Draft Code of Corporate Governance 2024/25

Report for the Chief Fire Officer

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1   Purpose of Report

This report gives the Committee an opportunity to make comment on the draft Code of Corporate Governance 2024/25 prior to it going forward to the full Fire Authority for consideration and formal adoption.

2   Recommendation

The Committee are asked to:

a)   make comment on the draft Code of Corporate Governance 2024/25, attached as an appendix to this report; and

b)   forward the draft Code, with amendments (if any), to the Fire Authority for consideration and formal adoption.

3   Background

The Fire Authority's Code of Corporate Governance is based on guidance issued by the Chartered Institute of Public Finance and Accountancy (CIPFA) and the Society of Local Authority Chief Executives and Senior Managers (SOLACE).

This guidance was refreshed in 2016 following publication of a new governance framework for local authorities, police and fire authorities - 'Delivering Good Governance in Local Government: Framework (CIPFA/SOLACE) 2016', published in April 2016.

Compliance with the Governance Code supports the Authority's review of the effectiveness of its system of internal controls as required by the Accounts and Audit Regulations 2015. This in turn informs the Annual Governance

Statement which accompanies the Annual Statement of Accounts, approved by this Committee as those charged with governance.

4   Annual Review

The 2024/25 Code has been reviewed in line with the latest CIPFA guidance. The Authority will refer to this Code of Corporate Governance when publishing its Annual Governance Statement for 2024/25.

A draft of the new Code is attached as an appendix to this report.

The terms of reference of the Standards, Audit and Performance Committee include a responsibility to review the Code of Corporate Governance. Accordingly, the Committee is asked to consider the draft 2024/25 Code, suggesting changes as appropriate. The draft will then be taken to the Fire Authority, for consideration and formal adoption, at its meeting on 25 June 2025.

5   Financial Implications

There are no direct financial implications arising from this report.

6   Legal Comment

Although the Fire Authority is not legally required to have in place a Code of Corporate Governance, it is considered best practice to do so.

7   Appendix

Shropshire and Wrekin Fire and Rescue Authority
Draft Code of Corporate Governance 2024/25.

8   Background Papers

CIPFA /SOLACE Guidance Note – Delivering Good Governance in Local Government – Framework (CIPFA/SOLACE, 2016)

Appendix to report on
Code of Corporate Governance 2024/25
Shropshire and Wrekin Fire and Rescue Authority
Standards, Audit and Performance Committee
10 April 2025

Shropshire Fire and Rescue Service
Draft Code of Corporate Governance 2024/25

Principle 1 - Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law
Local government organisations are accountable not only for how much they spend, but also for how they use the resources under their stewardship. This includes accountability for outputs, both positive and negative, and for the outcomes they have achieved. In addition, they have an overarching responsibility to serve the public interest in adhering to the requirements of legislation and government policies. It is essential that, as a whole, they can demonstrate the appropriateness of all their actions across all activities and have mechanisms in place to encourage and enforce adherence to ethical values and to respect the rule of law.

1.1 Behaving with integrity	Supporting Text
1.1.1 Ensuring members and officers behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the organisation	The Authority has a wide range of codes, policies and procedures governing the conduct of members and officers, including: Published Core Values, Core Code of Ethics and Workplace Charter Code of Corporate Governance Members' Code of Conduct Employee Code of Conduct Members' Protocol and Officers policy on Gifts and Hospitality Complaints procedures and log Discipline and Grievance policies Anti-Harassment and Bullying Policy Whistle-blowing policy Freedom of Information and Data Protection Alcohol and Drugs Policy. Confidential Reporting Line NFCC Leadership Framework The ongoing review of Fire Authority Governance Arrangements will support service and authority to continue to enable a culture of transparency

1.1.2	Ensuring members take the lead in establishing specific standard operating principles or values for the organisation and its staff and that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles)	The Authority is committed to the principles of good corporate governance and has adopted this Code of Corporate Governance, which is reviewed and used by Internal Audit to inform their overall risk assessment for scrutiny by the Standards, Audit and Performance (SAP) Committee. The standards of the Authority are made clear in its Core Values, which are fundamental to all it does. Each Member must complete a register of interests. The Authority has a Member / Officer Protocol in place which supports, and is clear about the management of, effective relationships which support good governance. The ongoing Governance Review includes a review of the Member / Officer Protocol to ensure that it remains relevant and fit for purpose.
1.1.3	Leading by example and using the above standard operating principles or values as a framework for decision making and other actions	Both the Member and Employee Codes of Conduct state clearly that they must not be influenced by prejudice, bias, or conflicts of interest in any matter relating to the Authority. The Service's EQIA processes ensures that all decisions undertaken are impact assessed to enable scrutiny and assurance around decision making. Each Member must complete a Register of Interests, which is held at Service headquarters and is open to public inspection. The Register, which is also accessible via the Service's website is updated as necessary, in accordance with the Members Code of Conduct.
1.1.4	Demonstrating, communicating and embedding the standard operating principles or values through appropriate policies and processes which are reviewed on a regular basis to ensure that they are operating effectively	The Code of Corporate Governance is reviewed annually. Core Values are reviewed annually through the Annual Plan. Officers adhere to Contract Standing Orders and Financial Regulations which are reviewed and updated annually. There is a clearly defined review process for Service policies and procedures that are part of the Brigade Order system. All Brigade Orders are required to be reviewed by the responsible author, on a regular basis, which ranges between 6 months and 3 years, dependent on the significance of the policy / procedure. This regular review cycle helps to ensure that the Service's policies and procedures remain current and effective. Reviews are also undertaken as and when needed, for example to reflect changes in legislation.

	There is a similarly robust review process for policies that are owned by the Fire Authority, such as the Member / Officer Protocol. These are reviewed by Officers on an annual basis, with proposed amendments reported to the Fire Authority for ratification. The review dates for such policies are set out in the Fire Authority's annual workplan.
1.2 Demonstrating strong commitment to ethical values	**Supporting Text**
1.2.1 Seeking to establish, monitor and maintain the organisation's ethical standards and performance	The Fire Authority's systems and processes comply with ethical standards set down in legislation and Government guidance or derived from best practice. Appropriate Members and/or officers regularly review procedures and codes to ensure their relevance and effectiveness. Ethical standards are included within our procurement policies and our environmental management system. SFRS will at all times endeavour to ensure that employees achieve and maintain a high standard of performance. The Performance Management Policy outlines the procedure followed when employees do not perform to the required standards or behaviours. This policy is aligned to the Core Values and our Core Code of Ethics which is the Workplace Charter. Individual Performance and Development Review (IPDR) is a formal performance assessment that takes place on annual basis, aligning personal objectives with the delivery of the Service strategy. The Service is committed to supporting the development and progression of all staff and ensuring a fair and consistent approach to performance and promotion. The IPDR process initially focusses on action planning, agreeing the behaviours required in meeting these objectives outlined in the Workplace Charter, together with development and career aspirations. The behaviours reflect those outlined in the National Fire Chiefs Council (NFCC) Leadership Framework. Monitoring of IPDRs is managed through the People Management meeting and data to ensure that under performance and allegations of misconduct are robustly managed and the learning applied.

| 1.2.2 | Underpinning personal behaviour with ethical values and ensuring they permeate all aspects of the organisation's culture and operation | The Workplace Charter was revised in 2023 in consultation with employees and Representative Bodies and is included at employees' induction, setting out expected standards of behaviour at the outset. The NFCC Leadership Behaviours are also incorporated into the Services' IPDR process, ensuring that consistently reminded of standards of behaviour and expectation.

