internal Tracking and Assessment	<p>Risk: There is a risk of implementation of changes that contain bugs, misaligned with business requirements or impact on the continued operation of the production application. Development changes are misclassified, create unforeseen cost and/or are not assessed for business need and risk.</p> <p>Action: Change management process to be reviewed and fully documented (see also Finding 6).</p>					
BMKFA 2021 2120 Resource Management System (6) Backups – Disaster Recovery Testing	<p>Finding: Backups and the associated disaster recovery procedures are controlled and operated by the Vendor. Although it was determined that backups are being conducted on the FSR application and that the Vendor are trained to conduct disaster recovery tests, no evidence was available to inspect to demonstrate a disaster recovery test had been performed. We recognise that this is often an annual exercise and FSR has only been in effect at the Authority since April 2020.</p> <p>Risk: There is a risk of partial or complete loss of data. Unavailability of systems and lack of business continuity.</p> <p>Action: A disaster recovery will be undertaken to test business continuity in this area.</p>	31-Dec-2021	Medium Priority	Group Commander Resourcing & Projects	99%	<p>At any time there should be a minimum of 2 team members from FSR trained and authorised to perform a catastrophic infrastructure failure recovery. The qualified and trained team members must test emergency contact procedures.</p> <p>FSR monitor several critical application metrics 24/7. These include, but are not limited to:</p> <ol style="list-style-type: none"> 1. Requests per seconds 2. Available database connections 3. Error rate 4. Background worker queues 5. Integrations with third party systems (e.g. Control room management software) <p>Whenever one of these metrics goes outside the acceptable range, on-call engineers are automatically alerted.</p> <p>A post mortem is created after every incident, with a root cause analysis, lessons learnt, and improvement actions. Checklists and runbooks are updated accordingly to improve the mitigation and response to future incidents.</p> <p>Database Backups: FSR perform two types of database backups:</p> <ol style="list-style-type: none"> 1. Snapshot backups. This type of backup is performed every 12 hours. During this backup, the entire database is stored as a single file. This file is then encrypted and saved to an Amazon S3 EU data centre. We keep 30 days of these backup files. Backups are protected against deletion using S3 Version Management. 2. Streaming backups. This type of backup is performed continuously. Data is stored at an Amazon S3 EU data centre in encrypted format. In case of a catastrophic failure, these backups are at most a few minutes behind. <p>Action to be closed following receipt of evidence of a recent disaster recovery test.</p>



Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
BMKFA 2122 2234 Procurement Governance and Compliance (7) Contract Performance Monitoring	<p>Finding We tested a sample of five procurements and noted that in two cases where procurements were conducted in partnership, the contracts required performance monitoring meetings no less than every six months. However, we found that in one case (TW Pumping Appliances), no such meetings had taken place since the procurement team of the lead authority, Oxfordshire County Council was no longer extant. In the remaining case (Water Hygiene Monitoring & Related Services), we were provided with certificates showing the performance of the contract by the supplier, but no formal meetings were taking place.</p> <p>Risk If predetermined meetings are not adhered to, the Authority will have limited oversight regarding the performance of a contract. Subsequently, it may be exposed to non-compliant suppliers/service providers, meaning the Authority does not achieve value for money.</p> <p>Action Performance monitoring meetings should be undertaken by the contract owner rather than the Procurement Team. Guidance on managing the performance of contracts will be included in procurement guidance to be disseminated to other departments (see also Finding 1).</p>	30-Sep-2022	Medium Priority	Procurement Manager		Update from Procurement Manager 06/10/2022: Contract Management Framework 2022-2025 approved by SMB August 2022 – this part is complete. Contract Management Training Package in Draft, expected to complete internal testing and commissioning to BFRS HEAT training portal by December 2022
BMKFA 2122 2234 Procurement, Governance and Compliance (1) Strategy, Policy, and Procedures	<p>Finding The new Strategy should also be version controlled, so it includes the following information: <ul style="list-style-type: none"> • Date of the last review; • Which officer/board conducted the review; and • The date of the following review. The current Procurement Strategy (2015 – 2020) has now expired. It does not contain a version control. There is a draft copy of the new procurement strategy set to be approved in 2022, but this has not been formalised. We noted that the Authority operated throughout 2021 without an effective Strategy. The 2015 – 2020 Strategy did not include any procedural guidance related to procurement, including information for contractor resilience which could be disseminated to other departments. It is the department's responsibility to conduct these checks. An up to date set of procedural guidance should be drafted covering the entire procurement process, including key points such as contractor resilience checks and approval; this could be added to the Authority's Finance Policy.</p> <p>Risk If key strategies and procedural guidance relating to procurement are not kept up to date, there is a risk that an ineffective and/or consistent approach could be taken, resulting in significant financial loss for the Authority.</p> <p>Action 1. Procurement Strategy 2022-2025 to be presented to the Fire Authority for approval 2. Procedural guidance related to procurement, including information for contractor resilience to be produced and disseminated to other departments</p>	30-Sep-2022	Medium Priority	Director of Finance & Assets; Procurement Manager		Update from Procurement Manager, 06/10/2022: Standing Orders progressing through internal governance process. <ul style="list-style-type: none"> • Approved at BTB • Approved at SMB • Due to O&A November 2022 • Final approval at Fire Authority meeting December 2022 On target to be complete internal governance approval process by December 2022
BMKFA 2122 2228 PMO Assurance (3) Projects Over Budget/Time	<p>Finding The Head of Transformation, Technology and PMO confirmed that the Authority does not currently have an official process for extensions and instead held informal conversations with project managers. They encourage RAG ratings for updates within a project regarding budgets and timescales. However, going beyond estimated figures does not require approval. We were informed</p>	30-Jun-2022	Medium Priority	Head of Technology, Transformation & PMO		Update from Head of Technology, Transformation & PMO, 17/10/2022: We continue to remind people to document and sign off any changes to their project.

Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
Request Approval	<p>that this was due to the PMO being in its infancy.</p> <p>Risk If there is no formal process to request additional budget requirements and timescale extensions, the budget may be exceeded without the Authority's notice and approval, putting unnecessary pressure on the Authority's overall budget.</p> <p>Action Refresh and relaunch the change control process relating to projects.</p>					The training has been delayed linked to BMKFA 2122 2228 PMO Assurance (2) The PMO's Standardisation of Project Processes
BMKFA 2122 2228 PMO Assurance (4) Expenditure records	<p>Finding From reviewing the document templates and project lifecycle we were provided with it was clear that there was no formal documentation where in which project managers should be recording expenditure. We were also informed this was a responsibility of the project managers and a consistent approach from the PMO was not evident.</p> <p>Risk Where project expenditure is not formally recorded in documentation, the risk arises that projects will go over budget more frequently as spending may not be sufficiently tracked. This could have severe financial implications to the Authority.</p> <p>Action Work with the Finance Team to ensure that the current budget monitoring process can feed into the project management process.</p>	30-Jun-2022	Medium Priority	Head of Technology, Transformation & PMO	 99%	<p>Update from Head of Technology, Transformation & PMO, 17/10/2022:</p> <p>This action is complete. Project budget & actual spend is now added to the project reporting with any changes to budget spend coming via the change control process. Financial Updates are standing item on the Business Transformation Board agenda.</p>
BMKFA 2122 2215 Blue Light Hub Post Project Evaluation (1) Governance Framework	<p>Finding The agenda and papers from the Fire Authority meeting held on 7 June 2017 outline the delivery plan for the Blue Light Hub project. It also details who the project will be managed by. A Governance Arrangements document was developed, which provides a basis to manage and control the project implementation. However, we established that key tasks for the project team were not defined in a schedule of activities. Besides the 7 June 2017 paper delivery plan, there was no formalised project governance framework.</p> <p>Risk If a formalised project governance framework is not in place, there is a risk that project objects, including time scales and budgets, are not met, leading to financial loss to the Fire Authority.</p> <p>Action When future projects of this scale are undertaken a formalised governance framework will be agreed. This will be reflected in updated budget/project management guidance. This finding also links to Finding 4, as the type of governance will be determined by the risk sharing arrangements.</p>	30-Sep-2022	Medium Priority	Director of Finance & Assets	 50%	<p>Update from Director of Finance and Assets 17/10/2022:</p> <p>Following further internal discussion, the updated process will be incorporated into the updated Property Strategy covering 2023 to 2028. The new due date for this audit action will now become 31 March 2023.</p>
BMKFA 2122 2228 PMO Assurance (1) PMO Key Performance Indicators	<p>Finding The Head of Transformation, Technology and PMO confirmed that the Authority does not currently have KPIs in place to report against concerning the PMO but confirmed that this was something they would be interested in implementing.</p> <p>Risk If there are no KPIs in place, the authority could miss identifying instances of poor performance and fail to address problems leading to repeated mistakes in future projects.</p> <p>Action KPIs for the PMO will be developed and these will be reported to the Senior Management Team periodically.</p>	30-Jun-2022	Medium Priority	Head of Technology, Transformation & PMO	 75%	<p>Update from Head of Technology, Transformation & PMO, 17/10/2022:</p> <p>Two PMO measures are now part of the Service Performance measures. Q1 presented to the Exec and Fire Authority in Oct'22. The PMO dashboard that shows Projects RAG status, Projects passing stages, Key Risk and issues are presented monthly to the Business Transformation Board and Strategic</p>

Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
						Management Board. Further KPI's have been delayed in sign off but will be completed this calendar year.
BMKFA 2122 2228 PMO Assurance (2) The PMO's Standardisation of Project Processes	<p>Finding The Head of Transformation, Technology, and PMO provided the Authority's guidelines around a project's process to ensure consistent and effective delivery. This included a detailed PMO presentation, a project life-cycle and various templated documents available for project managers. Furthermore, evidence was provided of an eLearning package and a page on the Fire Authority's intranet for PMs to review, explaining the process. In its design, the PMO's outlined a clear framework for consistency and successful delivery of projects. However, testing a sample of projects commencing after the PMO's creation outlined inconsistencies in the process they should follow and discrepancies regarding which documentation was completed for each project. The findings are as follows:</p> <ul style="list-style-type: none"> • 1/3 projects is without a completed project mandate; • 2/3 projects are without a completed business case; • 1/3 project is without a completed PID; • 3/3 projects are without a completed risk register which is key to reviewing the risks and controls in place within a project; • 3/3 projects are without a completed project plan, resulting in a lack of progress monitoring during the life of a project; • 3/3 projects are without a highlight report that updates management on key areas such as managing risks and their impact; and • 3/3 projects are without evidence of stakeholder communication for any of the projects that have commenced after creating the Authorities PMO function, despite stakeholders being outlined within the early project documentation. <p>Furthermore, we were informed that Property capital projects do not follow the process outlined within the PMO's lifecycle document. Consequently, they did not have evidence of the key documentation such as mandates, PID, business case and risk registers. These are key documents for successful project delivery and should be evident across all types of projects.</p> <p>Risk If project managers fail to follow the standardised process set out by the PMO and neglect certain documentation which should be completed, best practice will not be consistently followed throughout the Authority. This could result in the failure to deliver projects to the standard expected.</p> <p>Action 1. Launch Project Management e-Learning package. 2. Document a Property capital project process. 3. Introduce a PMO KPI relating to following the project process as part of finding 1.</p>	30-Jun-2022	Medium Priority	Head of Technology, Transformation & PMO		Update from Head of Technology, Transformation & PMO, 17/10/2022: Project Management eLearning package is ready to rollout. Launch plan to be agreed. <ul style="list-style-type: none"> • A Capital project process has been drafted and will be added to the Property strategy when it is refreshed later this year. • A KPI relating to following project process is captured in the draft KPI's in action BMKFA 2122 2228 PMO Assurance (1) PMO Key Performance Indicators.
BMKFA 2021 2120 Resource Management System (7)	<p>Finding: We noted that periodic user access reviews are not undertaken by the Resource Management Team at the authority when managing users access. Although a review of user access was completed in July 2020, there are no plans for this to continue.</p>	31-Dec-2021	Low Priority	Group Commander Resourcing & Projects		User access is to be reviewed once the permissions / role profile project has been completed – March 2022. I don't require all user access to be reviewed every 6 months, only

Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
User Access Reviews	<p>Risk: There is a risk of inappropriate access to the Authority's resources.</p> <p>Action: User access to be reviewed every six months.</p>					<p>when/if a staff member changes their role within the service which may include additional or less access.</p> <p>Due to be completed in April 2022.</p>
BMKFA 2021 2120 Resource Management System (8) Password Configuration	<p>Finding :</p> <p>Fire service rota does not use traditional password configuration to manage passwords at a group level. FSR uses an 'entropy plugin' to set password configurations for all users which are set at 40 bits. Although 40 bits of entropy is considered 'reasonable' in regard to network and company passwords, full control over password parameters cannot be implemented as FSR (the application) does not allow for editing of password configuration.</p> <p>Risk: There is a risk of unauthorised access to company resources due to weak password configuration, which increases the likelihood of a brute force attack.</p> <p>Action: Potential updating of the password configuration to be discussed with the supplier.</p>	31-Mar-2022	Low Priority	Group Commander Resourcing & Projects	0%	<p>Update from Group Commander Resourcing & Projects: This action is still outstanding.</p>
BMKFA 2122 2203 HR People Management (3) Performance and Monitoring – Monitoring of performance indicators	<p>Finding Concerns about staff performance are raised in employee appraisals, processing times are recorded in process notes for new starters and there is a Service Level Agreement in place for the HR Operations and Organisational Development service desks that includes delivery times for common requests and actions. However, there is no evidence to show that processing times are measured and monitored periodically.</p> <p>Risk If performance indicators are not in place there is a risk that instances of poor performance are not identified and rectified in a timely manner, leading to increased instances of key HR tasks not being performed accurately and/or in a timely manner.</p> <p>Action HR service level agreements (SLA) to be reviewed and reports run on a quarterly basis to monitor improvements and lead to efficiencies. Any areas where SLA's not met to be addressed in a timely manner.</p>	31-May-2022	Low Priority	Head of Human Resources	50%	<p>Update from Head of Human Resources 10/10/2022:</p> <p>Part completed. HR Operations Manager continues to review the HR service desk on a daily basis to ensure service levels are adhered to. The HR Operations team action and close the tickets in a timely manner.</p> <p>Any areas of concern are addressed between the HR Operations Manager and the HR Operations team member.</p> <p>Improvements in customer service and processes are implemented on an ongoing basis, in consultation with service users.</p> <p>SLA have not been reviewed recently due to competing priorities and no issues of concern being raised. Reports not run on a quarterly basis at present for the same reason.</p>
BMKFA 2122 2215 Blue Light Hub Post Project Evaluation (6) Implementation Strategy and Project Delivery-Resources	<p>Finding Additionally, there was a change of the Director of Finance and Assets in 2020. Ideally, this individual would have been present throughout the project to provide continuity from the top level. We were informed that the resources available to the Property Manager did not impact the project's outcomes. However, it made an impact on the individual's workload. Prior to occupation of the building, additional resources were allocated to the project from across the organisation to ensure a successful transition to the new station.</p> <p>Risk There is a risk that those who manage project deliverables in an operational setting do not have the necessary resources and training to manage them.</p>	30-Sep-2022	Low Priority	Director of Finance & Assets	50%	<p>Update from Director of Finance and Assets 17/10/2022:</p> <p>Following further internal discussion, the updated process will be incorporated into the updated Property Strategy covering 2023 to 2028. The new due date for this audit action will now become 31 March 2023.</p>

Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
	<p>Action Consideration to be given to allocating additional resources to major projects in the future. Guidance on this to be included in updated budget/project management guidance.</p>					
BMKFA 2122 2228 PMO Assurance (5) Centralised System	<p>Finding The Head of Transformation, Technology and PMO confirmed there was no centralised system for the storage of project documentation. There was evidence of a project dashboard, presented on an excel spreadsheet, which summarised the progress of all projects underway and in the review stage. This stated some key dates, the names of PMs and progress updates. However, there is no evidence of a system where documents can be accessed for each project. This would be beneficial from an audit trail perspective and allow PMs to follow previous projects' processes and learn from their mistakes. Risk Without a centralised system to store and access project documentation, there are missed opportunities to share important lessons learned across the organisation and avoid re-occurrences. Action Review the options available and launch a centralised system to store/review/access project documentation.</p>	30-Sep-2022	Low Priority	Head of Technology, Transformation & PMO	0%	Update from Head of Technology, Transformation & PMO, 17/10/2022: This has not yet been started but will be part of the scope of reviewing our Performance management system requirements
BMKFA 2122 2234 Procurement Governance and Compliance (2) CSOs - Version Control	<p>Finding BMKFA should ensure that the CSOs are version controlled, including: <ul style="list-style-type: none"> • Date of the last review; • Which officer/board conducted the review; and • The date of the following review. The Authority has a set of Contract Standing Orders (CSOs). An updated version is being drafted with a provisional submission date and approval in February 2022. However, the current set of CSOs does not contain a version control, so we could not ascertain if they were up to date or when the last review occurred. Risk If the CSOs are not version controlled, there is a risk that an outdated or wrong approach may be taken during the procurement process leading to substantial financial loss and non-compliance. Action Version control to be added to CSOs when the updated version is submitted to the Fire Authority for approval.</p>	30-Jun-2022	Low Priority	Director of Finance & Assets	90%	Update from Director of Finance & Assets 17/10/2022: The updated Standing Orders are being presented at the meeting of the Overview and Audit Committee on 9 November 2022
BMKFA 2122 2234 Procurement Governance and Compliance (5) Contract Register 44	<p>Finding We noted that the register did not include the name of the officer responsible for the contract in the register of contracts over £5,000, as required by Standing Order 2.2(g). As per regulation 31 of the Local Government Transparency Code 2015, it is only legally required for the Authority to state the local authority department instead of the officer responsible. We found that the department was included in the Authority's contract register. The Procurement Manager suggested that listing the officer was unfeasible given that officers in the authority often change departments. Risk If CSOs relating to the ownership of contracts is unclear, the responsibilities associated with the performance of a contract may be unclear, resulting in improper management of the agreement, and queries regarding specific agreements may be ineffectively communicated. Action This will be reviewed as part of the forthcoming update to CSOs.</p>	30-Jun-2022	Low Priority	Director of Finance & Assets	90%	Update from Director of Finance & Assets 17/10/2022: The updated Standing Orders are being presented at the meeting of the Overview and Audit Committee on 9 November 2022

Audit Title & Management Action	Description	Due Date	Priority	Action Owner	Action Progress	Latest Note
BMKFA 2122 2234 Procurement Governance and Compliance (6.1) Compliance with CSO 8.1 (c)	<p>Finding In two cases where the procurement was conducted under a partnership, a comparative assessment was made for the applicants regarding technical competence and financial health. However, no evaluation was made of the health and safety record of the potential service providers as per Standing Order 8.1(c) "Where the total value of the contract is more than £50,000, Officers must ensure that potential candidates are asked to provide sufficient detail to check their health and safety record".</p> <p>Risk If CSOs related to the assessment of a contractor's health and safety standards are ignored, The Authority may procure services from suppliers with health and safety standards below that expected or required by the Authority, potentially leading to non-compliance with standards that the Authority is required to adhere to.</p> <p>Action Standing Orders to be reviewed and guidance on the updated Orders and compliance to be added to guidance to be issued to Officers.</p>	30-Sep-2022	Low Priority	Procurement Manager		Update from Procurement Manager, 06/10/2022: Standing Orders progressing through internal governance process. <ul style="list-style-type: none"> • Approved at BTB • Approved at SMB • Due to O&A November 2022 • Final approval at Fire Authority meeting December 2022 On target to be complete internal governance approval process by December 2022
BMKFA 2122 2234 Procurement Governance and Compliance (6.2) Compliance with Contract Standing Orders	<p>Finding CSO 6.1(l) states that an officer must "retain evidence that the above steps (6.1(a)-(l)) have been carried out for examination by internal or external auditors;". In all three cases tested that were not conducted in partnership, evidence had not been retained regarding various steps required before letting a contract as per CSO 6.1, including estimation of the value of the contract, ensuring there is sufficient budgetary provision, and taking into account the outcome from any strategic service review.</p> <p>Risk Where a clear audit trail is not maintained, the Authority may be in non-compliance with document/evidence retention regulations, and effective review and lessons learned exercises related to the suitability of the procurement, as well as the performance of the procurement team more generally is not possible.</p> <p>Action Standing Orders to be reviewed and guidance on the updated Orders and compliance to be added to guidance to be issued to Officers.</p>	30-Sep-2022	Low Priority	Procurement Manager		Update from Procurement Manager, 06/10/2022: Standing Orders progressing through internal governance process. <ul style="list-style-type: none"> • Approved at BTB • Approved at SMB • Due to O&A November 2022 • Final approval at Fire Authority meeting December 2022 On target to be complete internal governance approval process by December 2022

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee - 9 November 2022

Report title: Internal Audit Report – Update on the 2022/23 Annual Audit Plan

Lead Member: Councillor David Carroll

Report sponsor: Mark Hemming – Director of Finance and Assets

Author and contact: Maggie Gibb – Internal Audit Manager,
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Action: Noting.

Recommendations: That Members note the progress on the Annual Internal Audit Plan

Executive summary: The purpose of this paper is to update Members on the progress of the annual Internal Audit Plan since the last meeting.

Work has progressed according to the approved 2022/23 plan, and regular discussions have been held with the Director of Finance and Assets to monitor progress.

The fieldwork for the HR/ Payroll Process Mapping review has been completed and the quality assurance review is being undertaken before the draft report is issued.

The Pensions Administration audit fieldwork has been completed and the quality assurance review is being undertaken before the draft report is issued.

Terms of references for the Business Continuity and Risk Management audit are currently being drafted, and fieldwork will commence in November.

The Inspection and Operational Plan Assurance review is scheduled for December.

The Core Financial Controls audit will be undertaken in quarter four.

The final reports will be presented to Members at the next Overview and Audit Committee meeting.

Financial implications: The audit work is contained within the 2022/23 budget.

Risk management: There are no risk implications arising from this report.

Legal implications: There are no legal implications arising from this report.

Privacy and security implications: There are no privacy and security implications arising from this report.

Duty to collaborate: Not applicable.

Health and safety implications: There are no health and safety implications arising from this report.

Environmental implications: There are no environmental implications arising from this report.

Equality, diversity, and inclusion implications: There are no equality and diversity implications arising from this report.

Consultation and communication: Not applicable.

Background papers:

Appendix	Title	Protective Marking
A	Progress against the 2022/23 Internal Audit Plan	Not applicable

Appendix A – Internal Audit Plan 2022/23

Auditable Area	Key Audit Objectives	Days Budget (Timing)	Risk Assessed	Status Update
Core Financial Controls	<p>To fulfil our statutory responsibilities, we will undertake work to provide assurance over key controls within the financial governance framework, which consists of the following key systems:</p> <ul style="list-style-type: none"> • Financial Control/Monitoring • Procure to Pay • Debtors • Capital • Financial Regulations • General Ledger • Reconciliations • Treasury Management <p>All audit findings from the 21/22 review will be followed-up to ensure that actions have been fully implemented.</p>	30 days	High	Audit scheduled for Quarter 4.
HR/Payroll – Process Mapping	<p>Due to the process weaknesses in HR/Payroll identified in the 20/21 Core Financial Controls audit, end-to-end process mapping will be undertaken in this area, followed by substantive testing of the key payroll controls to ensure that control weaknesses have been addressed. This audit was planned for FY21/22 however, was deferred due to new staff being recruited into the Payroll Team during the year. Work is planned for Q1 as the new officers will have settled into their roles.</p>	15 days	High	Fieldwork complete, quality assurance review in progress.
Business Continuity and Risk Management	<p>The Authority's objective for the system is to ensure that the Fire and Rescue Service have plans in place to manage incidents and emergencies that may have an adverse effect on service delivery. The scope will cover the Business Continuity Policy, guidance and risk management processes and IT Disaster Recovery planning to ensure the Service also has associated continuity plans covering critical areas. The audit will involve discussion with the officers and staff who are responsible for the management of the risk controls as well as compliance testing to identify whether the controls in place to minimise the risks are operating effectively.</p>	15 days	High	Audit being scoped, fieldwork commencing in November.
Pensions Administration	<p>The main objective of the Pension function is to ensure that the correct employer and employee contributions are received; retirees are paid the right amount at the right time, and the pension fund is managed effectively and in line with legislative requirements.</p>	10 days	High	Fieldwork complete, quality assurance review in progress
Inspection and Operational Improvement Plan Assurance	<p>To provide assurance on the improvement plan and ensure that agreed actions are being implemented and agreed timescales are achievable.</p>	10 days	High	Audit being scoped, fieldwork planned for December.
Contingency	<p>A contingency has been included within the audit plan to provide flexibility and in recognition of an expected but as yet unspecified need. If the days remain as at the beginning of Q4 then they will be used to review some key Governance areas such as Project Management and Contract Management, with the agreement of the Director of Finance and Assets.</p>	10 days	N/A	
Follow-Up General	<p>To ensure all outstanding medium and high recommendations raised in previous audits are implemented.</p>	10 days	Various	
Corporate Work	<p>A proportion of the total audit resource is made available for 'corporate work'. Corporate work is non-audit specific activity which still 'adds value' or fulfils our statutory duties. Examples of this type of work include attendance and reporting to Management and Committee, and audit strategy and planning work. This also includes developing the Audit Plan, writing the Annual Report and undertaking the annual Review of Effectiveness of Internal Audit.</p>	10 days	N/A	
Total		110 days		

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: Procurement Strategy 2022-2026 and Review of Standing Orders Relating to Contracts

Lead Member: Councillor Matthew Walsh

Report sponsor: Mark Hemming, Director of Finance and Assets

Author and contact: Ronda Smith, rondasmith@bucksfire.gov.uk

Action: Decision

Recommendations: That the Overview and Audit Committee approve the recommendations below for submission to the Fire Authority:

That the Authority be recommended to approve:

1. The Procurement Strategy 2022-2026 (Appendix 1)
2. The Standing Orders Relating to Contracts as amended (Appendix 2)

Executive summary:

The aim of the **Procurement Strategy** is to set a clear framework for the procurement of goods, works and services within the Authority. The strategy supports the development of a longer-term vision of how procurement can help to deliver the Authority's aims and outcomes while working within a value for money framework and standing orders relating to contracts to achieve efficiency savings.

The previous Procurement Strategy covered the period 2015-2020. Publication of the latest Strategy was delayed while procurement regulations were being updated following Britain's withdrawal from the European Union. Work has continued during the interim period, and this is detailed within the latest Strategy.

In order to support the aims of the Procurement Strategy, it is also recommended that the Authority approves the following changes to **Standing Orders Relating to Contracts**:

- References to EU replaced with UK equivalent following Brexit.
- Changes to transparency rules relating to Public Sector Sub-Central Bodies noted, including obligation to publish contracts to relevant UK Cabinet Office portals; Contracts Finder & Find a Tender Service (FTS) .
- Item 2.2(g): Contract value amended to £25,000 to align with latest Public Sector sub-central bodies threshold and SME or VCSE added

- Item 4.3 Exemptions – Value increased from £50,000 to £75,000 to align with Clause 7.1 threshold value
- Item 5.3: Standard contract clauses updated to include Insurances
- Item 7.1: Threshold value increased from £50,000 to £75,000
- Item 7.2: Contract Value Thresholds updated to align with latest requirements of Public Sector Sub-Central Bodies in accordance with PCR (2015) transparency obligations, and support collaborative working alignment, as follows:
 - 7.2(a) Threshold value amended from ‘below £10,000’ to ‘below £25,000’
 - 7.2(b) Threshold value range of ‘£10,000 up to £50,000’ amended to a value range of ‘£25,000 to £75,000’
 - 7.2(c) Threshold value amended from ‘over £50,000’ to ‘over £75,000’
 - 7.2(d) Updated ‘Over the Public Contract Regulations Financial thresholds’ in accordance with Cabinet Office Find a Tender Service (FTS) threshold values, effective from 01 January 2022
- Item 8.1(d): Added Insurance checks
- Item 8.3: Threshold value increased from £50,000 to £75,000
- Item 9.4(c): Added ‘data protection regulations’
- Item 9.4(d): Added ‘proportionate levels of insurance in place.....’
- Item 16.3: Added ‘Contract Award Notices publication requirements’
- Items 17.1 & 17.2: Threshold value of contracts requiring to be ‘Sealed’ increased to £500,000 to align with collaborative partners in the delivery of effective and efficient collaborative working.
- Item 19.1: Termination of contract value reduced from £50,000 to £25,000, to ensure appropriate Notices are published to relevant Government portals
- Item 21.2: Assets Disposal- Net Book Value increased from £10,000 to £25,000

Financial implications:

Successful delivery of the Procurement Strategy will support the Authority in maximising the value for money achieved through procurement activities.

In reviewing the Standing Orders Relating to Contracts the Authority can demonstrate accountability of its use of resources by updating in line with latest legislation and best practice guidance appropriate to the good governance of the Authority and the Service.

Risk management:

By agreeing the Procurement Strategy as drafted, the Authority will reduce or omit the risk of failure in the following areas:

- The consequences of breaking Competition Law can result in penalties or fines, bad publicity, compensation claims from suppliers or in serious cases of breach, Directors of organisations can be disqualified or even sent to prison.
- The principles of Offer and Acceptance under Contract Law are complied with.
- Contract Standing Orders and Financial Regulations are complied with.
- Achieving value for money.
- Ensure a clear audit trail is available for every decision reached under the transparency agenda.
- Individuals will be aware of the policies and procedures and therefore can be held accountable for actions and decisions.
- Planning for future requirements in a timely manner and ensuring no 'waste'
- Being environmentally responsible.
- Contributing to overall Authority objectives.

Standing Orders Relating to Contracts ensure that contracts are appropriate for their purpose, provide the right balance between price and quality, and are procured in an open way that demonstrates probity and compliance with the Authority's policies and relevant legislation.

Legal implications:

There are a number of legislative requirements for good procurement management and these are set out in the body of the draft strategy.

The terms of reference reserve to the Authority the power to vary the Standing Orders Relating to Contracts, having considered any recommendations from the Overview and Audit Committee.

Privacy and security implications:

No direct impact.

Duty to collaborate:

It is proposed to increase the minimum threshold for requiring three written quotations from £10,000 to £25,000, and to increase the threshold for requiring a publicly advertised competitive tender process from £50,000 to £75,000.

This will help facilitate further collaborative procurement with Oxfordshire & Royal Berkshire fire and rescue services through the alignment of threshold values and procurement processes.

UK Public Contract Regulations (PCR) 2015 transparency rules include the obligation of Sub-Central Bodies to publish all Contract Notices with a value of £25,000 and above, to the Cabinet Office Contracts Finder. Aligning the Authority's minimum

threshold to the latest UK PCR (2015) transparency minimum threshold will support effective, efficient and transparent procurement.

Health and safety implications:

No direct impact.

Environmental implications:

One of the key areas within the Strategy is social value, which is about improving economic, social and environmental wellbeing from public sector contracts over and above the delivery of the services directly required.

Equality, diversity, and inclusion implications:

The strategy specifically sets out the aim to ensure all processes are transparent, accountable and fair to all parties.

Equality Impact table is included in the Strategy document.

An Equality Impact Assessment (EIA) has not been completed, where specific actions are undertaken in the future as a result of this strategy, it is expected that a specific EIA will be completed as appropriate.

Consultation and communication:

Communication to our staff and suppliers will be made regularly in line with the action plan within the Strategy.

Background papers:

Procurement Strategy 2015-2020, Executive Committee, 19 November 2014 - https://bucksfire.gov.uk/documents/2020/03/191114_exec_committee_papers.pdf (pp.47-65).

Standing Orders Relating to Contracts, February 2020 - https://bucksfire.gov.uk/documents/2020/03/contract_standing_orders_-_february_2020.pdf/

Appendix	Title	Protective Marking
1	Procurement Strategy 2022-2026 (v1.0(004))	
2	Standing Orders Relating to Contracts (v1.0(004) – with tracked changes)	

PROCUREMENT STRATEGY 2022 - 2026



Buckinghamshire Fire and Rescue Service

www.Bucksfire.gov.uk

Version 1.0(004)



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Bucks Fire Procurement Strategy (the Strategy)

Introduction

The aim of the Strategy is to set a clear framework for the procurement of goods, works and services within the Authority. The strategy supports the development of a longer-term vision of how procurement can help to deliver the Authority's aims and outcomes while working within a value for money framework and standing orders relating to contracts to achieve efficiency savings. It supports the following aims in our Corporate Plan:

- To offer best value for money to our residents and businesses & ensure that the Service is compliant with regulatory requirements and recognised 'good practice' standards and can readily evidence this at all times.
- To ensure that risk, performance, financial and management information is accurate, relevant and delivered to users in an efficient, timely, effective and secure way.
- To provide high quality, cost effective assets and equipment with sufficient flexibility to adapt to changing requirements.

The Strategy has been developed with reference to the National Fire Chiefs Council (**NFCC**) National Procurement Strategy (which is based on the Local Government National Procurement Strategy).

The Strategy focuses on three key themes, which are then further broken down into a number of key areas. The three key themes are:

- Leadership
- Commercial Practice
- Delivering Local Benefits

To accompany the NFCC Procurement Strategy, a toolkit was developed that allows services to identify their level of maturity within each of these areas and themes. The toolkit then allows services to set local goals and assess their progress against these goals.

In addition to the 'Themes', the strategy also identifies four enablers:

- Developing our Staff
- Procurement Systems & Data Transparency
- Innovation
- Embedding Change

Background

Fire Commercial Transformation Programme (FCTP)

The NFCC have implemented a package of reforms in the commercial operation of the sector under the umbrella of the Fire Commercial Transformation Programme. Fire and Rescue Services should set their local strategy recognising the principles of the FCTP:

Standardisation - developing agreed standard specifications that are developed by the sector, are evidence led and operationally driven.



Aggregation - FRS that bring larger committed volumes to market typically get better deals. Where possible, i.e. non-fire specific goods and services, consider the wider purchasing power of other public sector organisations.

Collaborative Supplier Management - joined-up strategic engagement, supplier performance and contract management. Regardless of whether FRSs work collaboratively on procurement there is a need to more effectively manage Suppliers, we often use the same Suppliers but don't talk to each other about issues (or positive aspects such as innovation) we are having. This can be managed more effectively through managing our suppliers more collaboratively.

Duty to Collaborate

The Policing and Crime Act 2017 introduced a new duty on the police, fire and rescue and ambulance services to keep collaboration opportunities under review and, where it is in the interests of their efficiency or effectiveness, to put those collaboration opportunities into practice. The duty is deliberately broad to allow for local discretion so that the emergency services themselves can decide how best to collaborate for the benefit of their own communities.

Fire & Rescue National Framework

The Fire & Rescue National Framework includes for the first time a section on Commercial Transformation:

Each fire and rescue authority must demonstrate that it is achieving value for money for the goods and services it receives. Every fire and rescue authority should look at ways to improve its commercial practices including whether they can aggregate their procurement with other fire and rescue authorities and other local services (e.g. police) to achieve efficiencies.

Fire and rescue authorities must demonstrate and support commercial transformation programmes where appropriate. Each fire and rescue authority should be able to demonstrate full awareness of the objectives to standardise requirements, aggregate demand and manage suppliers of products and services within their commercial arrangements.

Fire and rescue authorities must ensure that their commercial activities, be that the placement of new contracts or the use of existing contracts, is in line with their legal obligations, including but not limited to the Public Contracts Regulations, the Public Services (Social Value) Act 2012, the Modern Slavery Act 2015 and transparency commitments.

HMICFRS

Independent inspection of fire and rescue authorities in England – and the fire and rescue service they oversee - is delivered by Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS). The chief fire and rescue inspector and inspectors of fire and rescue authorities in England have powers of inspection given to them by the Fire and Rescue Services Act 2004, as amended by the Policing and Crime Act 2017.

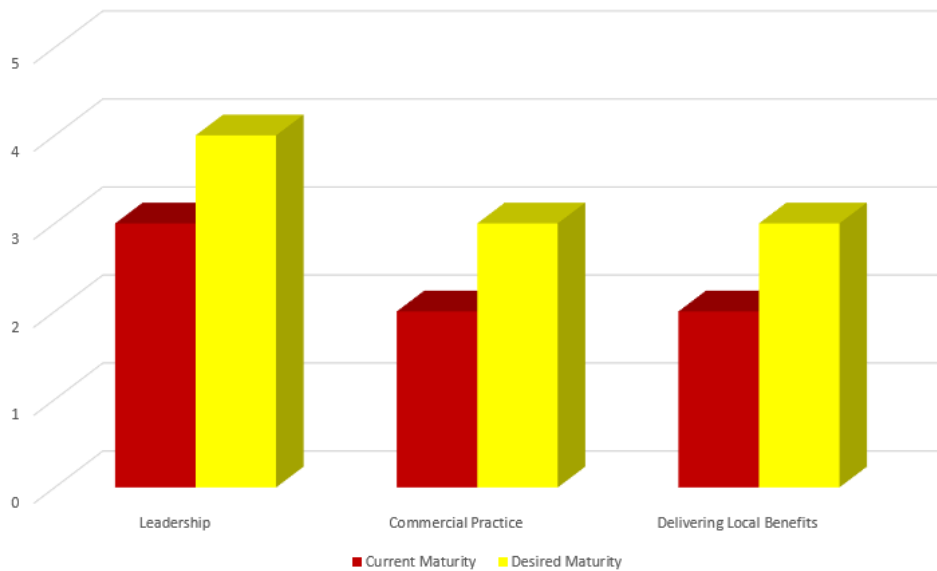
The inspectorate will provide a crucial assurance function to consider how effective and efficient fire and rescue authorities are, how well they manage their people and whether they are fulfilling their statutory obligations. The inspectorate will also highlight good practice and identify areas where improvement is needed so that remedial or constructive action can be taken.



Toolkit Self-Assessment

The chart below shows the output from the toolkit, highlighting the current maturity level versus the desired maturity level for each theme:

2018 National Procurement Strategy - Current Maturity vs. Desired (2020) Maturity



In tabular form this can be summarised as:

Theme	Current Maturity Level	Desired Maturity Level
Leadership	Mature	Leader
Commercial Practice	Developing	Mature
Delivering Local Benefits	Developing	Mature

The following sections look at each of the themes, and key areas, in more detail. The Service aspires to be assessed as mature in each of the three themes. A key part of this Strategy is the action plan on page 12 which details actions to be taken to achieve this.

Theme 1: Leadership

Key Area: Engaging Fire Authorities and Senior Managers

MATURE - Leadership engaged with commercial and procurement issues, routinely taking advice at key decision points.

This refers to the Fire Authority and the corporate management team valuing and benefiting from commercial and procurement advice at all stages of decision making including early advice on major projects. Good commercial and procurement advice (provided in-house wherever possible) can have a decisive impact on the outcome of a project. It is important that executive bodies and senior managers engage with commercial and procurement issues from the outset.

Influence & Impact	Developing - Contribution of commercial and procurement has been noted on isolated projects.
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Mission & Strategy	Mature - FRS has approved a procurement strategy aligned to corporate and service strategies.
Process	Mature - Structured approach to project management clearly defining roles and responsibilities in relation to commercial and procurement advice.
Training & Development	Developing - Some FRA members and senior managers have attended training courses.

Key Area: Collaboration

MATURE - Designing and implementing solutions as a single team in high value/high risk projects.