The actions from the 2024 staff survey around behaviours and culture were taken forward into a wider piece of work around cultural improvement.

To ensure that Equality, Diversity and Inclusion is mainstreamed throughout the Service, it has a strategic Equality, Diversity and Inclusion Steering Group that meets 4 times a year to discuss and take forward all Equality, Diversity and Inclusion initiatives throughout its business and monitors and oversees the Equality Action Plan. The Service have an employee Voices group which represents a range of employees and who attend the EDI Steering Group.

The Authority has in place policies, procedures and plans to ensure compliance with relevant legislation and guidance, associated targets for improvement and systems to monitor effectiveness and progress.

Officers operate standardised recruitment policies and processes, including employee reference checks, Disclosure and Barring Service checks for designated posts and Right to Work checks.

Ethical standards are included within our procurement policies and our environmental management system. |
| 1.2.3 | Developing and maintaining robust policies and procedures which place emphasis on agreed ethical values | The Equality, Diversity and Inclusion (EDI) Steering Group (which has Union representation and EDI Member Champion) discuss issues and initiatives relating to ethics, values, and relevant agenda items.

The SAP Committee ensures that the core values of the Authority are at the heart of its decision making. |

		There are quarterly meetings between union representatives and senior management, and staff are consulted on policy changes and major service developments. The Executive Team also meet with the Representative Bodies (RBs) on a monthly basis to discuss more general issues of note. Consultation with staff sits at the core of the Community Risk Management Planning, thus ensuring that staff are fully engaged. Ethical standards are included within our procurement policies and our environmental management system.
1.2.4	Ensuring that external providers of services on behalf of the organisation are required to act with integrity and in compliance with ethical standards expected by the organisation	Ethical standards are included within our procurement policies and our environmental management system. The Service requires its suppliers to adopt its Code of Conduct for Suppliers, which is based on International Labour Organisation conventions. The Service requires its suppliers to adopt this, or an equivalent Code of Conduct, and commit to continuous improvement towards compliance with the labour and environmental standards specified both in their own companies and those of their suppliers. Monitoring of the Code will be included in the Contract Management Plans for major contracts.
1.3 Respecting the rule of law		**Supporting Text**
1.3.1	Ensuring members and staff demonstrate a strong commitment to the rule of the law as well as adhering to relevant laws and regulations	The Authority has two statutory officers; the Monitoring Officer whose duties include ensuring the legality and fairness of decision making, and a Treasurer who as the most senior Finance professional is responsible for the proper administration of the financial affairs of the Authority. In addition, the Service has a Deputy Monitoring Officer and Deputy S151 Officer. The Monitoring Officer or the Deputy Monitoring Officer attends all meetings of the full Authority and reviews reports to the Authority and its Committees prior to publication. Relevant legal obligations are communicated to staff through policy and relevant training e.g., in recruitment and driving. Internal and External Audit provide assurance that proper probity exists, and legal obligations are met.

		The Data Protection Officer role is contracted in for the provision of data protection legal duties including informing and advising, monitoring compliance, raising awareness and provision of training to staff and as a contact to the Information Commissioner's Office (ICO). The Senior Information Risk Owner role is undertaken by the Assistant Chief Fire Officer which provides senior level accountability and assurance that information asset risks are managed.
1.3.2	Creating the conditions to ensure that the statutory officers, other key post holders, and members, are able to fulfil their responsibilities in accordance with legislative and regulatory requirements	The general roles, rights and obligations of Members are contained in the Protocol on Member / Officer Relations and the Code of Conduct.

The more specific roles of Members, Members with special responsibilities and of Member Champions are set out in the role descriptions.

There is also a Role Description for the Fire Authority's Independent Person, who will be consulted on the decision to investigate complaints and before a decision on an investigated complaint is made. The Independent Person may also be consulted on other standards matters, including by the Member, who is subject to an allegation.

Financial Regulations Standing Orders set out specific financial and other duties / functions of the Fire Authority, its committees, the Chief Fire Officer, Monitoring Officer and Treasurer. Delegations to specific officers are documented in the Scheme of Delegation to Officers.

A full governance framework is in place to enable Members to undertake their roles as required in legislation. This is guided as above and through the Authority's constitution. The Service provides technical and administrative support in the operation of this framework and in support of the role of statutory officers.

Job descriptions are in place for all senior officers, which clearly state their respective roles and responsibilities including political restrictions placed upon them.

Pay Policy Statement is reviewed by the full Combined Fire Authority (CFA) and published annually as required by the Local Government Act 2011. |

		The Authority has service level agreements (SLAs), detailing the roles and responsibilities of its Clerk, Monitoring Officer and Solicitor, and a Protocol for the Role of Monitoring Officer. It also has a service level agreement, setting out the role of its Treasurer and Section 151 Officer. There is an ongoing review of the services provided through these SLAs during the final quarter of 2024/25. Details of allowances payable to Members of the Authority are laid down in the Scheme for the Payment of Members' Allowances.
1.3.3	Striving to optimise the use of the full powers available for the benefit of citizens, communities and other stakeholders	The Authority is committed to openness in all its dealings and to this end has adopted a procedure for public participation at its meetings and those of its committees, which the public may attend. The procedure is set out in its Standing Orders for the Regulation of Proceedings and Business. It also has in place a policy relating to filming, photographing, recording, and using social networks at its meetings. Its agendas and reports are available to the public and publicised on its website and intranet in advance of meetings. The Fire Authority also has very clear rules governing access to information and the grounds on which information should be excluded from the public domain. All meetings of the Fire Authority and its Committees are held in public. The public will only be excluded if information to be considered is classed as exempt under Schedule 12A of the Local Government Act and the public interest in maintaining an exemption outweighs the public interest in disclosing the information, or where a government minister has directed that information is to be classed as confidential. Rules concerning exempt information are clearly laid down in the Fire Authority's constitution with a presumption that items will remain open to the public unless they meet specific criteria. A Chair's Report is produced after scheduled Fire Authority meetings. The report sets out the notable decisions made at the meeting with a short explanatory text giving background / context to the issue and decisions made. Shropshire Council receive this report at their full Council meetings, ensuring that locally elected councillors are aware of developments and/or innovations within the Fire Service that may affect their

		local constituents and communities. The same process needs to be embedded with Telford & Wrekin Council to ensure parity across the constituent authorities.
1.3.4	Dealing with breaches of legal and regulatory provisions effectively	The Authority has appointed a Monitoring Officer and Deputy Monitoring Officer, whose duties include ensuring the legality and fairness of decision making. The Monitoring Officer is the Associate Director: Policy and Governance, and the Deputy, Service Delivery Manager: Legal & Democracy.

The Monitoring Officer, or Deputy, attends all meetings of the full Authority and reviews reports to the Authority and its committees prior to publication. They provide advice and guidance on new legal developments and have access to specialist legal officers. This ensures that all decisions made by the Fire Authority will have received effective legal advice ensuring against breaches.

The ACFO (Corporate Support) is the Senior Information Risk Owner (SIRO) for the Service and logs and monitors relevant breaches for action and learning. These are appropriately discussed at the Systems Governance Group. |
| 1.3.5 | Ensuring corruption and misuse of power are dealt with effectively | Officers and Members of the Authority should lead by example and ensure adherence to legal requirements, rules, procedures, and practices.

All individuals coming into contact with the Authority should act with integrity and without thought or actions involving fraud, bribery, and corruption.

The Authority encourages a culture of honesty and opposition to fraud, bribery, and corruption.

The Authority's governance framework is designed to ensure that there is openness, transparency and scrutiny in its decision making

The Authority has in place an Anti-Fraud, Bribery and Corruption Strategy and a Reporting of Illegality and Malpractice (Whistleblowing) Policy which set the expected behaviours of staff when conducting themselves and what they should do if they become aware of, or suspect that, fraud, bribery or corruption are occurring. Both of these policies are reviewed on an annual basis and are published on the Staff Portal. |

	There is a Code of Conduct in place for Authority Members which aligns to the Seven Principles of Public Life, also known as the Nolan Principles, which all Authority Members undertake to abide by. The Standards, Audit and Performance Committee's remit includes promoting and maintaining a high standard of conduct by Members, overseeing the Register of Members' Interests and overseeing the effectiveness of the Authority's procedures for investigating and responding to complaints about Members

Principle 2 - Ensuring openness and comprehensive stakeholder engagement

Local government is run for the public good, organisations therefore should ensure openness in their activities. Clear, trusted channels of communication and consultation should be used to engage effectively with all groups of stakeholders, such as individual citizens and service users, as well as institutional stakeholders.

2.1 Openness	Supporting Text
2.1.1 Ensuring an open culture through demonstrating, documenting and communicating the organisation's commitment to openness	The Core Values and Core Code of Ethics are communicated in the Authority's plans. The complaints procedure is used and monitored. The Service has an active social media presence engaging in dialogue around key issues such as diversity in recruitment. All Authority meeting papers are published on the website along with other data transparency requirements. The employee engagement survey enabled staff to voice their opinions and allowed the Service to identify where future work should be targeted. An action plan was created, and a number of workshops were held with staff to create the workplace charter. NFCC Core Code of Ethics principles have been incorporated into induction, Member Development and IPDR / talent management processes. Considerable public consultation is undertaken when considering changes and assessing risk.

		An employee Voices group has been created to ensure that all employees are able to share their views and contribute to making changes to the Service. Voices members are invited to attend the EDI steering group and assist with creating events to support employees. The Service have an open seat on the EDI Steering Group. There is a specific area on the intranet where all employees can find more out about the Voices group and its activities. Data is published by the Service under the Local Transparency Code on the website.
2.1.2	Making decisions that are open about actions, plans, resource use, forecasts, outputs and outcomes. The presumption is for openness. If that is not the case, a justification for the reasoning for keeping a decision confidential should be provided	The Authority is committed to openness in all of its dealings and to this end has adopted a procedure for public participation at its meetings and those of its committees, which the public may attend. The procedure is set out in its Standing Orders for the Regulation of Proceedings and Business. It also has in place a policy relating to filming, photographing, recording, and using social networks at its meetings. Agendas and reports are available to the public and publicised on its website and intranet in advance of meetings. The Fire Authority also has very clear rules governing access to information and the grounds on which information should be excluded from the public domain. All meetings of the Fire Authority and its Committees are held in public. The public will only be excluded if information to be considered is classed as exempt under Schedule 12A of the Local Government Act. Rules concerning exempt information are clearly laid down in the Fire Authority's constitution with a presumption that items will remain open to the public unless they meet specific criteria. Consultation of partners, the community and staff informs decision making of the Fire Authority and the Service. This consultation process involves a survey available online and in paper format, as well as through focus groups made up of the community to reflect diversity of experiences and opinions. The staff stakeholder group is also engaged during the consultation process which has resulted in attendance of CRMP discussions by senior leaders and fire authority members.

| 2.1.3 | Providing clear reasoning and evidence for decisions in both public records and explanations to stakeholders and being explicit about the criteria, rationale and considerations used. In due course, ensuring that the impact and consequences of those decisions are clear | There is a standard format for all committee reports, which includes sections for legal comment and financial implications, prompting the writer to seek advice in these areas. The impact of decisions on the delivery of the Authority's Community Risk Management Plan (which is publicly consulted on) and Strategy are set out clearly in all reports

Prior to publication Authority and Committee reports are assessed by a solicitor representing the Clerk and Monitoring Officer and legal comment added, where appropriate.

The Treasurer/Head of Finance reviews those with financial implications.

The S151 and Monitoring Officer receive the papers and are invited to attend the monthly meetings of the Service Management Team, enabling them also to have input to the decision-making process at this level. |
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| 2.1.4 | Using formal and informal consultation and engagement to determine the most appropriate and effective interventions/ courses of action | **Community Risk Management Planning**
Since 2004, all Fire and Rescue Authorities have been required to produce Integrated Risk Management Plans, now referred to as Community Risk Management Plans (CRMP). In its CRMP each Fire Authority sets out how it will 'identify and assess all foreseeable fire and rescue related risks that could affect its community, including those of a cross-border, multi-authority and/or national nature. The plan has regard to the Community Risk Registers produced by Local Resilience Forums and other local risk 'analysis', as defined in the terms of the Home Office Fire and Rescue National Framework document.

The Fire Authority's CRMP combines with its financial and transformation plans to set the Service Plan 2025-2028 for Shropshire Fire and Rescue Service.

The current plan is in its first year and work is ongoing to deliver the next CRMP for 2025-28.

Detailed data analysis, alongside public and workforce engagement has shaped the CRMP plan, following the latest National Fire Chiefs Council (NFCC) guidance.

Emerging areas for inclusion, consist of: |

		• Adoption of NFCC Domestic Dwelling Fire and Road Traffic Collision (RTC) Risk Methodology • Managing the Emerging Threat of Lithium Batteries. • Increasing SFRS Confined Space and Rescue from Height Capability. • Extending SFRS Water/Flood Rescue, Wildfire Capability. • Water Availability for Firefighting During Prolonged Drought • Increasing Medical Response capability. • Revised attendance standard. The programme will be supported and managed through the Service Plan and included in annual departmental plans.
2.2 Engaging comprehensively with institutional stakeholders		**Supporting Text**
2.2.1	Effectively engaging with institutional stakeholders to ensure that the purpose, objectives and intended outcomes for each stakeholder relationship are clear so that outcomes are achieved successfully and sustainably	Each partnership entered into is supported by a partnership agreement, which sets out clearly and succinctly what the partnership aims to achieve and what each of the partners will do. The agreement also states to which of the Fire Authority's strategic aims the partnership contributes. Officers have developed a method of assessing partnerships to ensure that officers, Members, and partners are clear in the aims and purpose of any partnership working and know their respective responsibilities and commitments. Partnership agreements formally set out the aims of the partnership, expectations, roles, and reporting requirements. The partnership process has been developed, this includes a new register and a brigade order that include internal audit recommendations.
2.2.2	Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved more effectively	Each formal partnership is supported by a partnership agreement, which sets out clearly and succinctly what the partnership aims to achieve and what each of the partners will do and to which of the Fire Authority's strategic aims the partnership contributes. The Authority also engages in collaborations in some areas which tend to have less formal arrangements to enable opportunities to be seized. The strategic alliance with Hereford and Worcester Fire and Rescue Service (H&WFRS) is progressing in key