This refers to a one team approach to the design and implementation of solutions where Fire and Rescue Services work together as a single team to design and implement solutions. A team approach makes best use of limited resources and can lead to innovative solutions and better results.

Culture	Leader - Working as a single team is the norm when the FRS cooperates with external partners.
Process	Innovator - Peers acknowledge the transformational results being achieved through collaborative working.
Training & Development	Minimum - Training and developments programmes do not cover collaborative working

Key Area: Engaging Strategic Suppliers

DEVELOPING - The Fire and Rescue Service acknowledges the business case for improved SSRM and can demonstrate isolated activity.

This refers to the process of identifying strategic suppliers and engaging with them to improve performance, reduce cost, mitigate risk and harness innovation. Effective management of strategic supplier relationships can deliver a range of benefits including improved outcomes for the public, added social value, reduced cost, reduced risk and innovation.

Data Collection & Analysis	Developing - FRS has partial data and intelligence on its suppliers and is developing criteria it will use to identify strategic suppliers.
Engagement of Existing Strategic Suppliers	Developing - 1. Evaluating toolkits. 2. Piloting engagement with a major supplier.
Early Engagement with Future Strategic Suppliers	Developing - 1. Some information on forward plans published. 2. Experience of early market engagement on at least one FRS project.

Theme 2: Commercial Practice

Key Area: Creating Commercial Opportunities

DEVELOPING - Isolated examples of the FRS examining commercial opportunities to drive value creation and/or reduce current costs.



This refers to how Fire and Rescue Services promote value creation through the way it plans its major third-party expenditure (works, goods and services), reviews business options (make or buy) and engages with, and influences, markets and potential suppliers. Commercial opportunities can be created in many different ways, from conventional means such as increasing returns on assets to the way it engages with its partners and third party contractors.

Forward Planning	Mature - 1. Forward planning is the norm for all strategic contracts. 2. Opportunities to create new revenue streams are considered. 3. Procurement encouraged to contribute ideas for revenue generation in the forward planning process.
Options Appraisal	Developing - 1. Undertaken for high profile / high value projects and exercises. 2. Evaluation criteria sometimes incorporating commercial and social considerations.
Market & Supplier Research & Analysis	Developing - 1. Undertaken when a new requirement is sought and/or where there have been problems on an earlier contract. 2. Research sometimes includes looking for commercial opportunities or gaps in the market
Tendering	Leader - 1. Tendering is seen as a commercial process . 2. Documentation is prepared to make it attractive to take part and focused on innovation and opportunities. 3. Procurement is seen as an integral contributor to the planning phase.
Performance Reporting	Developing - 1. Performance reporting is undertaken but restricted to specific procurement exercises and some departments. 2. Summary reports are produced by Procurement for service heads on an annual basis.
Post Contract Review	Developing - 1. Post contract reviews undertaken, by most departments and/or identified categories of expenditure. 2. Seen as being an integral part of improving outcomes and identifying commercial opportunities

Key Area: Managing Contracts & Relationships

DEVELOPING - Identified the need to change and improve. Basic policies, procedures and systems in place.

Description: This refers to the effective management and control of all contracts from their planned inception until their completion by the appointed contractor(s). It covers the supporting policies, procedures and systems needed to undertake it, together with broader issues from the identification and mitigation of risk, successful and timely delivery of outcomes and performance, effective control of cost and variations and the maintenance of clear communication and operational relationships with contractors. Poor contractor performance or commercial failure can seriously damage a fire and rescue services reputation and its ability to deliver effective and efficient services to the local community.

Information Storage & Accessibility	Mature - 1. Contracts Register is dynamic and provided through a purpose built solution. 2. Full accessible to the whole FRS with read/write/edit and search capabilities 3. Complete data sets for all major third party spend.
Change Control	Developing - 1. A change control policy exists for capturing the details of any changes or variations made to some contracts 2. Standard documentation is available and used by some departments.
Savings & Benefits Delivery	Minimum - Savings and benefits are delivered from some contracts but not a part of any formal process.



Recognition & Cultural Acceptance	Developing - 1. Recognition by the FRS of value of contract and relationship management. 2. Job roles are designated as contract manager or contain specific contract and management activity in their job descriptions in some departments.
Skills & Knowledge	Minimum - Staff have limited access to any contract and relationship management skills and knowledge programmes.

Key Area: Managing Strategic Risk

MATURE - Taking a pro-active approach to strategic risk management with all vulnerable areas identified and mitigating policies and plans in place.

This refers to the impact of an external event, passing of a new statute, or illegal activity upon business as usual, reputation and/or financial health of the Fire and Rescue Service. The Service should have a series of actions and policies designed to reduce or eliminate the probability of a perceived risk occurring and minimising the detrimental effects / impacts that may occur should it materialise. The occurrence of any risk, particularly when it could be foreseen, can have a devastating impact on the fire and rescue services reputation and the lives of the people it serves, the quality of the services it provides and even its financial viability.

Fraud & Financial Loss	Mature - Systems in place to target both financial loss and fraud with a proactive approach to issues such as irregular transactions, duplicate payments, and fake creditors/invoices.
Supply Chain & Contractor Failure	Developing - FRS aware of the risks and issues involved and attempting to identify where this may occur.
Modern Slavery (Legislation)	Mature - 1. Expenditure categories/contracts with potential for modern slavery identified 2. Basic checks made with appropriate contractors.
GDPR (Legislation)	Mature - Actively identifying and reviewing contracts where data issues could occur.
External Events (e.g. Brexit)	Developing - Keeping abreast with National FRS/Central government briefings and taking appropriate action, as and when required.

Theme 3: Delivering Local Benefits

Key Area: Obtaining Social Value

DEVELOPING - Compliant with SV Act and pro-actively seeking SV engagement in a few key contracts only.

Social Value (SV) refers to wider financial and non-financial impacts of programmes, organisations and interventions. Social Value is about improving economic, social and environmental wellbeing from public sector contracts over and above the delivery of the services directly required.

Policy & Scope	Developing - No specific policy in place. Only complies with the Act (i.e. Services above UK procurement threshold)
Internal Management	Developing - No senior officer given a direct reporting responsibility for social value



Measurement: Themes, Outcomes & Measures (TOM's)	Developing - Measuring some limited form of social value e.g. SME spend.
Commissioning	Developing - Some attention given in larger contracts to commissioning for social value
Procurement	Mature - 1. Social Value requirements included in all relevant tenders as a part of quality score 2. SV weighting as a part of quality score 5-10%.
Market Engagement & Partnerships	Developing - Initial but ad hoc steps taken in market engagement around SV
Contract Management	Developing - Contracts not monitored in any coherent way for social value after award
Cross Sector Collaboration	Developing - Limited collaboration through joint occasional contract with other public sector bodies held regarding social value
Reporting	Minimum - Social value not considered important
Governance & Accountability	Minimum - No visibility of issue at FRA meetings

Key Area: Engaging Local SME's

DEVELOPING - SME's are engaged in a few key contracts only.

SME's (a business with fewer than 250 employees and turnover of less than £50m) play a major role in creating jobs and generating income for those on low incomes, they help foster economic growth, social stability, are a source of innovation and contribute to the development of a dynamic private sector.

Policy & Scope	Developing - 1. Commissioners have started to communicate what local needs are and the desired market outcomes. 2. No policy or strategy in place for addressing SMEs
Facilitating Good Relationships with SME's	Developing - Relationships between SMEs and other providers are not facilitated. It is not considered to be an area where intervention is needed or appropriate. As a result of this, there is an absence of consortia and networking in the locality.
Commissioning	Developing - 1. There is some knowledge of how SMEs' local expertise can add value. 2. A limited number of SMEs are invited to contribute to the commissioning process. 3. There are some general engagement events.
Market Engagement & Partnerships	Mature - 1. SMEs are seen as part of a diverse supply chain. 2. There is awareness of SMEs' need for support to effectively contribute to the commissioning process.
Procurement	Developing - 1. There is a prescriptive procedure for all procurement exercises and little awareness of how SMEs might engage 2. There is engagement with a limited number of SMEs ahead of notices of tenders being published.
Contract Management	Developing - Some parts of the FRS manage contracts with SMEs but this is not consistent. There is no particular expectation on how subcontracting relationships with smaller SMEs should be conducted.
Governance, Accountability & Reporting	Developing - Some analysis of SME spend is captured but no actions are taken based on the information gathered



Enablers

A number of cross-cutting issues have been identified that will need to be addressed by Fire and Rescue Services. These are referred to as the 'enablers' of the strategy.

Developing Staff

Developing – Recruits staff with professional qualifications and responds to ad hoc requests for training and development.

Where We are Now

Procurement staff competencies are maintained with ongoing training to meet Public Procurement legislative changes. Networking across UK fire service & other public procurement practitioners enables best practice is adopted within the Service.

An introduction to procurement working practices within the Service is provided as part of new Officers induction training in relation to financial regs and contract standing orders.

Future Plan

Further support and training of staff who have involvement in procuring goods & services across all levels of the organisation including a mandatory online procurement training package. The introduction of the BMKFA Contract Management Framework for staff with contract management responsibilities, supported by an online contract management training package.

Procurement Systems & Data Transparency

Mature – Use of an integrated Procure to Pay (P2P) system in conjunction with online ordering for all services/products fully automated and paperless. Comprehensive procurement, contract management and spend analysis information available online to all stakeholders with appropriate search and filtering. Use of electronic tendering and quotation system for all tenders.

Where We are Now

Electronic procurement is fully embedded and utilised for all tenders within our e-tendering portal. This enables the team to manage tenders effectively and efficiently and build resilience in this process, including the effective management and storage of all procurement documents. The market now accepts online tendering and communications as standard. The national strategy supports the wider development of e-commerce. The Authority will support this through the continued development and use of electronic tools, the virtual marketplace and sharing of knowledge through secure media collaboration platforms.

Purchase to Pay (known as P2P) – This assists the Authority to streamline its requisition through to payment processes through automated work flow, thereby, reducing transactional costs and enabling improved access to information and reporting.

Automated Budget Approval, Procurement Compliance & Supplier Management – The Integra finance system provides the Authority with a streamlined system incorporating expenditure



commitment controls, procurement compliance gateway utilising the Buyer Approval process and supplier management information and reporting.

Contract Catalogues – The Integra system supports the use of ‘catalogues’ to provide all staff can access contract information for the purchase of contracted goods and services. This ensures the correct suppliers, goods and services are purchased in accordance with approved contract terms and conditions.

Purchase cards are used for low value transactions. This arrangement is already established. Expenditure is monitored on a monthly basis within the Integra finance system. This enables officers to purchase low value commodities and services where there is no corporate contract in place and is below the threshold for competition. This reduces the transaction cost to the Authority and enables the supplier to receive immediate payment.

In accordance with Local Government Transparency Code 2015, the Authority publish the following the following transparency reports & contract information:

- *Expenditure exceeding £500*
- *Government procurement card transactions*
- *Procurement information for expenditure of £5,000+*
- *Contract Register for contracts of a value of £25,000+*

The Authority, as a sub-central body, meets the legal obligations to publish all contracts below UK procurement threshold with a value of £25,000+ on Contracts Finder, and publish above UK procurement threshold to Find a Tender Service (FTS), in accordance with Public Contracts Regulations (PCR) 2015 and Public Procurement Notice (PPN) 09/21,

Innovation

Mature – Outcomes based procurement and market shaping are the ‘standard’ way of doing things. Innovative procurement approaches not just applied to technology but to established services.

Where We are Now

Forward planning for contracts is undertaken collaboratively to maximise leverage and commercial attractiveness to the market. Arrangements for combined group (collaboration) of FRSs joint projects provide for early commercial and procurement advice from the FRS. Contracts register is used for forward planning and financial modelling for BMKFA and collaborative projects.

Establishment of the Thames Valley Collaborative Executive Board enables FRA members and senior managers to play their role in combined group (collaboration) of FRSs projects.

Standard specification of requirements established across the Thames Valley fire services for Vehicles and operational equipment has resulted in other FRSs regarding our approach as exemplary practice and seek to learn from us.

Outcomes from market and supplier research are used in collaboration with other organisations in the wider public sector for seeking and exploiting new commercial opportunities



Embedding Change

Mature – Procurement change comprehensively applied across multiple projects and departments.

Where We are Now

Procurement procedures, policies and strategies, including the Authority's Standing Orders relating to Contracts updated in accordance with Public Contracts Regulations (PCR) 2015 to ensure compliance with changes to procurement legislation

Procurement attendance at Business Transformation Board (BTB) and Leadership Group ensures early planning and development of projects incorporate compliance with the Authority's governance, policies, strategies and procurement legislation..

Contract changes and variations managed by procurement working with contract leads. Details used to inform impacts on budgets and assessing contractor risk / performance. Cost / time overruns reported to service leads and finance team to support budget forecasting and planning as part of the Authority's financial budget planning process. Contract catalogues for approved goods and services monitored regularly as part of ongoing contract management process with budget managers/department leads.

Future Plan

Procurement KPI's to be established and reported to the Performance Management Board (PMB).

Recognise and promote the value of EDI throughout the procurement process

Ensure sustainable procurement considerations are embedded into procurement processes to generate benefits not only to the organisation, but also to society and the economy, whilst minimising damage to the environment. The Authority will build its procurement sustainability strategy around three principles:

- *Environmental: Seeking to minimise any negative environmental impacts of goods and services purchased, across whole life cycle from raw materials extraction to end of life.*
- *Social: Managing and monitoring supply chains to ensure that fair contract prices and terms are applied and that ethical, human rights and employment standards are met.*
- *Economic: This principle relates not only to obtaining value for money from contracts, across the whole life of the product or service, but also ensuring as far as possible under relevant procurement law, that local businesses, particularly Small and Medium sized Enterprises (SME's) can benefit from our procurement processes.*



Action Plan

The previous Procurement Strategy covered the period 2015-2020. Publication of the latest Strategy was delayed while procurement regulations were being updated following Britain’s withdrawal from the European Union. Work has continued during the interim period, which is recorded within the Action Plan of the latest Strategy.

The action plan below has been produced following a review of the self-assessment toolkit and the actions required to be assessed overall as mature in each theme:

Year	Activity	Themes and Key Area Addressed
2021-22	<ul style="list-style-type: none"> • Critical Supplier annual review and formal ‘health check’, including 3rd party suppliers. Supplier viability ‘Real Time’ monitoring by external monitoring service. • 3 year Future pipeline published to the market via NFCC. Early engagement with market via national supplier events. Publication of contracts register with future planned review dates. • A formal process in place capturing savings and accruing benefits from contracts. 	<ul style="list-style-type: none"> • Leadership – Engaging Strategic Suppliers - Data collection & Analysis • Leadership – Engaging Strategic Suppliers- Early engagement with Future Strategic Suppliers • Commercial Practice - Managing Contracts & Relationships – Savings & Benefits
2022-23	<ul style="list-style-type: none"> • Procurement KPI’s, including benefits/savings, to be established and reported to PMB • Procurement to support Post Contract Review process • Change control policy implemented across the board for all contract changes and variations as part of Contract Management Procedures. Standard documentation to be available and used in all circumstances across all departments. • Procurement Staff to have access to regular contract management training. Contract Management guide to be made available to all staff. • Continuous improvements to the sustainability outcomes of procurement activity for both new and ongoing contracts, incorporating the three principles of Environmental, Social & Economic. 	<ul style="list-style-type: none"> • Commercial Practice – Creating Commercial Opportunities - Performance Monitoring • Commercial Practice – Creating Commercial Opportunities - Post Contract Review • Commercial Practice - Managing Contracts & Relationships – Change Control • Commercial Practice – Managing Contracts & Relationships – Skills & Knowledge • Enabler – Developing Staff • Delivering Local Benefits – Social Value & Engaging Local SME’s • Enabler – Embedding Change- Promote EDI & Sustainability through procurement process



<p>2023-24</p>	<ul style="list-style-type: none"> • Post Contract Review process to be established as part of a wider organisational Contract Management Strategy • Savings captured from contracts and benefits realisation applied uniformly across the FRS and reported to CFO/Executive body level. • Contract & Relationship Management is acknowledged as a core competency. Briefings on Contract & RM are given as part of Officer induction and budget manager training. Refresher programmes are available to all staff involved in Contract & RM. • Engagement with SMEs ahead of publishing a notice of tender. There is an attempt to better understand the capacity and capability of SMEs and adapt procurement processes to reflect this. 	<ul style="list-style-type: none"> • Commercial Practice – Post Contract Review • Commercial Practice - Managing Contracts & Relationships – Savings & Benefits Delivery • Commercial Practice – Managing Contracts & Relationships – Skills & Knowledge • Delivering Local Benefits – Engaging Local SME’s -
<p>2024-25</p>	<ul style="list-style-type: none"> • Contract & Relationship Management recognised by the FRS as being essential. Designated Contract & RM roles. Performance is reviewed with job holders in their annual appraisals. • Social Value policy and processes adopted across project scoping, tendering, evaluation & contract management. SV to be monitored and reported regularly 	<ul style="list-style-type: none"> • Commercial Practice - Managing Contracts & Relationships – Recognition & Cultural Acceptance • Delivering Local Benefits – Obtaining Social Value
<p>2025-26</p>	<ul style="list-style-type: none"> • Review Strategy following updated Public Safety Plan and Corporate Plan for 2025 onward. 	<ul style="list-style-type: none"> • Refreshed Strategy consistent with latest plans. Align dates with future Public Safety Plan & Corporate Plan



The Equality impact table

Does the activity have the potential to impact differently on individuals in different groups? To complete the table ✓ the likely impact. If an EIA action plan is necessary, this can be downloaded from the Intranet.

Assessment of impact on groups in **bold** is a legal requirement. Assessment of impacts on groups in *italics* is not a legal requirement, however it will help to ensure that your activity does not have unintended consequences.

Protected characteristic	Positive	Negative	Neutral	If negative, why and how could this be lessened <i>(use action plan if necessary)</i>
Individuals of different ages			✓	<p>Rationale:</p> <p>The Strategy specifically sets out the aim to ensure all processes are transparent, accountable and fair to all parties.</p> <p>Where specific actions are undertaken in the future as a result of this strategy, it is expected that a specific EIA will be completed as appropriate.</p>
Disabled individuals			✓	
Individuals transitioning from one gender to another			✓	
Individuals who are married or in civil partnerships			✓	
Pregnant individuals and new parents			✓	
Individuals of different race			✓	
Individuals of different religions or beliefs			✓	
Individuals gender identity			✓	
Individuals sexual orientation			✓	
<i>Individuals living in different family circumstances</i>			✓	
<i>Individuals in different social circumstances</i>			✓	
<i>Different employee groups</i>			✓	
<i>Other</i>				

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BUCKINGHAMSHIRE
and
MILTON KEYNES
FIRE AUTHORITY

STANDING ORDERS
RELATING TO
CONTRACTS

**BUCKINGHAMSHIRE AND MILTON KEYNES FIRE AUTHORITY
STANDING ORDERS RELATING TO CONTRACTS**

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1. Basic Principles

- 1.1 These Orders apply to all Authority contracts with the exception of employment contracts or any contract relating to the engagement of counsel.
- 1.2 Failure by an Officer to comply may result in disciplinary action being taken against that Officer.
- 1.3 These Orders set down the minimum requirements. A more detailed procedure may be appropriate for a particular contract.
- 1.4 In interpreting and applying these Orders, where there is a difference:
 - (a) ~~EU~~UK Public Procurement Directives and ~~EU case law~~Regulations take precedence over ~~both English law and~~ these Orders; and
 - (b) English law takes precedence over these Orders
- 1.5 A contract includes the following:-
 - (a) any contract for goods, works or services, including disposals
 - (b) any order for goods, works or services
 - (c) a grant given or received by the Authority
 - (d) a contract managed by consultants
 - (e) a contract appointing consultants
 - (f) any partnership arrangement
 - (g) contracts relating to the disposal or purchase of land and buildings.
- 1.6 Purchasing and disposal procedures must:
 - (a) Achieve best value for public money spent;
 - (b) Be consistent with the highest standards of integrity;
 - (c) Ensure fairness in allocating public contracts;
 - (d) Comply with legal requirements;
 - (e) Ensure that non-commercial considerations do not influence any contracting decision;
 - (f) Support the Authority's corporate and service aims and policies;
 - (g) Comply with Financial Regulations and Health and Safety requirements;
 - (h) Be able to demonstrate that the Authority's interests have not been prejudiced or exposed to undue or unmanaged risks; and
 - (i) comply with any monitoring arrangements required by the Authority from time to time.

2. Responsibilities of Officers

2.1. Officers

- (a) Every Officer dealing with contracts must have written authority to do so. This can be in their job description or in written delegated authority.
- (b) Officers responsible for purchasing and disposal must comply with these Standing Orders relating to Contracts, the Financial Regulations and the Employee Code of Conduct together with all UK ~~and EU/EC~~ [public procurement](#) legal requirements.
- (c) Officers must comply with any prevailing guidance issued by the Chief Finance Officer or his or her nominee.
- ~~(e)~~(d) Officers must use any relevant corporate contract which is already in place.
- ~~(d)~~(e) Officers must keep the records to show a clearly documented audit trail. The Officer has a duty to produce such records when requested to do so by the Monitoring Officer, Chief Finance Officer, or Chief Fire Officer and Chief Executive or their nominees.
- ~~(e)~~(f) Officers must ensure that agents and consultants acting on their behalf comply with the requirements referred to in Standing Order 2.1(b) above. Such consultants must not make any decision as to whether to award a contract or to whom a contract should be awarded.
- ~~(f)~~(g) Officers must take all necessary legal, financial and professional advice.

2.2 Chief Fire Officer and Chief Executive

The Chief Fire Officer and Chief Executive must:

- (a) Have delegated powers for the contract or ensure that the project has the formal approval of the appropriate Committee of the Authority;
- (b) Ensure that there is full budgetary provision for the contract and that the sources of funding are fully detailed before starting the contract process;
- (c) Ensure that no tender is accepted where it exceeds the approved budget/cash limit by more than 10% unless prior written approval is obtained from the relevant Committee of the Authority;
- (d) Ensure that expenditure is fully contained within the approved budget/cash limit unless prior approval has been obtained from the Committee of the Authority;
- (e) Ensure that he or she has given written delegation of the role that the appropriate Officer may take in the contracting process on behalf of the Authority;
- (f) Ensure that his or her staff complies with these Standing Orders relating to Contracts; and

- (g) Keep a register of contracts ~~over~~ with a value of £525,000 or more showing:
- (i) the contract reference number;
 - (ii) the contract title;
 - (iii) the name of the contractor;
 - (iv) the total contract value;
 - (v) the contract start and end date
 - (vi) duration of any option to extend
 - (vii) the contract review date
 - (viii) the name of the Officer responsible for the contract
 - (ix) the contract category/type
 - (x) the contractor is a SME or VCSE

3. Partnerships

Officers considering a partnership arrangement must before starting the contract process obtain advice from the Chief Finance Officer or his or her nominee who will advise on the partnership options available to ensure a workable partnership including appropriate governance arrangements.

4. Exemptions

- 4.1 Exemptions are subject to the requirements set out in this Standing Order. An exemption allows a contract to be placed by direct negotiation with one or more suppliers rather than in accordance with **Standing Order 8**. Exemptions under this Standing Order cannot be granted if EU the Public Contract Regulations (PCR) 2015 apply.
- 4.2 If an Officer requires an exemption from one or more Orders in an emergency, the Chief Finance Officer can provide this. A report must be made to a Committee of the Authority subsequent to the award of the contract. An emergency means a situation involving risk of injury or loss of life or risk to the security or structural viability of a property.
- 4.3 If an Officer requires an exemption from one or more Orders where there is no emergency and the estimated value is below the EuropeanUK public procurement threshold, this requires the prior approval of the Chief Finance Officer if the value is up to £75,000; or prior approval of a Committee of the Authority if the value is over £75,000 or more.
~~£50,000; or prior approval of a Committee of the Authority if the value is over £50,000 or more.~~ Approval will be given in exceptional circumstances only, such as:
- (a) special expertise or manufacturing capacity is required for which only one source has been identified. In this case a written quotation shall be obtained from that source; or
 - (b) special expertise or manufacturing capacity is required which is only available from such a limited number of sources that competitive tendering is not practicable. In this case all sources shall be invited to provide quotations.

5. Requirements for all contracts

- 5.1 Every contract must be in writing and must state:-

- (a) the goods, works or services to be provided;
- (b) the agreed programme of delivery;
- (c) the price and terms of payment
- (d) all other terms that are agreed;
- (e) exit procedures, for when the contract comes to its natural end, and
- (f) termination procedures for early termination of the contract including when the contractor has not fulfilled his contractual obligations.

5.2 Every contract must comply with Financial Regulations and corporate procurement guidance, including [EUUK Public Procurement regulationsRegulations](#), where necessary.

5.3 Every contract shall include standard clauses approved by the Chief Finance Officer or his or her nominee on:-

- (a) Anti Fraud and Corruption
- (b) Equal Opportunities
- (c) Health and Safety, [where appropriate](#)
- (d) Freedom of Information [and](#) Data Protection
- (e) Time of the Essence (for contracts for goods)
- (f) Liquidated Damages
- (g) Safeguarding
- [\(h\) Insurances](#)

5.4 The Chief Finance Officer or his or her nominee shall be responsible for the safekeeping of all executed contracts.

6. Steps Prior to Letting a Contract

6.1 Before letting a contract, an officer must:

- (i) identify whether there is an existing corporate contract already in place;
- (b) estimate the total value of the contract. For example, if the subject matter of the procurement is worth £15,000 over 5 years, the total value of the contract will be £75,000;
- (c) ensure that the contracting process is not used to create separate contracts in order to avoid the requirements of Contract Standing Orders or the requirements of the [EU procurement regulationsPublic Contract Regulations \(PCR\) 2015 and UK Public Procurement Regulations](#);
- (d) ensure that there is sufficient budgetary provision for the goods or services required;
- (e) ,if leasing arrangements are proposed, obtain prior approval from the Chief Finance Officer;
- (f) take into account the outcome from any strategic service review, if appropriate;
- (g) define the objectives of the contract;
- (h) provide evidence in writing that the risks that are associated with the

contract have been assessed and suitable arrangements have been or can be put in place to manage them;

- (i) evaluate what procurement method is most likely to achieve the Authority's objectives, including internal/external sourcing, sourcing through a public sector consortium, or collaboration with another organisation.
- (j) consult users as appropriate about the proposed procurement method and standards for the contract;
- (k) take into account the whole-life costs of the contract;
- (l) retain evidence that the above steps have been carried out for examination by internal or external auditors;
- (m) ensure confidentiality when dealing with contractual matters. Officers must not disclose any information regarding tenders to anyone who is not involved in the selection process; and
- (n) in circumstances that it is likely that employees will transfer to a new employer as a result of a contract, seek legal advice from an appropriately qualified source with regard to the application of TUPE (Transfer of Undertakings (Protection of Employment) Regulations 2006.
- (o) if the procurement is for the provision of services, consider how what is being procured might improve the economic, social and environmental well-being of Buckinghamshire and Milton Keynes, and in conducting the process of procurement, how that improvement might be secured in the procurement process taking into account any consultation that may have been undertaken by the Authority.

7. Requirements to Ensure Competition

7.1 Where the total value of the contract is less than ~~£50~~£75,000, Officers may identify potential candidates using the most cost-effective and reasonable methods. This may include reference to advertising, catalogues, business directories etc.

7.2 Where the estimated value of a contract is:

(a) ~~Up to and including £10~~Below £25,000

One written quotation is required. This can be a written confirmation by an Officer of an oral quotation. The aim of the Officer responsible for the contract shall be to obtain the best value for money for the Authority.

(b) ~~Over £10~~£25,000 and up to and including ~~£50~~£75,000

Three written quotations must be requested. The aim of the Officer responsible for the contract shall be to obtain the best value for money for the Authority.

[In accordance with Public Contract Regulations \(PCR\) 2015 transparency rules, a Contract Award Notice must be published to the Cabinet Office Contracts Finder on completion of the process.](#)

(c) **Over £5075,000 and up to the ~~European Union~~UK Public Procurement thresholds**

The Officer responsible for the contract must follow a publicly advertised competitive tender process (**See Standing Order 8**)

The Officer responsible for the contract must before starting the contract process obtain advice from the Chief Finance Officer or his or her nominee.

The Officer must use the Authority's conditions of contract or appropriate professional institute conditions of contract or a contract which has been approved by the Chief Finance Officer or his or her nominee.

(d) **Over the ~~European Union~~Public Contract Regulations (PCR) financial thresholds** ~~which as at 1 January 2020 not applicable for sub-central contracting authorities, based on the aggregate contract value, inclusive of VAT, from 01 January 2022, are as follows:~~

<u>Type of Contract:</u>	<u>£Value – (Including VAT)</u>	
<u>Works</u>	<u>£4,733,252</u>	<u>5,350,000</u>
Goods & Services		<u>£189,330,213,47</u>
<u>Works</u>		<u>£5,336,937</u>
Light Touch Regime for Social & Health Related Services		<u>£663,54</u>
<u>Utilities Contracts – Supplies & Services</u>		<u>£426,955</u>

When calculating the estimated value of the contract to determine whether the regulations apply, the contract value estimation should be inclusive of VAT (where applicable)

Contracts must be advertised ~~according to EU procurement law in accordance with Public Contract Regulations (PCR) 2015, to the Find a Tender Service (FTS) & Contracts Finder.~~ The Officer responsible for the contract must before starting the contract process obtain advice from the Chief Finance Officer or his or her nominee

(e) **Any Value**

The Officer responsible for the contract may use a Framework or Consortium Agreement but before starting the contract process must seek advice from the Chief Finance Officer or his or her nominee.

EUUK public procurement law requires compliance with the principles of the free movement of goods, the right of establishment the freedom to provide services, non-discrimination and equal treatment, transparency, proportionality and mutual recognition.

Contracts which fall outside of the Procurement Directives either by reference to value or type must still be let in accordance with the guidance

contained in the ~~European Commission Interpretive Communication~~ Public Procurement Regulations provided by the Cabinet Office Minister for Public Procurement in accordance with The Public Contracts Regulations (PCR) 2015

[The Public Contracts Regulations 2015 \(legislation.gov.uk\)](#)

[The Public Procurement \(Amendment etc.\) \(EU Exit\) Regulations 2020 \(legislation.gov.uk\)](#)

8. Competitive Tendering Process

8.1 Where the total value of the contract is more than £~~5075~~5075,000, Officers must ensure that potential candidates are asked to provide sufficient detail to:

- (a) ensure that they are financially stable;
- (b) ensure that they have appropriate technical ability to undertake the sort of contract for which they wish to be considered; ~~and~~
- (c) check their health ~~and~~ safety record; ~~and~~
- (d) check appropriate Insurance levels are in place

8.2 Officers must be able to demonstrate documentary evidence that (a) to ~~(ed)~~ above have been checked.

8.3 Where the total value of the contract is more than £~~5075~~5075,000 and there is no Approved List or Corporate Contract for the contract, Officers must invite tenders by public advertisement. All tenders will be released to the market electronically, via the Authority's ~~E~~e-tendering system and advertised on the ~~Government's~~Cabinet Office procurement portal, Contracts Finder.

8.4 Unless a shorter period has been approved by the Chief Finance Officer a period of four weeks must be provided for potential tenderers to receive and submit their expressions of interest for the contract. Where ~~EUUK~~ Public Procurement Regulations apply, the relevant ~~OJEU~~ Public Contract Regulations (PCR) 2015 time limits apply.

9. Creation and Maintenance of an Approved List

9.1 As an alternative to advertising contracts, Officers may use approved lists to select tenderers. However, approved lists cannot be used where the total value of the contract exceeds the EU PCR 2015 procurement threshold.

9.2 Where the Chief Finance Officer or his or her nominee decides that a select list of approved Contractors shall be maintained, at least four weeks before the list is compiled or reviewed Public Notice (as a minimum via the Authority's website and ~~E~~e-tendering system) inviting applications for inclusion on the list must be given. In addition, each Contractor already included on any relevant list shall be asked whether they wish to remain on it.

9.3 The criteria for admission to and suspension from a select list shall be based upon the Authority's contract regulations and procurement procedural guidance, be specified in writing by the Officer and be approved by the Chief Finance Officer or his or her nominee.

9.4 Potential candidates for the list must be asked to provide details, which will enable the Authority to:

- (a) ensure that they are financially stable based upon the submission of statements of accounts for the last two years as a minimum
- (b) ensure that they have appropriate technical ability to undertake the sort of contract for which they wish to be considered
- (c) compliance with environmental, health and safety, equality and diversity standards, [and data protection regulations](#) as determined by legislation and as may be approved by the Authority
- (d) ensure that they have proportionate levels of insurance in place to meet the contract requirements, evidence of valid insurance is required.

9.5 The standing list shall include the names and addresses of all the Contractors who meet the selection criteria and shall indicate the nature and value of Contracts for which each Contractor listed may be used.

9.6 Any Contractor may withdraw at any time from a standing list by giving written notice to the Authority.

9.7 Each list must be re-advertised at least every three years, and subject to competition in accordance with the Requirements to Ensure Competition contained within these Standing Orders relating to Contracts. Any necessary amendments including additions and deletions shall be made by the Officer responsible for the list.

9.8 An accredited government scheme subject to approval by the Chief Finance Officer or his or her nominee is also considered to be an approved list for the purpose of these Standing Orders relating to Contracts.

10. Standards and Award Criteria

10.1 Officers must ensure that the award criteria ~~are~~ selected ~~which~~ are appropriate to the contract.

10.2 Officers must design award criteria to ensure best value for money for the Authority.

10.3 The pre-agreed criteria for assessing the bid must not be changed after tender proposals have been opened.

11. Invitations to Tender/Quotations

11.1 The Officer must ensure that Invitations to Tender and Invitations to Quote include a specification. The specification must describe clearly the Authority's requirements in sufficient detail to ensure the submission of competitive bids which may easily be compared.

11.2 The Invitation to Tender or Invitation to Quote must state that the Authority is not bound to accept any Quotation or Tender.

11.3 All candidates invited to tender or quote must be issued with the same information at the same time and subject to the same terms. Any additional information or amendments to the specification must be provided to the candidates on the same basis.

11.4 In cases where it can be demonstrated that there are insufficient suitably qualified candidates to meet the competition requirements set out in **Standing Order 7**,

all suitably qualified candidates must be invited.

- 11.5 The Invitation to Tender or Invitation to Quote must specify the award procedure
- 11.6 Unless the tendering process is by using an approved list, all Invitations to Tender must be advertised on the Authority's [E-e](#)-tendering system.

12. Shortlisting

- 12.1 Where approved lists are used, the responsible Officer in consultation with the Chief Finance Officer or his or her nominee may undertake the shortlisting in accordance with the relevant criteria.
- 12.2 Shortlisting must be undertaken with regard to financial and technical standards and other criteria relevant to the contract including the award criteria.
- 12.3 In the case of contracts let under the [EUFTS](#) Procedure, the advice of the Chief Finance Officer or his or her nominee must be obtained.
- 12.4 Where appropriate, Officers may decide not to shortlist and to send Invitations to Tender and evaluate all submissions.

13. Submission, Receipt and Opening of Tenders/Quotations

- 13.1 Candidates invited to bid must be given adequate time in which to submit a quotation or tender. At least four weeks must be allowed for submission of tenders and the [EU Procedure Public Contracts Regulations \(PCR\) 2015](#) sets out specific time periods.
- 13.2 Requests for quotations and invitations to tender will be issued and received electronically via the Authority's [E-e](#)-tendering system. Tenders will be released to the market electronically.
- 13.3 The Chief Finance Officer shall be responsible for the safekeeping of tenders. All tender documentation will be held electronically within the [E-Tendering-e-tendering](#) system.

14. Clarification Procedures

- 14.1 After the tender opening, it may become apparent that one or more of the potential contractors that have submitted bids have misinterpreted the specification. If it is clear that this is a result of an error or ambiguity in the specification, the responsible Officer must consult the Chief Finance Officer or his or her nominee as to whether all the contractors should be provided with revised specifications and given the opportunity to revise their tender.

15. Tender Evaluation

- 15.1 Confidentiality of tenders/quotations and the identity of tenderers must be maintained at all times. Information about one tenderer's response must not be given to another tenderer.
- 15.2 Officers must evaluate and award the contract in accordance with the award criteria in the Invitation to Tender. The Officer responsible for evaluating the tenders should complete a tender evaluation sheet recording the details of the tenders and the process for selecting the winner. This Officer must be someone other than the person who is going to sign the contract. Financial evaluation must be completed by the Chief Finance Officer or his or her nominee. Financing arrangements must be included in the evaluation.

- 15.3 The reasons for the selection of the successful candidate should be recorded on the evaluation report. The Officer carrying out the evaluation must sign the report. Authorisation to award the contract must be given in writing by an Officer who has written delegated authority to do so.

16. Award of Contract

- 16.1 All candidates must be notified in writing, simultaneously and as soon as possible, as to the outcome of the tender exercise.

In the case of those contracts which have been let using the [EUFTS](#) procurement procedure, a statutory standstill of 10 days must apply between the notification of the tenderers and the successful candidate signing the contract, to allow for the decision to be challenged by the unsuccessful candidates.

- 16.2 The contract can only be signed by an Officer who has written delegation to do so.

[16.3 In accordance with Public Contract Regulations \(PCR\) 2015, a Contract Award Notice must be published to the appropriate UK Government portal\(s\).](#)

17. Executing a Contract

- 17.1 Where a contract has a bond or guarantee or is over £~~450~~500,000 it shall be sent to the Monitoring Officer and shall be sealed on behalf of the Authority.

- 17.2 Any contract under £~~450~~500,000 shall be signed by the Chief Fire Officer and Chief Executive or an Officer with written delegated authority to sign by the Chief Fire Officer and Chief Executive, in accordance with approved levels, or may be executed by affixing the seal of the Authority in accordance with **SOA 15** (SOA 15 - Standing Orders for the Authority and its Committees)

18. Post Contract Monitoring

- 18.1 During the duration of a contract, the designated project manager, or, where no project manager has been appointed, the Officer signing the contract must monitor the contract/contractor in respect of:

- (a) performance
- (b) compliance with the specification and the contract
- (c) cost
- (d) user satisfaction
- (e) risk management; and
- (f) in accordance with any guidance issued by the Chief Finance Officer or his or her nominee.

- 18.2 Officers must seek advice from the Chief Finance Officer or his or her nominee if payments to a contractor are to be withheld or there is any other problem with the contract which may result in early termination.

19. Termination of Contract

- 19.1 An Officer shall not terminate a contract over £~~50~~25,000 prior to its expiry date without first obtaining advice from the Chief Finance Officer or his or her nominee.

20. Land and Property

- 20.1 This Standing Order relates to the acquisition and disposal of land and property including leases which are for a fixed term of more than seven years.
- 20.2 All valuations and negotiations shall be the responsibility of the Chief Finance Officer or his or her nominee who must ensure that anyone undertaking valuations or negotiations on his/her behalf must have appropriate written delegation and must be a qualified Member of the Royal Institution of Chartered Surveyors or equivalent.
- 20.3 All valuations prepared for the purpose of a transaction must be accompanied by evidence of the values or comparable properties in the locality, where possible, or evidence of recent, similar transactions carried out the Authority.