		areas like the Command and Control project. Officers have developed a method of assessing partnerships to ensure that officers, Members, and partners are clear in the aims and purpose of any partnership working and know their respective responsibilities and commitments. Partnership agreements formally set out the aims of the partnership, expectations, roles, and reporting requirements.
2.2.3	Ensuring that partnerships are based on: - Trust - a shared commitment to change - a culture that promotes and accepts challenge among partners and that the added value of partnership working is explicit	Each partnership is supported by a partnership agreement, which sets out clearly and succinctly what the partnership aims to achieve and what each of the partners will do. The agreement also states to which of the Fire Authority's strategic aims the partnership contributes. Officers have developed a method of assessing partnerships to ensure that officers, Members, and partners are clear in the aims and purpose of any partnership working and know their respective responsibilities and commitments. Partnership agreements formally set out the aims of the partnership, expectations, roles, and reporting requirements. The partnership brigade order and register are helping to facilitate an ongoing assessment to ensure all partnerships are GDPR compliant. The Service has produced a standard checklist based on the ICO data sharing code of practice for personal data. There is also a quick stop guide to partnerships on the intranet that sets out guidance regarding GDPR.
2.3 Engaging with individual citizens and service users effectively		**Supporting Text**
2.3.1	Establishing a clear policy on the type of issues that the organisation will meaningfully consult with or involve communities, individual citizens, service users and other stakeholders to ensure that service (or other) provision is contributing towards the achievement of intended outcomes	The Authority is required to consult with 'persons subject to non-domestic rates' as part of its budget setting strategy – Local Government Finance Act 1992. The Authority consults with the public about its budget on the website and through social media. The Authority consults with all relevant stakeholders on all relevant matters pertaining to its proposals for change within its Community Risk Management Plan.

		The Service uses its Equality Impact Assessment (EQIA) process to inform on its consultation with relevant protected characteristics who may be impacted by changes to current policies. Stakeholders are covered in the CRMP where their challenges meet our risk. Stakeholders have individual risk reviews that sit behind the CRMP. These risk reviews are available on the CRMP tile of the Portal.
2.3.2	Ensuring that communication methods are effective and that members and officers are clear about their roles with regard to community engagement	The Service uses a range of methods and channels to communicate and engage with external and internal audiences in line with its Corporate Communications Strategy and Communications Action Plan. An inter-active, online survey platform is used to consult and engage staff. These survey and consultation projects are actively supported and promoted by means of the Service's intranet, internal newsletter, and email. Issue-specific staff surveys of different kinds are conducted each year such as the Staff survey. New and more modern forms of internal communications have been developed including a Service Update vlog to make information clear and accessible to all staff. This is supported by the traditional methods of communication as mentioned above. Strategic plans are put into place for significant Service wide issues or projects, such as the HMICFRS inspection or the independent Culture Review. A range of online and "conventional" communication methods are used to inform and engage the public and other external audiences. These methods include: • Press releases • Media interviews • Social Media activity across all platforms • External Surveys accessible via social media (e.g. Facebook) • Service website • Live Events: Open Days, Recruitment Events, Campaign Events • Email subscription updates The Service has held a wholetime recruitment campaign and positive action taster sessions to inform the public about the role of on call and wholetime firefighter posts.

		A new external campaign strategy has been developed and implemented with a robust evaluation process which focuses on engagement rather than just incident figures. The use of social media and other channels is reviewed as part of these evaluations. The strategy was trialed over the last twelve months and has now been adopted for the next year. Work is also underway to develop a new website which will be more accessible to the public with a view to improving two way engagement. The internal newsletter and external press releases are now sent out via Granicus software which means they are centralised and have analytics which are monitored and used for evaluation biannually. Training for Operational officers, regarding warn and informing and public engagement has been highlighted as an issue over the last six months and has been added to the Communications Strategy Action Plan.
2.3.3	Encouraging, collecting, and evaluating the views and experiences of communities, citizens, service users and organisations of different backgrounds including reference to future needs	As part of developing the CRMP a full consultation programme is undertaken prior to publication. The Service has engaged with a multitude of partners and is currently working with following groups. This is by no means an exhaustive list. Shropshire Connectors Shropshire Safeguarding Partnership Board Shropshire Neglect and exploitation sub group Shropshire Domestic Abuse Strategic Priority Group West Midlands Fire NHS and Baywater Partnership meeting Telford Connectors Telford and Wrekin Interfaith Council Telford White Ribbon Group Team Shrewsbury Telford Crime Reduction Neighbourhood Partnership East and West Midlands Regional Safeguarding Group East and West Midlands Community Safety Managers Group Domestic Homicide Review Panel

		#Morse (multi agency partnership) Suicide Prevention Shropshire Early Help Partnership Board Shropshire Strengthening Families Telford and Wrekin Drug and Alcohol Group Telford and Wrekin Healthy Lives Steering Group Shropshire Council Telford and Wrekin Council West Mercia Police Asian Fire Service Association (AFSA) Shropshire Disability Network Shropshire, Telford and Wrekin Dementia Action Alliance Safe and Ageing No Discrimination (SAND) Shropshire Rainbow Film Festival Shrewsbury LGBT History Telford Equality, Diversity and Inclusion Partnership Telford Employer Group Mental Health at Work Commitment White Ribbon Accreditation Women in the Fire Service
2.3.4	Implementing effective feedback mechanisms in order to demonstrate how views have been taken into account	See comments for 2.3.2 and 2.3.3
2.3.5	Balancing feedback from more active stakeholder groups with other stakeholder groups to ensure inclusivity	The Service consults with a large range of stakeholders from constituent authorities to small local groups and individual members of the public. In addition to that we use the local Rainbow Film Festival groups, Shropshire Disability Network, Safe and Ageing No Discrimination (SAND) and the national Asian Fire Service Association (AFSA), Telford and Wrekin Interfaith Council and Women in the Fire Service (WFS) where necessary and other local groups where identified.

| 2.3.6 | Taking account of the impact of decisions on future generations of tax payers and service users | The long-term financial consequences of capital projects are considered when making strategic financial decisions, as detailed in the Authority's Capital Strategy. Where possible, authority reserves and balances have been used to fund capital projects to avoid debt charges for up to 50 years. |

Principle 3 - Defining outcomes in terms of sustainable economic, social, and environmental benefits

The long-term nature and impact of many of local government's responsibilities mean that it should define and plan outcomes and that these should be sustainable. Decisions should further the organisation's purpose, contribute to intended benefits and outcomes, and remain within the limits of authority and resources. Input from all groups of stakeholders, including citizens, service users, and institutional stakeholders, is vital to the success of this process and in balancing competing demands when determining priorities for the finite resources available.

3.1 Defining outcomes		Supporting Text
3.1.1	Having a clear vision, which is an agreed formal statement of the organisation's purpose and intended outcomes containing appropriate performance indicators, which provide the basis for the organisation's overall strategy, planning and other decisions	The fundamental purpose of the Fire Authority is to provide and maintain a fire and rescue service capable of fulfilling the statutory requirements of the Fire and Rescue Services Act 2004.
		Our Vision is most readily identifiable through our logo and strapline "Making Shropshire Safer" which is displayed on all letter headings, compliments slips, corporate documents, vehicles, and buildings.
		The Service Plan defines our purpose, aims, measures and targets, while the Annual Plan sets our immediate priorities and what actions we are going to take to deliver the Service Plan in a timely manner.
3.1.2	Specifying the intended impact on, or changes for, stakeholders including citizens and service users. It could be immediately or over the course of a year or longer	The Service uses Corporate Performance Indicators to set out the expected outcomes. These are in the form of ambitious reductions in the numbers of fire related incidents, the response standard and injuries to both the public and our staff. The Service uses a range of Corporate Performance Indicators to monitor and improve performance. These are set out against key areas covering Prevention, Protection, Response and People.
		The overall aim of this approach is to ensure a reduction in the number of fire related incidents and injuries to both the public and our people, through analysing and interrogating data to make intelligence led decisions.