Acquisitions

- 20.4 No purchase of land or property (freehold or leasehold) may be made without the prior approval of an Officer delegated to do so by the Authority's Scheme of Delegation. In order to do this the information detailed below must be provided for this Officer which must be retained for six financial years after the acquisition has been completed:
- (a) a complete description of the land or property that is being considered for purchase;
 - (b) the reason for the purchase;
 - (c) any information that may affect the value of the property or land, including structural and environmental reports;
 - (d) the proposed purchase price or rental value together with evidence of the prices for similar properties in the location, and evidence that there is sufficient budget to cover all costs; and
 - (e) any other terms and conditions.

Disposals

- 20.5 Land and buildings owned by the Authority shall not be disposed by lease or freehold without the prior approval of a Committee of the Authority.
- 20.6 Prior to approval being sought the following information must be provided:
- (a) a complete description of all the land and/or property to be included in the disposal;
 - (b) confirmation that the title of the land and/or property is owned by the Authority;

- (c) the reason for the sale and any restrictions which this may impose;
- (d) a report on any information which is held by the Authority in the previous use of the land which may affect its value (eg if the site were contaminated);
- (e) the estimated value of the land and/or property together with evidence of comparable properties in the location or by reference to other recent, similar Authority transactions;
- (f) in cases where land and/or property is being sold as potential housing development, evidence that planning applications will be obtained prior to the completion of the disposal in order to obtain the best possible price for the land;
- (g) recommendations on the following:
 - (i) issues that need to be resolved before marketing the land and/or property can commence;
 - (ii) the preferred method of disposal (private treaty/public auction/formal tender);
 - (iii) the title to be transferred; and
 - (iv) the minimum price that the Authority is prepared to receive together with an asking price.

20.7 Where it has been decided that the disposal of the land and/or property will be by formal tender, **Standing Order 8** above relating to tenders shall be applied.

21. Asset Disposals (other than Land or Property)

21.1 A check must be made to determine whether there is a corporate policy or contract for the disposal of the stock. If a policy or contract is in place, this should be used.

21.2 Where the net book value of the goods is no more than £~~40~~25,000 the disposal will be authorised by the Chief Finance Officer. If the net book value is more than £~~40~~25,000 a Committee of the Authority must approve the disposal.

21.3 Except in circumstances in which the Chief Finance Officer is authorising disposal in accordance with 21.2 in which case donation to a charity approved by the Authority may be considered, disposal must be either by public auction or by obtaining three quotes from suitable contractors.

21.4 The Officer responsible for the disposal must ensure that the Authority is receiving value for money, except in circumstances in which the Chief Finance Officer is authorising disposal in accordance with 21.2 ; that the contractor used is reputable; and that the necessary anti-money laundering checks are in place by reference to the Chief Finance Office.



Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: Corporate Risk Management

Lead Member: Cllr Keith McLean, Health, Safety and Corporate Risk

Report sponsor: Graham Britten, Director of Legal & Governance

Author and contact: Stuart Gowanlock, Corporate Planning Manager

sgowanlock@bucksfire.gov.uk

Action: Decision

Recommendations:

1. That the status of identified corporate risks at Annex C be reviewed and approved.
2. That comments be provided to officers for consideration and attention in future updates / reports.

Executive summary:

This report provides an update on the current status of identified corporate risks. Risk registers are maintained at project, departmental and directorate levels. Corporate risks are those that have been escalated from these levels for scrutiny by the Strategic Management Board (SMB) because of their magnitude, proximity or because the treatments and controls require significant development.

Officers draw on a range of sources to assist with the identification and evaluation of corporate risks. For example, membership of the Thames Valley Local Resilience Forum (TVLRF)'s Strategic Coordinating Group (SCG) facilitates active monitoring of a range of risks with the potential for impacts on local communities and services.

Involvement with the Local Resilience Forum directly links officers into national Government agencies and departments such as the UK Health Security Agency and the Department for Levelling Up, Housing and Communities. This allows the sharing of intelligence and information with those who are making decisions at the very highest levels.

The TVLRF SCG enables its partners to jointly develop combined responses to civil emergencies, and strategic consequence management. This multi-agency partnership approach helps target activity directly to the needs of the public.

The Corporate Risk Register was last reviewed by the Overview and Audit Committee at its 20 July 2022 meeting. Since then, it has been subject to review by the Performance Monitoring Board (PMB), at which all the directorate and departmental

risk registers are reviewed, and by SMB at its monthly meetings. Also, Lead Members have been consulted during the evaluation process for risks falling within their portfolios of responsibility.

Since the last Overview and Audit Committee review, the Corporate Risk Register has been updated to reflect:

- In relation to the staff availability risk, the latest position regarding the potential for industrial action following the FBU's decision to ballot members on the revised five per cent pay offer from the national employer representatives;
- The forecast impact of inflationary pressures, particularly in relation to energy costs and the annual firefighter pay settlement, this has resulted in the financial sustainability risk score being increased to 4x4=16, reverting it to red RAG status
- The introduction of the Data Protection and Digital Information Bill (DPDI Bill) into Parliament on 18 July 2022. This was the next step in the, then, government's much-publicised plans to reform the UK data protection regime following Brexit. In the government's response to the September 2021 consultation ('Data: A New Direction') it said it intended 'to create an ambitious, pro-growth and innovation-friendly data protection regime that underpins the trustworthy use of data'. The DPDI Bill proposes substantial amendments to existing UK data protection legislation. It contains amendments to the GDPR aimed at reducing the compliance burden on organisations and to create more flexibility. The second reading of the DPDI Bill did not take place on 5 September 2022 as scheduled, with a new date not yet published. The potential effects of the DPDI Bill on the Authority if it were to be enacted in substantially the same form have yet to be fully evaluated.
- Regarding the McCloud / Sargeant pensions risk, the provision of circa £250k made in the 2020-21 financial year to cover potential awards for 'injury to feelings' claims, is now available to use for other purposes, as these costs will be met by Central Government and the funds provided to fire and rescue authorities before any payments are made to FBU claimants.
- Inclusion of the Climate Change risk specified at pages 11-12 of the Corporate Risk Register (Appendix 3).

The current distribution of corporate risks relative to probability and potential impact is shown at Appendix 1.

Changes to the corporate risk ratings over the last year are shown at Appendix 2.

Detailed assessments of identified corporate risks are shown in the Corporate Risk Register at Appendix 3.

The next Overview and Audit Committee review is scheduled for 15 March 2023, preceded by review at the 21 February 2023 SMB meeting.

Financial implications:

No direct financial implications arising from the presentation of this report. It is envisaged that the further development of the Authority's corporate risk management framework will be undertaken from within agreed budgets.

Risk management:

The development, implementation and operation of effective corporate risk management structures, processes and procedures are considered critical to assure continuity of service to the public, compliance with relevant statutory and regulatory requirements and the successful delivery of the Authority's strategic aims, priorities and plans.

Legal implications:

None directly arising from this report. Any legal consequences associated with the crystallisation of individual risks are detailed in the Risk Register report at Appendix 3.

Within the role description of a Lead Member is a requirement 'to attend the Overview and Audit Committee, at its request, in connection with any issues associated with the portfolio which is the subject of scrutiny'

Privacy and security implications:

None directly arising from the presentation of this report. However, potential risks to privacy and security together with mitigating actions are captured within applicable risk evaluations.

Duty to collaborate:

The potential to share corporate risk intelligence with neighbouring fire and rescue services and other relevant agencies will be considered. Buckinghamshire and Milton Keynes Fire Authority already participates in the multi-agency Thames Valley Local Resilience Forum which produces a Community Risk Register which is among the sources used to identify potential risks to the Authority.

Health and safety implications:

Development of the framework does not impact directly on the legal compliance to health and safety, however if risks are not appropriately identified or evaluated then this may present Health and Safety risks.

Environmental implications:

None directly arising from the presentation of this report. However, potential environmental implications together with mitigating actions are captured within applicable risk evaluations.

Equality, diversity, and inclusion implications:

No direct implications from the presentation of this report. However, risks to achieving the Authority's equality, diversity and inclusion objectives or compliance with relevant statutes or regulations are identified assessed and managed via this

process and are currently monitored within the HR Risk Register. Equality Impact Assessments are undertaken on strategies, change, procedures and projects.

Consultation and communication:

Senior managers and principal officers are key stakeholders in the development of the corporate risk management framework and have an active role in this at every stage as well as in ongoing identification, evaluation and monitoring of corporate risks. The Lead Member for Health, Safety and Corporate Risk is also be involved in the development of the framework with particular responsibility for determining the reporting arrangements for the Authority.

Background papers:

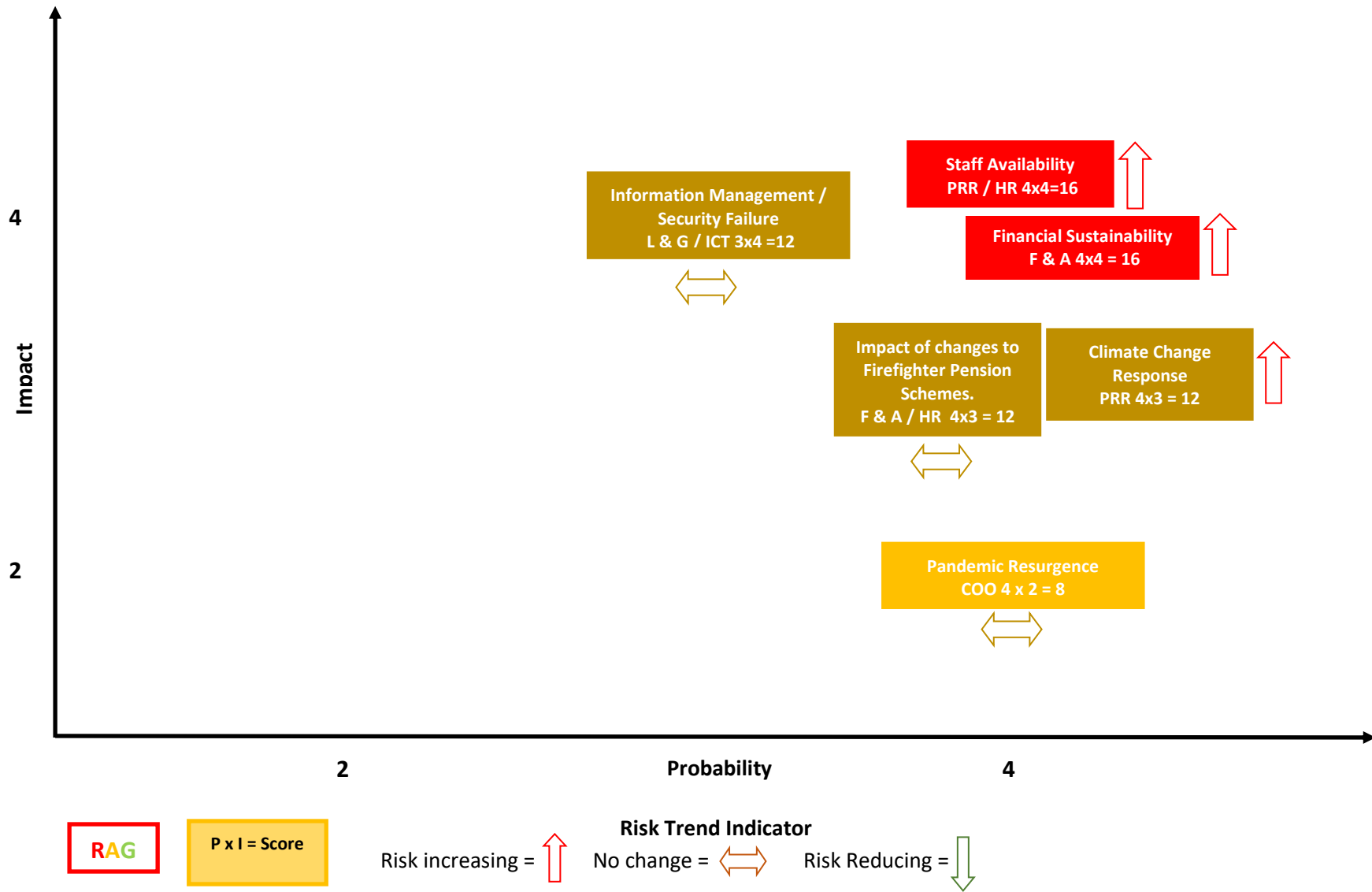
The current Corporate Risk Management Policy was approved at the 24 March 2021 Executive Committee:

<https://bucksfire.gov.uk/documents/2021/03/ec-240321-item-5.pdf/>

Fire Authority Members were last updated on the status of the Authority’s Corporate Risks at the [20 July 2022 Overview & Audit Committee](#).

Appendix	Title	Protective Marking
1	Distribution of Corporate Risks as at 18 October 2022.	None
2	12 Month View of Changes to Corporate Risks	None
3	Corporate Risk Register Report	None

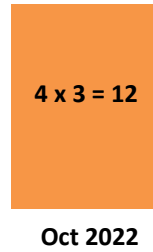
Appendix 1: Corporate Risk Map – As at 18 October 2022



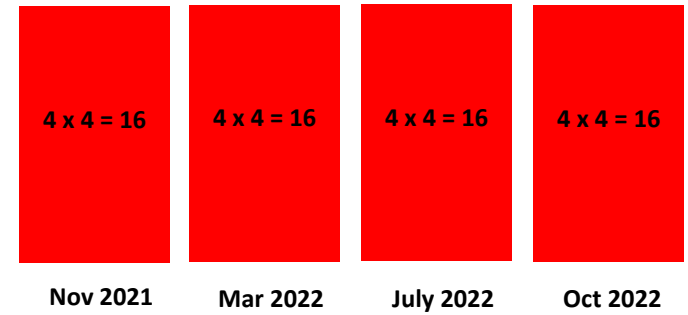
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Appendix 2 – Risk Register Changes (12 Month View)

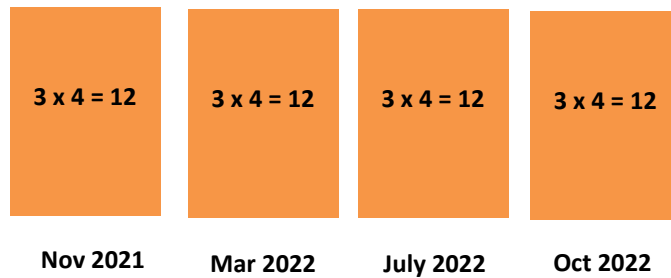
Climate Change Response



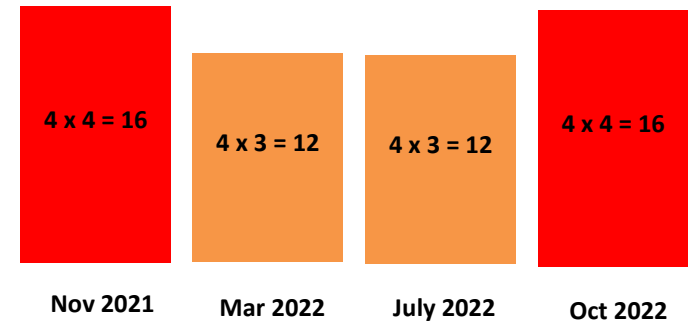
Staff Availability



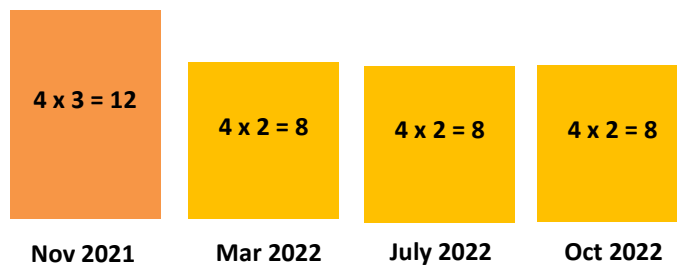
Information Management / Security Failure



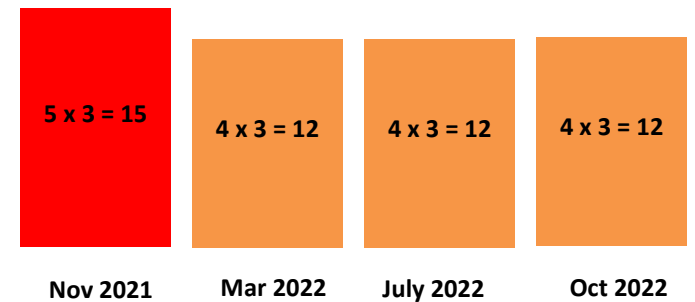
Financial Sustainability



Risk of Covid-19 Resurgence / Pandemic Flu



Impact of Changes to Firefighter Pension Schemes



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Appendix 3 - Corporate Risk Register – as at 18 October 2022

Corporate Risks

Risk Description	Resp.	Consequences if Untreated Risk Occurs	Risk Score (Former) / New			Risk Level	Current Treatment	RAG	Comments / Further Treatment Proposed
			P	I	Σ	HML			
Staff Availability: 1/ Staff inability or reduced ability to work due to disruption caused by factors such as Pandemic Flu, fuel supply issues, industrial action etc. 2/Impact of employment market conditions on attraction of new staff, retention and overall workforce stability. 3/ Simultaneous loss of Principal Officers / Senior	Lead Member for Service Delivery, Protection & Collaboration	Potential detrimental effects on service delivery to the community and the Service's reputation.	(2)	(5)	(10)	(M)	<ul style="list-style-type: none"> Full business continuity plans in place & uploaded to Resilience Direct. Succession Plans in place for key leadership and management personnel. Contingency arrangements in place to mitigate risks to Principal Officer operational rota capacity. Peer review of the business continuity arrangements Bank System Flexi-Duty System Pilot Staff Transfer Procedure Employee assistance and welfare support Training Needs Assessment process Monitoring of staff 'stability ratio' relative to best practice and sector norms Review of Resourcing and Retention strategies Wider range of contracts offering more flexible ways of working A variety of approaches are being adopted to replenish the workforce. These include more operational apprentices, transferees, and re-engagement options Workforce planning data is regularly reviewed with Prevention, Response & Resilience, HR and Finance. 	R	21 June 2022 SMB Wholetime recruitment has progressed to the interview stage, which will take place shortly. The On Call/Firefighter transferee advert is live and closes on 3 July. The advert for Promotion/Development Centres for Watch, Crew and Station Commanders is live, they take place w/c 17 September. Support Services and On Call recruitment continues. HR and the recruiting managers work closely with the Marketing Communication Team to attract diverse candidates with the right skills and experience. Meetings are taking place to discuss workforce planning/establishment. National pay negotiations for 'Grey Book' staff between employer representatives and the representative bodies are ongoing via the NJC. These are being closely monitored given the sensitivity of this issue across the public sector and the potential for industrial action in the event that an agreement cannot be reached. <u>Post meeting Update:</u> On 27 June 2022, the Fire Brigades Union recommended that its members reject the employer's proposal for a two per cent increase to firefighters' pay and indicated that it will consider all options, including strike action. 23 August 2022 SMB Workforce Planning Group meeting regularly to progress recruitment actions for Wholetime,
			(5)	(5)	(25)	(H)			
			(3)	(5)	(15)	(H)			
			(4)	(5)	(20)	(H)			
			(3)	(5)	(15)	(H)			
	Chief Operating Officer	Failure to discharge statutory duties.	(4)	(3)	(12)	(M)			
			(5)	(3)	(15)	(H)			
			(4)	(3)	(12)	(M)			
			(5)	(3)	(15)	(H)			
			(3)	(3)	(9)	(M)			
	Loss of critical knowledge / skills / capacity /competency levels.	(4)	(3)	(12)	(M)				
		4	4	16	H				

Appendix 3 - Corporate Risk Register – as at 18 October 2022

Risk Description	Resp.	Consequence if Untreated Risk Occurs	Risk Score (Former) / New			Risk Level	Current Treatment	RAG	Comments / Further Treatment Proposed
			P	I	Σ				
Financial Sustainability	Lead Member for Finance and Assets, Information Security & IT Director Finance & Assets	The Medium-Term Financial Plan (MTFP) factors in several assumptions when forecasting the financial position. Future costs are significantly affected by the level of pay awards (which for most staff are determined nationally), general price inflation and changes to employer pension contributions. Future funding levels are affected by council tax referendum limits, growth in council tax and business rate bases, the level of general government funding and specific grants. If a number of these areas are significantly worse than forecast	(4)	(4)	(16)	H	Proactive management of the MTFP is in force and is very closely aligned to workforce planning. As part of the budget setting process, Officers will seek to identify savings opportunities to address potential future cost pressures. A risk-assessed General Fund reserve of £1.5m (circa five per cent of the net budget requirement) is held to cover a range of potential financial risks. In addition, earmarked reserves are held to fund specific anticipated future costs.	R	<p>5 April 2022 SMB Recommended that risk score and RAG status remain at current level given current inflationary pressures particularly in relation to energy, fuel, other consumables, contract prices and also future staff pay settlements.</p> <p>17 May 2022 SMB The Service continues to monitor the impact of inflation on key contracts. Inflationary pressures will form a key part of the sector’s submission to the Government in relation to the financial settlement.</p> <p>21 June 2022 SMB The MTFP process has commenced for 2023/24 and consideration will be given to all inflationary pressures highlighted, to mitigate them as part of the MTFP process. Pay settlements for staff on ‘Grey Book’ contracts is negotiated nationally and therefore outside of the Authority’s control. The current budget provision for this is two per cent. The incremental cost of an additional one per cent is c. £200k. which could place the revenue budget under considerable pressure were any settlement to be significantly greater than the current provision. There is also uncertainty as to the continuity of some of the hypothecated grant funding that Fire and Rescue Services receive from central government – the USAR grant is of particular concern. The fire sector is working closely to highlight these financial pressures to the Government so they can be considered as part of the financial settlement.</p> <p>According to the Bank of England’s Monetary Policy Summary (June 2022) “CPI inflation was expected to average slightly over ten per cent at its peak in 2022 Q4”. For comparative purposes, a £5 increase in the Authority’s Band D precept would be equivalent to c. seven per cent.</p> <p>At its meeting on 15 June 2022 the base rate was increased by 0.25 percentage points to 1.25 per cent. As all the Authority’s borrowing is at a fixed rate of interest and there</p>
			(3)	(4)	(12)	M			
			(3)	(4)	(12)	M			
			(4)	(4)	(16)	H			
			(4)	(3)	(12)	M			
		4	4	16	H				

Appendix 3 - Corporate Risk Register – as at 18 October 2022

		<p>there is a risk the Authority will not meet its commitment to the PSP 2020 - 25 and that a fundamental re-think of service provision would be required.</p>							<p>are no plans to borrow further, this on its own does not have a direct impact on the financial position.</p> <p><u>23 August 2022 SMB</u> The Bank of England’s most recent Monetary Policy Report (August 2022) noted that higher energy prices are expected to push inflation to 13 per cent. The energy prices the Service was paying had decreased from Q1 to Q2 of the current year, but prices quoted for Q3 are even higher than those in Q1. Additionally, it is anticipated the pay award for staff in 2022-23 will be higher than the two per cent in the budget.</p> <p>It is therefore recommended that the impact score is increased, as without further funding, the Service may need to reduce establishment numbers back towards the number at the start of 2021-22. This would mean increasing the RAG score from Amber to Red – Approved.</p> <p><u>20 September 2022 SMB</u> Awaiting details of Government support for non-domestic energy users to facilitate assessment of likely impact on revenue budget forecast.</p> <p><u>18 October 2022 SMB</u> The announcement of the energy price cap for non-domestic customers has reduced the forecast spend for the year on gas and electricity by £400k. However, the cap is currently only confirmed to apply for six months until 31 March 2023. On 4 October 2022, the UK National Employers for Fire & Rescue Services have agreed to make an improved pay offer of five per cent on all basic pay rates and continual professional development payments. While a five per cent pay award can be absorbed this year, it is because of the recent non-domestic energy support announcement and assumes no further financial pressures emerging. However, without additional funding through either grant funding and/or precept flexibility in the forthcoming Local Government Finance Settlement, the Service would not be on a sustainable footing in future years.</p>
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Appendix 3 - Corporate Risk Register – as at 18 October 2022

Risk Description	Resp.	Consequences if Untreated Risk Occurs	Risk Score (Former) / New			Risk Level	Current Treatment	RAG	Comments / Further Treatment Proposed
			P	I	Σ				
<p>Information Management* / Security failure to -</p> <p>a) comply with statutory or regulatory requirements</p> <p>b) manage technology</p> <p>c) manage organisational resources</p> <p>Deliberate: unauthorised access and theft or encryption of data.</p> <p>Accidental: loss, damage or destruction of data</p>	<p>Lead Member for Finance and Assets, Information Security & IT</p> <p>Senior Information Risk Owner (SIRO)</p> <p>Director Legal & Governance</p>	<ul style="list-style-type: none"> Inability to access/use the e-information systems. Severe financial penalties from the Information Commissioner Lawsuits from the public whose sensitive personal information is accessed causing damage and distress. <p>*Information management is concerned with the acquisition, custodianship and the distribution of information to those who need it, and its ultimate disposition through archiving or deletion. Information security is the practice of protecting information by mitigating risks such as unauthorised access and its unlawful use, disclosure, disruption,</p>	(4) 3	(4) 4	(16) 12	(H) M	<p>1. Appropriate roles:</p> <ul style="list-style-type: none"> SIRO has overall responsibility for the management of risk Information and information systems assigned to relevant Information Asset Owners (IAO's) Department Security Officer (DSO) the Information Governance & Compliance Manager has day-to-day responsibility for the identification of information risks and their treatments 'Stewards' assigned by IAO's with day-to-day responsibility for relevant information. <p>2. Virus detection/avoidance:</p> <p>Anti-Malware report – no significant adverse trends identified which indicates that improved security measures such as new email and web filters are being successful in intercepting infected emails and links.</p> <p>3. Policies / procedure:</p> <p>Comprehensive review and amendment of the retention and disposal schedules / Information Asset Registers,</p> <ul style="list-style-type: none"> current and tested business continuity plans / disaster recovery plans employee training/education tested data/systems protection clauses in contracts and data-sharing agreements Integrated Impact Assessments (IIA) disincentives to unauthorised access e.g. disciplinary action <p>4. Premises security:</p> <ul style="list-style-type: none"> Preventative maintenance schedule Frequent audits at Stations and inventory aligned to asset management system. Reduction in the number of CCTV requests following improved education and guidance in relation to the use of the same; 	A	<p>18 January 2022 SMB</p> <p>The Service's ICT team were made aware of the national issues with the 'Log4j 2' vulnerability early due to their close ties with the UK National Cyber Security Centre, they took immediate action to scan internal resources and found that they were not affected. They then worked with suppliers to ensure any systems hosted externally which the Service utilises were checked, and where appropriate patched, to prevent any exposure.</p> <p>22 February 2022 SMB</p> <p>The mandatory staff cybersecurity training packages have been rolled out to Members. A Cabinet Office report published on 25 January 2022 advised that of the 777 incidents managed by the National Cyber Security Centre between September 2020 and August 2021, around 40 per cent were aimed at the public sector.</p> <p>The Authority is now a subscriber to the South-East Employers (SEE) sub-group South-East Government Warning, Advisory and Reporting Point (SEGWARP) -which shares knowledge, resources and benchmarking among participating IT Security Specialists & IT Managers https://www.seemp.co.uk/segwarp/</p> <p>5 April 2022 SMB Meeting</p> <p>Recommended that Risk Score and RAG status remain at present levels in light of National Cyber Security Centre guidance in relation to heightened virus and malware risks following measures taken by UK, EU, US and other countries in response to the</p>

Appendix 3 - Corporate Risk Register – as at 18 October 2022

		<p>deletion and corruption. As more and more information is held electronically risks have become systems, as well as process and people based and are therefore vulnerable to cyber-attacks. Cyber-crime is unrelenting and issues arise at a greater frequency than existing intrusion attempts can be resolved. As such, this is a constant on the CRR.</p>					<p>- Premises Security Group re-established to meet on a 3 monthly basis aligned to the PMB meeting schedule has been suspended during the internal governance review. The associated risks are being monitored.</p> <p>5. Training: The biennial “Responsible for Information” training will be supplemented by the National Cyber Security Centre’s new e-learning package 'Top Tips for Staff' which has been built into the Heat training platform as a mandatory biennial package. Cyber-security training, delivered by Thames Valley Police’s cyber security advisor, rolled out to members of the Leadership Group during September 2020. Further training planned for 21/22.</p>		<p>Russian invasion of Ukraine. ICT Manager has been appointed as Single Point of Control for liaison with the Home Office in relation to related cyber risks in addition to other control measures already in place.</p> <p><u>21 June 2022 SMB</u> Against South-East Government Warning, Advisory and Reporting Point (SEGWARP) criteria, due to interventions applied by ICT, BMKFA’s email security ranking has improved since last evaluated in March 2022.</p> <p><u>20 September 2022 SMB</u> In August Oxford Health NHS foundation trust reported that it was the subject of a ransomware attack, declaring a critical incident over the outage which targeted systems affecting its patients’ care and its finance system. A reminder to BFRS staff about the danger of ‘phishing’ by which ransomware can be introduced to BFRS systems was published on the intranet.</p> <p><u>18 October 2022 SMB</u> The Data Protection and Digital Information Bill (DPDI Bill) was introduced into Parliament on 18 July 2022. The second reading of the DPDI Bill did not take place on 5 September 2022 as scheduled, with a new date not yet published. The potential effects of the DPDI Bill on the Authority if it were to be enacted in substantially the same form have yet to be fully evaluated, however they will likely reduce the resources needed to achieve regulatory compliance.</p>
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Appendix 3 - Corporate Risk Register – as at 18 October 2022

Risk Description	Resp.	Consequences if Untreated	Risk Score (Former) / New			Risk Level	Current Treatment	RAG	Comments / Further Treatment Proposed
			P	I	Σ	HML			
Risk of resurgence of Covid-19 and / or seasonal influenza in 2022/23	Lead Member for Health and Safety and Corporate Risk	Increased levels of sickness absence amongst staff.	(4)	(3)	(12)	M	<ul style="list-style-type: none"> Maintenance of current social distancing and sanitisation regimes in all Authority workplaces, including covid-secure monthly assessments. Hybrid working and gradual reintroduction to office environment Provision of appropriate PPE for staff required to work in close proximity with the public. Appliance / service availability degradation planning. Free seasonal flu jabs available to all staff. Covid-19 app rolled out to all sites, and pushed to all Authority phones Lateral flow testing available to all staff via workplace collect scheme. 	A	<p>18 January 2022 SMB The progression of the highly transmissible Omicron variant is resulting in increased staff absence levels across departments. It is reassuring that the new variant appears less severe, thus reducing the health risks to staff, however, the bigger risk now is our ability to maintain effective service delivery should case numbers continue to rise. The Service has degradation plans in place to manage high staff absence levels and continues to mitigate risks through infection prevention control measures.</p> <p>22 February 2022 SMB Current control measures are keeping Covid absence to a tolerable level, resulting in reduced impact on staff resourcing. Decreasing case numbers, shorter isolation periods and less severe symptoms, owing to Omicron dominance and good vaccine availability and uptake, is leading to an improved picture across the Service. Short term absence spikes and the ongoing risk of emerging variants of concern, continue to be monitored. Impact score reduced from 3-2, probability to remain at 4 owing to turnover of covid absence (three per cent – six per cent) within the workforce and ongoing risk to service delivery.</p> <p>5 April 2022 SMB The effect of the vaccine programme and residual control measures continues to keep staff Covid related staff absence levels within manageable levels. The ability to provide staff with access to Lateral Flow Tests remains to assist with infection control. No change to risk score or RAG status recommended.</p>
	Chief Operating Officer	Potential degradation of capacity or capability to deliver key services to the public and / or sustain supporting functions.	4	2	8	M			

Appendix 3 - Corporate Risk Register – as at 18 October 2022

Risk Description	Resp.	Consequences if Untreated Risk Occurs	Risk Score (Former) / New			Risk Level	Current Treatment	RAG	Comments / Further Treatment Proposed
			P	I	Σ				
Court of Appeal ruling on the McCloud / Sargeant cases: potential impact on staff retirement profile, resourcing to implement required changes and financial impacts thereof.	Lead Member for Finance and Assets, Information Security & IT Director Finance & Assets	Failure to discharge statutory duties. Failure to comply with legal requirements. Unknown / unquantified budgetary impacts.	(5)	(3)	(15)	H	<ul style="list-style-type: none"> Potential impacts on costs to be factored into future Medium-Term Financial Planning process. Recruitment of dedicated specialist resource to evaluate requirements arising from the Court of Appeal ruling and implement necessary administrative changes. 	M	<p><u>13 April 2021 SMB</u> A recent Home Office ‘one-off’ allocation of funding to mitigate some of the cost of additional administrative burdens arising from Court / Tribunal decisions in relation to the Firefighters Pension Scheme (£32,301 being the pro rata share of the £3m allocated nationally) was noted. The potential risks to the schemes administration nationally as a result of provider consolidation were discussed and noted alongside potential cost sharing across fire authorities nationally to offset potential financial risks arising from further litigation in relation to schemes at individual authority level.</p> <p><u>22 June 2021 SMB</u> The Home Office and LGA issued version 2 of their immediate detriment guidance in June 2021. This will assist with the handling of immediate detriment payments.</p> <p><u>19 October 2021 SMB</u> The LGA and the FBU have identified a mutually acceptable framework for handling immediate detriment cases, to assist all parties prior to completion and implementation of the McCloud / Sargeant remedying legislation. A paper will be presented to the meeting of the Executive Committee on 17 November 2021 recommending that the Service adopts this framework.</p> <p>The framework will have internal resource implications for the Service, as well as resourcing implications for its pension administrator.</p> <p><u>18 January 2022 SMB</u> On 17 November 2021 the Executive Committee adopted the Framework with the proviso that the timescale for payments may be extended where it is beneficial to the recipient and the Service to do so.</p>
			4	3	12	M			

Appendix 3 - Corporate Risk Register – as at 18 October 2022

								<p>On 29 November 2021 the Home Office withdrew its informal and non-statutory guidance on processing certain kinds of immediate detriment case ahead of legislation, with immediate effect. However, the MoU and the accompanying Framework is separate from, and is not subject to or dependent on, any guidance issued in relation to immediate detriment before the legislation comes into force.</p> <p><u>22 February 2022 SMB</u> No changes to the risks identified since the meeting on 18 January 2022.</p> <p><u>5 April 2022 SMB</u> Staff retirement trends remain manageable with near term exits effected by 31 March 2022, following which remaining affected staff revert to the revised 2015 scheme. Potential financial risks arising from the 4 yearly revaluation of the scheme will be mitigated as part of the MTFP process. No change to risk score or RAG status recommended.</p> <p><u>21 June 2022 SMB</u> Claimants’ representatives have submitted schedules of test claimants for the purposes of the levels of financial awards to be paid by employers for ‘injury to feelings’. The LGA’s position is that employers should be recompensed by government for any awards.</p> <p><u>20 September 2022 SMB</u> No significant developments to report. Monitoring continues. No change to risk score / RAG status.</p> <p><u>18 October 2022 SMB</u> Cases are being processed as they arise. A provision of circa £250k had been made in the 2020-21 financial year to cover potential awards in relation to the ‘injury to feelings’ claims (referenced 21 June 2022). However, this amount is now available to use for other purposes, as the LGA confirmed on 14 October 2022 that all the settlement payment costs for FBU claimants will be met by the Government and that funds will be provided to FRAs before any payments are made to FBU claimants by FRAs</p>
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Appendix 3 - Corporate Risk Register – as at 18 October 2022

Risk Description	Resp.	Consequences if Untreated Risk Occurs	Risk Score (Former) / New			Risk Level	Current Treatment	RAG	Comments / Further Treatment Proposed
			P	I	Σ	HML			
<p>Increased risk of wildfires, flooding, gales and altered hydrology due to effects of climate change.</p> <p>UK Climate Change Risk Assessment 2022 (publishing.service.gov.uk)</p>	<p>Vice Chairman of the Authority.</p> <p>Chief Operating Officer.</p>	<p>Failure to protect people from the risks associated with climate change including potential damage to:</p> <ul style="list-style-type: none"> • Infrastructure and local businesses • Housing • Agriculture • Food production and distribution • Forestry • Heritage • Sensitive environments • BFRS premises (building fabric) • Education • CNI sites <p>Inability to effectively respond during extreme weather events.</p> <p>Inability to effectively deal with increasing incidents within recycling, electricity generation and distribution, largescale battery storage, and electric/hydrogen fuelled vehicles.</p>	4	3	12	M	<p>Provision of National Operational Guidance programme which adapts to changing environment. Adoption of guidance as best practice across Thames Valley. Strategic gap analysis underway to identify and close gaps relative to national best practice.</p> <p>Provision of equipment and training to deal with wildfire, water rescue and flooding, and extreme weather events. Adverse weather procedure in place and business continuity plans for all sites. Research and development officer continues to identify new equipment and practice to mitigate emerging risks (e.g. new equipment to reduce risk involving fires with photovoltaics)</p> <p>Access to and provision of specialist tactical advisors through national resilience framework.</p> <p>Urban Search and Rescue team in-service equipped to deal with major building/infrastructure collapse</p> <p>Specialist boat rescue capability situated in north and south of county. Both included on national asset register. All staff trained appropriately in working in flood water.</p> <p>Site-specific risk assessments and risk information for high risk sites – being expanded to include broader risks such as wildfire, water rescue and flooding and transport. Access to wildfire severity index and flood forecasting data to assist planning.</p> <p>Targeted national and local prevention messaging to mitigate risks at key points in the calendar (e.g. water safety summer/winter – Barbecues spring/summer – Chimneys – Autumn).</p>		<p>20 September 2022 SMB: Added to Corporate Risk Register.</p> <p>The likelihood and impact of extreme weather-related incidents has been reviewed and escalated following the exceptional summer conditions which stretched the sector beyond what was previously foreseeable.</p> <p>This has prompted a focus to ensure our capabilities are prepared for future similar events, which are now foreseeable to occur again.</p> <p>The Operational debrief process of the major incidents will capture learning to inform future decisions. Where appropriate this will be shared nationally with other Services and agencies.</p> <p>The terms of reference for the Strategic Infrastructure Resilience Group (SIRG) are to be reviewed to include analysis of current capability against foreseeable risks.</p> <p>The Service will explore possibilities of short-term adaptations to existing capabilities and consider long term requirements to inform development of new Community Risk Management Plan</p> <p>Consider any recent PESTEL factors that may have increased the risks and potential impacts to inform the next CRMP, e.g. expanding rural/urban interface increasing wildfire risks, or increased risks of flooding etc.</p>

Appendix 3 - Corporate Risk Register – as at 18 October 2022

						<p>Back-up power generators to protect emergency response sites from power outages. Regular building surveys from facilities team. Fleet replacement programme ongoing.</p> <p>Bunkered fuel stocks and establishing fleet of alternative fuel vehicles where appropriate to mitigate risk of fuel disruption</p> <p>Strategic infrastructure group in place to horizon scan and ensure preparedness for future risks.</p> <p>Engaged with NFCC to identify and prepare for longer term “fit for the future” considerations</p> <p>Engaged in local resilience groups for flood management</p> <p>Isotonic supplements and cool boxes added to appliance inventories</p>	<p>The operational debriefs for the summer major incidents are underway for a ‘Lessons Learned’ report relating to extreme heat conditions experienced in July</p> <p>The NFCC is also planning to capture national work on learning and capability gaps</p> <p>Potential to use Northumberland FRS for Wildfire risk assessment, and learn from other services who are more influenced by prominent wildfire risks</p> <p>Impact of extreme spate / simultaneous demand risks on operating model / capacity gap to feed into future community risk management planning.</p> <p><u>18 October 2022 SMB</u> As per September update. The debrief/operational learning process is progressing through the operational assurance team and a report will be presented to the Authority once complete.</p>
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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: Operational Assurance Improvement Plan (OAIP)

Lead Member: Councillor Gary Hall

Report sponsor: Area Commander Calum Bell, Head of Protection, Assurance and Development

Author and contact: Group Commander Barrie Ackerlay backerlay@bucksfire.gov.uk

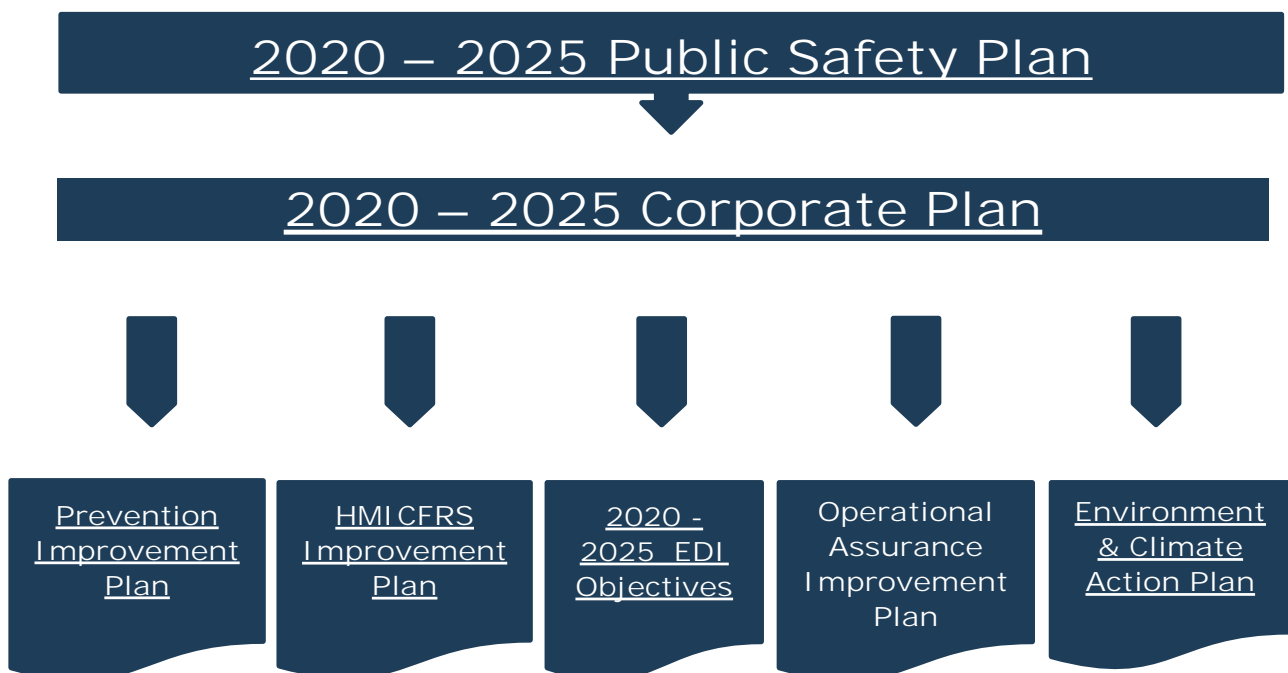
Action: Noting

Recommendations: That the progress made against each improvement detailed within the new updated OAIP is noted

Executive summary:

The purpose of this report is to provide an update on the progress that continues to be made in the delivery of the Service's Operational Assurance Improvement Plan (OAIP).

The 2020 –2025 Corporate Plan is underpinned by several more detailed plans which refer to specific issues, the OAIP is an example of one such plan.



The OAIP contains a comprehensive record of the recommendations and resulting actions taken that are intended to improve operational effectiveness within Buckinghamshire Fire and Rescue Service.

The OAIP is essentially a 'live' document that is regularly updated to incorporate relevant information originating from either trend or gap analysis reports, operational incidents or exercise monitoring, themes taken from both significant local and national events and reports emanating from audits and public enquires.

All recommendations and resulting actions are subject to oversight and governance by the Operational Assurance Group (OAG) before being accepted onto the OAIP.

Any department or individual with responsibility for completing actions on the OAIP is asked to provide supporting evidence about the progressive measures taken to suitably conclude their particular action point.

Recommendations are reviewed periodically to ensure compliance before being completed and archived. This review process ensures the Service maintains and improves standards. Thematic reviews are also held into specific areas to ensure compliance with procedures.

The Operational Assurance Team (OAT) maintains a programme of Station / Watch visits and are responsible for sharing learning across the Service by a variety of means including incident reports, case studies, newsletters, operational bulletins. Confirmation of learning is achieved by direct questioning, Hub of Education And Training (HEAT) thematic quizzes and exercising.

The internal approach towards how the Service now gathers and assess learning from operational activity, has better enabled it to effectively identify emerging issues and then implement practical and corrective solutions, to enhance operational performance.

The main areas of focus for the OAIP continues to be operational learning from incidents and exercises, this is not limited to just those that Buckinghamshire Fire and Rescue Service has attended. A key element of the Joint Emergency Services interoperability Programme (JESIP) Doctrine is that learning is shared across all CAT 1 and 2 Responders through the Joint Operational Learning (JOL) portal and via the National Fire Chiefs Council (NFCC), the Service can also access and share "Learning Events" through the National Operational Learning (NOL) framework.

Good progress continues to be made through delivery of the Operational Exercise Programme, for example the large-scale high-rise exercise at Mellish Court Milton Keynes.

The OAIP has been updated and improved, this can be viewed in Appendix 2 and 3, the reason for this is to enhance both its reporting and inputting functionalities, for example the document now contains a dashboard that provides a quick overview of

the number and status of all actions by department. An action to approve and develop this new OAIP was taken by the OAG.

Financial implications:

There are no direct financial implications associated with this report, as all expenditure is contained within existing budgets.

Risk management:

Delivery of the OAIP will contribute towards ensuring the Service's operational safe systems of work are continuously improved and developed to conform to the latest safety standards and are efficient, effective, and responsive to significant changes in the external or internal environments.

Failure to deliver the OAIP could expose:

- the Service, its personnel, and the public to operational, health and safety risks.
- Buckinghamshire Fire and Rescue Service to reputational and / or financial risks.

The OAIP will inform the ongoing development of the operational workforce plan particularly in relation to areas such as maintenance of operational skills, acquisition training and assessment.

Legal implications:

There are no negative legal implications associated with this report.

Privacy and security implications:

The OAIP does not raise any privacy or security issues.

Duty to collaborate:

Although the Authority has committed to a default position of collaboration with Thames Valley Fire and Rescue Authorities (FRAs). The OAIP relates specifically to Buckinghamshire Fire and Rescue Service operational activity, however any opportunity to collaborate will be explored, as will the sharing of any identified operational learning through existing groups.

Health and safety implications:

There are no negative implications on health and safety associated with this report. The delivery of the OAIP will continue to promote and enhance the existing health and safety culture within the Service with all associated costs being considered and governed through relevant boards.

Environmental implications:

Delivery of the OAIP will enhance the Service’s ability to identify and manage potential environmental hazards in both the internal and external surroundings.

Equality, diversity, and inclusion implications:

Please refer to Appendix 1 – Equality Impact Assessment.

Consultation and communication:

Learning from operational activity or recommendations are routinely published and communicated to all staff, utilising either the Intranet, HEAT or the Operational Assurance newsletter. This approach is intended to ensure there is a clear understanding and appreciation of the collective responsibility there is toward continuous improvement in respect to operational performance.

From a monitoring and reporting perspective, the Head of Protection, Assurance and Development leads on the improvement plan and is chair of the OAG.

The Head of Operational Training and Assurance has responsibility for delivering the OAIP in conjunction with the OAT.

Appendix	Title	Protective Marking
1	Equality Impact Assessment Sep 2022	
2	OAIP Oct 2022	
3	OAIP Dashboard Oct 2022	

Service Document Standard Form:

Equality Impact Assessment (EIA)

Linked documents: *Equality Impact Assessment Guidance note*



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1: Overview information

Name of activity / change / project:	Operational Assurance Improvement Plan (OAIP)
Directorate/department:	Protection, Assurance and Development
Name(s) of person(s) completing the assessment	Group Commander Barrie Ackerlay
Date of commencement of assessment:	15.09.2022

2: What is the aim and purpose of the activity / change / policy / procedure / project you are assessing?

Executive summary:

The purpose of the report is to provide an update on the progress that continues to be made in the delivery of the Service's Operational Assurance Improvement Plan (OAIP).

The OAIP contains a comprehensive record of the recommendations and resulting actions taken that are intended to improve operational effectiveness within Buckinghamshire Fire and Rescue Service.

The OAIP is essentially a 'live' document that is regularly updated to incorporate relevant information originating from either trend or gap analysis reports, operational incidents or exercise monitoring, themes taken from both significant local and national events and reports emanating from audits and public enquires.

All recommendations and resulting actions are subject to proper oversight and governance by the Operational Assurance Group (OAG) before being accepted onto the OAIP.

3: Who will be affected by the activity / change / policy / procedure / project, and how? Consider members of the public, employees, partner organisations etc.

The only staff group to be affected are the Operational Assurance Team who collates the information and action owners following the recommendations.

This information is held for organisational and legal reasons and will be retained for only as long as necessary

Service Document Standard Form:

Equality Impact Assessment (EIA)

Linked documents: *Equality Impact Assessment Guidance note*



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4: What information is already available that tells you what impact the activity / change / policy / procedure / project has/will have on people? (*Please reference*) Consider quantitative and qualitative data, consultation, research, complaints etc. What does this information tell you?

Information already available includes completion rates and duration to complete regarding actions on the OAIP. In addition, feedback from the OAT at the regular meetings which discuss the OAIP.

5: Does the activity/change have the potential to impact differently on individuals in different groups? Complete the table below by ✓ the likely impact.

Assessment of impact on groups in **bold** is a legal requirement. Assessment of impacts on groups in *italics* is not a legal requirement, however it will help to ensure that your activity does not have unintended consequences.

Protected characteristic	Positive	Negative	Neutral	Rationale for decision.
Individuals of different ages	✓			All BFRS staff, from a range of age groups, could receive actions following recommendations added to the OAIP.
Disabled individuals		✓		All reasonable adjustments are put in place to accommodate individuals; however, the individual who requires reasonable adjustment / assistance to highlight this so it can then be discussed. Further research is required to determine if there are opportunities within the OAIP

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Service Document Standard Form:

Equality Impact Assessment (EIA)

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				<p>reporting process to accommodate further reasonable adjustments.</p> <p>The OAIP together with its recommendations and actions should accommodate the variety of learning styles and hidden disabilities staff may have.</p>
Individuals transitioning from one gender to another			✓	No impact in this area.
Individuals who are married or in civil partnerships			✓	No impact in this area.
Pregnancy, maternity and new parents			✓	No impact in this area as pregnant individuals do not receive actions from the OAIP.
Individuals of different race			✓	No impact in this area.
Individuals of different religions or beliefs			✓	No impact in this area.
Individual's gender identity			✓	No impact in this area.
Individual's sexual orientation			✓	No impact in this area.

6: What further research or consultation is needed to check the impact/potential impact of the activity / change / project /policy / procedure / on different groups? If needed, how will you gather additional information and from whom?

Further research is required reference - does the OAIP and actions from it accommodate the array of learning styles and hidden disabilities staff may have.

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Equality Impact Assessment (EIA)

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7: Following your research, considering all the information that you now have, is there any evidence that the activity / change / project / policy / procedure is impacting/will impact differently or disproportionately on some group of people?

Not at this time, further research and consultation is required.

8: What amendments will you make/have been made to the activity /change / project /policy / procedure as a result of the information you have? If a negative effect has been identified, how could it/has it been lessened, does the original plan need changing?

No changes at this stage, however further research is required to ensure the OAIP, its recommendations and subsequent actions accommodate all learning styles and hidden disabilities.

9: After these amendments (if any) have been made, is/will there still be a negative impact on any groups?

Yes – please explain below

No – go to section 11

YES

Disabled individuals

All reasonable adjustments are put in place to accommodate individuals; however, the individual who requires reasonable adjustment / assistance to highlight this so it can then be discussed.

Further research is required to determine if there are opportunities within the OAIP reporting process to accommodate further reasonable adjustments.

The OAIP together with its recommendations and actions should accommodate the array of learning styles staff may have.

10: Can continuing or implementing the proposed activity/change/project, without further amendment, be justified legally? If so, how?

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Service Document Standard Form:

Equality Impact Assessment (EIA)

Linked documents: *Equality Impact Assessment Guidance note*



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YES

Proposal falls in line with existing procedures and current expectations regarding the OAIP.

11: How can you ensure that any positive or neutral impact is maintained?

Through on-going reviews and consultation with all involved.

12: How will you monitor and review the impact of the activity/change/project once it has been implemented?

To constantly review and further consultation is required.

13: Sign off

Name of department head / project lead

Head of Protection, Assurance & Development

Date of EIA sign off:

Sep 2022

Date(s) of review of assessment:

EIA to be reviewed on an ongoing basis, to ensure all equalities aspects considered in line with best practice

This information is held for organisational and legal reasons and will be retained for only as long as necessary

Service Document Standard Form:

Equality Impact Assessment (EIA)

Linked documents: *Equality Impact Assessment Guidance note*



14. Action Plan - the table below should be completed to produce an action plan for the implementation of proposals to:

- Lower negative impacts
- Ensure the negative impacts are legal under anti-discriminatory law
- Provide an opportunity to promote equality, equal opportunity and improve relations within equality target groups i.e. increase
- the positive impact

Area of impact	Changes proposed	Timescales	Resource implications	Comments
Disabled individuals	No proposals at this stage. Further consultation required using the statistics available.	NA		

This information is held for organisational and legal reasons and will be retained for only as long as necessary

Service Document Standard Form:

Equality Impact Assessment (EIA)

*Linked documents: Equality Impact Assessment
Guidance note*



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Appendix 2 - Operational Assurance Improvement Plan (OAIP) Oct 2022

OAIP - Action Log												
Ref	No.	Category	Sub Category	Report recommendation number	Recommended Action	Action Owner(s)	Date action assigned	Start date	Priority H/M/L	RAG status	Progress & Issues Report	Status
OAL report 2019	6	Height, structures and confined space	High-rise	R5, R9	Operational Assurance to promote High-Rise exercising as part of the exercise programme and to look to carryout Service level exercises within Service or at the Fire Service College. To include themes of stay put to full building evacuation.	Group Commander Operational Training & Assurance	30/09/2020	30/09/2020	Medium	G	01/09/2022 update JN: Overarching high rise report will be completed following agreement / release of Ex Hammer report at OAG 07/09/22. OAG 07/09/22 update: JN advised that the overarching report consolidating all of the learning / recommendations arising from recent high rise exercises had been delayed. However, this would be brought to the next OAG meeting. In the meantime, the Exercise Hammer report at agenda item 3 contained many of the key recommendations and feedback in relation to these would be helpful in terms of finalising the overall report. CB confirmed that he was content with this approach. Overarching High-Rise Report to be brought to next OAG meeting .	In progress
Stephenson House Ex Eden Ex Nakatomi	12	Height, structures and confined space	SSRI	R1	Review of High-Rise SSRI database to confirm if information regarding siting and reach of the TTL is recorded within. Review question set to ensure that siting and reach of TTL is assessed and recorded.	Group Commander Technical	08/09/2021	08/09/2021	Medium	G	OAG 06/04/22 update AB: External contractor is completing the scheduled development work which we expect to have completed early April. SC asked if information relating to the reach and siting of TLs would include those based over the border in neighboring FRS. AB advised that this was not currently within the scope of the work. JN advised that the current priority is for TTLs to accompany SSRI visits to tall buildings to determine best places to optimise reach and establish limits and how these would affect evacuation plans.	In progress
Stephenson House Ex Eden Ex Nakatomi	20	Incident Command	Comms	R9	Remind all of the importance of having a communications strategy in place especially at larger, more complex incidents. Commanders to be familiar with radio equipment and procedures of neighbouring Services/other agencies and use of multi-agency talk groups/Airwave Tac-Ads.	Group Commander Technical	08/09/2021	08/09/2021	Medium	G	OAG 06/04/22 update: Response Policy are working on the OIN in readiness for publication. 09/08/22 AB - No further update at this time.	In progress
Stephenson House Ex Eden Ex Nakatomi	26	Height, structures and confined space	SSRI	R15 Risk register	SW to review risks associated with high-rise review findings and consider for inclusion in PRR Risk Register.	Head of Prevention, Response and Resilience	08/09/2021	08/09/2021	Medium	G	OAG 06/04/22 update: debrief 05/05/22 overarching high rise report will follow debrief. JN advised that this action now sits with ST and is pending finalisation of the over-arching high rise Report. ST advised that he will be reviewing the PRR Risk Register on 8 April so will consider it then. JN indicated that given progress since this action was raised, the risk would still need to be included but that the risk score may now be lower.	In progress
Cressex Report	41	Incident Command	Command Support	R8 ICS: Decision Log filled in by inexperienced CSO who has not had formal training.	Source and deliver Loggist / Decision Log training for Commanders and Incident Command Unit Operatives.	Group Commander Operational Training & Assurance	12/01/2022	12/01/2022	Medium	G	06/01/22 update SCu: explore options for professional loggist course for a smaller cadre of personnel to be deployed on the ICU - ICU staffing model dependant? JM advised that he had approached the Thames Valley Development Group to agree that a sister group would be set up to review all of the command support documentation in use across the Thames Valley with a view to aligning. However, this is on hold pending it being agreed by the Group Commander Alignment Group. ST asked SHa and AB to raise at the Alignment Group with a view to progressing. 08/08/2022 BA update: BA to look into this further.	In progress
Thames Reach	42	Water rescue	Mobilising	R1 Mobilising: Initial turn out for incident JCS1P1 and JCS1R1. Due to WRU being switch crewed TVFCS needed to be contacted to switch from 51P1 to 51R1.	TVFRSs to understand the resourcing models for switch crewing appliances / vehicles for each service and inform TVFCS of the differences. Is it technically feasible for FSR to update Vision with accurate switch crewing availability / geographic location for true nearest is nearest mobilisation?	Group Commander Technical TVFCS	12/01/2022	12/01/2022	Medium	G	09/08/22 AB - I would argue that this does not sit with technical. This should sit with Resourcing as the system owners of FSR. OAG 07/09/22 update: SHa advised that this was still work in progress but that he would ensure that it is added to the agenda for the next operational alignment group meeting.	In progress
Thames Reach	48	Water rescue	Resourcing	R8 Mobilising: 4x4 access to the south bank is possible and could have been achieved had the resource been asked for / crew available.	Consider vehicular access points on the Cock Marsh side of the river and types of suitable transport (4x4) appliances or vans. Risk assess and consider 4x4 accessible areas along the river stretch within Bucks and neighbouring services. Consider whether this information should be added onto SSRI.	Group Commander Resourcing, Projects and Service Delivery North Group Commander Technical	12/01/2022	12/01/2022	Medium	G	OAG 06/04/22 update: AB advised that this requirement has been raised with Nigel Turner who has mapped all the launch points for the boat in collaboration with his RBFRS counterpart. AB is awaiting feedback as to whether there is capacity to address the requirement via this route (AB to update at next OAG meeting).	In progress

Operational Assurance Improvement Plan (OAIP) Oct 2022

Thames Reach	49	Search rescue & casualty care	Multi-Agency	R9 Capabilities: communications between FRS and SCAS HART were difficult. FRS staff to be more aware of capabilities and levels of skill of partner agencies such as HART, Lowland Search and Rescue teams.	BFRS Water Rescue Lead Officer nominated, form a TVLRF multi-agency working group / subcommittee to improve awareness of other agency capabilities and processes.	Water Rescue Lead Officer	12/01/2022	12/01/2022	Medium	G	26/09/2022 SG update: The TVLRF Water Rescue Framework continues to be delayed due to other SCAS work commitments, however the requirement from JOL to add the survivability model has been confirmed. SCAS has reported that they hope to recommence work on this over the coming few weeks.	In progress
Folly Inn	58	Fires in buildings	SSRI	R1 Inaccurate 1.7a Information: Lack of a responsible person / owner, or on scene witness, legacy information on TIP sheet. Possibility of making an incident persons reported with out of date or limited information.	Review of all 'inactive' SSRI information, old risk data from the TIP sheet is still available to crews if not removed from the system by means of a FB1.7a. Issue and promote clear guidance on how to manage similar sites / situations. ICs to consider the currency of the information / local knowledge / all of the information at hand prior to making an incident persons reported.	Group Commander Technical Group Commander Training & Assurance	12/01/2022	12/01/2022	Medium	G	OAG 06/04/22 update: SHa confirmed that TVFCS can assist with entering updated risk information into Vision. AB advised that Barrie Ackerlay is picking this issue up from the BFRS side. Also, with the new SSRI module, there is an accompany review of what should go on the 'tip sheet' and how that information is managed and updated on an ongoing basis and also migrated from the old system to the new in the first instance. SHa advised that part of the problem is that the pre-existing SSR information had been bulk uploaded from the old Vision system to the new without having been cleansed. ST advised that he is intending to prepare a paper on how to address this issue and asked if it is possible to delete data back from a particular date. SHa advised that this would have to be done at the individual record level. AB advised that he had drafted a paper on this same issue for Dave Norris prior to the pandemic – AB to forward to ST.	In progress
Folly Inn	59	Fires in buildings	Closing Incidents	R2: Delay and uncertainty when declaring the incident as "All persons accounted for" due to unstable structure preventing access – lack of credible exit strategy for FRS resources.	Commanders to consider logical steps required for an incident to be made "All persons accounted for" allowing for the incident to be scaled down / closed appropriately. Review of existing guidance.	Group Commander Technical FI Lead Officer	12/01/2022	12/01/2022	Medium	G	OAG 06/04/22 update: JN advised that there is no existing guidance in relation to this issue and indicated that he would discuss further with AB and JM and then update ST.	In progress
Folly Inn	60	Fires in buildings	SSRI	R3: SSRI information made inactive rather than being updated to reflect the derelict site with associated hazards and control measures.	Review of inactive derelict buildings / sites process to be reviewed. SSRI and TVFCS systems do not talk to each other and relies on manual intervention.	Group Commander Technical	12/01/2022	12/01/2022	Medium	G	OAG 06/04/22 update: AB advised that this is being looked at currently – including requirements for an educational piece for staff to ensure that they understand the process for making mobilised changes at individual property level including review by Group Commanders before submission to TVFCS via the dedicated email address. This would be picked up as part of the roll-out of the new SSRI module and linked to the wider education relating to RD mapping and how that manages the risk profile. Noted.	In progress
M25	61	Transport	Mobilising	R2 Add water carrier to motorway PDA for large vehicle fire	Investigate whether PDA should be adjusted to include a water carrier for incidents involving confirmed large vehicle fires on motorway. (TV collaboration opportunity?)	Group Commander Technical	06/04/2022	06/04/2022	Medium	G		In progress
M25	63	Transport	Comms	R4 Communications / incorrect terminology / JESIP / Training Packages and OINs	ICs and crews to be reminded of importance of correct terminology and that messages must be clear and concise / Verify correct recording and confirmation of radio messages from CSO and IC before sending. ICs to be reminded that when JESIP / multi-agency meetings have taken place this should be recorded in messages to TVFCS. Training package and latest OIN had different terminology, the training package had not kept up to date with OIN releases.	Group Commander Technical Group Commander Training & Assurance	06/04/2022	06/04/2022	Medium	G	OAT Newsletter article (Radio Messages) published MAY-JUNE 2022. OAT Newsletter article (Radio Messages) published MAY-JUNE 2022. Confirm responsibility / procedure for updating training packages reflect current and future updates to OINs 08/08/2022 BA update: SC Brinklow is trialing using watch's to update / create new presentations for HEAT. 6 watch's at Newport and Broughton are being used and their deadline to produce a product is 31st Aug 2022.	In progress

Grenfell Project Programme	67	Height, structures and confined space	High-rise		OAIP will hold an overview of all actions contained within the Grenfell Project Programme	Group Commander Technical	08/12/2020	08/12/2020	Medium	A	<p>1 In-progress 17 In-progress 32 In-progress</p> <p>2 In-progress 18 Complete 33 In-progress</p> <p>3 Complete 19 In-progress 34 Complete</p> <p>4 In-progress 20 Complete 35 In progress</p> <p>5 In-progress 21 In-progress 36 In-progress</p> <p>6 In-progress 22 Complete 37 In-progress</p> <p>7 Complete 23 Complete 38 In-progress</p> <p>8 In-progress 24 Complete 39 In-progress</p> <p>9 In-progress 25 In-progress 40 Complete</p> <p>10 In-progress 26 Complete 41 Complete</p> <p>11 In-progress 27 In-progress 42 Complete</p> <p>12 Complete 28 Complete 43 Complete</p> <p>13 Complete 29 In-progress 44 In-progress</p> <p>14 In-progress 30 In-progress 45 Complete</p> <p>15 Complete 31 In-progress 46 In-progress</p> <p>16 In-progress</p> <p>KEY-Prepared for change =BFRS is ready to change procedure/policy however has to wait for external change first i.e. legislation</p> <p>OAG 26/5/2021 - SC / DT to liaise re: alignment of reporting for Overview & Audit meetings. 31/08/2021 DT: Not yet complete</p> <p>08/09/2021 DT: annual leave and BA project commitments have slowed progress over the summer period. However, DT would liaise with Phill Mould to provide CB with forecast completion dates for the actionable elements of the programme</p>	In progress
Kerslake Report Gap Analysis	69	Operations	Comms	Communications Element 3, 5, 7, 11, 19,28, 29	To liaise with TVFCS to ensure progression of this gap analysis and TVFCS gap analysis.	Group Commander Resourcing, Projects and Service Delivery North			Medium	G	<p>OAG 07/09/22 update: AB advised that outstanding actions arising from the Kerslake Report had been consolidated with those relating to the Grenfell enquiry and would be progressed by DT. CB stated that this had been done to ensure a clear separation between the delivery and assurance roles, the latter of which is responsible for quality assurance and verification that required changes to practice have been embedded rather than implementing the changes themselves. CB asked that this item be progressed to completion prior to the next OAG Meeting.</p>	In progress
Chearsley	71	Operations	Mobilising	R2 BA back up - BFRS do not mobilise a second BFRS pump for BA back up within or outside its own borders. OFRS / RBFRS / other neighboring FRSs do.	<p>1.Alignment of practice and procedures across the Thames Valley would be progressed via the BA Collaboration Project;</p> <p>2.Response Policy would look at whether there is a need to change the current policy of not mobilising a second pump for BA back-up in light of wider practice across the South-East Region.</p>	Head of Prevention, Response and Resilience	06/04/2022	06/04/2022	Medium	G	<p>OAG 06/04/22 update: Thames Valley (TV) BA collaboration delivery will reduce the requirement to mobilise additional resources within TV. AB advised that this would be addressed via the roll-out of the TV BA collaboration project which would align procedures across the TV FRS over the next year. Following this, the wider issue of cross border mobilisations from other neighboring FRS can be considered. In the meantime, Incident Commanders still have discretion to request additional resources as required which would also address any over the border incident requirements. ST and SC noted that this has been a longstanding and recurring issue, and that a review of practice across the South-East Region would be beneficial to establish whether or not BFRS is an outlier.</p>	In progress
Chearsley	72	Operations	Fire Investigation	R3 Improve Fire Investigation knowledge of operational staff / Promote that scene preservation is key to any investigation / actions taken need to be recorded.	FI training for crews required to improve awareness of fire investigators roles / expectations. Produce / publish HEAT package to compliment OIN.	Group Commander Community & Business Safety Policy BFRS FI Lead	06/04/2022	06/04/2022	Medium	G	<p>OAG 07/09/22 update: SH confirmed that a presentation is being prepared for the next JO input session. Input is being received from all FIs with the assistance of Sean Brannon if required. Once this presentation has been given the FI team are looking to use the information to create a learning package to go on HEAT. Noted.</p>	In progress
Chearsley	77	Operations	OTB FRS	R8 Hydrant information not available on OFRS MDTs or appliance tablets.	Review feasibility of sharing hydrant information across the Thames Valley FRSs (TVFRSs) as standard / added to TV MDTs.	Group Commander Technical	06/04/2022	06/04/2022	Medium	G	<p>09/08/2022 AB - Sharing of Hydrant information is currently being tested with LFB. Once a process is in place then this will be explored across the TV.</p>	In progress

Operational Assurance Improvement Plan (OAIP) Oct 2022

Exercise Hammer	78	Fires in buildings	High-rise	<p>R1 TVFCS asked the assigned crews whilst mobile if they wanted the information received from early FSG calls</p> <p>Although crews were state 22, FSG information was still being passed by TVFCS. This was recorded on paper in the rear locker of one of the first attending appliances</p> <p>Initial CS was under resourced and initial FSG information was recorded in a manner where it could have easily been overlooked or lost</p> <p>FSG was not consistently shared with the incident ground</p>	<p>All FSG information to be recorded on relevant incident log by TVFCS and shared with FRS point of contact at the earliest opportunity (first crews in attendance were state 22 – all crews committed) (TVFCS)</p> <p>Explore other alternatives / robust method for sharing / recording FSG information with relevant stake holders (GC Technical / TVFCS)</p> <p>Develop FSG training package / input / familiarisation for Commanders and ICU operators (GC Training & Assurance / TVFCS)</p> <p>Consider early nomination of an Evacuation Commander</p>	<p>Group Commander Operational Training & Assurance Group Commander Technical Group Commander TVFCS</p>	09/07/2022	09/07/2022	G	<p>JN drew attention to the first recommendation relating to fire survival guidance and the potential to create HEAT training packages to address the issues around recording and sharing information between the incident ground and fire control. Linkages to the Command Support project were also recognised as the software includes a fire survival guidance module which will link to Vision. Some issues had arisen with Fire Control attempting to contact crews at 'State 22'. SHa indicated that he would need to review this as is not captured in TVFCS processes and potentially refer it to the Operational Alignment group for resolution. Part of the problem is that RBFRS provide their pumping appliances with both hand-held and vehicle mounted radios whereas BFRS and OFRS do not. DT indicated that there is some existing guidance in the relevant OIN, however SHa was of the view that this was insufficient to address the issue. It was therefore agreed that AB would progress resolution of the issue via the Operational Alignment route.</p> <p>OIN-TV-226 Evacuation Commander published JUN 2022 + OAT Newsletter article (SEARCHING) published JULY-SEPT 2022. Recommend move to complete at next OAG.</p>	In progress
Exercise Hammer	79	Operations	Comms	<p>R2 Sighting of TTL – No MDT on TTLs results in crews unable to pre-plan whilst enroute, reliant on either local knowledge or information obtained once on scene. All paper copies removed from BFRS appliances and specials.</p>	<p>Explore the option of installing MDTs on TTLs and other specialist appliances</p>	<p>Group Commander Technical ICT</p>	09/07/2022	09/07/2022	G		In progress
Exercise Hammer	80	Operations	Comms	<p>R5 Bedfordshire FRS officers must carry their mobile phone attached to their tunic for high rise incidents. These were used to effectively communicate between the FSG Commander and Search Sector Commander. Beds FRS officers have their mobile numbers on the tallies so CS can contact them. They have been issued a clip for attaching their phones to tunics</p>	<p>Explore viability / options for issuing mobile phone clips / cases to all appliances and officers</p>	<p>Group Commander Technical</p>	09/07/2022	09/07/2022	G		In progress
Exercise Hammer	81	Operations	Comms	<p>R6 Emergency Sharers Multi-Agency (MA) airwave talkgroup was established at the beginning of the exercise by police control and the details of which passed to MA commanders but not utilised throughout the incident – this has been observed and reported on multiple exercises and incidents</p>	<p>All FDOs to receive ES talkgroup familiarisation / training from Service Operational Comms Tac Advisor</p>	<p>Group Commander Operational Training & Assurance</p>	09/07/2022	09/07/2022	G	<p>OAT Newsletter article (OPERATIONAL COMMUNICATIONS TACTICAL ADVISORS - OCTA) published JULY-SEPT 2022.</p>	In progress

Operational Assurance Improvement Plan (OAIP) Oct 2022

Exercise Hammer	84	Fires in buildings	High-rise	<p>R9 Due to the number of people requiring rescue in the search sector, it was discussed how to safely evacuate them and if crews could be deployed without BA and firefighting media above the fire floor</p> <p>Search sector did not undertake any meaningful or effective search / clearance above the fire sector (the search sector), tactics remained largely unchanged despite a move from stay put to simultaneous evacuation</p> <p>Ensure the search sector is resourced sufficiently to help support any change in evacuation strategy</p>	<p>Review of Operational guidance in regard to PPE / RPE / firefighting media requirements when searching above the fire sector (OIN-TV-225 Search Sector Commander and OIN-TV-619 Fires in Tall Buildings) (RP)</p> <p>A risk assessment for this activity needs to be conducted and communicated appropriately. BA must be worn in situations where a credible incident is underway (OIN-TV-625 Evacuation and Rescue of Persons) (RP)</p> <p>ICs to consider early implementation of a search sector as soon as resources permit, resources required are likely to be considerable (OAT)</p>	<p>Group Commander Operational Training & Assurance Group Commander Technical</p>	09/07/2022	09/07/2022	G	<p>JN referred to the lack of a tactical plan to search floors 11 – 18. AB indicated that aspects of this would be addressed in the second phase of the BA project as part of the overall alignment programme. The recommendations in relation to this issue were endorsed.</p> <p>OAT Newsletter article (SEARCHING) published JULY-SEPT 2022.</p>	In progress
Exercise Hammer	85	Operations	High-rise	<p>R10 The tactical plan evolved throughout the exercise but in the main was focused on how to adopt high rise procedures with multiple FRS (BA crews) in attendance rather than on how to simultaneously evacuate residents once the evacuation strategy had changed</p>	<p>Develop evacuation training package / input / familiarisation to be given to Commanders and ICU operators. OIN-TV-226 Evacuation Commander published JUN 2022 (TA / OT)</p> <p>Create and release OAT thematic quiz follow release and embedding of training package (OAT)</p>	<p>Group Commander Operational Training & Assurance</p>	09/07/2022	09/07/2022	G		In progress
Exercise Hammer	86	Height, structures and confined space	Specialist Equipment	<p>R11 TTL was used to good effective but lacked reach for the size of the building, further into the incident an assistance message was sent requesting the attendance of two "high reach TTLs"</p>	<p>OICs to be aware of the limitations of standard reach TTLs and terminology used when requesting high reach TTLs. In this instance, TVFCS would have mobilised the next closest standard TTL (OAT)</p> <p>Explore options of introducing new high-rise capabilities – BFRS currently have 2 x 32m TTLs, LFB have 3 x 64m TTLs (Magirus vehicles built at Emergency One in Glasgow) (R&D)</p>	<p>Group Commander Operational Training & Assurance Group Commander Technical</p>	09/07/2022	09/07/2022	G	<p>OAT Newsletter article (AERIAL APPLIANCES) published JULY-SEPT 2022.</p> <p>It was also noted that high-rise buildings with 19+ floors are now being approved for Milton Keynes and that these would exceed existing high-reach capabilities. JN acknowledged this and indicated that currently there are only three 64 metre TTLs that could be potentially called upon. CB advised that it would be unrealistic to expect that equipment could be provided for every conceivable situation and that given changes to legislation and building regulations, preventative and protective measures, including reliable means of alerting residents and provision of safe means of escape would be the primary response in the event of an incident.</p>	In progress
Exercise Hammer	88	Operations	Specialist Equipment	<p>R13 The police drones were used towards the end of the incident but were able to share live images with the ICU via a MS Teams link</p> <p>The drones are also equipped with thermal imaging and loud halers</p>	<p>Commanders to be made familiar with the TVP drone capabilities and how to request their attendance via TVFCS. Invite TVP drone lead to attend FDO training (BFRS drone lead / TA)</p> <p>Commanders to consider an early assistance message for a drone so to allow time for travel and setup (OAT)</p>	<p>Group Commander Operational Training & Assurance Group Commander Technical</p>	09/07/2022	09/07/2022	G	<p>OAT Newsletter article (DRONES) published JULY-SEPT 2022.</p>	In progress
Exercise Hammer	89	Fires in buildings	BA	<p>R14 Some BA crews in the later stages did not present at the BA board with Fire Escape Hoods</p>	<p>Crews to be reminded of the importance of carrying Fire Escape Hoods at persons reported incidents (OAT)</p> <p>Commanders to request additional stock to be held at the bridgehead for this incident type – guidance to be updated (RP)</p>	<p>Group Commander Operational Training & Assurance Group Commander Technical</p>	09/07/2022	09/07/2022	G	<p>OAT Newsletter article (SEARCHING) published JULY-SEPT 2022.</p> <p>OAT Newsletter article (SEARCHING) published JULY-SEPT 2022.</p>	In progress

Operational Assurance Improvement Plan (OAIP) Oct 2022

Exercise Oak Exercise Snowflake Exercise Speedbird	92			R2 Lack of information for radiation equipment in service (EPDs / Survey Meter) Training materials contain minor inaccuracies	Produce equipment notes for EPDs / Survey Meter Review / revise training packages for EPDs / Survey Meter following production of equipment notes in liaison with HMA lead	Group Commander Technical	09/07/2022	09/07/2022	G		In progress
Exercise Oak Exercise Snowflake Exercise Speedbird	93			R3 Lack of overall knowledge of radiation hazards, risks posed, operational procedures and radiation detection equipment within BFRS	Continue to exercise with GE Healthcare to improve knowledge of site and radiation in general / explore opportunities to re-establish training externally (Radsafe Harwell) (HMA lead / SC AME & BEA) Continue to exercise with GE Healthcare to improve operational response and working relationships (SC AME & BEA) Review OIN-TV-614 Radiation Incidents v3 (on completion of issue / recommendation 2) if necessary (RP) Thematic Radiation quiz to be produced for knowledge evaluation on completion of revised and published materials and external training opportunities (OAT)	Group Commander Operational Training & Assurance Group Commander Technical Group Commander Response South	09/07/2022	09/07/2022	G	JN drew attention to lack of knowledge of radiation hazards, risks posed, operational procedures and radiation detection equipment. The recommendations in relation to these issues were endorsed, including continuing work with GE Healthcare. CB also advised, in the context of radiation risks more widely, that free training and information is available from Radsafe and recommended re-establishing contact with them as a source of support and guidance.	In progress
Exercise Oak Exercise Snowflake Exercise Speedbird	94			R5 Personnel unsure of their nominated role and therefore responsibilities / wrong tabards and inserts worn	Produce sector command aide memoires with roles / responsibilities / tabard and insert information - to be kept in command wallet for use at training and incidents (RP)	Group Commander Technical	09/07/2022	09/07/2022	G		In progress
Kings Hotel	99	Operations	SSRI	R2 Premises building plans and risk information were not readily available – as now - in the early stages of the incident	Investigate methods to ensure building plans are available for all properties of this type. (RP) Include as a prompt as part of the SSRA visits. Protection to reinforce through their own methods	Group Commander Prevention and Resilience Group Commander Technical	09/07/2022	09/07/2022	G	JN highlighted importance of improving technology to facilitate sharing of relevant incident information such as SSRI / ARA and live video feeds from TTLs and drones which can be displayed on tablets. OAG noted and endorsed the recommendations set out in the report and for them to be included in the OAIP	In progress
Kings Hotel	100	Operations	Resourcing	R4 Limited information available en route. No rationale given for the make-up, or any messages sent over main scheme radio during the 30-minute drive to the incident	TVFCS to include significant information on subsequent turnout details (BOSS Mobile) and update MDTs with live information accordingly Promote to ICs to give basic rationale for make-ups (OAT)	Group Commander Operational Training & Assurance Group Commander TVFCS	09/07/2022	09/07/2022	G	OAT Newsletter article (RATIONALE FOR "MAKE UP" MESSAGES) published JULY-SEPT 2022.	In progress
Kings Hotel	102	Operations	Specialist Equipment	R11 TTL from High Wycombe was off the run (for a protracted period of time), the TTL from West Ashland was initially used effectively as water tower (cage removed due to mechanical defect) however was not effective at the latter stages / targeting hot spots due to the operators working blind and relying on an ALP to guide them	Inform / guidance for TVFCS of the different configurations and limited capabilities of BFRS TTLs (cage removed -> water tower) and how the assets are assigned for deployment (RP)	Group Commander Technical	09/07/2022	09/07/2022	G		In progress