3.1.3	Delivering defined outcomes on a sustainable basis within the resources that will be available	The development of the CRMP is complemented by a Service Plan that sets out how Officers intend to deliver the CRMP over its 3-year lifecycle. CPIs support the understanding of how Service Plan goals are being delivered.
3.1.4	Identifying and managing risks to the achievement of outcomes	As part of the strategic planning process a review of the risk register is undertaken along with the ear marked reserves to cover against any foreseeable risks. These Corporate Risks are monitored on an ongoing basis to support their management and where needed the most effective mitigation, through effective and early planning to ensure outcomes can be achieved.
3.1.5	Managing service users' expectations effectively with regard to determining priorities and making the best use of the resources available	The Authority's strategic planning process demonstrates the effects of today's decisions on medium to long term budgets. Prudent funding assumptions are used to ensure that an honest picture of the financial position can be shown to members and the public. This means that the Authority's consultation processes are meaningful and useful.
3.2 Sustainable economic, social and environmental benefits		**Supporting Text**
3.2.1	Considering and balancing the combined economic, social and environmental impact of policies and plans when taking decisions about service provision	The Service has Sustainability and Environmental Policies. Initial impact assessments and financial comments are included in all authority reports and decision documents. These are supported by a full environmental management system, which includes sustainability assessments.
3.2.2	Taking a longer-term view with regard to decision making, taking account of risk and acting transparently where there are potential conflicts between the organisation's intended outcomes and short-term factors such as the political cycle or financial constraints	Members will consider the medium and long term effects of any strategic financial decision that is made in the short term. Strategic planning models are available to demonstrate how planning decisions will affect a number of years. The combination of the CRMP and the Medium Term Financial Plan (MTFP) encourage the service to take a longer term view and to factor in the potential effects of both a change in risk profile and a change in financial resources. Committee reports will demonstrate that the Fire Authority has consistently taken an approach that is best for the Service.

		The more formal planning process is also supported by the Strategic Advisory Group (StAG) which allows Members and officers to explore the more uncertain aspects of the future and consider very early on what mitigation or development may need to be considered.
3.2.3	Determining the wider public interest associated with balancing conflicting interests between achieving the various economic, social and environmental benefits, through consultation where possible, in order to ensure appropriate trade-offs	CRMP is subject to a wide-ranging consultation process the outcome of which informs the activities of the Service Plan. The economic, environment and social issues would be discussed at meetings that are accessible to the public.
3.2.4	Ensuring fair access to services	Equality, Diversity and Inclusion support with harder to reach and vulnerable communities. Completing Equality Impact Assessments to identify any potential areas of negative impact to specific groups.

Principle 4 - Determining the interventions necessary to optimise the achievement of the intended outcomes

Local government achieves its intended outcomes by providing a mixture of legal, regulatory, and practical interventions (courses of action). Determining the right mix of these courses of action is a critically important strategic choice that local government has to make to ensure intended outcomes are achieved. They need robust decision- making mechanisms to ensure that their defined outcomes can be achieved in a way that provides the best trade-off between the various types of resource inputs while still enabling effective and efficient operations. Decisions made need to be reviewed frequently to ensure that achievement of outcomes is optimised.

4.1 Determining interventions		Supporting Text
4.1.1	Ensuring decision makers receive objective and rigorous analysis of a variety of options indicating how intended outcomes would be achieved and associated risks. Therefore, ensuring best value is achieved however services are provided	The Service Management Team (SMT) consider reports and supporting information in their decision making provided by the specialists within the Service. SMT consists of the most senior members of all teams with a mix of operational and non-operational remits to properly consider issues in the round. The StAG considers and debates issues and options to challenge Officers to provide all appropriate and necessary information for decision making before reports are prepared for the full Authority.

		Currently there is no separate scrutiny function and so all Members are sighted on all matters through their attendance at meetings, and by receipt of meeting papers and minutes.
4.1.2	Considering feedback from citizens and service users when making decisions about service improvements or where services are no longer required in order to prioritise competing demands within limited resources available including people, skills, land, and assets and bearing in mind future impacts	Through the CRMP consultation process proposals relating to significant changes to the current resourcing of the Service are consulted upon with all relevant stakeholders. This specifically includes those stakeholders potentially impacted by that change e.g. closure of fire stations, removal/relocation of fire appliances and changes to response standards. Improvements in targeting particular vulnerable groups are discussed and delivered through collaborative working with other organisations and strategic planning groups around the county, thereby ensuring that customer needs are placed at the centre of the decision making e.g. change from 'Home Fire Safety Checks' to 'Safe and Well' visits. Feedback from these consultation processes is captured and considered in the strategic planning for the future delivery of services.
4.2 Planning interventions		**Supporting Text**
4.2.1	Establishing and implementing robust planning and control cycles that cover strategic and operational plans, priorities and targets	The Authority has a well-defined strategic planning process which is agreed by the CFA at its annual meeting. The report sets out timescales for developing the annual plan, department plans and CPIs. The report gives an overview of the planning documents that are produced and what information will be reported to each committee throughout the year.
4.2.2	Engaging with internal and external stakeholders in determining how services and other courses of action should be planned and delivered	CRMP proposals and objectives were scrutinised by the public through a consultation period which was independently facilitated by ORS. As a result of the consultation and the final report to SMT, amendments were made to the CRMP to address feedback. The Service also proactively engages with a broader group of stakeholders to identify where synergies exist between its objectives and others with a duty for community inclusivity, health, and welfare.

4.2.3	Considering and monitoring risks facing each partner when working collaboratively, including shared risks	Each partnership entered into is supported by a partnership agreement, which sets out clearly and succinctly what the partnership aims to achieve and what each of the partners will do. The agreement also states to which of the Fire Authority's strategic aims the partnership contributes. Officers have developed a method of assessing partnerships to ensure that officers, Members, and partners are clear in the aims and purpose of any partnership working and know their respective responsibilities and commitments. Partnership agreements formally set out the aims of the partnership, expectations, roles, and reporting requirements. Partnership register contains details on financial, legal reputational and resource based risks.
4.2.4	Ensuring arrangements are flexible and agile so that the mechanisms for delivering goods and services can be adapted to changing circumstances	The Service uses NHS Exeter Data to support vulnerability targeting. The data provided is 65 years plus, however the Service will use a pragmatic approach in order to service the safe and well visits in the county, this data set is in excess of 100,000 residents. Agreement has been reached between Telford & Wrekin Council to offer a Safe and Well visit to those receiving an annual Care Package and have given their consent to share their details with SFRS. Shropshire Council also provide data from Adult Social Care on the same principle as Telford which is clients that have given their consent to share their data. This will assist with matching resources to risk rather than to just age profiles. Lone Working has been successfully expanded across the On-Call areas. The Safe and Well process has linked the Prevention Team to both Local Authorities. This is an automated secure electronic pathway that is underpinned by data sharing agreements. In addition to Safe and Well, referral mechanisms are in place for public health, police, and housing partners. This is becoming increasingly useful in hoarding cases.

		Servicing of response (operational) incidents is planned and managed daily in such a way to ensure that changing circumstances aligned to community risk can be resourced effectively.

Where additional support is needed reinforcement agreements for operational incidents are in place with all bordering Fire and Rescue Services through a legal framework as part of the Fire and Rescue Services Act 2004.