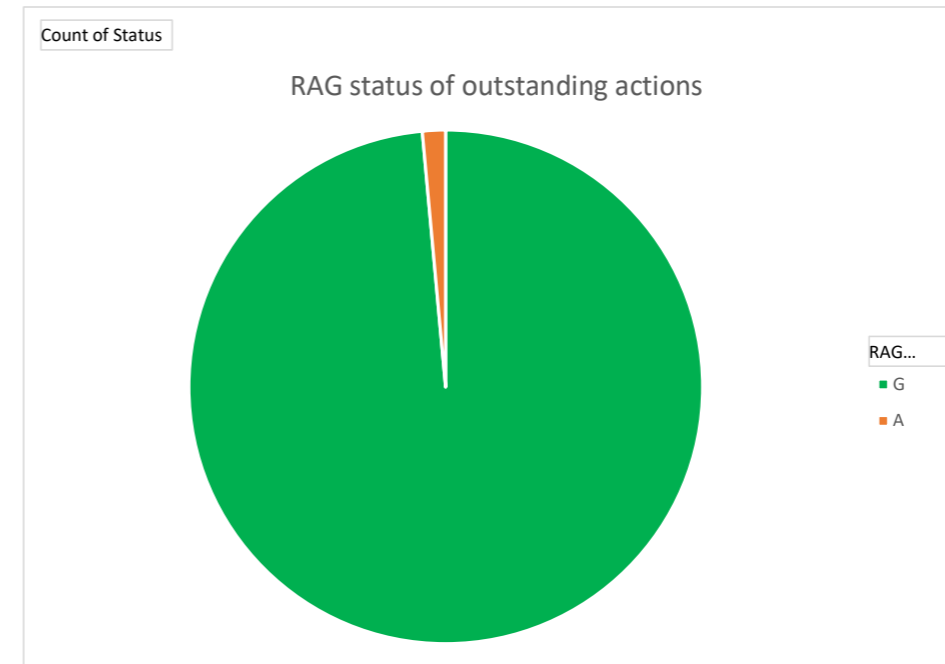
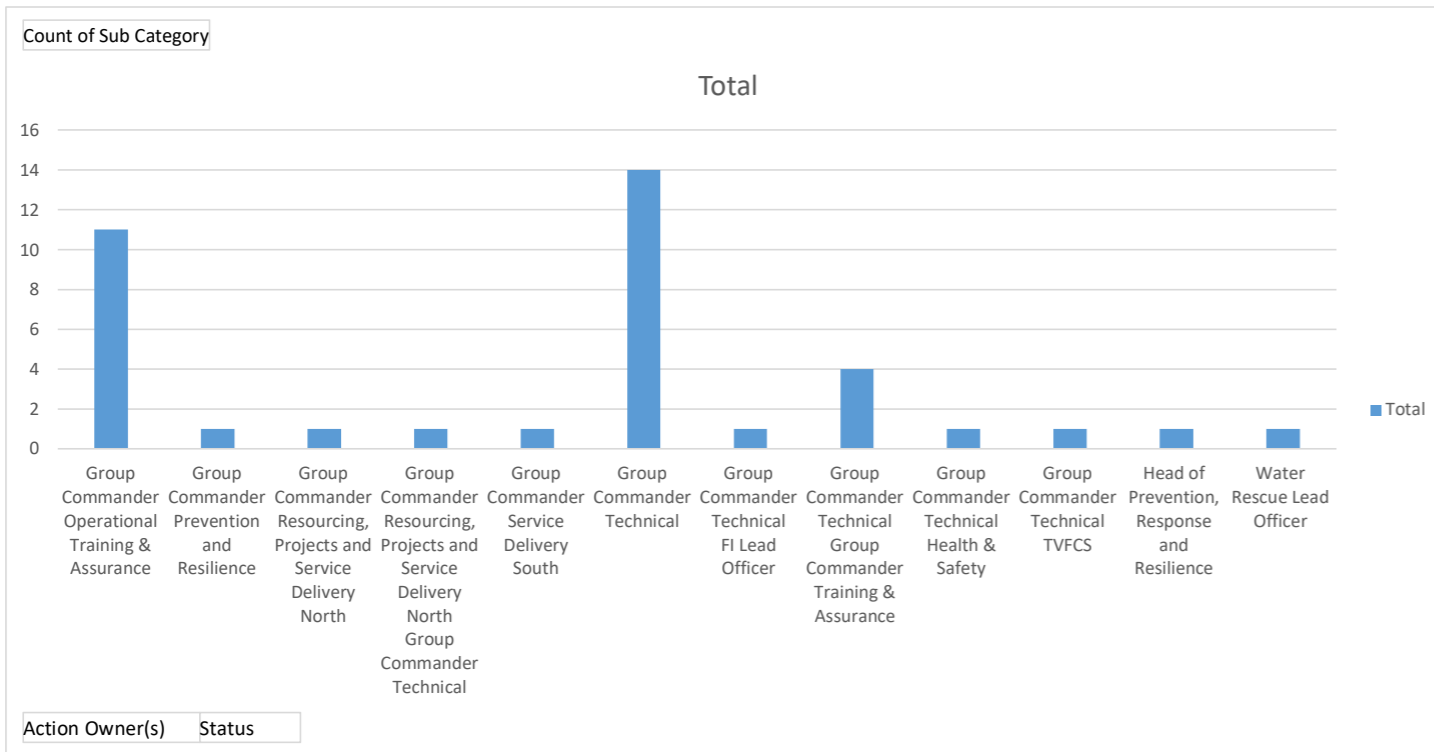
Fairport Containers	107	Operations	Specialist Equipment	R1 TIC readings were initially inconsistent due to variations in TIC placement, this was resolved by improvising FRS equipment to fix TIC in a static position	Research and consider procurement of tripod attachment for TICs (R&D)	Group Commander Technical	09/07/2022	09/07/2022		G		In progress
Fairport Containers	111	Operations	Comms	<p>R8 Communication / lack of public updates regarding ongoing A41 road closures. FDO unable to contact comms team from incident ground (mobile phone / through TVFCS)</p> <p>When requesting BFRS comms team through TVFCS the JC Comms callsign is paged – this is the BFRS ICT team callsign, this causes confusion both at TVFCS and for BFRS staff.</p>	<p>Confirm procedure for contacting / availability of BFRS comms team 24/7 (RD / Comms)</p> <p>Request change of callsign or clarification of guidance and awareness regarding JC Comms (ICT) callsign (RD / TVFCS)</p>	<p>Group Commander Technical</p> <p>Group Commander TVFCS</p> <p>Communication Team</p>	09/07/2022	09/07/2022		G	<p>JN drew attention to difficulties experienced in contacting the Communications Team from the incident ground and also with mobile phone reception at the incident location. CB indicated that he was aware of changes to the availability of the Communications Team following a recent re-structure which meant that they are not available 24/7, 365 and that in future the LRF would be looked to, to provide warning and informing information for the public*. JN advised that the main challenge had been less around the initial warning and informing but more around keeping the position updated during what proved to be a protracted incident.</p> <p>* N.B. TVLRF is not a 24/7 operation and is unlikely to be available out of hours for warning and informing unless a major incident is declared.</p> <p>SHa identified another issue around terminology which resulted in TVFCS contacting ICT rather than the Communications Team and undertook to address this with AB via the Operational Alignment Group and for this action to be captured in the Incident Report recommendations.</p>	In progress

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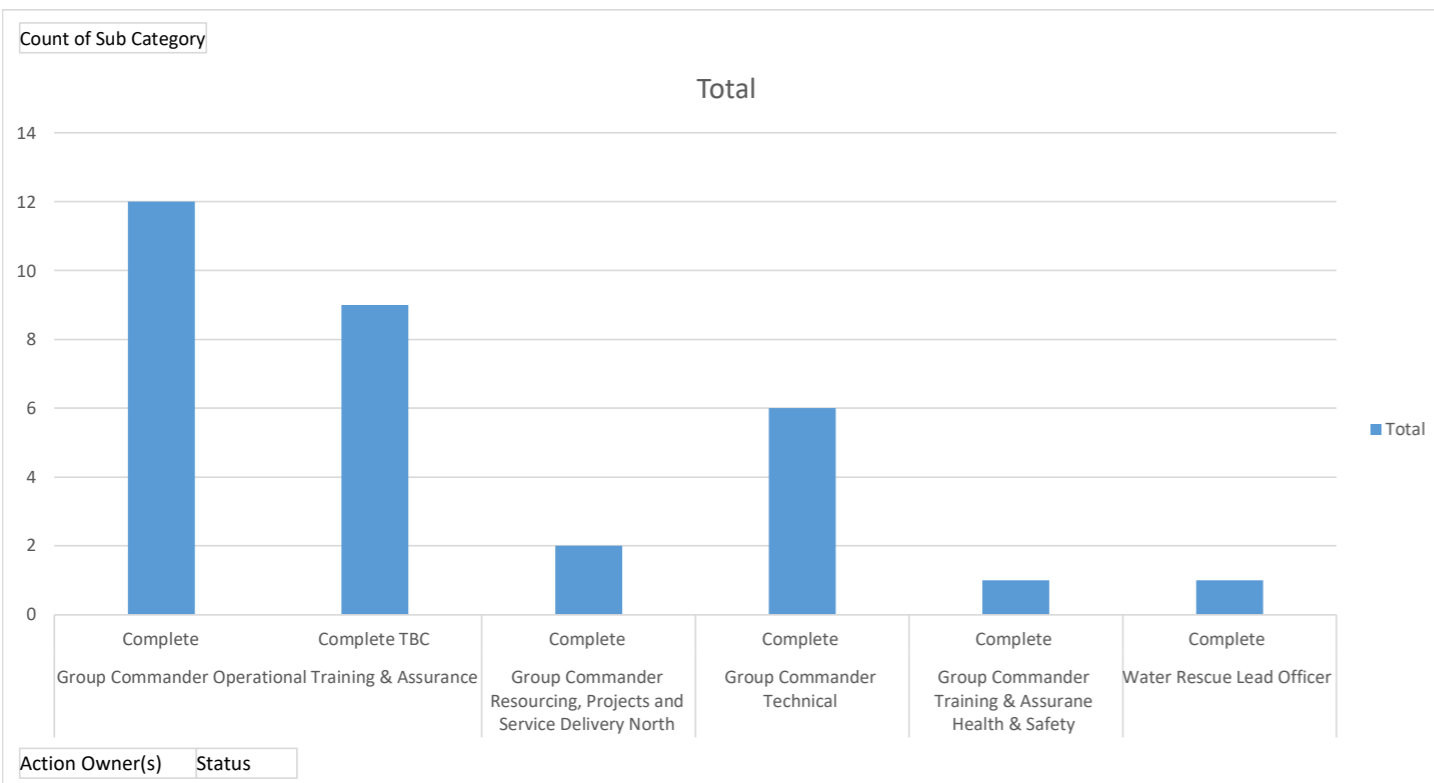


Operational Assurance Improvement Plan - Dashboard

Outstanding Actions



Completed Actions



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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: Grenfell Infrastructure Update (September 2022)

Lead Member: Councillor Simon Rouse

Report sponsor: Area Commander Calum Bell – Head of Protection, Assurance and Development

Author and contact: Group Commander Adam Burch - aburch@bucksfire.gov.uk

Action: Noting

Recommendations: That the report is noted

Executive summary:

This report outlines the progress that has and is currently being made by Buckinghamshire Fire and Rescue Service (BFRS) in response to the Grenfell Tower tragedy which took place on 14 June 2017. It highlights the extensive work being undertaken across the Service in response to the formal recommendations made by the Grenfell Tower Inquiry Phase 1 Report published on 30 October 2019.

The report reflects the transparent approach undertaken by each part of the Service to see the improvements that need to be made following the Phase 1 Report recommendations. This in turn meets the requirement, in a letter from Lord Greenhalgh on 30 September 2021, about informing the local communities of the Service's progress in this area. This report also summarises the central support funding being made available to BFRS and how this is being used to assist in the development and implementation of new technologies to address the formal recommendations made in the Grenfell Tower Phase 1.

Following BFRS HMICFRS inspection in 2021, the inspectorate team found that the Service has responded positively and proactively to the lessons learned from this tragedy. Highlighting that the Service is ahead of schedule to audit all high-rise premises clad with aluminium composite material (ACM) and improve its information about high-rise risk.

Financial implications:

BFRS has received specific allocations of grant funding to address the Phase 1 recommendations and separate cost centres have been created to ensure robust

monitoring of expenditure and accurate reporting back to the Home Office through the National Fire Chiefs Council (NFCC).

Monitoring and reporting is undertaken by the Protection and Technical Group Commanders and is authorised by the Director of Finance and Assets.

Risk management:

Risks to the delivery of the Grenfell project are recorded, managed and monitored at a departmental level as indicated in the Corporate Risk Management Procedure. Risks can be escalated from the project register to the Protection and Assurance Risk Register or Corporate Risk Register as required.

A dedicated Station Commander has been given the responsibility of monitoring BFRS progress against the recommendations made in the Phase 1 report and this is regularly reviewed and updated and reported through the Protection and Assurance Risk Register.

Legal implications:

Any legal implications are considered as the respective strands of this project are implemented.

Privacy and security implications:

There are no identified privacy issues or security implications and the implementation of the recommendations and the information in the Phase 1 Report are in the public domain.

Duty to collaborate:

Throughout the progression of this project there have been opportunities to collaborate with the other Thames Valley Fire and Rescue Services as well as with local authorities. This continues to take place and specific examples have been highlighted in *Annex A Grenfell Infrastructure Update – September 2022*. This involves collaborative procedures and collaborative exercises.

Health and safety implications:

The imbedded practical application of the health and safety management policies and procedures ensure the Service's compliance is demonstrated and evidenced as it continues to implement the respective strands of the project.

Environmental implications:

The actions undertaken by the Service under the project heading of Grenfell are aiming to meet the recommendations as set out by the Home Office. Whilst considering this the project team is aware of the duty of the Service to consider the environmental impact of its activity. Environmental considerations form part of the procurement process and are considered throughout the way in which the Service undertakes training and transport when managing exercises.

Equality, diversity, and inclusion implications:

Equality, Diversity, and Inclusion matters are considered routinely as each respective action is undertaken to meet the recommendations. Equality impact assessments are considered and undertaken where there is any perceived impact.

Consultation and communication:

Regular stakeholder engagement is achieved across BFRS through the dedicated project coordinator and within the Grenfell project Group, involving a range of departments across the Service. This is highlighted through the Annex A report and the ongoing reports and progress are monitored and reported through the management processes and reporting line.

The paper is for noting and further updates will continue to come to O&A through the Head of Protection and Assurance via the Operational Assurance Group and the Performance Monitoring Board.

Background papers:

[Grenfell Infrastructure Update \(16 March 2022\)](#)

[Grenfell Infrastructure Update \(10 November 2021\)](#)

[Grenfell Infrastructure Update \(17 March 2021\)](#)

[Phase 1 report | Grenfell Tower Inquiry](#)

Appendix		Protective Marking
1	Annex A – Grenfell Infrastructure Update (September 2022)	None

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Grenfell Infrastructure Update (September 2022)

Buckinghamshire Fire and Rescue Service
Updated September 2022



Contents:

1. Executive Summary
2. Introduction
3. Response Activity
4. Prevention Activity
5. Protection Activity
6. Operational Assurance and Training Department Activities
7. Improvement Plan Following the Grenfell Tower Inquiry Phase 1 Report and a Look Forward to Phase 2
8. Central Funding
9. Collaboration and Alignment
10. Conclusion

1. Executive Summary

1.1 This report outlines the progress that has and is currently being made by Buckinghamshire Fire and Rescue Service (BFRS) in response to the Grenfell Tower tragedy which took place on 14 June 2017. It highlights the extensive work being undertaken across the Service in response to the formal recommendations made by the Grenfell Tower Inquiry Phase 1 Report published on 30 October 2019.

1.2 The report reflects the transparent approach undertaken by each part of the Service to see the improvements that need to be made following the Phase 1 Report recommendations. This in turn meets the requirement detailed in a letter from Lord Greenhalgh on 30 September 2021, about informing the local communities of the Service's progress in this area. This report also summarises the central support funding being made available to BFRS and how this is being used to assist in the development and implementation of new technologies to address the formal recommendations made in the Grenfell Tower Phase 1 Report published on 30 October 2019.

2. Introduction

2.1 Grenfell was the most significant high-rise fire the Country has experienced in living memory. The resulting Public Inquiry is still ongoing. Phase 1 established a factual narrative of events, highlighting the organisational learning for London Fire Brigade (LFB); The Inquiry has now concluded hearings for the eight Phase 2 modules and the Inquiry Panel are in the process of preparing the final report.

2.2 As a result of the Grenfell Tower fire, BFRS has undertaken a number of actions to enhance how it manages the risks associated with large, complex buildings. Since the publication of the Phase 1 report, it continues to work through the 46 recommendations to inform the evolving improvement plan.

2.3 BFRS have also taken the opportunity to collaboratively work with other services and agencies to review policy and procedures involving fires in high-rise buildings to review and assure how effectively it responds to these incidents. There are a number of projects and activities that were already taking place as part of the Service's improvement journey that reflect some of the lessons of Grenfell that also form part of the ongoing work.

3. Response Activity

3.1 The Technical Team has oversight of the Site-Specific Risk Information (SSRI) database, ensuring the Service's obligations under Section 7 (2) (d) of the fire and Rescue Services Act 2004, and has previously conducted a review of all high-rise risks. This involved the Data

Intelligence and Risk Information teams working together to identify all structures in Buckinghamshire and Milton Keynes over 18 metres and then cross referencing this with those buildings that are residential or commercial of six floors and over. This gives it the confidence to understand the high-rise in its area. These buildings are automatically given a high-risk status which ensures an annual review and visit from the local fire station which in turn results in the production of a tactical plan to assist crews to resolve any operational incidents on these sites. When completed, the risk information and plans are made available to all frontline appliances through Mobile Data Terminals and are also shared with the neighbouring services up to 10 km from the risk site. This information is also made available within Thames Valley Fire Control Service (TVFCS) and relevant information is made available to the operational crews whenever they are sent to an incident involving high-rise buildings.

- 3.2 Whilst waiting for further changes to national high-rise firefighting policy, BFRS has issued interim guidance for operational considerations related to building managers' stay put procedures and the evacuation requirements of large residential buildings. This guidance required the Response and Protection Teams to work together to establish the evacuation strategy for each building during intelligence gathering for inclusion in the Site-Specific Risk Information. The guidance also raised awareness of how the move from a Stay Put strategy to a Simultaneous Evacuation during a fire and highlighted the foreseeable scenarios where incidents occur in high-rise residential buildings that challenge both the structural integrity and compartmentation in the event of fire. The guidance also reiterated the Incident Commander's authority to review the evacuation strategy for the building from an operational perspective.
- 3.3 The policies and training packages for operational staff were reviewed, drawing attention to the need for external safety observers to monitor external fire spread from the compartment of origin and to clarify the risks of how combustible exterior materials and poor building management can lead to accelerated fire growth. Additionally, working with TVFCS and the other two Thames Valley Services the pre-determined attendance was reviewed to ensure that it reflected the requirements identified for fires in high-rise.
- 3.4 Having undertaken remedial action, BFRS has turned its attention to ensuring our preparedness for the introduction of any changes in National Operational Guidance by engaging in the consultation process and ensuring that this guidance is fully implemented across the Thames Valley. This work is being undertaken in joint partnership with both Oxfordshire and Royal Berkshire Fire and Rescue Services introducing both collaborative equipment and procedures. Work in this area continues as new guidance and information is released.
- 3.5 A project is underway to incorporate the SSRI that is collected by the operational staff into the Premises Risk Management System (PRMS).

This will mean that data collected from Response, Prevention and Protection will be in the same software system offering a single source for all information collated and recorded on the buildings and their occupants. This will give added insight into the activities of other departments with reference to specific buildings and will continue to improve the way in which departments collaboratively work with each other. The introduction of a new SSRI module in PRMS will improve the quality and accessibility of risk intelligence captured on high-risk premises. The new SSRI module in PRMS is due to be piloted in Q3 22/23, followed by a Service wide rollout.

4. Prevention Activity

- 4.1 The Service area's high-rise buildings house a differing range of vulnerabilities which can reduce the likelihood of engagement with preventative advice. These include high-density occupancy, disability, drug and alcohol dependency, hoarding, transient living, and communication difficulties linked to literacy levels and first language.

Following low levels of engagement with community information sessions, the prevention team has worked to build relationships with the respective councils, responsible persons, and residents associations to improve proactive engagement.

- 4.2 BFRS has stratified all high-rise domestic dwellings based upon known protection issues, external wall surfaces and tenancy turnover, enabling prevention information to be offered more frequently to those at greater risk of fire.

The Community Safety Technicians have been trained to recognise fire safety issues within the common parts of high-rise buildings which they pass to protection for investigation.

- 4.3 Where there is specific information or concern with particular high risk residential buildings including high-rise from operational incidents or the public, the Prevention team proactively engage with the residents and the responsible person to mitigate the identified issue or risk, highlighting the collaboration work that goes on between the prevention team and operational crews.

5. Protection Activities

- 5.1 The Protection Team continues to maintain its knowledge and understanding of the construction of modern buildings and how they are being refurbished whilst keeping abreast of evolution of building methods particularly following Grenfell. The Protection Team has carried out a review of all high-rise buildings and is aware of all those currently utilising both non-flammable and flammable cladding. It continues to work

proactively alongside Duty Holders to advise and support them with any necessary changes to the buildings.

- 5.2 The Protection Team continues to concentrate their focus on the highest risk premises and, as the Enforcing Authority for common areas in high-rise buildings, proactively engages with the Duty Holders to maintain compliance and take enforcement action where necessary. The enactment of the Fire Safety Act 2021 clarifies that under the Regulatory Reform (Fire Safety) Order 2005 (the Order), owners and/or managers of multi-occupied residential buildings (two or more sets of domestic premises) the Responsible Person (RP) must manage and reduce the risk of fire for the structure and external walls of the building. This includes cladding, balconies and windows and the entrance doors to individual flats, that open on to common parts. These areas were previously covered by the Housing Act 2004 and enforced by Local Authority, Private Sector Housing.
- 5.3 The Home Office are providing a Building Prioritisation Tool, which will enable RPs to undertake an assessment of their building portfolios and target assessment works at the potentially highest risk premises. This is due largely to an anticipated shortage of qualified and competent fire risk assessors, with the requisite knowledge and experience to undertake assessments of External Wall Systems (EWS).
- 5.4 The Fire Safety (England) Regulations 2022 have been introduced under Article 24 of the Regulatory Reform (Fire Safety) Order in order to meet the recommendations that have come out of the Phase 1 Grenfell Tower Inquiry. These Regulations will come into full force on 23 January 2023.
- 5.5 The Regulations impose additional measures on the responsible person (RP) of a multi-occupied residential building and the RP must now be preparing to work on the new regulations in order to meet the requirements by this date. The requirements depend upon the height of the buildings with those above 18m having the most stipulations. These include providing fire services with information about their buildings including floor plans, the state of fire-fighting equipment and other relevant information in order to assist with any fire-fighting action. For all multi-occupied residential buildings including those below 18m the RP must provide information and checks that will assist residents escape safely.
- 5.6 The Building Safety Act 2022 provides for a new regulator (the Building Safety Regulator [BSR]) to be established under the Health and Safety Executive (HSE). The aim of the regulator is to secure the safety of people in and around buildings with respect to the risk arising from them. The outcome is to improve the standards of buildings. Within the Act there is an expectation that all higher risk buildings must be registered with the regulator by October 2023 and there will be an additional approvals process for these buildings.

- 5.7 The role of the fire service nationally is to assist the regulator with any fire safety concerns within these building with the proposal of multi-disciplinary teams that may include other agencies as required. Work is presently taking place at a regional level to ascertain the nature and expectations required of these teams and specifically the role that BFRS will have within them.
- 5.8 The Protection Team continues to focus on improving their collaboration with the Response crews by undertaking enhanced protection training as part of the Home Office Protection uplift grant funding programme and High-Risk Residential Building work.
- 5.9 Dedicated fire safety input sessions are aimed at all operational managers from the rank of Crew Commander to Group Commander. The sessions are conducted over a consecutive two-day period, delivered by an external consultant.

Non-operational specialist roles such as Operational Training and Assurance have also been included in the planned sessions.

The training programme is scheduled to be completed by December 2022.

A brief overview of the course content is as follows:

- Applicable legislation – Regulatory Reform Fire Safety Order 2005 (RRO), Fire and Rescue Services Act 2004
- Types of evacuation strategies - types of fire alarm systems to support the given evacuation strategy
- Common types of high-risk premises
- The Fire Brigades duties and what actions to take at a fire safety incident

Following the conclusion of the programme a confirmation of understanding process will be devised. This will improve the Response crews understanding of basic fire safety issues which will increasingly become more apparent whenever they visit higher risk premises.

6. Operational Assurance and Training Department Activities

- 6.1 In the wake of the recommendations coming out of the Phase 1 report it was necessary to assure the Service's preparedness of high-rise building fires through thematic reviews and external audits. The Operational Assurance Team has collated information following on from a number of incidents the Service has attended. The Team has also arranged several high-rise exercises throughout Buckinghamshire and Milton Keynes as well as the Fire Service College. The aim is to ensure that as many varied operational staff receive the opportunity to undertake a practical high-rise exercise and feedback into the Operational Assurance Team.

- 6.2 From the high-rise incidents and exercises, several recommendations have been made that have now been placed onto the Operational Assurance Improvement Plan (OAIP) with the resulting actions being given to the appropriate personnel and departments. The objective of all this activity is to improve the way in which BFRS responds to and manages high-rise incidents which in turn will feed into the overall recommendations following the Phase 1 report.
- 6.3 The Training department continues to work with the Operational Assurance Team, feeding into the OAIP to ensure that learning points are captured. It has created training packages that reflect policy and procedural changes to high-rise buildings and other closely associated procedures. This has involved specific breathing apparatus training and positive pressure ventilation training to reflect national best practice. There is work taking place to ensure that the Thames Valley Services aim to have replicated these across the whole of the Thames Valley area. This will form part of the training required for the new collaboratively purchased breathing apparatus set.
- 6.4 Extensive work has taken place to include multi-agency training and exercises that will reflect the multi-agency approach required for fires in high-rise buildings. This has included the other blue light services as well as the local Councils.
- 6.5 On 18 March 2022, the Operational Assurance and Operational Training teams hosted Exercise Hammer, a high-rise scenario involving an 18-storey block of flats.
- 6.6 Exercise Hammer was designed to test the capability, response, and operational procedures of BFRS, partner FRSs and agencies at a major incident involving a fire in a high-rise apartment building with large numbers of casualties and evacuating occupants.

The primary objectives were to test and observe:

- The operational tactics employed and Incident Command System (ICS) at a high-rise incident
- The completed areas within the Grenfell Tower action plan
- The undertaking of a move from a stay put strategy to a simultaneous evacuation
- A multi-agency approach to managing what will become a major incident
- Managing rescues, evacuees, and casualties

Over the course of three hours, appliances, crews and officers from Buckinghamshire, Northamptonshire, Bedfordshire and Oxfordshire FRSs took part in the exercise along with representatives from Milton Keynes Council, Thames Valley Police (TVP) and South-Central Ambulance Service (SCAS). To add elements of realism, multiple role players acted as residents.

- 7. Improvement Plan Following the Grenfell Tower Inquiry Phase 1 Report and a Look Forward to Phase 2
- 7.1 Following the Phase 1 report, there were 46 recommendations made that BFRS have incorporated into an improvement plan. This plan is coordinated through the Technical Team and sponsored by the Head of Protection and Assurance. Oversight is managed through a Grenfell Working Group which reports progress to the Overview and Audit Committee via the Performance Monitoring Board and Operational Assurance Group.
- 7.2 Of the 46 recommendations BFRS identified 45 actions that were identified in the Phase 1 report. To date, BFRS have been able to complete 18 of them and made significant progress in 28.

Table of previous and current progress of actions based upon Phase 1 recommendations

	Actions from March 2021 Report	Actions from October 2022 Report	Actions from February 2022 Report	September 2022 update
BFRS has made preparations for this change and is ready to implement	13	3	1	0
Currently in Progress	18	28	28	28
Complete	15	15	17	18
Total	46	46	46	46

Table 1

- 7.3 Of the 46 recommendations BFRS are directly responsible for 28 and of these have completed 18. Of those that have yet to be completed they are all in progress and in the majority of cases are at the assurance phase, reviewing the positive actions taken to ensure that the recommendations have been addressed through improvements that have been made.
- 7.4 BFRS does not have direct responsibility for 18 of the Phase 1 recommendations as these, in most cases, rests with the responsible person or Duty Holder.
- 7.4 Phase 1 of the Grenfell Tower Inquiry focused on the cause of the fire, its subsequent development and the course of events during the night, the principle focus of Phase 2 of the inquiry is on how and why the decisions were made that led to a highly combustible cladding system was fitted on to Grenfell Tower. Phase 2 will also explore other area that emerged from the information gathered during Phase 1. The Inquiry has concluded hearings for Phase 2. The Inquiry Panel are preparing the final report. It is anticipated that there will be additional recommendations for fire and rescue services to review and action once the phase 2 report is published.

8. Central Funding

- 8.1 In April 2020 an announcement was made by Lord Greenhalgh, the Minister of State for Building Safety, Fire and Communities, offering a grant to assist with the implementation of the Phase 1 findings. BFRS received an initial payment of £123,549, a second payment instalment of £97,962 in February 2022, a third payment of £86,060 in September 2022 and an additional payment of £86,060 due to be received in March 2022 to drive improvement in Protection. A further £60,000 has been allocated to facilitate a review of all high-rise residential buildings over 18 metres and additional funding of £46,253 was provided which BFRS has set aside for research and development and procurement of new equipment.
- 8.2 The initial payment and follow up allocation of £60,000 has been set aside for Protection. This has been used for fixed term employment contracts, training, IT equipment and continues to be used for website development and collaborative working both internally and externally.
- 8.3 The funding BFRS has set aside for research and development and equipment has been used for purchasing equipment such as loud hailers and escape hoods. Additionally, work is presently underway to investigate the equipment and software required to improve the effectiveness of communication between the operational incidents and TVFCS. This will allow the Service to maintain effective control and communication in more complex and dynamic incidents such as the potential evacuation of high-rise buildings.
- 8.4 On 30 September 2021 Lord Greenhalgh sent a further letter to all the chief fire officers regarding the expectation of the Home Office, following the announcement for funding, of the responsibilities each service has to their communities about the lessons learnt and the improvements made following the Grenfell tragedy. This letter highlighted that each fire and rescue service must show the transparent progress they have made meeting the Phase 1 Inquiry's recommendations and that these recommendations affect all services.

9. Collaboration and Alignment

- 9.1 A significant amount of work continues to take place in respect of collaboration between BFRS, Oxfordshire Fire and Rescue Service and Royal Berkshire Fire and Rescue Service. This work includes research and development concentrating on purchase of new equipment. An example of this is a collaborative contract for a new breathing apparatus (BA) set between the three services that will improve the effectiveness with which large complex incidents can be dealt. This will remove the need for different BA equipment and will allow any service to use any BA equipment from across the Thames Valley.

9.2 BFRS is also continuing to work with its Thames Valley partners and TVFCS to align its procedures and guidance in order to improve the effectiveness with which the services can all work together at larger incidents that involve more than one fire and rescue service. Specifically, work is being undertaken to align the BA procedures to make effective use of the recent joint BA contract. Work has also been undertaken to ensure that the three services and TVFCS have a joint understanding of high-rise procedures and any changes to National Operational Guidance with respect to high-rise incidents are implemented as efficiently and collectively as possible.

10. Conclusion

10.1 BFRS continues to be proactive in implementing the learning from the Grenfell Tower Inquiry. The tragedy has focused the collective mind of the Service to prioritise improvements in the way it manages an incident of this nature. This has been recognised in the HMICFRS report published in December 2021. The inspectorate team found that the Service has responded positively and proactively to the lessons learned from this tragedy. Highlighting that the Service is ahead of schedule to audit all high-rise premises clad with aluminium composite material (ACM) and improve its information about high-rise risk.

10.2 Progressing outstanding actions to address the recommendations from the Grenfell Tower Inquiry will continue to be a priority. BFRS has made some significant steps to improve the collaborative work it undertakes both internally and externally and this is reflected in the extensive work being undertaken to meet the demands of the inquiry as well as the learning points that have come out of identified areas for improvement.

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) –Buckinghamshire Fire and Rescue Service (BFRS) Improvement Plan Update: September 2022

Lead Member: Councillor David Hopkins

Report sponsor: Deputy Chief Fire Officer Mick Osborne

Author and contact: Anne-Marie Carter, Head of Technology, Transformation and PMO – Acarter@bucksfire.gov.uk

Action: Noting

Recommendations: That the Committee note the updated HMICFRS - BFRS improvement plan: September 2022

Executive summary:

BFRS's second round inspection took place between 24 May 2021 and 9 July 2021.

The latest report for this Service, was published on 15 December 2021, identified 22 areas for improvement, and two causes of concern – Effectiveness: Prevention and People: Equality, Diversity and Inclusion (EDI) accompanied by eight recommendations.

	Effectiveness	Efficiency	People
	Requires improvement	Requires improvement	Requires improvement
Cause of concern	1		1
Recommendations	3	0	5
Area for Improvement	11	5	6

An improvement plan (Appendix 1) is in place to specifically progress the report recommendations and areas for improvement.

The Prevention recommendations are being progressed via the Prevention Improvement Plan. Key progress to note is:

- Prevention Strategy: Approved by the Fire Authority on 12 October 2022.

The revised strategy incorporates four focus areas, Safer Homes, Neighbourhoods, Roads & Environment, identifying inputs, processes, outputs & achievement measures for each.

- Safety Centre Evaluation completed, and funding agreed for a further 3 years supporting the reach of our Prevention work into different communities.

The Equality, Diversity and Inclusion recommendation are being progressed via the Authority's equality, diversity, and inclusion objectives 2020-2025. Key progress to note is:

- Updating and relaunching the Equality Impact Assessment procedure has led to a better understanding of why they are important and an increase in completion.
- Supporting Eid in the Park raised the profile of BFRS as an employer of choice to a wider community.

HMICFRS have now confirmed our revisit will take place week commencing 3 January 2023. (Appendix 2 - Letter from HMI Parr – 18 October 2022). The revisit will focus on the 2 causes of concern and involve interviews, desktop reviews and stations visits. We continue to build our evidence portfolio to support the revisit.

Financial implications: The prioritisation of improvements to address the specific recommendations raised within the causes of concern may introduce additional financial implications, either through reprioritisation of other projects, or through new workstreams.

Consideration will be given to ensure associated costs, both direct and indirect, are fully understood and managed effectively.

FRSs are not funded for the preparation for, HMICFRS inspections, nor is the Service charged. The inspections are funded directly by the Home Office. The Police are top sliced from their government grants to fund the HMICFRS inspections of Police Forces. There has been no indication yet that this might be a future funding model for the inspection of FRSs.

Risk management: There remain reputational corporate risks to the organisation should we be judged as inadequate. The Service had already taken steps to mitigate this through having extensive internal and external audits of a number of areas of the Service, in addition to the HMICFRS inspections. The external audit plan for 22/23 can be found here: [Overview and Audit Committee - 16 March 2022 - Buckinghamshire Fire & Rescue Service \(bucksfire.gov.uk\)](#)

Legal implications: The current Fire and Rescue Service National Framework issued under section 21 of the Fire and Rescue Services Act 2004, to which the Authority must have regard when carrying out its functions, states as follows at paragraph 7.5:

‘Fire and rescue authorities must give due regard to reports and recommendations made by HMICFRS and – if recommendations are made – prepare, update and regularly publish an action plan detailing how the recommendations are being actioned. If the fire and rescue authority does not propose to undertake any action as a result of a recommendation, reasons for this should be given.’

It continues: ‘When forming an action plan, the fire and rescue authority could seek advice and support from other organisations, for example, the National Fire Chiefs Council and the Local Government Association’.

Privacy and security implications:

No privacy or security implications have been identified that are directly associated with this report or its appendices. The respective strands of the improvement plan have undergone Data Protection Impact Screening and full impact assessments have been completed and reviewed where appropriate.

The report and its appendices are not protectively marked.

Duty to collaborate:

Each fire and rescue service is inspected individually. However, the latest report includes findings relating to the Service’s ability to collaborate effectively with partners.

Health and safety implications:

There are no Health, Safety or Wellbeing implications arising from this report.

Environmental implications:

There are no environmental implications arising from this report.

Equality, diversity, and inclusion implications:

Progress against our Equality, Diversity and Inclusion objectives are included within the updated improvement plan.

The Service has been judged as ‘requires improvement’ in the people pillar, along with a cause of concern and five recommendations relating to equality, diversity and inclusion. All the findings from the HMICFRS round two inspection report will be fully considered and prioritised to ensure continual improvement is established and maintained.

The Authority’s equality, diversity, and inclusion objectives 2020-2025 – year 2 progress was presented to the Fire Authority on 15 June 2022.

Consultation and communication:

Specific areas identified for Service improvement are being captured in relevant plans and will be reported on in the usual way, ultimately to the Overview and Audit Committee.