Outside of the Section 13, 16 Agreements the Service also has access to and provides resources to other FRS nationally through National Resilience and the NCAF Framework. |
| 4.2.5 | Establishing appropriate key performance indicators (KPIs) as part of the planning process in order to identify how the performance of services and projects is to be measured | Corporate Performance Indicators (CPIs) are developed as part of the annual strategic planning process. They are agreed by S&R in March each year and progress is monitored by SAP quarterly. |
| 4.2.6 | Ensuring capacity exists to generate the information required to review service quality regularly | There is an operational monitoring and debriefing process which includes improvements and lessons learnt. This looks at identifying the quality of service delivered at the operational level, using expected minimum standards as the indicator, against which gaps (and best practice) are identified and, where necessary disseminated wider.

A quality performance measures fires confined to room of origin. This judges the speed of response and how successful the Service's education strategy is in terms of the 'get out stay out' message, as well as the effectiveness of fire safety campaigns regarding the importance of locations of fire alarms. |
| 4.2.7 | Preparing budgets in accordance with objectives, strategies and the medium term financial plan | The budget setting process is one element of the strategic planning process and ensures that the Service's plans are quantified. The Authority takes a strategic view of the Service's financial requirements and these requirements are managed within the resources available over the planning period. |
| 4.2.8 | Informing medium and long term resource planning by drawing up realistic estimates of revenue and capital expenditure aimed at developing a sustainable funding strategy | Strategic financial planning for the Authority includes a planning tool which models varying revenue and capital scenarios. This allows members and officers to flex the amounts and timings of its service decision within the funding streams available. |

4.3	Optimising achievement of intended outcomes	Supporting Text
4.3.1	Ensuring the medium term financial strategy integrates and balances service priorities, affordability and other resource constraints	The medium term strategy is designed to quantify the plans within the Service, and will incorporate the Service's strategic objectives, workforce planning, CRMP, asset management and fleet planning, and service improvement. In some of these areas, such as CRMP, cuts have been necessary in previous planning periods to remain within the funding available. In others, such as Assets and Fleet and SPB, the Authority's reserves strategy has ensured that funds are available to pay for replacements and improvements without the need for additional costs within the revenue budget.
4.3.2	Ensuring the budgeting process is all-inclusive, taking into account the full cost of operations over the medium and longer term	The budget setting process includes an annual review of the base budget and any committed costs to ensure that current operations are accounted for correctly. It also considers the full revenue cost of any new capital schemes, including borrowing costs, any ongoing running costs, and where applicable, replacement costs, into the longer term. Officers are also instructed to consider the longer term effects of any decision making in the short term.
4.3.3	Ensuring the medium term financial strategy sets the context for ongoing decisions on significant delivery issues or responses to changes in the external environment that may arise during the budgetary period in order for outcomes to be achieved while optimising resource usage	The use of short to medium term planning ensures that officers and members can consider the impact of any decisions or events both now and over the foreseeable planning period. The longer term planning estimates cannot be used with any certainty in the current climate and should not be used to base any future decisions on. However, as an estimate, it can give an indication of what may need to be considered in the long term and may be used to formulate options.
4.3.4	Ensuring the achievement of 'social value' through service planning and commissioning	SFRS have been able to work with other agencies to ensure our combined staffing is used to best effect across multiple service agendas. This has provided access to all the below groups: Shropshire Safeguarding Partnership Board Shropshire Neglect and exploitation sub group Shropshire Domestic Abuse Strategic Priority Group West Midlands Fire NHS and Baywater Partnership meeting Telford Employer Group Telford Crime Reduction Neighbourhood Partnership

	Telford White Ribbon Group Team Shrewsbury East and West Midlands Regional Safeguarding Group East and West Midlands Community Safety Managers Group Domestic Homicide Review Panel #Morse (multi agency partnership) Early Help Partnership Board Shropshire Strengthening Families Telford and Wrekin Drug and Alcohol Group Telford and Wrekin Healthy Lives Steering Group Telford and Wrekin Council now commission the Service to use its Fire Control facility for its Out of Hours calls service.

Principle 5 - Developing the entity's capacity, including the capability of its leadership and the individuals within it	
Local government needs appropriate structures and leadership, as well as people with the right skills, appropriate qualifications, and mindset, to operate efficiently and effectively and achieve intended outcomes within the specified periods. A local government organisation must ensure that it has both the capacity to fulfil its own mandate and to make certain that there are policies in place to guarantee that its management has the operational capacity for the organisation as a whole. Because both individuals and the environment in which an organisation operates will change over time, there will be a continuous need to develop its capacity as well as the skills and experience of individual staff members. Leadership in local government is strengthened by the participation of people with many different types of backgrounds, reflecting the structure and diversity of communities. As outlined in the People Strategy our intention is that leaders will have the ability to lead, inspire, coach and develop others in the organisation. They will be visible, demonstrate strong leadership skills, accountability, honesty, openness and transparency in their decision making. Leaders will be effective in performance management of their employees.	

5.1 Developing the entity's capacity	Supporting Text
5.1.1 Reviewing operations, performance and use of assets on a regular basis to ensure their continuing effectiveness	The Service has clearly defined its aims and the activities it will carry out to achieve those through its Strategic planning process. The effectiveness of activities is reviewed through debriefing and performance review meetings. The asset management strategy and supporting plans have been developed to ensure the provision, availability, and reliability of assets to support the identified activities. Asset provision is reviewed when potential improvements or efficiencies are identified through the debriefing or review processes.

		The Service reviews its performance through debriefing, operational monitoring, and corporate performance indicators against its aims.
		It develops asset management plans to ensure it provides assets to meet identified needs.
5.1.2	Improving resource use through appropriate application of techniques such as benchmarking and other options in order to determine how resources are allocated so that defined outcomes are achieved effectively and efficiently	The Service continues to use comparative data where it is available within the sector. This includes information on Health and Safety and whole sector financial information through the NFCC. The sector has developed a benchmarking tool that will provide comparisons nationally as well as groupings of similar services. This will create the foundation for further analysis to identify efficiencies and productivity improvements.
5.1.3	Recognising the benefits of partnerships and collaborative working where added value can be achieved	Reinforcement agreements for operational incidents are in place with all bordering Fire and Rescue Services through a legal framework as part of the Fire and Rescue Services Act 2004. Outside of the Section 13, 16 Agreements the Service also has access to and provides resources to other FRS nationally through the NCAF Arrangements. The Service has entered into a range of collaborations and partnerships incorporating Local Authority, NHS and other Emergency Services as well as volunteer organisations, Housing Associations & the Police and Crime Commissioner. Many examples of operational collaboration between local partners, particularly with regards to protecting vulnerable people, are evident through partnerships such as Multi Agency Risk Assessment Conference (MARAC) and the Health and Wellbeing Boards. Initiatives such as Serious and Organised Crime Joint Action Group (SOCJAG) (aimed at "County Lines" drug gangs) and Multi Agency Targeted Enforcement Strategy (MATES) (Operational specific aims for Fire safety, police, trading standards and immigration) have been developed by West Mercia Police and are supported by the Service.