Next steps -

- Report published on BFRS website
- Next update to Overview and Audit Committee on the 15 March 2023

Background papers:

HMICFRS Home Page: <https://www.justiceinspectrates.gov.uk/hmicfrs/>

10 November 2021 - Overview and Audit Committee: Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) –Buckinghamshire Fire and Rescue Service (BFRS) Improvement Plan Update

<https://bucksfire.gov.uk/documents/2021/10/oa-item-18-10-11-21.pdf/>

10 November 2021 - Overview and Audit Committee: Prevention Evaluation - Phase one report 2021 <https://bucksfire.gov.uk/documents/2021/10/oa-item-17-17-10-21.pdf/>

16 February 2022 – Fire Authority: Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) – Buckinghamshire Fire and Rescue Service (BFRS) Inspection Report 2021

<https://bucksfire.gov.uk/documents/2022/02/fa-item-10-16022022.pdf/>

16 March 2022 – Overview and Audit Committee: Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) –Buckinghamshire Fire and Rescue Service (BFRS) Improvement Plan Update

<https://bucksfire.gov.uk/documents/2022/03/oa-item-14-160322.pdf/>

15 June 2022 – Fire Authority – Equality, Diversity and Inclusion Objectives 2020-2025 – Year two update

<https://bucksfire.gov.uk/documents/2022/05/fa-item-16.pdf/>

20 July 2022 – Overview and Audit Committee: Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) –Buckinghamshire Fire and Rescue Service (BFRS) Improvement Plan Update – May 2022

<https://bucksfire.gov.uk/documents/2022/07/oa-item-13-2.pdf/>

12 October 2022 – Fire Authority: Prevention Strategy 2022-2025, Safety Centre Funding Agreement, People Strategy 2020-2025 Year Two Update

[Buckinghamshire & Milton Keynes Fire Authority, 12/10/2022](https://bucksfire.gov.uk/documents/2022/10/oa-item-12-10-2022.pdf/)

Appendix	Title	Protective Marking
1	2021 Inspection report action plan - Sept 2022	N/A
2	Letter from HMI Parr – 18 October 2022	N/A



HMICFRS 2021 Inspection Report Action Plan - Dashboard

Last Update: **Sep-22**

Recommendations	Total	Complete	On track	On hold/delayed	Not started	Overall RAG status
Effectiveness	3	0	2	1	0	
People	5	0	5	0	0	

Areas For Improvement	Total	Complete	On track	On hold/delayed	Not started	RAG status
Effectiveness	11	1	7	0	3	
Efficiency	5	2	2	1	0	
People	6	0	6	0	0	

Grand Totals	30	3	22	2	3
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Last Update: Sep-22

Sub-category	HMICFRS inspection report finding	Finding type	Overall RAG Status	PMO Project link	Delivery Lead	SMT Sponsor	Delivery Date	Sept 2022 Update	Project Status	Evidence to support completion
Understanding the risk of fire and other emergencies	The service, through regular engagement with its local community, needs to build a more comprehensive profile of risk in its service area.	Area for improvement	On track	Corporate Plan SO3.10 Prepare 2025 – 2030 Public Safety Plan (PSP)	Corporate planning	COO	24/25	Comprehensive Service Delivery Area (SDA) profiles to inform station planning developed and launched to all nine SDAs. These comprise socio-demographic, geo-spatial, risk and demand related information. Station planning process now includes liaison and collaboration with external partners / agencies (for example, MK Council to address increase in fires in their housing stock). NHS 'Exeter' data now being leveraged to inform targeting at local level of higher risk groups such as the 80+ population.	On-Track	
Understanding the risk of fire and other emergencies	The service should make sure its integrated risk management plan is informed by a comprehensive understanding of current and future risk. It should use a wide range of data to build the risk profile and use operational data to test that the risk profile is up-to-date.	Area for improvement	On track	Corporate Plan SO3.10 Prepare 2025 – 2030 Public Safety Plan (PSP)	Corporate planning	COO	24/25	Gap analysis against CRMP Fire Standard undertaken.	On-Track	
Understanding the risk of fire and other emergencies	The service should make sure that the aims and objectives of prevention, protection and response activity are clearly outlined in its integrated risk management plan.	Area for improvement	Not started	Corporate Plan SO3.10 Prepare 2025 – 2030 Public Safety Plan (PSP)	Corporate planning	COO	24/25	This will be addressed in the 2020-25 PSP / CRMP.	Not started	
Preventing fires and other risks	The service should have plans in place for an effective system to define the levels of risk in the community.	Recommendation	On-Track	Prevention Improvement Plan	GC Prevention & Resilience and Community Safety & Safeguarding Manager	Prevention, Response and Resilience	01/11/2024	The Prevention improvement plan is now reporting as of 14/9/22: Total recommendations- 60, Completed - 7, On -track - 33, On hold/delayed - 18, Not started - 2. The Prevention strategy has been developed and been through formal consultation. This was taken to BTB on 8 September 22 and presented to SMB on 20 September 22. Updates are provided through PMB, SMB and O&A	On-Track	
				Corporate plan SO1.3 - Develop partner agencies understanding of the risks from fire and other emergencies. Implement a collaborative community risk methodology and targeting approach, to achieve a reduction on risk and impact of fire.	GC Prevention & Resilience and Community Safety & Safeguarding Manager	Prevention, Response and Resilience	01/04/2023	This continues to be linked to the Improvement plan. The Prevention strategy has been reviewed and developed in line with HMICFRS recommendations and inline with the Prevention implementation standards. This has been aligned to the current PSP dates 2022-25. The strategy gives a clear framework on a 4 step approach - step 1 being Identifying those most at risk,. This includes: Working with Community Safety Partnerships (CSP) to understand wider emerging risks at a multi-agency level Identifying target groups to reduce the risk of fire fatality or incident drawing on datasets (Experian Mosaic, Exeter, MAST, CrashMap) demographic and incident analysis Developing community plans and data profiles to enable Service Delivery Area understanding of prevention needs Training partner agencies to recognise and refer risk of / from fire Prevention & Data managers attending the NFCC proof of concept, definition of risk, phase 2 domestic dwelling fires national risk methodology on 21 September 2022.	On-Track	
				Service Delivery Plans	GC Prevention & Resilience and Community Safety & Safeguarding Manager	Prevention, Response and Resilience	Annual	Comprehensive Service Delivery Area (SDA) profiles to inform station planning developed and launched to all nine SDAs. These comprise socio-demographic, geo-spatial, risk and demand related information. Station planning process now includes liaison and collaboration with external partners / agencies (for example, MK Council to address increase in fires in their housing stock).	On-Track	
				Safety Centre evaluation	GC Prevention & Resilience and Community Safety & Safeguarding Manager	Prevention, Response and Resilience	30/09/2022	The Safety centre funding review has been completed. The output of the review has approved at agreement has been approved at BTB - 8 September 22, SMB - 20 September 22 and the Fire Authority - 12th October '22.	Complete	https://bucksfire.gov.uk/documents/2022/09/fa-item-13-121022.pdf/
Preventing fires and other risks	A revision of its prevention strategy that clearly prioritises the people most at risk of fire and other emergencies, giving focus and direction to specialist teams.	Recommendation	On-Track	Prevention Improvement Plan	GC Prevention & Resilience and Community Safety & Safeguarding Manager	Prevention, Response and Resilience	Q3 22/23	The Prevention strategy has been reviewed and developed in line with HMICFRS recommendations and inline with the Prevention implementation standards. The dates have been aligned to the current PSP dates 2022-25. The updated Prevention strategy has been through formal consultation. The revised strategy incorporates four focus areas, Safer Homes, Neighbourhoods, Roads & Environment, identifying inputs, processes, outputs & achievement measures for each. The strategy has been approved at BTB - 8 September 22, SMB - 20 September 22 and the Fire Authority - 12th October '22. Work is underway to promote the new strategy across the Service.	On-Track	https://bucksfire.gov.uk/documents/2022/09/fa-item-12-121022.pdf/
Preventing fires and other risks	The review of systems and processes for dealing with referrals from individuals and partner agencies. This is to make sure they are managed effectively and those referrals with highest identified risk are prioritised.	Recommendation	Delayed	Prevention Improvement Plan	GC Prevention & Resilience and Community Safety & Safeguarding Manager	Prevention, Response and Resilience	01/11/2024	Work is continuing with developing the offline PRMS capability and this has resulted in further all user testing. Risk stratification has been developed and tested, aligning the home fire safety visit scoring with the online home fire safety check tool. When porting of the PRMS has been completed, this will need to be tasked as development.	Delayed	

Last Update: Sep-22

Preventing fires and other risks	The service should understand the reasons for its decreasing number of prevention visits and consider how it can better target those who are most at risk of fire.	Area for improvement	On-Track	Prevention Improvement Plan	GC Prevention & Resilience and Community Safety & Safeguarding Manager	Prevention, Response and Resilience	01/11/2024	All Prevention roles have been recruited for and now filled apart from one Community Safety Adviser. This is now in the onboarding staff phase for the next few months. Data is being utilised through the Data & Intelligence Team to provide information for proactive targeting of those aged >80+. Phase 1 was the identification of high density areas, enabling further analysis to occur in slow time. Phase 2 has been for those aged >80+ in areas which also support areas identified for On-Call recruitment. Data analysis will be undertaken to review the location of referring partners to enable effective targeting of the fire sense input. The Number of Fire & Wellness visits and the Number of Fire & Wellness visits delivered to vulnerable people are now part of the BFRS Performance measures, which is reported quarterly to members.	On-Track	Performance Measures can be found on page 55 & 56 of this pack: https://bucksfire.gov.uk/documents/2022/09/special-meeting-of-the-executive-committee-7-october-2022.pdf/
Preventing fires and other risks	The service should evaluate its prevention work, so it understands the benefits better.	Area for improvement	Complete	Prevention Improvement Plan	GC Prevention & Resilience and Community Safety & Safeguarding Manager	Prevention, Response and Resilience	01/11/2024	Action completed - Phase 1 evaluation report presented to Overview and Audit Committee 10/11/21	Complete	10 November 2021 - Prevention Evaluation - Phase one report 2021 https://bucksfire.gov.uk/documents/2021/10/oa-item-17-17-10-21.pdf/
Protecting the public through fire regulation	The service should make sure it aligns its increased resources to a prioritised and risk-based inspection programme.	Area for improvement	On-Track	Protection Uplift Programme	Group Commander Community & Business Safety Policy	Protection, Assurance and Development	01/01/2023	The Risk based inspection programme has started focussing on high risk residential buildings. Recently, involving the Data Intelligence Team, the confidence in the statistical output of commercial buildings has improved with the expectation that these will start to be inspected as well. The main focus initially will be on those premises such as hotels and care homes that have a sleeping risk. Training of response staff has been taking place throughout the year to wholetime and day crewing stations and watches and remains on track with all watches having been visited by the end of the calendar year. There will be some mop up sessions in the new year and then we will look at options for response staff to carry out inspections of lower risk sites where there is sufficient capacity. A review of the Protection area of our website is taking place to improve options for businesses to be more informed with the expectation that they can undertake self-assessments. this is a wider piece of work that is taking place nationally.	On-Track	
Protecting the public through fire regulation	The service should make sure it has an effective quality assurance process, so staff carry out audits to an appropriate standard.	Area for improvement	On-Track	BAU	Group Commander Community & Business Safety Policy	Protection, Assurance and Development	TBC - Subject to NFCC programme	The Protection Department continues to maintain its CPD through relevant training. The department has worked through the Fire Standards for protection and is developing how the department will comply with the third party accreditation process being developed by the NFCC.	On-Track	
Protecting the public through fire regulation	The service should review its response to false alarms (called 'unwanted fire signals') to ensure operational resources are used effectively.	Area for improvement	On-Track	UwFS Review	Group Commander Community & Business Safety Policy	Protection, Assurance and Development	01/01/2023	The Protection Department is reviewing how it deals with unwanted fire signals. It is waiting for changes to PRMS before implementing these. It is looking at the time it spends on these and is looking to concentrate on the major offenders on which it keeps a close eye. The removal of a dedicated Unwanted Fire Signals Officer has had no major impact on the number of Unwanted Fire Signals but there will have been some disruption due to Covid which will have muddied the water. The Department continues to review the time it spends upon this area as it brings on increased activity through the risk based inspection programme.	On-Track	
				AFA review	TBC	Prevention, Response and Resilience	TBC	Review is being managed separately to this by Prevention, Response and Resilience and scheduled to start in Q4 22/23	Not started	
Protecting the public through fire regulation	The service should make sure it plans its work with local businesses and large organisations to share information and expectations on how they can comply with fire safety regulations.	Area for improvement	On-Track	Protection Uplift Programme	Group Commander Community & Business Safety Policy	Protection, Assurance and Development	01/01/2023	The Department has started a review of its pages on the BFRS website to improve the way we communicate with businesses and look at how to best implement a self-assessment toolkit. The Service now hosts an NFCC toolkit for small and medium sized businesses to undertake their own fire risk assessment; the Service will begin to gain data from this. A SPOC continues to be in place as a Business Safety officer but all inspecting officer, as part of the Fire Safety Order, continue to offer advice and guidance throughout their audit to those higher risk premises.	On-Track	
Responding to fires and other emergencies	The service should assure itself that it understands what resources it reasonably requires to meet its foreseeable risk; it should make sure that all of its fire engines can be sufficiently resourced, if required.	Area for improvement	Not started	Not a current project	TBC	TBC			Not started	
Responding to fires and other emergencies	The service should make sure it consistently gives relevant information to the public to help keep them safe during and after all incidents.	Area for improvement	Not started	Not a current project	Communication, Marketing and Engagement Manager	Technology, transformation and PMO	Q3-Q4 22/23		Not started	

HMICFRS 2021 Inspection Report Action Plan - Efficiency



Last Update: Sep-22

Sub-category	HMICFRS inspection report finding	Finding type	Overall RAG Status	PMO Project link	Delivery Lead	SMT Sponsor	Delivery Date	Sept 2022 Update	Project Status	Evidence to support completion
Making best use of resources	The service should have effective measures in place to assure itself that its workforce is productive, that their time is used as efficiently and effectively as possible and in a more joined up way to meet the priorities in the IRMP.	Area for Improvement	On Track	Portfolio Management Office Project	Head of Technology, Transformation, and PMO	Finance and Assets	Q4 22/23	The PMO is now part of BAU.	Complete	
				Performance Management framework	Data Intelligence Team Manager	Technology, transformation and PMO	Q3 22/23	The BFRS Performance measures and Q1 results were prepared for the Executive Committee meeting (14th Sept '22). These measures will now be presented quarterly to the Performance Monitoring Board and Executive Committee. Further work is ongoing to build a framework that sits around the measures.	On-Track	
Making best use of resources	The service should actively seek further collaboration opportunities with other Thames Valley fire services, to achieve value for money and better outcomes for the public.	Area for Improvement	Complete	Thames Valley Breathing Apparatus procurement	GC Technical	Protection, Assurance and Development	01/04/2023	This project is monitored and reviewed by the BFRS PMO and the Thames Valley collaboration boards	BAU	
				Emergency Service Mobile Communications Programme	Programme Manager	Technology, transformation and PMO	2025/26	This project is monitored and reviewed by the BFRS PMO and the Thames Valley collaboration boards	BAU	
				Thames Valley National Operational Guidance	GC Technical	Protection, Assurance and Development	Mar'22:Phase 1 Sept '22: gap analysis - implemented NOG	This project is monitored and reviewed by the BFRS PMO and the Thames Valley collaboration boards	BAU	
				Thames Valley Fire Investigation	GC Protection	Protection, Assurance and Development	01/10/2023	This project is monitored and reviewed by the BFRS PMO and the Thames Valley collaboration boards	BAU	
				2022/23 reset of the collaboration framework for Thames Valley	pan-directorate	Technology, Transformation and PMO			Complete	
Making the fire and rescue service affordable now and in the future	The service needs to assure itself that it is maximising opportunities to improve workforce productivity and develop future capacity through use of innovation, including the use of appropriate and up-to-date technology.	Area for Improvement	On-Track	Various	pan-directorate	Technology, Transformation and PMO	Ongoing	We have invested in replacing our Wide and Local area networks in collaboration with Buckinghamshire council. This will provide a more resilient network to build our technology on. The ICT strategy is in place and following a budget challenge last year is funded until 2025	On-Track	
Making the fire and rescue service affordable now and in the future	The service should have a clear and sustainable strategic plan for the use of its reserves which promotes new ways of working.	Area for Improvement	Complete	BAU	Director of Finance and Assets	Finance and Assets	18/11/2020	Complete	Complete	https://bucksfire.gov.uk/documents/2020/11/item-7-executive-committee-financial-strategy.pdf/ https://bucksfire.gov.uk/documents/2020/03/reserves_strategy_2018-19_web.pdf/
Making the fire and rescue service affordable now and in the future	The service needs to make sure that its fleet and estate strategies are regularly reviewed and evaluated to maximise potential efficiencies.	Area for Improvement	Delayed	BAU	Property Manager/Fleet Manager	Finance and Assets	23/24	The Property strategy is current and in date. A review is scheduled to ensure it remains in date after 2023	Complete	https://bucksfire.gov.uk/documents/2020/03/property_strategy_2018_-_2023.pdf/
				BAU	Fleet Manager	Finance and Assets	01/04/2022	The Fleet Strategy update has been delayed to allow the Service Delivery team to review and forecast the service's future operational requirement	Delayed	

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HMICFRS 2021 Inspection Report Action Plan - People



Last Update: Sep-22

Sub-category	HMICFRS inspection report finding	Finding type	Overall RAG status	PMO Project link	Delivery lead	SMT Sponsor	Delivery Date	Sept 2022 Update	Project Status	Evidence to support completion
Promoting the right values and culture	The service should assure itself that senior managers are visible and demonstrate service values through their behaviours.	Area for Improvement	On Track	BAU improvement	SMT	CFO	Ongoing	SMT continue to meet face to face with all employees, through planned meetings and through working from alternative locations across the county. SMT attend community engagement events with employee such as Eid in the Park in July and open days at Aylesbury and West Ashland. The Chief Fire Officer shares regular updates via a Vlog.	On Track	Diary invites and SMT station visit timetable.
Promoting the right values and culture	The service should make sure that it effectively communicates its absence/attendance procedures for consistent application.	Area for Improvement	On Track	BAU improvement	Head of Human Resources	Human Resources	Monitoring	Covid reports are run on a weekly basis and anomalies compared with Fire Service Rota. Absence reports run on a monthly basis by the Data Intelligence team and shared with the Employee Relations team for follow up with managers and supporting employees back to work. Absence statistics shared at Health, Safety and Wellbeing Committee in September 2022. How to guides, flowcharts and Attendance Management procedures are shared on the intranet. Employee Relations Team train managers on the procedure.	On Track	Reports run by HR team with anomalies, monthly reports run by Data team and for HSWC. Covid data information stored on central spreadsheet, HR store confidential information.
Getting the right people with the right skills	The service should review its succession planning to make sure that it has effective arrangements in place to manage staff turnover while continuing to provide its core service to the public.	Area for Improvement	On Track	Internal Governance review	Corporate planning Manager	Legal and Governance	Phase 1 January 2021 Phase 2 October 2021 - May 2022	Workforce Planning Group meets on a monthly basis, minutes and actions are recorded. Dashboard to show progress, due to be presented to September Performance Monitoring Board and then at every future meeting.	Complete	SMB approval of Phase 2 recommendations on 17 May 2022. WPG and PMB dashboard, minutes and actions
				Workforce Planning Group	Head of Human Resources	COO	Ongoing	Workforce Planning Group (WPG) meet on a monthly basis. Dashboard presented at every meeting details information covering: -Headcount -Leavers -Promotion -Absence The dashboard and plan was presented to PMB 29 September and a summary update to the Executive committee on the 7th October Workforce planning is now a regular item on the Strategic Management Board Agenda. Promotion/Development Centres took place in September for Crew, Watch and Station. Future Senior Management Succession report presented and approved at June Fire Authority. Annual SMT remuneration and employee bonus report being drafted for November Executive Committee	On Track	Dashboard, minutes and actions. Promotion/Development Centre information. SMT future succession (June Fire Authority) and SMT remuneration and employee bonus reports (November Executive Committee) - Pink papers The workforce planning update to members can be found on Page 15-20: https://bucksfire.gov.uk/documents/2022/09/special-meeting-of-the-executive-
Getting the right people with the right skills	The service should assure itself that all staff are appropriately trained for their role.	Area for Improvement	On Track	Active Monitoring System project	GC Training and Assurance	Protection, Assurance and Development	05/03/2022	Active monitoring system now embedded.	Complete	
				Operational Training Provider	GC Training and Assurance	Protection, Assurance and Development	01/05/2022	New contract awarded to FSC > 2025	Complete	
				TNA	Organisational Development Manager	Protection, Assurance and Development	BAU	The Training Needs Analysis (TNA) process assesses the need for staff training at least annually. This TNA is translated into prioritised learning programmes, approved by the Training Strategy Group (TSG) and scrutinised to ensure alignment with business priorities, business continuity succession plans and approved budgets In April 2022, the TSG met to review the proposal for allocating funding against the 2022/23 TNA and were able to approve £220,000 of investment into staff training.	Complete	
				Internal Governance review / BTB	Organisational Development Manager / GC Training and Assurance	Protection, Assurance and Development	22/04/2022	Training Strategy Group - Terms of reference, including group membership and reporting mechanisms of outputs reviewed as part of phase 2 governance review. All complete and initial meeting held May 2022.	Complete	
				Quality Assurance training records	Organisational Development Manager / GC Training and Assurance	Protection, Assurance and Development		Quality assurance of appraisal returns is undertaken to identify themes, and to assist with training requirements. A report detailing the number of appraisal returns received is being taken to PMB on 29 September. Maintenance of competencies are being review quarterly with the half year report being presented to PMB and SMB in October.	On Track	

HMICFRS 2021 Inspection Report Action Plan - People



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Ensuring fairness and promoting diversity	Give greater priority to how it increases awareness of equality, diversity and inclusion across the organisation	Recommendation	On Track	EDI objectives	Head of Human Resources EDI group	COO	01/04/2025	Made a commitment to train a network of employees as ED&I Champions - provide access for members to the most current EDI information - Funding has been secured to deliver ED&I Champions training to all members of the ED&I Group - effectively role-model the expected behaviours and cascade information to other employees. - Training took place in October 2022.	On Track	Training materials and PowerPoint presentation		
Ensuring fairness and promoting diversity	The service should make sure it has appropriate ways to engage with and seek feedback from all staff, including those from underrepresented groups	Recommendation	On Track	People Strategy	Head of Human Resources EDI group	COO	01/04/2025	People Strategy Roadshow completed within planned timescales and engaged with a wide range of employees across the Service. Information gained fed into the Culture Survey information allowing for a focused approach on delivering improved outcomes and communicating this effectively across the Service.	On Track	People Strategy report - October 2021 and 2022 https://bucksfire.gov.uk/documents/2021/10/fa-item-10-people-strategy-13102021.pdf https://bucksfire.gov.uk/documents/2022/09/fa-item-14-121022.pdf		
				Culture Survey	Head of technology, Transformation and PMO	COO	Ongoing			Bi-annual Culture Survey results received in Jan 2022 Culture Survey Group consists of employees from across the Service. Culture Survey Group has completed Service wide 'listening workshops' to gain greater knowledge regarding the Survey results and to develop a plan to address issues raised. Introduction of 'Feedback Loop'	On Track	Culture survey results, employee engagement presentations, feedback spreadsheet
				Senior Management Team	Head of Human Resources EDI group	COO				Senior Leadership Team have been engaging with wide range of employees through face-to-face meetings at sites across the county, these are formal meetings and them working from stations. A timetable is in place of who is visiting which station and when. Chief Fire Officer presents regular Vlogs to keep employees updated with priorities, cascade important news and celebrate success. Joint Consultation Forum meetings take place regularly engaged and consulting with the recognised trade union representatives. Chairman visits to stations	On Track	Chief Fire Officer vlogs, SMT timetable of visits. Joint consultation forum agenda, minutes and actions. Chairman visits to stations - diary invites
				People Networks	Head of technology, Transformation and PMO	Head of technology, Transformation and PMO	Q4 22/23				Not started	
Ensuring fairness and promoting diversity	The service should make improvements to the way it collects equality data to better understand its workforce demographics and needs	Recommendation	On Track	EDI objectives	Head of Human Resources EDI group	COO	01/04/2025	Project plan written. Carried out extensive research on the ED&I data collected by other organisations – including other fire services; Census data; ENEI data; NHS Digital. Agreed a refresh of the data categories to be collected by BFRS. Consultation with key stakeholders started. Dashboard being created to evidence EDI in wholtime recruitment, and where protected characteristics are not getting to next stages of recruitment process. Plan to use throughout all recruitment, once dashboard finalised.	On Track	ITrent protected characteristic data, EDI recruitment dashboard		
Ensuring fairness and promoting diversity	The service should ensure it has robust processes in place to undertake equality impact assessments, implement and review any actions required	Recommendation	On Track	EDI objectives	Head of Human Resources EDI group	COO	01/04/2025	Reviewed the existing Equality Impact Assessment (EIA) documentation. Consulted with employees through intranet articles, presentations, 1:1 support, drop-in sessions and group workshops. Service has committed to embedding EIAs into all areas of the Service and have introduced guidance stating that all governance papers should be supported by a suitable and sufficient EIA. Good practice shared by storing completed EIAs in a single location, allowing authors to view examples of completed documents.	On Track	EIA guidance note and template, intranet articles internet EIA area set up, calendar invites for drop in sessions https://bucksfire.interactgo.com/Interact/Pages/Content/Do		
Ensuring fairness and promoting diversity	The service should be more ambitious in its efforts to attract a more diverse workforce which better reflects the community it serves	Recommendation	On Track	Engagement, Attraction, Recruitment and Selection Framework (EARSF) -Delayed	HR Operations Manager	COO	01/04/2025		Delayed			
				Recruitment	HR Operations Manager	COO	Ongoing	Wholtime (WT) Firefighters - 18 started on 3 October 2022, 31 progressed, plus 3 who are transferees. Next course 1 March 2023. WT Advert out closed 2 October 2022, 90 applicants. A review of the demographics of the applicants and appointments is underway to understand who is dropping out when. Transferees (On Call and external Firefighters) 58 applicants. 7 internal and 2 external candidates started 5 September. Two others started at Fire Service College on 1 September. External candidates interviews - 16 shortlisted progressed to the RRT and behaviour workshops on 27/28 September. 6 offered to start on 5 December. Continue to run On Call and Wholtime awareness events, station open days promote careers and attend careers fairs. Attendance at National Apprenticeship Show in September 2022. Planning underway to attend Armed Forces recruitment event in 2023. Change 100 Engaged with the Change 100 internship programme and commitment to recruit in 2023.	On Track	Wholtime, On call and Transferee adverts and media, recruitment plan for each campaign, calendar of recruitment events, Workforce planning Group agenda, minutes and actions		

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			On Track	Development Centres	Organisational Development Manager	Protection, Assurance and Development	Ongoing	Promotion/Development Centres for Watch, Crew and Station Commanders, are in progress. Work has started to understand further, the barriers to people going for development.	On Track	
			On Track	External	Head of Human Resources EDI group	COO	Ongoing	Achieved the Gold Award in the Defence Employer Reward Recognition Scheme for 2022 (Armed Forces Covenant.) Committed to focus on the South Asian community for the next 12 months with the objective to advance our presence in the community and promote career opportunities in the Fire Service. Attended Eid in the Park in July 2022. Chief Fire Officer attended engagement sessions at local schools and Islamic community group in High Wycombe as part of our engagement plan. Attendance at a range of Asian Fire Service (AFSA) events. Developed a plan to engage with the local Mosques. MK Pride prepared for by task and finish group, unable to attend due to Queen's passing.	On Track	Armed Forces award, Eid in the Park and Pride project plan
			On Track	EDI objectives	Head of Human Resources EDI group	COO	01/04/2025	The June 2022 Fire Authority agreed the ED&I objectives 2020-25 - Year two: The details of these can be found in the link to the right. Development of EDI delivery plan which monitors activities to address the cause of concern. Plan reviewed and updated prior to monthly ED&I meeting and updates provided to PMB. EDI pledges made at June 2022 Leadership group meeting. Delivered a Hidden Disabilities awareness and British Sign Language toolkit to our employees.	On Track	https://bucksfire.gov.uk/documents/2022/09/fa-item-14-121022.pdf/ https://bucksfire.interactgo.com/Interact/Pages/Content/Document.aspx?id=36770&SearchId=365874&utm_source=interact&utm_medium=general_search&utm_term=equality&
Managing performance and developing leaders	The service should put in place an open and fair process to identify, develop and support high-potential staff and aspiring leaders	Area for Improvement	On Track	BAU improvement - Talent management	Organisational Development Manager	Protection, Assurance and Development	01/04/2023	The Authority's workforce development programme, continues to ensure replenished development pools at each level, resulting in staff with the required skills to fulfil the roles when needed. All elements/modules of our promotional process have been reviewed, consulted on, and brought together in one Operational Promotional Procedure to provide clarity and consistency to staff on the requirements and route for promotion. Following the successful pilot of a scheme used to identify and develop future senior leaders in the Authority, this has now been embedded into the recently refreshed procedure.	On Track	Hidden Disabilities and Deaf Awareness e learning packages, and intranet articles https://bucksfire.interactgo.com/Interact/Pages/Content/Document.aspx?id=36543&utm_source=interact&utm_medium=quick_search&utm_term=hidden+disability https://bucksfire.interactgo.com/Interact/Pages/Content/Document.aspx?id=36817&utm_source=interact&utm_medium=quick_search&utm_term=british
			On Track	Leadership and Management framework	Organisational Development Manager	Protection, Assurance and Development	01/03/2023	Phase 1 of the programme was delivered to existing middle – senior managers and was completed in April 2022. An evaluation of phase 1 of the LMDP was presented to the Executive Committee in March 2022 and can be accessed here – https://bucksfire.gov.uk/documents/2022/03/ec-item-7-230322.pdf/ The next phase (phase 2) of the programme is to roll it out to the remaining established managers, this includes operational Watch Commanders. The final phase for the LMDP, once all existing managers have completed the programme, is for it to become acquisition training for all new managers/leaders and development for any potential future managers/leaders. This will be delivered internally via the Learning and Development team. In addition to the LMDP, two senior managers within the service have been successful in securing places on to the sector's national Executive Leadership Programme. Growth bid as part of in-year process to secure additional resource to bring back into the Service the Operational Support Manager (OSM) role was unsuccessful, this should be priority area for the service as is leaving a gap in the acquisition skills and knowledge for new operational managers.	On Track	Leadership and Mangement course content
			On Track	Apprenticeship programme	Organisational Development Manager	Protection, Assurance and Development	Complete	The Authority continues to exceed its required target with an average of 4.5 per cent apprenticeship new starts each year and with current recruitment plans, this is set to continue. Due to the Authority's commitment to apprenticeships and how effectively it uses the levy to fund training, we are now in a fortunate position where any future apprenticeships will be co-invested by the government. The co-investment means that the Authority pay 5% towards the cost of apprenticeship training and the government pay the rest (95%) up to the funding band maximum.	Complete	https://bucksfire.gov.uk/documents/2021/07/oa-item-15-210721.pdf/

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Managing performance and developing leaders	The service should put in place a system to actively manage staff careers, with the aim of diversifying the pool of future and current leaders	Area for Improvement	On track	Appraisal Process	Organisational Development Manager	Protection, Assurance and Development	Complete	Quality assurance of appraisal returns is undertaken to identify themes, and to assist with training requirements. A report detailing the number of appraisal returns received is being taken to PMB on 29 September.	Complete	Internal file - Performance Monitoring Board meeting 30/09/21, item 11(ii) update on appraisal returns (official sensitive personal)
				Direct Entry	Organisational Development Manager	Protection, Assurance and Development	TBC	Awaiting NFCC project completion and White paper consultation	Not started	

HMICFRS 2021 Inspection Report - Identified Good Practice (narrative)



Last Update: 22 September 2022

Pillar	Sub-category	HMICFRS inspection report finding	Finding type	Accepted Y/N	Rationale, if finding not accepted	PMO Project link	Delivery lead	Lead Department
Effectiveness	Understanding the risk of fire and other emergencies	The service gathers information about the risks its firefighters face in response to incidents	Narrative - Good Practice	yes		SSRI Project	Technical	Protection, Assurance and Development
Effectiveness	Understanding the risk of fire and other emergencies	The service is good at using information from operational incidents attended to improve its understanding of current and past risk	Narrative - Good Practice	yes		BAU	Training and Assurance	Protection, Assurance and Development
Effectiveness	Understanding the risk of fire and other emergencies	The service is ahead of schedule to improve its information about high-rise risk following the Grenfell Tower fire inquiry	Narrative - Good Practice	yes		Grenfell project (GTI 1)	Technical/Protection	protection, Assurance and Development
Effectiveness	Preventing fires and other risks	The service is proactive in identifying and reporting safeguarding concerns	Narrative - Good Practice	yes		BAU	Community Safety and Safeguarding Manager	COO
Effectiveness	Protecting the public through fire regulation	The service has done a good job of increasing its number of qualified staff	Narrative - Good Practice	yes		Protection Uplift Programme	Protection	Protection, Assurance and Development
Effectiveness	Protecting the public through fire regulation	The service is ahead of schedule to audit all ACM-clad high-rise premises	Narrative - Good Practice	yes		Building Risk Review (BRR) Programme	Protection	Protection, Assurance and Development
Effectiveness	Protecting the public through fire regulation	The service provides proportionate enforcement activity and works with others to support its capacity	Narrative - Good Practice	yes		Protection Uplift Programme	Protection	Protection, Assurance and Development
Effectiveness	Protecting the public through fire regulation	The service is improving its response to building consultations	Narrative - Good Practice	yes		Protection Uplift Programme	Protection	Protection, Assurance and Development

Effectiveness	Protecting the public through fire regulation	The service has increased the ways in which it engages with businesses to help them understand and comply with fire safety legislation	Narrative - Good Practice	yes		Protection Uplift Programme	Protection	Protection, Assurance and Development
Effectiveness	Responding to fires and other emergencies	The service's response strategy is a unique and innovative approach	Narrative - Good Practice	yes		BAU	Resourcing and Projects	Prevention, Response and Resilience
Effectiveness	Responding to fires and other emergencies	The service meets its immediate availability standard	Narrative - Good Practice	Partially accept	The round 2 inspection covered the pandemic timeframe when resourcing improved considerably due various lockdowns and furloughed on-call employees. Further work is required to ensure the availability standard is resilient	Links to AFI in resourcing. Not currently a project	Resourcing and Projects	Resourcing and Projects
Effectiveness	Responding to fires and other emergencies	The service meets national response standards of performance	Narrative - Good Practice	yes		BAU	Resourcing and Projects	Prevention, Response and Resilience
Effectiveness	Responding to fires and other emergencies	The service has good command of incidents	Narrative - Good Practice	yes		BAU	Training and Assurance	Protection, Assurance and Development
Effectiveness	Responding to fires and other emergencies	The service has a positive relationship with Thames Valley Fire Control	Narrative - Good Practice	yes		BAU	Pan organisation	Prevention, Response and Resilience
Effectiveness	Responding to fires and other emergencies	Thames Valley Fire Control is developing its ability to handle fire survival guidance calls	Narrative - Good Practice	yes		Grenfell project	TVFCS	Prevention, Response and Resilience
Effectiveness	Responding to fires and other emergencies	The service maintains and regularly updates information about risk to firefighters	Narrative - Good Practice	yes		BAU	Prevention, Response and Resilience	Prevention, Response and Resilience
Effectiveness	Responding to fires and other emergencies	The service is good at evaluating its operational performance and is aligning to national operational guidance	Narrative - Good Practice	yes		NOG project	Technical	Protection, Assurance and Development
Effectiveness	Responding to major and multi-agency incidents	The service is well prepared for major and multi-agency incidents	Narrative - Good Practice	yes		NOG project	Technical	Protection, Assurance and Development

Effectiveness	Responding to major and multi-agency incidents	The service has a good ability to respond to major and multi-agency incidents	Narrative - Good Practice	yes		NOG project	Technical	Protection, Assurance and Development
Effectiveness	Responding to major and multi-agency incidents	The service works well with other fire services	Narrative - Good Practice	yes		Collaboration	Technical	Protection, Assurance and Development
Effectiveness	Responding to major and multi-agency incidents	The service works well with other partners	Narrative - Good Practice	yes		Collaboration	Technical	Protection, Assurance and Development
Effectiveness	Responding to major and multi-agency incidents	The service has a well-established cross-border exercise plan	Narrative - Good Practice	yes		BAU	Training and Assurance	Protection, Assurance and Development
Effectiveness	Responding to major and multi-agency incidents	The service has adopted JESIP	Narrative - Good Practice	yes		BAU	Training and Assurance	Protection, Assurance and Development
Effectiveness	Responding to major and multi-agency incidents	The service listens to and applies learning from national incidents and practices	Narrative - Good Practice	yes		BAU	Training and Assurance	Protection, Assurance and Development
Efficiency	Making best use of resources	The service plans to deal flexibly with its immediate financial difficulty	Narrative - Good Practice	yes		BAU	Finance and Assets	Finance and Assets
Efficiency	Making best use of resources	The service collaborates when possible	Narrative - Good Practice	yes		BAU	Pan organisation	Pan organisation
Efficiency	Making best use of resources	The service has good continuity arrangements	Narrative - Good Practice	yes		BAU	Business Continuity	Legal and Governance
Efficiency	Making best use of resources	The service shows sound financial management, but it could make improvement in its resource allocation	Narrative - Good Practice	yes		BAU	Finance and Assets	Finance and Assets
Efficiency	Making the fire and rescue service affordable now and in the future	The service works hard to continually improve value for money and do more with less	Narrative - Good Practice	yes		BAU	Finance and Assets	Finance and Assets
Efficiency	Making the fire and rescue service affordable now and in the future	Reserves are reducing significantly	Narrative - Good Practice	yes		BAU	Finance and Assets	Finance and Assets
People	Promoting the right values and culture	There is a positive health and safety culture within the service	Narrative - Good Practice	yes		BAU	Health and Safety	Protection, Assurance and Development

People	Ensuring fairness and promoting diversity	The service has made some progress to promote fairness in its internal promotion and progression processes	Narrative - Good Practice	Yes		Leadership and Management Framework	Organisational Development	Protection, Assurance and Development
People	Managing performance and developing leaders	The service has introduced a good process for managing individuals' performance	Narrative - Good Practice	Yes		Appraisal Process	Organisational Development	Protection, Assurance and Development



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Matt Parr CB

His Majesty's Inspector of Constabulary
His Majesty's Inspector of Fire & Rescue
Services

Mick Osborne
Acting Chief Fire Officer
Buckinghamshire Fire and Rescue Service
Via email

18th October 2022

Dear Mick,

FOLLOW UP INSPECTION

Further to my letter of 14 December 2021, I am writing to update you about our next steps on the causes of concern which we found during your service's inspection in July 2021.

Thank you for submitting your draft action plan in March 2022 and follow up information identifying the progress the service has made. We intend to conduct a revisit of your service to follow up on the causes of concern in prevention and fairness and diversity and assess the progress you have made. The revisit will take place on site week commencing 3rd January.

We will take a flexible approach to the visit timetable. Our SLL Kathryn Richardson will work with your SLO to programme activity around any commitments the service may have. The programme will include a limited number of interviews, focus groups, document reviews and a further review of your action plan.

The revisit will conclude with a debrief session with Kathryn Richardson and Chief of Staff Damian Henderson who will update you on the findings. After the visit we will write to confirm our findings. As with our previous letters, this will be published on our website.

If you have any questions about the revisit, please discuss these with Kathryn Richardson (Kathryn.richardson1@hmicfrs.gov.uk) who will be able to help.

Yours sincerely,

Matt Parr CB

His Majesty's Inspector of Constabulary
His Majesty's Inspector of Fire & Rescue Services

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: Prevention Improvement Plan – Update Two

Lead Member: Councillor Simon Rouse

Report sponsor: Area Commander Simon Tuffley

Author and contact: Community Safety & Safeguarding Manager Joanne Cook

jcook@bucksfire.gov.uk

Action: Noting.

Recommendations:

That the Prevention Improvement Plan highlight report, summarising the progress made against the measures required to secure long-term improvements to Prevention delivery in Buckinghamshire Fire & Rescue Service (BFRS) be noted.

Executive summary:

An initial update on progress against The Prevention Improvement Plan was written and presented to Performance Monitoring Board on 9 June 2022 and formed part of the subsequent Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) update, noting this is now His Majesty's Inspectorate of Constabulary and Fire & Rescue Services.

The Prevention Improvement Plan contains 60 recommendations drawn from the Prevention Evaluation, the HMICFRS findings, the twelve areas required to meet the Prevention Fire Standard and associated National Operational Guidance for the Person-Centred Approach (PCA).

Work to evidence attainment against the removal of the HMICFRS Prevention cause for concern continues to be prioritised over other recommendations within the Prevention Improvement Plan (PIP), with the progress being made against almost all other recommendations being detailed within the PIP.

During the period of this highlight report, recruitment to most of the vacancies within the Central Prevention delivery team has been successful which will in time help to alleviate some of the capacity limitations within the team and assist in increasing Home Fire Safety Visit (HFSV) delivery numbers. Whilst a recruitment process is ongoing for one role (equivalent to 17 percent of the delivery team

headcount), applications have been received and it is hopeful that the role will be filled fourteen months after becoming vacant.

Whilst no new recommendations have been completed within the two-month period covered by this highlight report, three of the five strands have moved to green/on track overall, with significant areas such as the Prevention Strategy on track for delivery in the next period.

Financial implications:

Amending communication methods and referral mechanisms in response to some of the Prevention Improvement Plan recommendations may introduce additional financial implications, however where appropriate, work completed by the NFCC on developing online resources will be utilised.

Any requirement for growth will be submitted through the established internal governance arrangements for consideration.

Risk management:

This Prevention Improvement Plan is the most effective way of ensuring continued improvement to ensure the best possible service is provided to the communities we serve.

The provision of regular highlight reports is an assurance tool to ensure that we are ultimately working towards aligning to national best-practice and more effectively to reduce risk in our communities.

There remain reputational corporate risks to the organisation should we be judged as inadequate by HMICFRS. The Service had already taken steps to mitigate this through having extensive internal and external audits of a number of areas of the Service, notably, elements of our operational activity has been subject to external independent assurance. The prevention evaluation is another example of applying constructive internal scrutiny to drive improvement and reduce risk.

Key risks are identified in the highlight report, of which the staffing issue has already been seen to impact upon delivery.

Legal implications:

The key legislation, regulation, and duties linked to a Fire and Rescue Service's prevention function can include (but is not limited to) the following:

- The Road Traffic Act, Section 39
- Home Safety Act
- Housing Act
- Children's Act

- Working Together to Safeguard Children
- Safeguarding Vulnerable Groups Act and the Protection of Freedoms Act
- United Nations Human Rights Convention on the Rights of the Child
- Mental Capacity Act and Mental Health Act
- Police & Crime Act
- Modern Slavery Act
- Crime and Disorder Act
- Counter Terrorism and Security Act
- The Care Act
- Homelessness Reduction Act
- Anti-social Behaviour Crime & Policing Act

Privacy and security implications:

No privacy or security implications have been identified that are directly associated with this report or its appendices. The respective strands of the improvement plan will ensure Data Protection Impact Screening and full impact assessments are completed and reviewed where appropriate.

The report and its appendices are not protectively marked.

Duty to collaborate:

Collaboration with partners to ensure a collective and shared approach to identify and mitigating community risk is critical to ensure Prevention activity is effective. The evaluation identifies a number of areas where collaboration and partnerships can be developed for the benefit of community safety.

Health and safety implications:

There are no Health, Safety or Wellbeing implications arising from this report.

Environmental implications:

There are no environmental implications directly arising from this report.

Equality, diversity, and inclusion implications:

Whilst there are no identified implications directly associated with this report or its appendices, elements of work contributing to the progressive of individual recommendations have a positive impact upon. The respective strands of the improvement plan will ensure impact screening and full impact assessments are completed and reviewed where appropriate.

Consultation and communication:

The Prevention evaluation involved extensive engagement with stakeholders to ensure an effective and thorough evaluation of all our activity.

Background papers:

23 January 2020 - Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) – Buckinghamshire Fire and Rescue Service (BFRS) Inspection Findings Report:

https://bucksfire.gov.uk/documents/2020/03/230120_item_7_hmicfrs_cover_report_23012020_appendix-min.pdf/

10 November 2021 – Prevention Evaluation – Phase One Report

<https://bucksfire.gov.uk/documents/2021/10/oa-item-17-17-10-21.pdf/>

20 July 2022 – Overview and Audit Committee – Item 14

[14 Prevention Highlight Report](#)

Appendix	Title	Protective Marking
1	Prevention Improvement Plan highlight report – June/August 2022	Not protectively marked
2	Prevention Improvement Plan dashboard – July 2022	Not protectively marked
3	Prevention Improvement Plan dashboard – August 2022	Not protectively marked

Project: Prevention Improvement Plan (Appendix 1)



Lead Member: Project Sponsor: Project Manager:		Cllr Simon Rouse AC Simon Tuffley Joanne Cook		Project Objectives: Following the Prevention Evaluation, a three-year plan is in place to develop Prevention within the service: Effective prevention strategy, processes and systems in place facilitating effective delivery of preventative information across the community				Overall RAG 	
Strategy, vision and leadership		Intelligence		Management of processes, systems and planning incl. audit		Coordination & communication of operations		Delivery of operations	

Summary – Period dated: June – August 2022

Key Activities

- Incident upload from Vision into PRMS reviewed against all incident types that should pull through. Although assured that all relevant incidents were being received with the exception of ‘small hazmat’, the system upgrade at TVFCS caused an issue with incident pull through that has not been able to be resolved. This has impacted on all follow up activity to incidents since that date, with measures necessary to redress the backlog when it is able to be accessed.
- Recruitment has reduced the vacancies within the Central Prevention team to just one. However, as onboarding to competent takes four to six months, this does not have an immediate impact on delivery numbers.
- Firesetter Intervention Scheme (FIS) delivery model review of scoring and supervision moved to delayed due to this work being undertaken by the NFCC Firesetter Intervention Scheme core group at a national level.
- Scoring review for Home Fire Safety Visit assessment linked to research on risk of fire fatality or serious injury drafted and tested prior to consultation circulation.

Priorities for Next Period: September - November 2022

Progress

- Prevention strategy through the next stages of the consultation process. It is scheduled for final stage of approval 12 October.
- Firesetter intervention scoring review in line with the outcomes of the National Fire Chief’s Council (NFCC) core group.
- Station objectives process to include dashboard reporting capability, evaluation form and service wide objective area.

Complete

- Initial set of Key Performance Indicators (KPIs) for Prevention identified with information summarised for Service KPIs.
- Review of referral processes to increase protection of sensitive information submitted by partner agencies, facilitate external reporting (Home Office/ HMICFRS) and uplift of information to the National Data Hub.

Project: Prevention Improvement Plan (Appendix 1)



Lead Member: Project Sponsor: Project Manager:		Cllr Simon Rouse AC Simon Tuffley Joanne Cook		Project Objectives: Following the Prevention Evaluation, a three-year plan is in place to develop Prevention within the service: Effective prevention strategy, processes and systems in place facilitating effective delivery of preventative information across the community				Overall RAG 	
Strategy, vision and leadership		Intelligence		Management of processes, systems and planning incl. audit		Coordination & communication of operations		Delivery of operations	

Summary – Period dated: June - August 2022				
Key Activities (continued)	Key Milestones		Forecast/ Actual	RAG
	Effective system for dealing with referrals implemented, prioritising those with highest level of risk		October 2022	
	Approval of revised Prevention Strategy		October 2022	
	An effective system defining levels of risk in the community		October 2022	
	Evidence in place to support removal of Prevention Cause for Concern		October 2022	
Change Request Log:				
NA		NA		NA

Risk/ Issue	RAG	Description	Mitigating Action	Next Action
Enter top three highest risks to the plan				
Staff capacity		Failure to recruit into vacant roles impacting on ability of Prevention team to conduct core day to day activity as well as progress actions within the Prevention Improvement Plan	Use of operational staff through alternate duties business cases to alleviate capacity issues	1 role readvertised for the fourth time.
Prioritisation of visits by risk level (risk stratification)		Capacity of 3 rd party company (Active Informatics) to make changes to the Prevention side of the Premises Risk Management System whilst the migration to 365 and development of the Site Specific Risk Information (SSRI) area is underway delays ability to progress areas of work required for prevention including the prioritisation of visits by risk level	If scoring within the system can be adjusted, threshold levels (bands) may have to be managed outside of the system Work on recording all visits in PRMS commenced whilst awaiting SSRI completion but delivery date is dependent on Active's ability to provide development time	Once migration of PRMS to 365 is complete, development time is needed to enable risk stratification to be applied within the system.
Collaborative working – staff capacity		Staff retention in key departments and conflicting priorities within the organisation impacting upon Prevention team's ability to deliver against the recommendations	Regular liaison with relevant department leads to ensure early warning of issues that may impact upon progress against the cause for concern areas or the wider prevention improvement plan	Continue regular liaison with other dept leads

Appendix 2: Prevention Improvement Plan dashboard update – July 2022



Prevention Improvement Plan - Progress Dashboard

	Total recommendation	Complete	On track	On hold/delayed	Not started
Intelligence	15	2	8	5	0
Management of processes, systems and planning, including audit	15	0	13	1	1
Coordination and communication of operations	13	0	11	1	1
Delivery of operations	10	3	7	0	0
Grand totals	60	7	39	12	2

Appendix 3: Prevention Improvement Plan dashboard update – August 2022



Prevention Improvement Plan - Progress Dashboard

	Total recommendations	Complete	On track	On hold/delayed	Not started
Intelligence	15	2	7	6	0
Management of processes, systems and planning, including audit	15	0	11	3	1
Coordination and communication of operations	13	0	9	3	1
Delivery of operations	10	3	6	1	0
Grand totals	60	7	33	18	2



Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: 2021-22 Annual Performance Monitoring Report

Lead Member: Councillor Simon Rouse

Report sponsor: Deputy Chief Fire Officer Mick Osborne

Author and contact: Craig Newman, Data & Intelligence Team Manager

cnewman@bucksfire.gov.uk

Action: Noting

Recommendations: That the outturn performance against the outcome measures specified in the Corporate Plan 2020-25 be noted.

Executive summary: This report provides a review of annual performance in relation to the Authority's 2020–25 Corporate Plan objectives focusing on incidents in homes, workplaces, whilst travelling and in wider community settings. It covers the period 1 April 2021 to 31 March 2022.

While the impact of the pandemic on incident numbers that Buckinghamshire Fire and Rescue Service attended during 2020/2021 is clear to see, in most cases, incident numbers have returned to the pre-pandemic trends.

A summary of key indicators is shown at page four of the annexed report. These indicate, significant improvement/change against five-year averages across most key indicators. In particular: Accidental Dwelling Fires (down 6%), chimney fires (down 21%), and deliberate secondary fires (down 12%).

Financial implications: None at present.

Risk management: Performance and risk information is designed and presented to assist the Authority in the strategic decision-making through understanding the communities we serve and associated risk profiles. Performance management information is a major contributor to service improvement and to the effective prioritisation of resources.

Legal implications: None at present.

Privacy and security implications: None at present.

Duty to collaborate: This report references collaborative work-streams based upon the Authority's collaborative principles where this is deemed appropriate.

Health and safety implications: No issues identified from this report.

Environmental implications: No issues identified from this report.

Equality, diversity, and inclusion implications: While there are no issues identified within this report, as a service we monitor groups impacted by incidents that we attend. We then use this information to understand and develop our community engagement methodology.

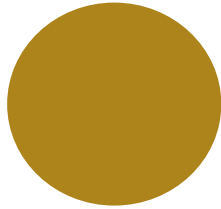
Consultation and communication: We aim to provide performance information incorporating stakeholder contributions. The report will be circulated throughout the organisation for information and awareness.

Board	Date	Outcome
Performance Monitoring Board	29/09/2022	Approved for submission to Strategic Management Board
Strategic Management Board	18/10/2022	Approved for Overview and Audit Committee

Background papers:

- [2020-21 Annual Performance Monitoring Report](#)
- [2020-2025 Corporate Plan - Year 2 Update](#)
- [2020-2025 Corporate Plan](#)
- [Public Safety Plan 2020-25](#)

Appendix	Title	Protective Marking
1	2021-22 Annual Performance Monitoring Report	N/A



2021/2022 Annual Performance Monitor



Contents

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2021/2022 – At a glance	4
2021/2022 – Incident breakdown	5
Home	6
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Introduction

Welcome to [Buckinghamshire Fire & Rescue's \(BFRS\) annual report for 2021/2022](#). This report monitors the number of incidents and associated outcomes that occurred within Buckinghamshire and Milton Keynes during 2021/2022.

Our [vision](#) is to make Buckinghamshire and Milton Keynes the [safest areas](#) in England in which to [live](#), [work](#) and [travel](#).

In view of the above, this report includes four key sections:

- In the [Home](#)
- In the [Workplace](#)
- [Travel](#) in and through Buckinghamshire and Milton Keynes
- In the [Community](#)

Because incident numbers can be heavily influenced by external factors, comparing one year's performance with the previous year may not provide a fair indicator, especially if the previous year was exceptionally busy, or vice versa. The pandemic that impacted the way in which most people behaved in 2020/2021 is a prime example of this.

This report will primarily compare 2021/2022 with the average of the previous five years' recorded incident data.

At a glance

Unless otherwise stated, numbers throughout this report are excluding co-responder incidents. There will also be slight differences in some of the figures shown, which is due to rounding. The figures below are a comparison between 2021/2022 and the previous 5 years as an average.

6,826 Incidents attended

↓ 3% Number of incidents
Decrease

↓ 6% Accidental Dwelling Fires
Decrease

↓ 21% Chimney fires in dwellings
Decrease

↓ 1% Primary fires in non-domestic properties
Decrease

↓ 8% Deliberate primary fires
Decrease

↓ 12% Deliberate secondary fires
Decrease

↑ 2% RTCs Attended
Increase



Average response times:

All incidents: 08:39
(previous five year average: 08:25)

Accidental dwelling fires: 08:13
(previous five year average: 07:57)

Primary fires: 08:22
(previous five year average: 08:29)

Secondary fires: 08:52
(previous five year average: 08:51)

Road traffic collisions: 09:23
(previous five year average: 09:21)

72% of incidents reached within 10 minutes
(previous five year average: 74%)

98% of incidents reached within 20 minutes
(previous five year average: 98%)

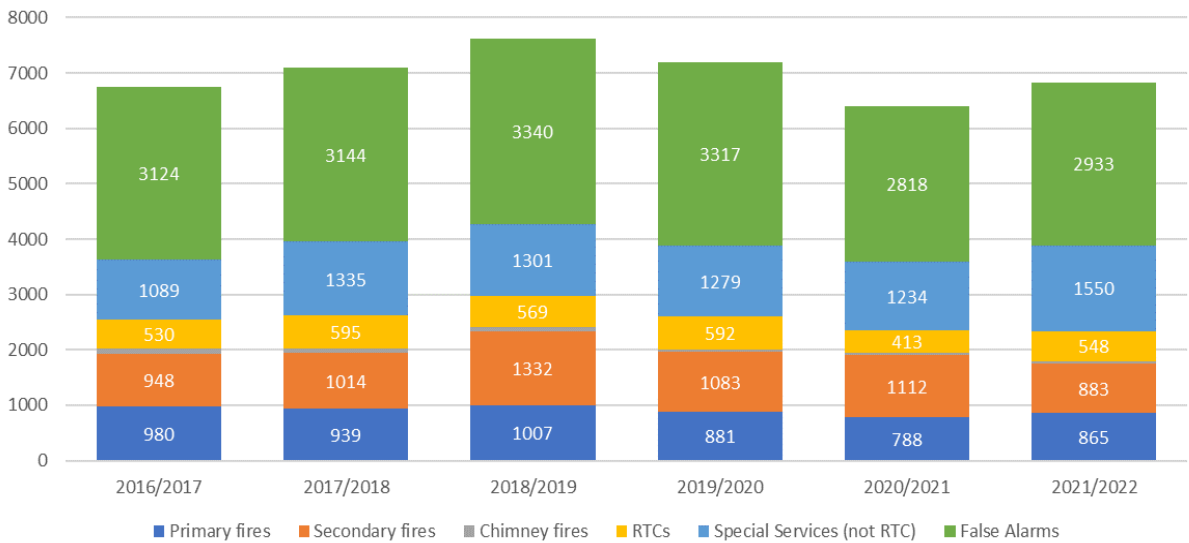




2021 / 2022 – Overall incident breakdown

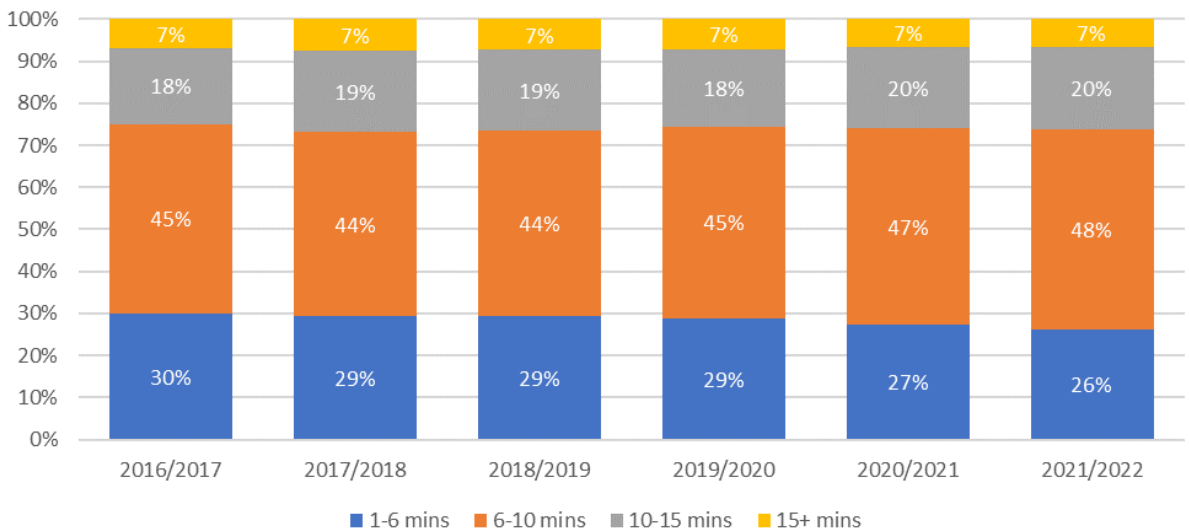
During 2021/2022 BFRS attended **6,826** incidents. This was **3% fewer** than the previous 5 year average. Reductions during this period were seen across nearly all incident types with the exception of Road Traffic Collisions which **increased by 2%** from the previous five year average.

BFRS - Incident type breakdown



BFRS response times have remained fairly consistent despite the change in incident numbers and types over the last 5 years. **26%** of incidents were reached in under **6 minutes** and **74%** reached within **10 minutes**.

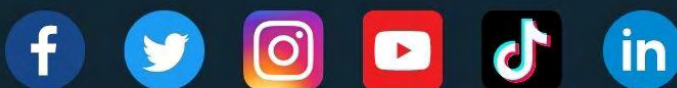
BFRS incident response times





IN THE HOME

**Making Buckinghamshire and Milton Keynes
the safest areas in England in which to live**



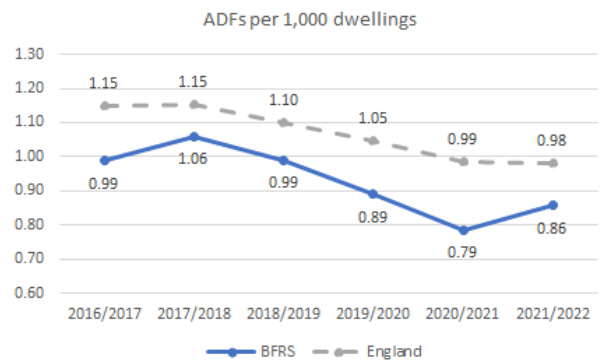
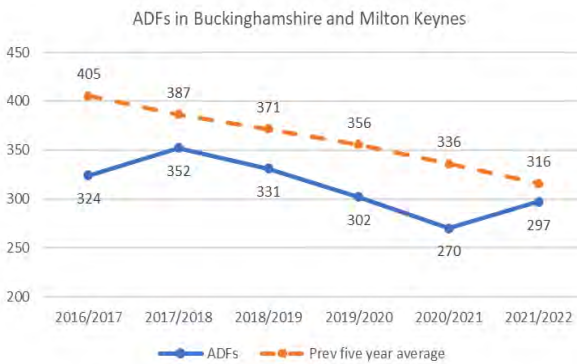
@bucksfire / @bucksfirerescue / #BFRS



HOME

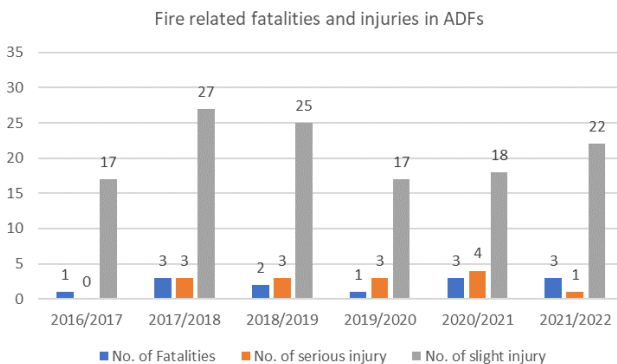
Accidental Dwelling Fires (ADFs) include those where the officer in charge recorded the cause of the fire to be accidental or not known. **Dwellings** are defined as buildings occupied by households, excluding hotels, hostels and residential institutions.

Following a downward trend, 2021/2022 saw an increase in the number of ADFs attended, returning closer to pre-pandemic trend, and still below the previous five year average. Despite the increase, the number of ADFs per 1,000 dwellings is still below the national average, as illustrated below:



The number of fire-related **fatalities** and **injuries** recorded at ADFs can be found below.

- Three **fire-related fatalities** were recorded at accidental dwelling fires in 2021/2022. The average of the previous five years was 2.0.
- There were 23 **serious** or **slight** injuries recorded, compared with an average of 23.4 recorded in the previous five years.

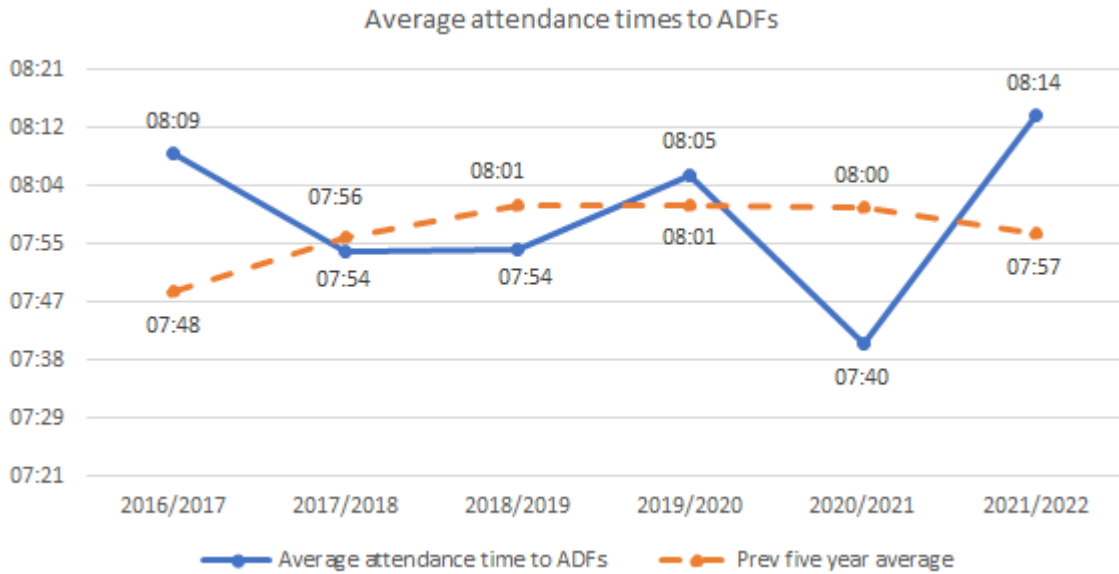


- **Serious** - Casualty went to hospital, injuries appear to be serious
- **Slight** - Casualty went to hospital, injuries appear to be slight

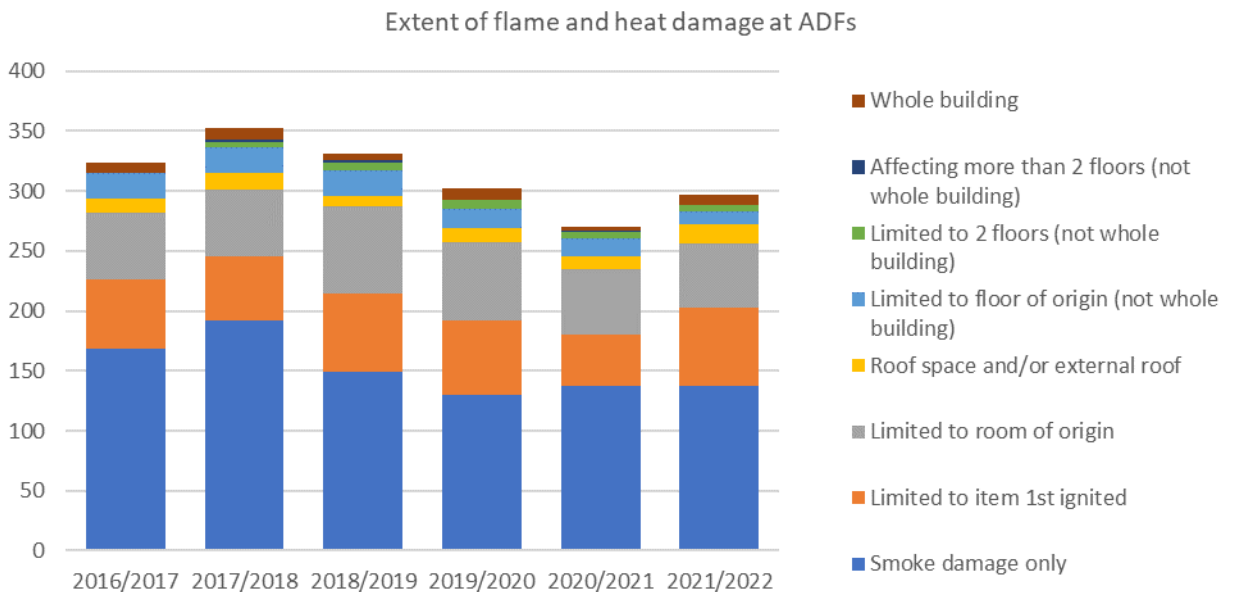


HOME

The chart below details the attendance times to ADFs year on year. Attendance times in 2021/2022 increased to 08:13, an increase of 16 seconds. This increase was in-line with the average of all incidents attended, which saw an increase of 14 seconds.



The following chart highlights the level of damage recorded at ADFs. During 2021/2022, 14% of ADFs saw the fire or heat damage spread further than the room of origin. The majority, 68% of ADFs, were limited to the item of origin or recorded as smoke damage only.

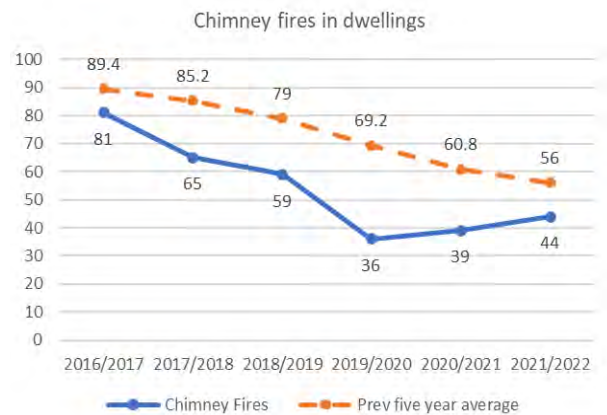
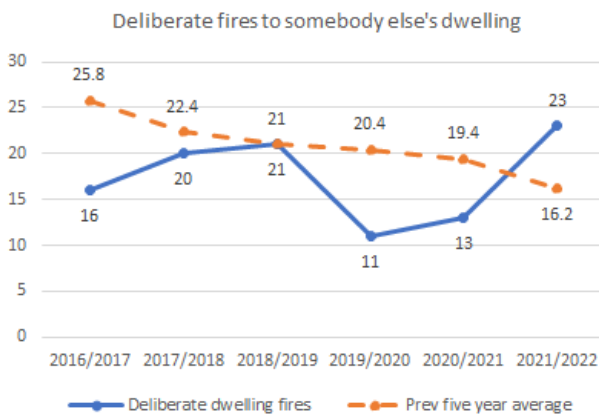




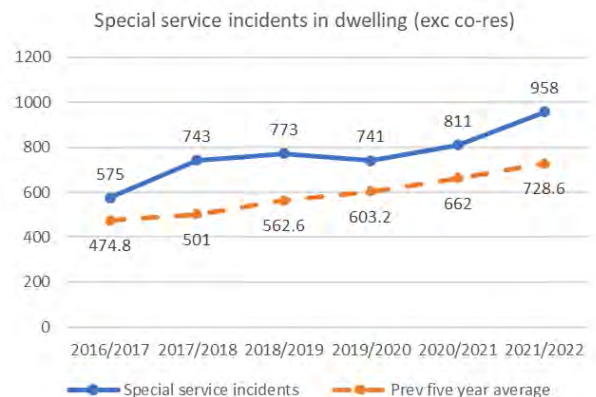
HOME

Dwelling fires where the cause was believed to be **deliberate** to somebody else's property increased from a five year average of 16 to 23 in 2021/2022.

There was also a 13% increase in **chimney** fires in dwellings, but numbers remained below the average of the previous five years.



2021/2022 saw **958 special service** incidents attended at dwellings, an increase of 18% compared to 2020/2021. The majority of incidents related to supporting **South Central Ambulance Service** in areas such as gaining access to a property. Other incident types included flooding-related calls. These figures do not include co-responder call outs.



	2016/2017	2017/2018	2018/2019	2019/2020	2020/2021	2021/2022
Effecting entry/exit	148	260	310	293	243	316
Flooding	191	203	191	131	191	178
Assist other agencies	36	42	65	77	121	152
No action (not false alarm)	36	47	40	36	72	75
Hazardous Materials incident	27	37	36	47	43	63
Lift Release	31	47	41	56	36	48
Making Safe (not RTC)	14	14	11	13	11	34
Removal of people from objects	9	7	22	9	22	18
Animal assistance incidents	18	19	11	17	21	18
Other rescue/release of persons	13	19	11	10	14	12
Advice Only	10	9	6	9	11	6
Other (grouped remaining <10)	42	39	29	43	26	38
Total	575	743	773	741	811	958



IN THE WORKPLACE

**Making Buckinghamshire and Milton Keynes
the safest areas in England in which to work**

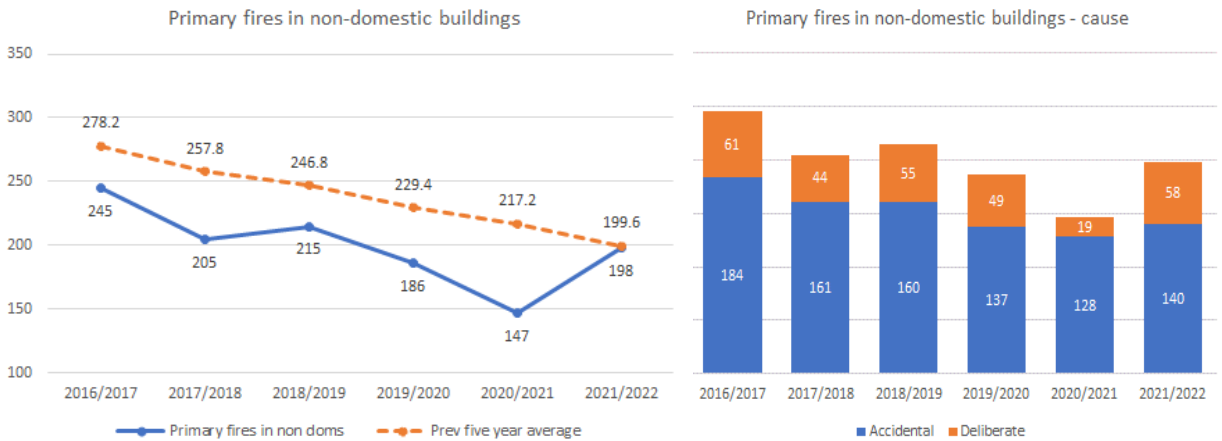


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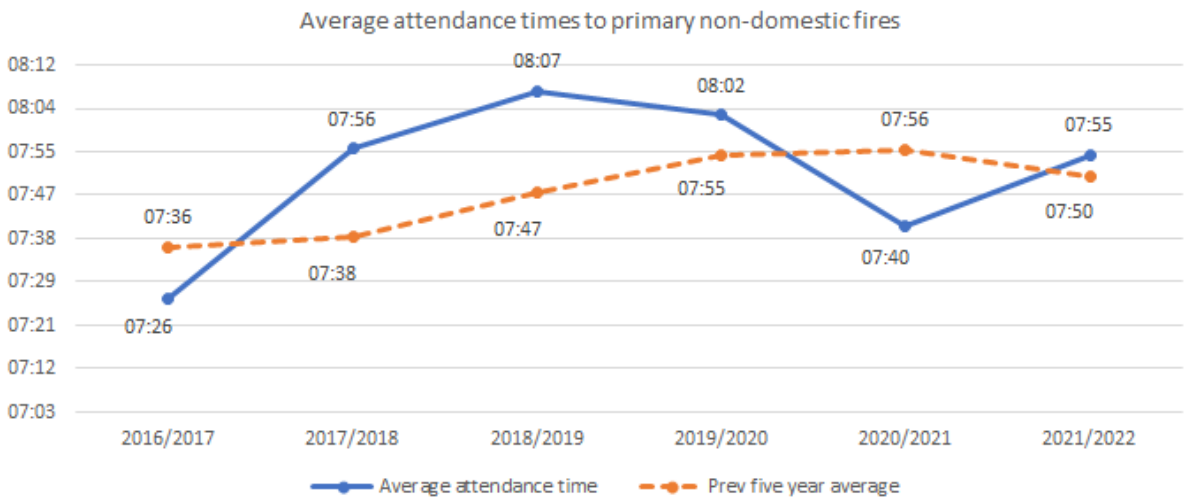


WORK

The number of primary fires in **non-domestic** properties increased to be in line with the average of the previous five years. The biggest contributor to this increase was deliberate fires (to somebody else’s property). This saw an increase of 29% when compared with the previous five years, and in addition, the largest share since 2010/2011.



As with the attendance times to accidental dwelling fires, times have risen above the average of the previous five years, with 2021/2022 being 5 seconds slower.

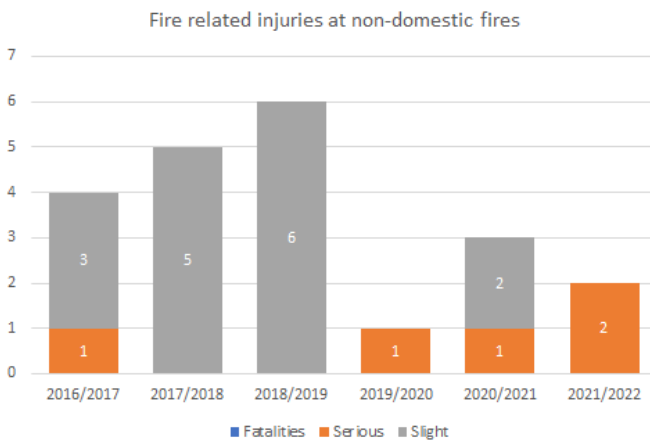




WORK

Fire-related injuries from **non-domestic** fires continue to remain low, however, **two serious injuries** were recorded in the last year. One of these was a deliberate fire within a prison, which led to breathing difficulties. The other was started accidentally in an office building, and led to severe electrical burns.

A breakdown of the injuries can be seen in the chart below.



- **Serious** - Casualty went to hospital, injuries appear to be serious
- **Slight** - Casualty went to hospital, injuries appear to be slight



WORK

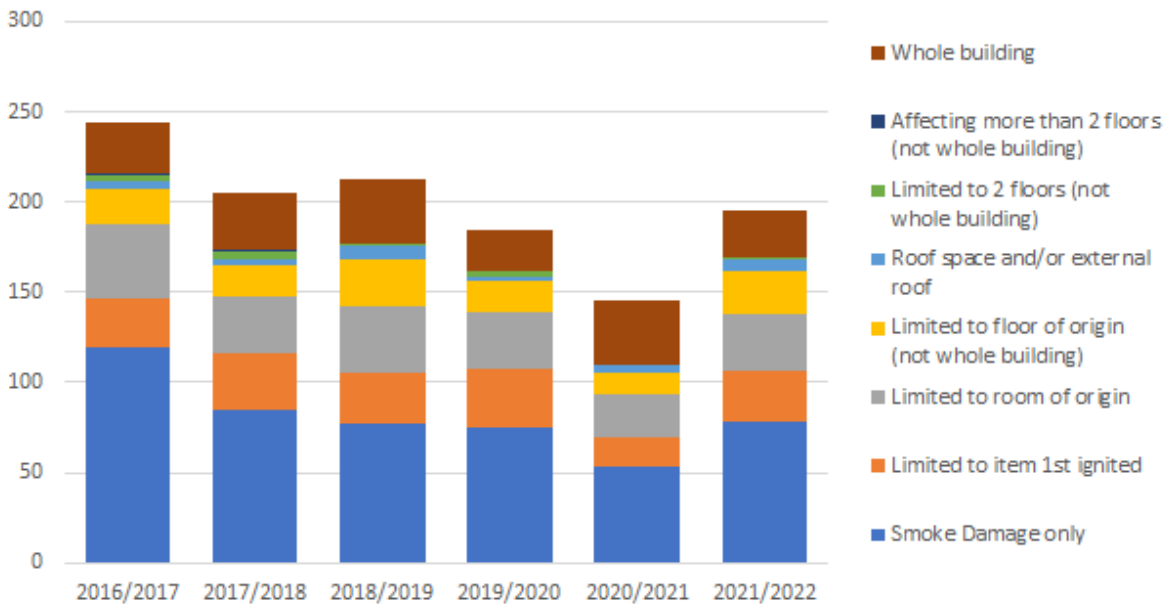
The following chart highlights the **level of damage** recorded at fires in **non-domestic** buildings. During 2021/2022;

54% of fires in non-domestic properties were limited to the item of origin or only recorded smoke damage, compared with 48% the previous year.

29% of fires in non-domestic properties saw the fire or heat damage spread further than the room of origin, compared with 36% in 2020/2021.

13% of fires resulted in the whole building being damaged. This was compared with 25% in 2020/2021 and a 15% average over the previous five years.