		Future workstreams will target best practice in developing evaluation and measurement of collaboration and partnerships.
5.1.4	Developing and maintaining an effective workforce plan to enhance the strategic allocation of resources	A People Strategy is in place to ensure that activity and resources are focused on identified priorities. The People Strategy for 2021- 2025 is about to close and a new People Strategy for 2025 – 2028 is ready to be launched, aligned to the delivery of the CRMP and Service Plan. Workforce planning is an approach for managing the workforce's changing needs in conjunction with the People Strategy. Workforce Planning aims to ensure that the future human resource requirements of the Service are met at the right time and at the right cost. Regular establishment meetings including retirement planning and forecasting and succession planning. This feeds into our Bi-monthly People Management meetings where discussion takes place regarding Establishment / Strength / Vacancies / Post Changes / Recruitment / Requests for Growth / Departmental Restructures / Development. A three-year core module training programme is in place to ensure workforce competence A HR Dashboard has been developed to give real-time access to information and trends to improve the ability to forecast and plan.
5.2 Developing the capability of the entity's leadership and other individuals		**Supporting Text**
5.2.1	Developing protocols to ensure that elected and appointed leaders negotiate with each other regarding their respective roles early on in the relationship and that a shared understanding of roles and objectives is maintained	The Authority's Protocol on Member / Officer Relations sets the tone for Member / officer relations generally. The Chair, Vice Chair and the Leaders of the Opposition Groups attend a Chair's Briefing with the senior officers once a month. There are agreed role descriptions for each chair and vice chair position. The Chief Fire Officer meets with the Chair on a regular basis as well as a holding a Chairs brief on a monthly basis.

5.2.2	Publishing a statement that specifies the types of decisions that are delegated and those reserved for the collective decision making of the governing body	Financial Regulations Standing Orders 5.1 set out the specific matters reserved for the collective decision of the Authority. Delegations to specific officers are documented in the Scheme of Delegation to Officers and the Financial Regulations Standing Order. Each of the Authority's Committees has terms of reference which clearly state their powers and any authority delegated to them.
5.2.3	Ensuring the leader and the chief executive have clearly defined and distinctive leadership roles within a structure whereby the chief executive leads in implementing strategy and managing the delivery of services and other outputs set by members and each provides a check and a balance for each other's authority	The Chief Fire Officer's job description and the Scheme of Delegation to Officers state that the CFO is responsible and directly accountable to the Authority for all aspects of operational management. The role of the Chair is specified in the Member Handbook. The Protocol on Member/Officer relations also supports the understanding of the delineation of roles.
5.2.4	Developing the capabilities of members and senior management to achieve effective leadership and to enable the organisation to respond successfully to changing legal and policy demands as well as economic, political and environmental changes and risks by: • ensuring members and staff have access to appropriate induction tailored to their role and that ongoing training and development matching individual and organisational requirements is available and encouraged • ensuring members and officers have	As members receive comprehensive training and development from their constituent authorities, the Fire Authority provides an induction for new members which focusses specifically on the Fire Service, in order to avoid duplication of resources. In addition, members regularly receive presentations and development sessions on various topics to ensure that their knowledge is kept up to date. The ongoing review of Fire Authority Governance Arrangements includes an evaluation of Member training and induction to ensure that it continues to be relevant and appropriate. Specialist training is provided to members of Committees, to improve knowledge on technical issues and update members on new developments. There is a tailored induction and a programme of organised training for officers. Further learning will be identified through skills assessments.

the appropriate skills, knowledge, resources and support to fulfil their roles and responsibilities and ensuring that they are able to update their knowledge on a continuing basis • ensuring personal, organisational, and system-wide development through shared learning, including lessons learnt from governance weaknesses both internal and external	Applications from Area Managers and above to attend the Executive Leadership Programme through Warwickshire University are encouraged ahead of each new cohort, to provide strategic leadership development to senior managers. Group Managers undertake the Level 7 Diploma in Senior Leadership. Middle Managers undertake an accredited ILM Level 5 in Leadership and Management, delivered on site. Supervisory managers undertake the ILM Level 3 Leadership and Management following a decision to implement this in 2018. The Service is currently trialling the NFCC's Supervisory and Middle Leadership Development Programmes as opposed to the ILM Levels 3 and 5. This has been in direct response to feedback received from delegates on these programmes. A paper will be presented to SMT in May / June 2025 to look at options going forward. Managers, and the training and development teams attend dyslexia awareness training. Managers have EQIA training. There is an appraisal system in place for officers, part of which is to consider training and development needs. The Development Officer and Training and Development Co-ordinator (Learning and Development) organise and deliver a wide range of professional and personal development courses including management development. There is also regular 1-2-1 supervision for staff by their line managers. Members of staff in specialist roles such as finance and human resources maintain their Continuous Professional Development as required by their own professional body. A debrief process exists for operational incidents and exercises. SIRO breaches log and shared experience at SGG Officers use Internal Audit in a constructive manner to invite scrutiny in any areas of concern as well as maintaining regular audit of key areas such as finance and payroll .

5.2.5	Ensuring that there are structures in place to encourage public participation	This process starts with the CRMP and continues into the transparency associated with the governance model, but the Authority has many ways of encouraging and promoting public participation, both in the community and as part of the democratic process.
5.2.6	Taking steps to consider the leadership's own effectiveness and ensuring leaders are open to constructive feedback from peer review and inspections	The Authority and each Committee has a work plan for the year, with an end of year report brought to show activity against that work plan. External Audit's annual Value for Money conclusion considers and gives an assessment on economy, efficiency, and effectiveness. Staff engagement survey provides feedback from those employed with the Service Findings from the Grenfell Tower enquiry are co-ordinated through the NFCC which has resulted in the establishment of an internal steering group to implement recommendations. Recent HMICFRS inspection outcomes identify areas for improvement and a cause for concern. Each of these areas have been accepted by Service leaders and Fire Authority members and a robust action plan in place for each area. An approach to monitoring and reviewing progress is in place both internally and through Fire Authority scrutiny.
5.2.7	Holding staff to account through regular performance reviews which take account of training or development needs	All staff are offered an annual appraisal, which provides a one to one opportunity for managers and staff to contribute to the production of mutually agreed personal development plans, focussing on development/training needs, wellbeing and objectives for the 12 months ahead. Managers are also encouraged to hold regular 1-2-1's with their staff.
5.2.8	Ensuring arrangements are in place to maintain the health and wellbeing of the workforce and support individuals in maintaining their own physical and mental wellbeing	Occupational Health (OH) services are available to all Authority employees including the services of a nurse, suitably qualified OH physician and counsellors and Physiotherapy. The Service will be starting with a new OH Provider from April 2025. Staff conditioned to the Grey Book also have an annual fitness assessment and a general medical every three years.

The People Strategy 2021 – 2025 provides a framework to support the aims and objectives of the service as outlined in the CRMP. One of the plans underpinning this strategy is the Health and Wellbeing Action plan. Through this plan the Service continues to introduce new initiatives to support staff's psychological and physical health, working with partner agencies and the Trade Unions. A new Health and Wellbeing Plan is being created to underpin the new People Strategy for 2025 – 2028.

The Service has signed up to the Disability Confident Employer Scheme, MIND Blue light pledge, the Mental Health at Work Commitment and action plan, White Ribbon Accreditation and the SAND Covenant. The Service also have Mental Health First Aiders and Voices representatives who support Mental Health, along with other physical activities to support health and wellbeing.

There is also a module available on Learning Environment On-line (LEO) for all staff to access, entitled Leading and Managing Change and Transition.

Principle 6 - Managing risks and performance through robust internal control and strong public financial management

Local government needs to ensure that the organisations and governance structures that it oversees have implemented, and can sustain, an effective performance management system that facilitates effective and efficient delivery of planned services. Risk management and internal control are important and integral parts of a performance management system and are crucial to the achievement of outcomes. Risk should be considered and addressed as part of all decision making activities.

A strong system of financial management is essential for the implementation of policies and the achievement of intended outcomes, as it will enforce financial discipline, strategic allocation of resources, efficient service delivery and accountability.

It is also essential that a culture and structure for scrutiny are in place as a key part of accountable decision making, policy making and review. A positive working culture that accepts, promotes, and encourages constructive challenge is critical to successful scrutiny and successful service delivery. Importantly, this culture does not happen automatically, it requires repeated public commitment from those in authority.