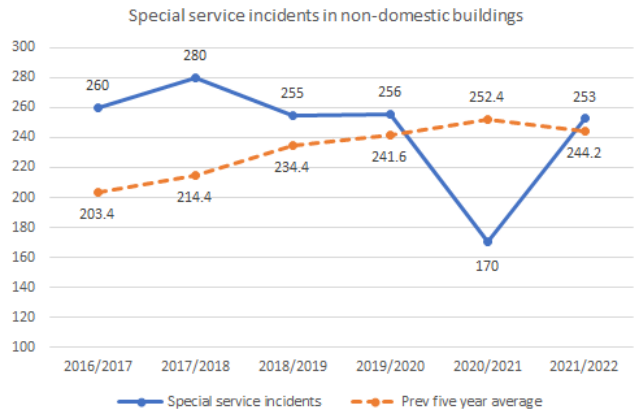
Extent of flame and heat damage at non-domestic fires





WORK

Special services – 2021/2022 saw BFRS attend 253 special service incidents to non-domestic buildings, the majority of which related to lift releases and ring removals. Other incident types included flooding related calls. These figures do not include co-responder call outs.



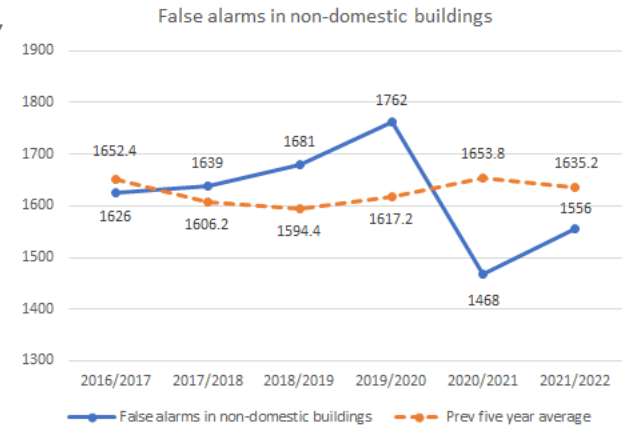
	2016/2017	2017/2018	2018/2019	2019/2020	2020/2021	2021/2022
Lift Release	71	87	82	93	35	59
Removal of objects from people	47	50	45	35	31	59
Effecting entry/exit	17	20	21	21	17	19
No action (not false alarm)	24	12	11	12	7	19
Assist other agencies	7	11	13	6	5	16
Flooding	31	44	26	28	26	15
Making Safe (not RTC)	14	8	13	10	7	15
Animal assistance incidents	6	6	1	6	7	11
Hazardous Materials incident	9	6	16	10	6	10
Removal of people from objects	6	2	5	5	4	9
Other rescue/release of persons	9	6	8	3	5	5
Suicide/attempts	5	5	6	3	6	5
Advice Only	3	4	1	3	2	3
Medical Incident - First responder	3	4	5	1	2	3
Spills and Leaks (not RTC)	4	4		4	1	2
Evacuation (no fire)	1	2	2	1	1	1
Other Transport incident		3		1	1	1
RTC	2	6		14	7	1
Water provision	1					
Total	260	280	255	256	170	253



WORK

False alarms – 53% of ‘false alarms’ in Buckinghamshire and Milton Keynes during 2021/2022 were to incidents located at a non-domestic property. This differs from 52% recorded in 2020/2021.

The table below provides a breakdown of the reasons listed for the false alarm calls to non-domestic properties. “System” usually refers to an alarm system i.e. smoke detectors, fire panels and break glass:



	2015/2016	2016/2017	2017/2018	2018/2019	2019/2020	2020/2021	2021/2022
Good intent - fire	219	178	196	142	107	73	74
Good intent - special service	8	9	12	10	13	10	6
Malicious	53	67	55	62	73	28	67
Sprinkler	25	14	19	29	25	35	26
System - external factors (contaminants or power surge)	190	241	206	246	229	176	257
System - faulty	242	248	228	193	261	228	264
System - human involvement (testing or cooking)	439	494	533	592	651	527	534
System - incorrect positioning	30	17	26	8	9	17	11
System - other	62	62	42	32	34	21	12
System - poor maintenance, damaged or unsuitable equipment	37	32	26	25	28	24	13
System - unknown	256	264	296	342	332	329	292
Total	1561	1626	1639	1681	1762	1468	1556



WHEN TRAVELLING

**Making Buckinghamshire and Milton Keynes
the safest areas in England in which to travel**

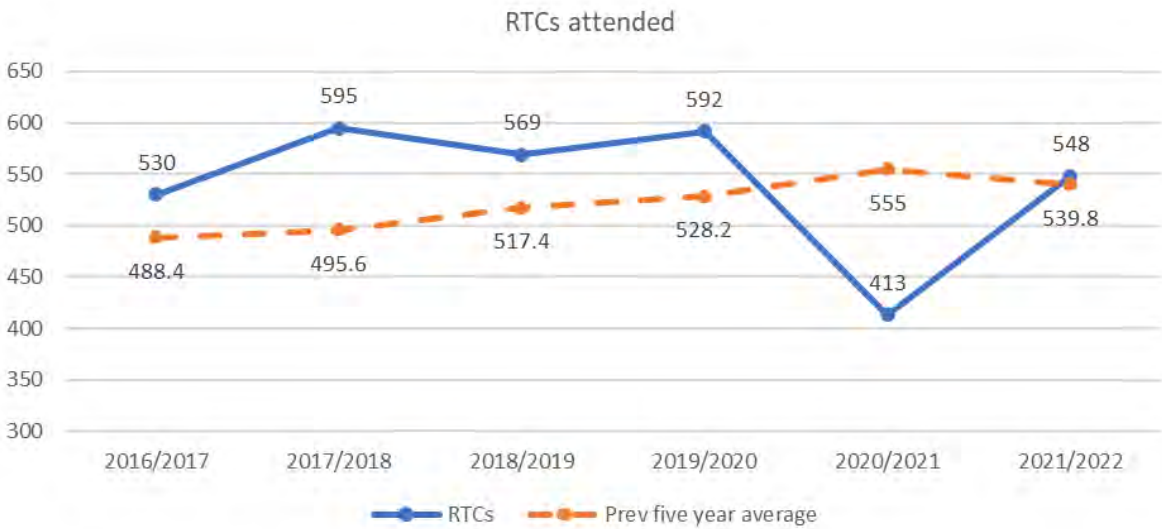


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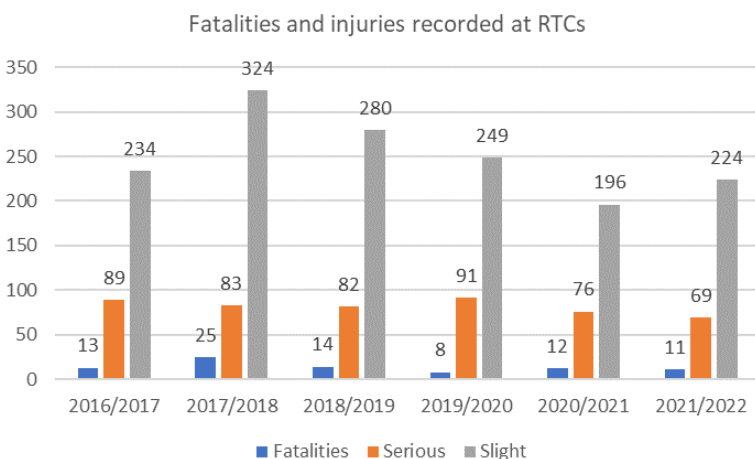
TRAVEL

Road Traffic Collisions (RTCs) – the number of RTCs attended by fire & rescue services within Buckinghamshire & Milton Keynes saw a slight increase when compared with the previous five years. However, the five year average was significantly impacted by the pandemic. The figure of 548 RTCs is still lower than the three years prior to the pandemic.



The chart below details the number of fatalities and injuries recorded at RTCs in Buckinghamshire and Milton Keynes attended by a fire & rescue service.

Further to the numbers detailed in the chart, crews also dealt with 175 minor injuries at RTCs during 2021/2022.



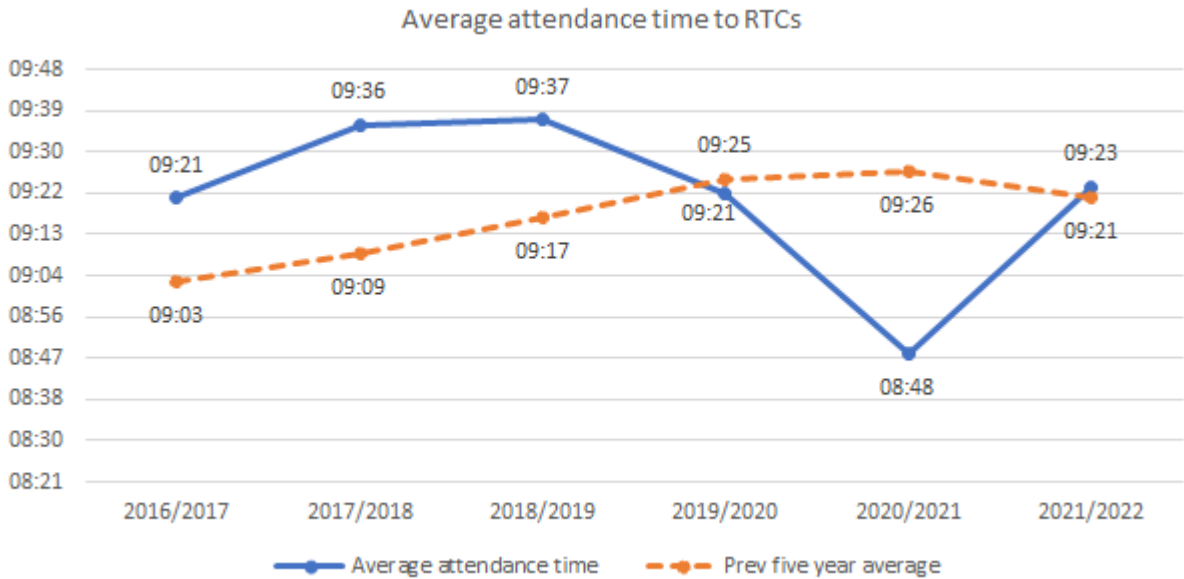
Serious - Casualty went to hospital, injuries appear to be serious

Slight - Casualty went to hospital, injuries appear to be slight

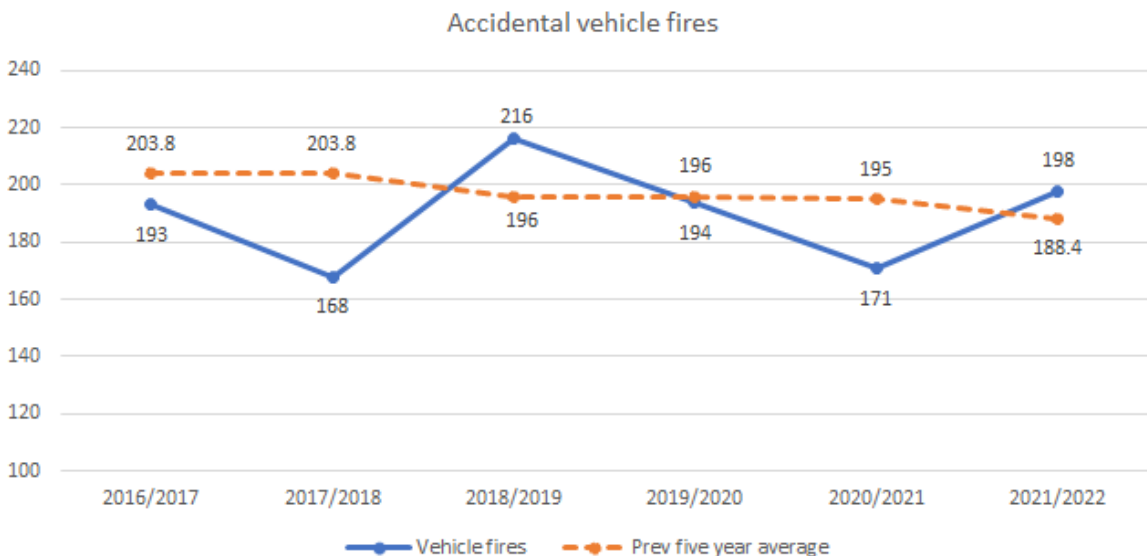


TRAVEL

The table below shows the average attendance times to RTCs within Buckinghamshire and Milton Keynes.



The figures below show the number of accidental vehicle fires BFRS attended (that were not related to an RTC). The number has remained consistent since incident reporting changed in 2009.





IN THE COMMUNITY

**Making the communities within
Buckinghamshire and Milton Keynes the
safest in England**



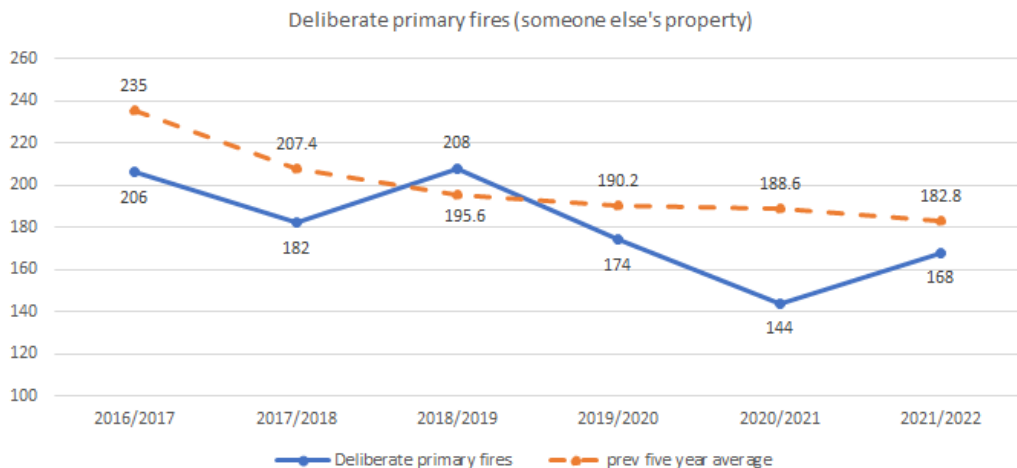
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COMMUNITY

The number of **deliberate primary fires** remained below the five year average, and remains on a positive trend, despite an increase when compared with 2020/2021.

Non-residential properties topped the chart of property types involved in deliberate primary fires for the first time since data collection changed in 2009/2010.



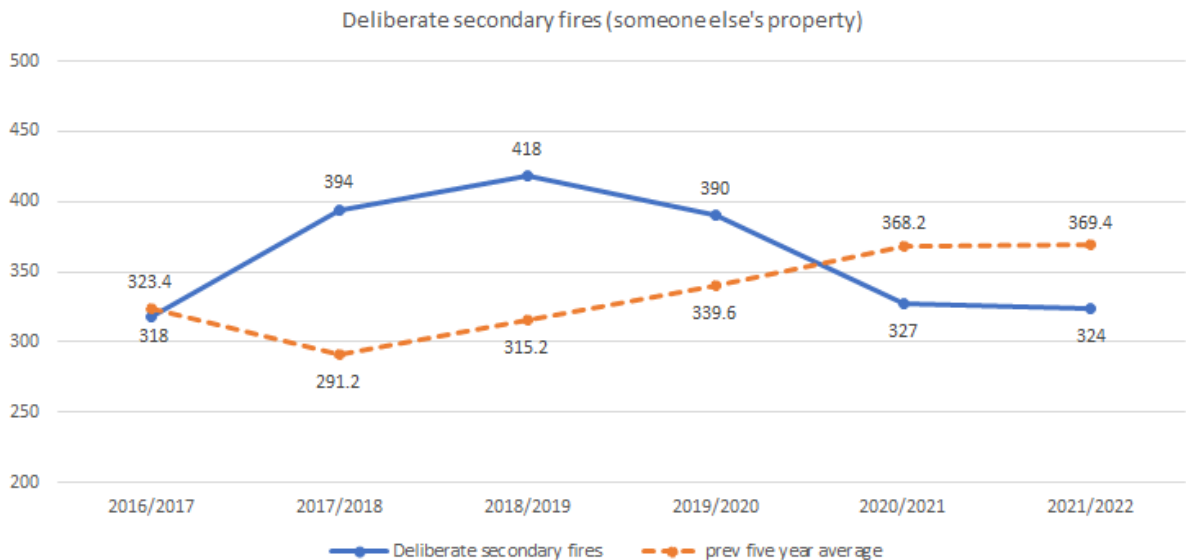
	2016/2017	2017/2018	2018/2019	2019/2020	2020/2021	2021/2022
Non Residential	38	35	40	35	16	48
Grassland, woodland and crops	18	20	32	29	37	26
Car	67	43	47	43	35	24
Dwelling	16	21	21	11	13	23
Motorcycle	15	8	16	12	6	16
Van	15	8	9	9	11	10
Outdoor structures	13	25	22	17	11	9
Outdoor equipment and machinery	1	3	4	2	3	4
Multiple Vehicles	7	8	6	4	6	2
Other	3	1	3	4	1	2
Caravan unspecified	3	4	1			2
Bicycle	1	1	1	2		1
Other Residential	2	2				1
Boats						
Lorry/HGV	2			3	2	
Towing caravan elsewhere (not on tow)		1	2	1	1	
Trailers - Trailer unit (not attached to tractor)			2		2	
Minibus	2	1	1			
Agricultural			1	1		
Other outdoors (including land)	1			1		
Motor Home		1				
Total	204	182	208	174	144	168

The definitions for deliberate, primary and secondary fires can be found in the glossary section at the end of this report.



COMMUNITY

The number of **deliberate secondary fires** (to other people's property) in 2021/2022 showed improvement for the third consecutive year and remains below the average of the previous five years.



	2016/2017	2017/2018	2018/2019	2019/2020	2020/2021	2021/2022
Other outdoors (including land)	132	200	158	136	118	122
Grassland, woodland and crops	68	90	130	147	126	106
Outdoor structures	92	88	99	83	53	68
Non Residential	11	8	16	5	9	12
Car	3	2	2	5	6	6
Outdoor equipment and machinery	3	1	2	1		4
Dwelling	4		3	6	1	1
Caravan unspecified	4	1	1	1	2	1
Van		1	3	1	3	1
Motorcycle		2	2	1	3	1
Towing caravan elsewhere (not on tow)				2	3	1
Boats						1
Caravan on tow	1			1		
Lorry/HGV			1		1	
Other Residential				1	1	
Multiple Vehicles			1			
Trailers - Trailer unit (not attached to tractor)					1	
Other		1				
Total	318	393	418	390	327	324

The definitions for deliberate, primary and secondary fires can be found in the glossary section at the end of this report.

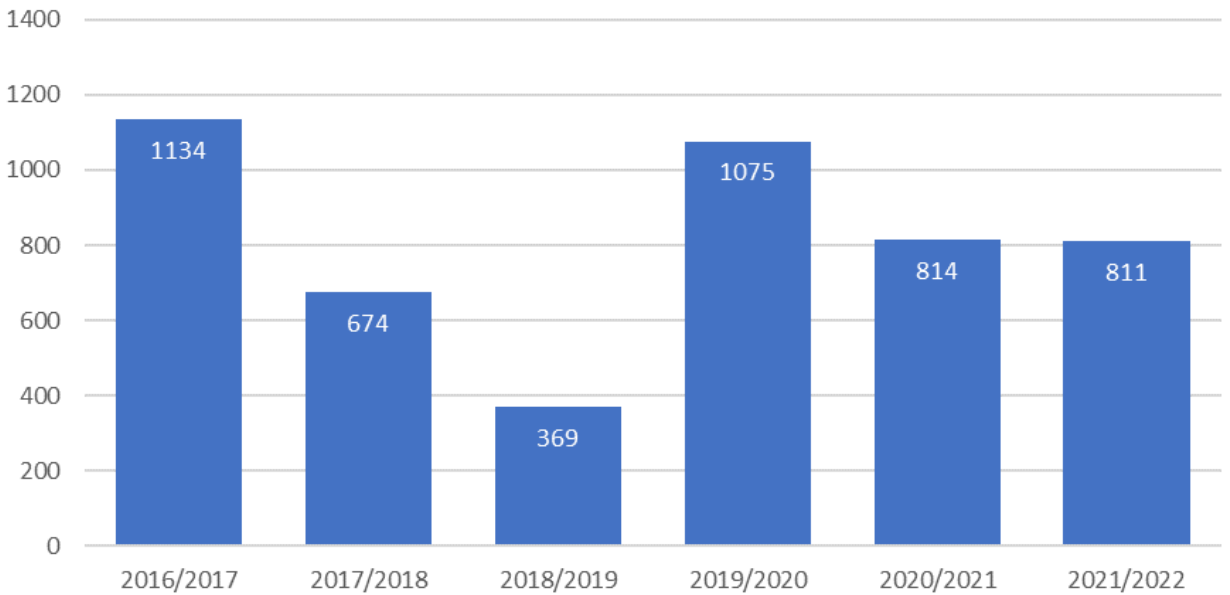


COMMUNITY

In 2021/2022 BFRS [co-responders](#) attended 811 incidents within Buckinghamshire and Milton Keynes.

While most calls are to people’s homes, co-responders also attend incidents in other locations, such as nursing homes.

Co-responder incidents attended



	2016/2017	2017/2018	2018/2019	2019/2020	2020/2021	2021/2022
Dwelling	884	500	254	817	664	702
Other Residential	79	60	51	78	60	42
Non Residential	104	77	36	106	30	30
Other	67	37	28	74	60	37
Total	1134	674	369	1075	814	811



Glossary

Accidental fires include those where the fire was ignited by accident or the cause was not known or unspecified.

Chimney fires are reportable fires at occupied buildings where the fire was confined within the chimney structure and did not involve casualties or rescues and was not attended by 5 or more appliances.

Deliberate fires include those where deliberate ignition is merely suspected.

Dwellings are defined as buildings occupied by households, excluding hotels, hostels and residential institutions.

False Alarms are events in which the Fire and Rescue service was called to a reported fire which turned out not to exist. False alarms are categorised as follows:

Malicious False Alarms are calls made with the intention of getting the fire and rescue service to attend a non-existent fire-related event, including deliberate and suspected malicious intentions.

Good Intent False Alarms are calls made in good faith in the belief that the fire and rescue service really would attend a fire.

Primary fires include all reportable fires at non-derelict buildings, vehicles and outdoor structures or any fire involving casualties, rescues, or fires attended by five or more appliances.

Secondary fires are the majority of outdoor fires including grassland and refuse fires unless they involve casualties or rescues, property loss or five or more appliances attend. They include fires at single derelict buildings. They are reported in less detail than other fires and consequently less information concerning them is available.

Special Service Incidents - Non-fire incidents which require the attendance of an appliance or officer and include:

- (a) Local emergencies e.g. road traffic incidents, rescue of persons, 'making safe' etc;
- (b) Major disasters;
- (c) Domestic incidents e.g. water leaks, persons locked in or out etc;
- (d) Prior arrangements to attend incidents, which may include some provision of advice and inspections.

Co responders – these are firefighters who also respond to ambulance calls. The aim of a co-responder is to preserve life until the arrival of either an ambulance or a response vehicle from the NHS ambulance service.

CONTACT US

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999 in an emergency only
01296 744400 (Monday to Friday 8am to 4pm)

Fire safety in the workplace

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Buckinghamshire
FIRE & RESCUE SERVICE
we save lives



Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: Treasury Management Performance 2022/23 – Quarter 2

Lead Member: Councillor Matthew Walsh

Report sponsor: Mark Hemming, Director of Finance & Assets

Author and contact: Marcus Hussey mhussey@bucksfire.gov.uk

Action: Noting

Recommendations: That the Treasury Management Performance 2022/23 – Quarter 2 report be noted.

Executive summary:

This report is being presented to provide the treasury investment position as at the end of 2022/23 quarter 2. It is best practice to review on a regular basis how Treasury Management activity is performing.

The accrued interest earned for 2022/23 quarter 2 is £83k, which is £68k higher than the budget for the same period.

Financial implications:

The budget for 2022/23 relating to interest earned on balances invested is £30k. Performance against the budget is included within Appendix A.

Risk management:

Making investments in the Authority's own name means that the Authority bears the risk of any counterparty failure. This risk is managed in accordance with the strategy and with advice from external treasury management advisors.

The Director of Finance and Assets, will act in accordance with the Authority's policy statement; Treasury Management Practices and CIPFA's Standard of Professional Practice on Treasury Management.

The risk of counterparty failure is monitored on the directorate level risk register within Finance and Assets.

There are no direct staffing implications.

Legal implications:

The Authority is required by section 15(1) of the Local Government Act 2003 to have regard to the Department for Communities and Local Government Guidance on Local

Government Investments; and by regulation 24 of the Local Authorities (Finance and Accounting) (England) Regulations 2003 [SI 3146] to have regard to any prevailing CIPFA Treasury Management Code of Practice.

Privacy and security implications:

No direct impact.

Duty to collaborate:

No direct impact.

Health and safety implications:

No direct impact.

Environmental implications:

No direct impact.

Equality, diversity, and inclusion implications:

No direct impact.

Consultation and communication:

No direct impact.

Background papers:

Treasury Management Policy Statement, Treasury Management Strategy Statement and the Annual Investment Strategy

<https://bucksfire.gov.uk/documents/2022/06/treasury-management-strategy.pdf/>

Appendix	Title	Protective Marking
1	Treasury Management Performance 2022/23 – Quarter 2	

Appendix 1 – Treasury Management Performance 2022/23 – Quarter 2**Background**

Up until 31 March 2013, the Authority's cash balances were managed by Buckinghamshire Council (BC) under a Service Level Agreement (SLA). From 2013/14 the Authority began investing in its own name. Since the treasury management function has been managed in-house, the Authority has achieved investment returns of £1.311m between 2013/14 and 2021/22. This is in comparison to the returns of £0.534m the Authority would have earned through BC and the SLA for the same period.

This report highlights the performance to date of the in-house treasury management function for as at the end of financial year 2022/23 – Quarter 2.

Security of Investments

The primary investment priority as set out in the Treasury Management Policy Statement is the security of capital. The Authority applies the creditworthiness service provided by Link Treasury Services Limited (Link). This determines whether or not a counterparty is suitable to invest with and if so, the maximum duration an investment could be placed with them. In the Annual Investment Strategy (AIS), the Authority resolved that the balances invested with any single counterparty at any point in time would be 30% of the total investment portfolio to a maximum of £5m (with the exception of Lloyds Bank, who as our banking provider that have a limit of £7.5m, of which at least £2.5m must be instant access). During 2022/23 – Quarter 2, Link made no relevant changes to the counterparty listing. The amount invested with each counterparty on the approved lending list as at 30 September 2022 is detailed below:

Counterparty	Credit Ratings						Amount (£000)
	Fitch		Moody's		S&P		
	Long Term	Short Term	Long Term	Short Term	Long Term	Short Term	
Close Brothers Group Plc	A	F2	Aa	P-1	-	-	4,000
Goldman Sachs International	A	F1	A	P-1	A	A-1	2,000
Leeds BS	A	F1	A	P-2	-	-	2,000
Newcastle BS	-	-	-	-	-	-	2,000
Principality BS	BBB	F2	Baa	P-2	-	-	2,000
Standard Chartered Bank (SD)	A	F1	A	P-1	A	A-1	2,000
West Brom BS	-	-	A	P-1	-	-	2,000
CCLA Fund Managers Ltd (MMF)	-	-	-	-	AAA	A-1	2,012
Aberdeen Asset Management PLC (MMF)	AAA	F1	Aaa	P-1	AAA	A-1	1,006
Lloyds Bank plc (CA)	A	F1	A	P-1	A	A-1	873
Total							19,891

BS = Building Society, MMF = Money Market Fund, CA = Current Account, SD Sustainable Deposit. Rating as at 30 September 2022.

During this period, no counterparty limits were breached.

Credit Rating

Link monitor and supply the Authority with a weekly credit rating list for all counterparties listed in the Treasury Strategy 2022/23. In addition to this Link will also supply the Authority with any changes to the counterparties credit ratings as and when they occur. The credit ratings are not set by Link, these are obtained through rating agencies (Fitch, Moody's and Standard & Poor's (S&P)). The Authority will not place sole reliance on the credit ratings supplied by Link. The Authority will also use market data and market information, information on government support for banks and the credit ratings of that supporting government.

There are some counterparties that are not rated by the rating agencies. These are mainly Building Societies. The Authority will review the counterparties market data, market information (asset portfolio) before committing to an investment deal with the counterparty.

Below are the rating definitions for each rating agency:

Fitch:

Short Term	Long Term	Rating Definition
F1	AAA, AA, A	Highest Credit Quality
F2	A, BBB	Good Credit Quality
F3	BBB	Fair Credit Quality
B	BB, B	Speculative Credit Quality
C	CCC, CC, C	High Default Risk
RD	RD	Restricted Default
D	D	Default

Moody's:

Short Term	Long Term	Rating Definition
P-1	Aaa, Aa, A	Superior ability to repay debt obligation
P-2	A, Baa	Strong ability to repay debt obligation
P-3	Baa	Acceptable ability to repay debt obligation
NP	Ba, B, Caa, Ca, C	do not fall within any prime rating

Standard & Poor's:

Short Term	Long Term	Rating Definition
A1	AAA, AA, A	Extremely Strong
A2	A, BBB	Satisfactory
A3	BBB	Adequate
B	BB, B	Vulnerable and has significant speculative characteristics.
C	CCC, CC, C	Vulnerable to non-payment
D	RD	Restricted Default
D	D	Default

Liquidity

Investments

The second objective set out within the Treasury Management Policy Statement is the liquidity of investments (i.e., keeping the money readily available for expenditure when needed). Investments have been placed at a range of maturities, including having money on-call in order to maintain adequate liquidity. The current investment allocation by remaining duration can be seen on the chart below:

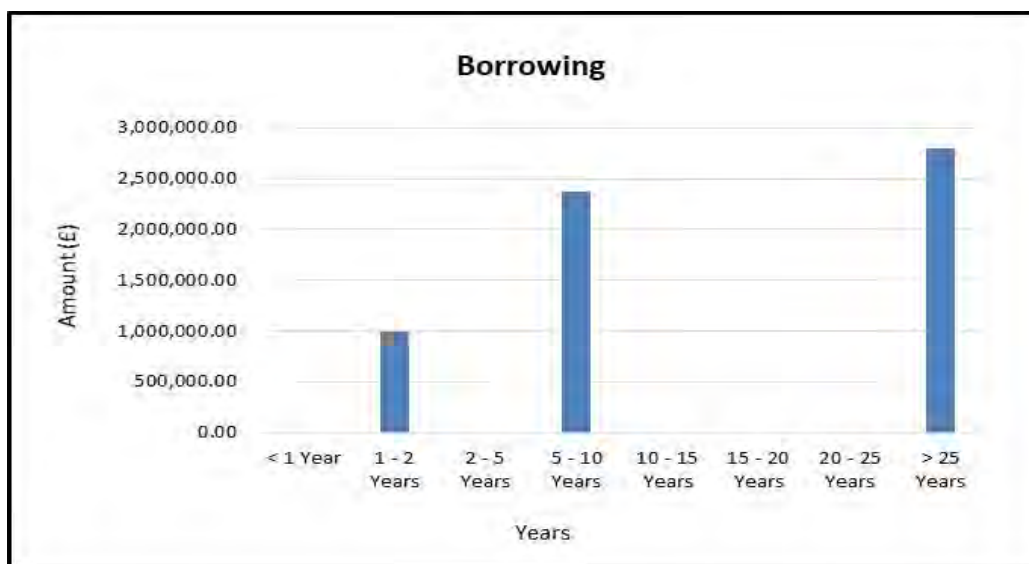


In order to cover expenditure such as salaries, pensions, creditor payments, and potential liabilities for which the Authority have made provisions within the Statement of Accounts, the balances are invested as short fixed-term deposits.

There are six investments currently falling in the <1 Month, 1-3 Months and 3-6 Months periods. At least one deal matures each month for the next twelve months and were all originally invested for different terms and will be re-invested for varying terms upon maturity to maintain liquidity and meet future commitments. The Authority continues to hold Money Market Funds to help improve the liquidity of the Authority’s balances. By investing collectively, the Authority benefits from liquidity contributed by others and from the knowledge they are all unlikely to need to call on that money at the same time.

Borrowing

As part of managing the liquidity of investments, it is important to have regard to the maturity structure of outstanding borrowing. This can be seen in the following chart:



The total borrowing outstanding as at 30 September 2022 is £6.177m. A repayment for a maturing loan was completed in May 2022, the value of this loan was £0.620m. The next maturing loan is March 2024. These repayments do not directly affect the revenue budget, as they simply reflect the use of cash accumulated by setting aside the appropriate minimum revenue provision (MRP) to settle the outstanding liability.

Investment Yield

Having determined proper levels of security and liquidity, it is reasonable to consider the level of yield that could be obtained that is consistent with those priorities.

Performance Against Budget

The interest receivables budget was reviewed as part of the Medium-Term Financial Plan (MTFP) 2022/23 process with the outcome for the budget to remain at £30k. This was approved by at the Fire Authority in February 2022. The reason for the same level of investment income is due to the volatility of the market and taking a prudent approach not to increase the investment budget at the time, with any additional investment income above the set budget being greatly received. The interest base rate in February 2022 when the budget was set was 0.50%.

Since the Bank of England’s two unprecedented emergency interest rate cuts in March 2020 to a base rate record low of 0.10%. The Monetary Policy Committee (MPC) has voted to increase the interest base rate at each of the last seven (MPC) meetings (December 2021 (0.25%), February 2022 (0.50%), March 2022 (0.75%), May 2022 (1.00%), June 2022 (1.25%), August 2022 (1.75%) and September (2.25%)). The Authority has seen the benefits in the interest base rate increase both in short term investment deals and Money Market Funds interest.

The accrued interest earned for financial year 2022/23 – Quarter 2 is £83k, against the planned budget of £15k for the same period. This is an over achievement of £68k and has resulted in the Authority being able to hit the budget target for financial year 2022/23 of

£30k by end of quarter 2. As of 30 September 2022, the Authority is projecting to achieve a minimum of £250k return on investments for the financial year 2022/23. The return is likely to be higher than £250k as we still have investments to mature this financial year which will be replaced with investments that are likely to achieve a better return than we previously achieved.

Link are forecasting for the current interest base rate of 2.25% (as 30 September 2022) to potentially more than double within the next 12 months, before gradually reducing in the following 12 months. With this projection in mind, as part of the MTFP 2023/24 process, the investment income budget will be significantly increased to reflect the increase in interest rates. This will consider the funds available to invest and ensuring the Authority is able to maintain sufficient liquidity to cover the day-to-day expenditure.

Performance Against the Benchmark

The relative performance of the investments is measured against two benchmark figures:

- SONIA (Sterling Overnight Index Averages) – SONIA is based on actual transactions and reflects the average of the interest rates that banks pay to borrow sterling overnight from other financial institutions and other institutional investors.
- Base Rate – This is the interest base rate set by the Bank of England’s MPC.
- The weighted average rate (%) (Actual) is compared to the two benchmark figures in the following chart for each month.



The Authority for April to September 2022 underperformed against the interest base rate and SONIA rates. This was due to several investment deals being placed prior to the MPC increasing the interest base rate in the last seven consecutive MPC meetings. With those investment deals maturing, the Authority has been able to re-invest these funds achieving a higher interest rate return.

It must also be noted that the level of funds available for investment have reduced because of the reduction in reserves in the last five years. The Authority will continue to re-invest any surplus funds with varying maturity dates to ensure the Authority makes a return on investments and has sufficient liquidity to cover the day-to-day expenditure.

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Buckinghamshire & Milton Keynes Fire Authority

Meeting and date: Overview and Audit Committee, 9 November 2022

Report title: Local Pensions Board Update

Lead Member: Councillor Matthew Walsh

Report sponsor: Area Commander Simon Tuffley – Head of Prevention, Response and Resilience

Author and contact: Area Commander Simon Tuffley stuffley@bucksfire.gov.uk

Action: Noting

Recommendations: That the report be noted.

Executive summary:

Buckinghamshire and Milton Keynes Fire Authority is required to establish a Local Pension Board to assist the Authority in its role as Scheme Manager. As Scheme Manager the Authority is responsible for the delivery of the Firefighters' Pension Scheme.

Pension Boards are responsible for assisting the Scheme Managers in securing compliance with the Scheme Regulations and other legislation relating to the governance and administration of the Scheme.

The Local Pension Board for Buckinghamshire & Milton Keynes Fire Authority (the Board) has formally adopted Terms of Reference, which cover its purpose, duties, membership, decision making and a number of other topics.

The Board schedules to meet a minimum of four times per year.

- The key actions taken by the Board, and any actions outstanding, can be seen in Appendix 1.
- A copy of the current risk register can be seen at appendix 2
- The risk trend report can be seen at appendix 3

Section 29 of The Board terms of reference (see background papers) requires that the board will report to the appropriate member committee as necessary, and as a minimum on an annual basis, along with more frequent reporting to the Strategic Management Board as required.

Financial implications:

None arising from this report.

Risk management:

The Board maintains a risk register, which is discussed and reviewed at each meeting. A copy of the most recent Risk Register and Trend Report can be seen in Appendix 2 and 3.

Legal implications:

The Public Service Pensions Act 2013 requires that Pension Boards are established for Public Service Pension Schemes. The role of each Board is to help ensure each Scheme complies with governance and administration requirements.

Privacy and security implications:

None arising directly from this report

Duty to collaborate:

None arising directly from this report

Health and safety implications:

None arising directly from this report

Environmental implications:

None arising directly from this report

Equality, diversity, and inclusion implications:

None arising directly from this report

Consultation and communication:

The Board consists of three employer representatives and three employee representatives. Two of the employee representative positions are currently vacant and are regularly advertised.

Regular communications are internally published for all employees, and the external website maintains a dedicated area for the Local Pensions Board.

Background papers:

https://bucksfire.gov.uk/documents/2020/03/item_12_local_pension_board_update_-_11_march_2020_appendices-min.pdf/

<https://bucksfire.gov.uk/documents/2022/06/terms-of-reference-for-the-local-pension-board-for-buckinghamshire-milton-keynes-fire-authority.pdf/>

Appendix	Title	Protective Marking
1	key actions taken by the Board, and any actions outstanding	Exempt from publication
2	A copy of the current risk register	Exempt from publication
3	The risk trend report	Exempt from publication

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Overview and Audit Committee Forward Plan 2022/23

ITEM 20

Item	Reporting Date	Recommended Action	Lead Officer
Internal Audit Reports (a) Final Audit Reports (b) Update on Progress of the Annual Audit Plan (c) Update on Progress of Audit Recommendations	March 2023	Noting	Internal Audit Manager and Director of Finance and Assets
HMICFRS Improvement Plan Update	March 2023	Noting	Head of Technology, Transformation and PMO
Corporate Risk Management	March 2023	Decision	Director of Legal and Governance
Statement of Assurance	March 2023	Decision	Director of Legal and Governance
Prevention Improvement Plan	March 2023	Noting	Head of Prevention, Response and Resilience
Operational Assurance Improvement Plan Update	March 2023	Noting	Head of Protection, Assurance and Development
Treasury Management Performance	March 2023	Noting	Deputy Director of Finance and Assets
Audit Results Report	March 2023	Noting	Deputy Director of Finance and Assets
Audited Statement of Accounts	March 2023	Noting	Deputy Director of Finance and Assets
Letter of Management Representation	March 2023	Noting	Deputy Director of Finance and Assets
Annual Audit Letter	March 2023	Noting	Deputy Director of Finance and Assets

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