6.1 Managing risk	Supporting Text
6.1.1 Recognising that risk management is an integral part of all activities and must be considered in all aspects of decision making	Up until mid-year the Service had an established Risk Management Group (RMG) which was responsible for ensuring the Authority has an effective risk management process in place. Corporate risk management is being fundamentally reviewed and aligned to the strategic performance and risk forum. Corporate risks are now reported to PRG and programme and project risks are reported to SPB.

		Corporate Risk management reports are taken to SAP committee.
6.1.2	Implementing robust and integrated risk management arrangements and ensuring that they are working effectively	The risk management process is subject to a bi-annual assessment by Internal Audit. The process is underpinned by the monitoring of the corporate, departmental and programme risk registers. Statements of Assurance are completed in line with the development of the Annual Plan and supporting Departmental Plans. The statements of assurance are signed off by the departmental head and lead executive officer and include departmental risks. Up until mid-year progress was monitored by RMG and RMG minutes were forwarded to SMT. Progress is now monitored by PRG and reported to SMT. The corporate risk register is monitored by SAP quarterly. Officers and Members also receive training from the Service's insurance provider Zurich. All operational incidents are debriefed in line with the Service Policy. Any incident attended by a Flexible Duty Officer is also subject to operational monitoring procedures, all findings, both those of merit and development needs, are recorded and managed through an action plan and the Service's Operational Learning Board. Where necessary Significant Event Investigation can be instigated by the Duty Area Manager to provide a formal comprehensive report into specific events or incidents.
6.1.3	Ensuring that responsibilities for managing individual risks are clearly allocated	All risks on the corporate risk register are assigned a risk owner. Departmental risks are updated by the Head of Department and signed off by the Executive Lead through statements of assurance.
6.2 Managing performance		**Supporting Text**
6.2.1	Monitoring service delivery effectively including planning, specification, execution and independent post implementation review	An established performance management process exists, which provides reports to meetings of the PRG and the SAP committee on the Service's performance against service tolerances. The Authority has agreed nine corporate performance indicators and agreed tolerances in order to monitor service delivery. In addition, there are supporting objectives, which are managed through departmental plans.

		Major projects are monitored through SPB with reviews carried out and system user feedback captured for lessons learned purposes.
6.2.2	Making decisions based on relevant, clear objective analysis and advice pointing out the implications and risks inherent in the organisation's financial, social and environmental position and outlook	There is a standard format for all committee reports, which includes background to the report and any recommendations for decision together with reasons behind those recommendations. All reports contain a section for legal comment and financial implications and list the background papers, which are integral to understanding the report. EQIAs are completed where appropriate.
6.2.3	Ensuring an effective scrutiny or oversight function is in place which provides constructive challenge and debate on policies and objectives before, during and after decisions are made thereby enhancing the organisation's performance and that of any organisation for which it is responsible. (Or for a committee system) Encouraging effective and constructive challenge and debate on policies and objectives to support balanced and effective decision making.	SMT offers oversight on policy and performance and SPB oversees all major delivery projects within a programme of change. Both groups are made up of executive officers and departmental leads. Minutes and actions are taken at both meetings to capture discussions and decisions. S&R Committee offers oversight on strategic direction, Value for Money, and monitoring of budget and financial performance. SAP Committee provides independent assurance and independent scrutiny. The current review of Fire Authority governance arrangements will seek to put into place a specific scrutiny function for the Fire Authority.
6.2.4	Providing members and senior management with regular reports on service delivery plans and on progress towards outcome achievement	SMT meets every month and SPB meets every 3 months. Management reports and progress reports against major projects are reported. Progress on the Capital Programme is reported to S&R Committee.
6.2.5	Ensuring there is consistency between specification stages (such as budgets) and post implementation reporting (e.g. financial statements)	A robust and structured budget setting and management system is in place and is well documented through Authority and senior management reporting. Officers ensure that the budget that is set at the beginning of the financial year is consistent through to the Statement of Accounts.

6.3 Robust internal control	Supporting Text
6.3.1 Aligning the risk management strategy and policies on internal control with achieving objectives	Statements of Assurance are completed in line with the development of the Annual Plan and supporting Departmental Plans. The Statements of Assurance are signed off by the departmental head and lead executive officer and include departmental risks and areas for improvement. Alignment of risk management and reporting to the progress of projects and departmental action plans takes place through SPB and departmental reporting processes.
6.3.2 Evaluating and monitoring risk management and internal control on a regular basis	The Risk Management Brigade Order and the Risk Management Protocol are reviewed annually. Up until mid-year progress was monitored by RMG and RMG minutes were forwarded to SMT. Progress is now monitored by PRG and reported to SMT Corporate risk is a standing item on the RMG and PRG agenda. The Annual Governance Statement is reviewed annually, and the accompanying improvement plan is reviewed quarterly.
6.3.3 Ensuring effective counter fraud and anti-corruption arrangements are in place	A comprehensive Anti-Fraud, Bribery and Corruption Strategy and Fraud Plan is in place and is reviewed every financial year. This is approved by Members and widely circulated amongst staff.
6.3.4 Ensuring additional assurance on the overall adequacy and effectiveness of the framework of governance, risk management and control is provided by the internal auditor	The Risk Management and Statements of Assurance processes are reviewed bi-annually by Internal Audit. Any recommendations/actions are monitored by RMG.
6.3.5 Ensuring an audit committee or equivalent group/ function, which is independent of the executive and accountable to the governing body: • provides a further source of effective assurance regarding arrangements for managing risk and maintaining	The terms of reference for SAP includes scrutiny of the corporate risk register and the AGS improvement plan on a quarterly basis. The Chair of SAP who is also the Member champion.

	an effective control environment • that its recommendations are listened to and acted upon	
6.4 Managing data		**Supporting Text**
6.4.1	Ensuring effective arrangements are in place for the safe collection, storage, use and sharing of data, including processes to safeguard personal data	An all-round approach of electronic safeguards through permissions, training for staff; and established agreements for sharing data with other agencies covers risks from an electronic, personnel and legislative angle. There are courses on the Learning Environment Online (LEO) platform that staff are required to complete, including: • Information Security including FOI • GDPR A GDPR quarterly update is published on the Service's internal newsletter and there is also a GDPR page on the Portal that offers advice and guidance. There is an information asset register which is updated annually.
6.4.2	Ensuring effective arrangements are in place and operating effectively when sharing data with other bodies	Data sharing protocols and regular scrutiny by SMT, as well as monitoring through the Statements of Assurance ensures that arrangements in place are monitored. There are courses on the LEO platform that staff are required to complete, including: • Information Security including FOI • GDPR A GDPR quarterly update is published on the Service's internal newsletter and there is also a GDPR page on the Portal that offers advice and guidance. There is an information asset register which updated annually.

6.4.3 Reviewing and auditing regularly the quality and accuracy of data used in decision making and performance monitoring	The Service has developed a data warehouse that supports the monitoring and improvement of data quality. It acts as a central repository that stores data from key departmental systems. Departmental systems have assigned System Owners and System Administrators who are responsible for ensuring data quality standards. The data warehouse also allows System Administrators to more easily query data from their systems and check the data for problems. As the data warehouse pulls in data from multiple sources then the data from different systems can be compared. The process of developing the data warehouse itself helped data and system owners understand how their data might be used, determine definitions for reporting and identify any data entry or data quality issues which they needed to resolve before reports could be created.
6.5 Strong public financial management	**Supporting Text**
6.5.1 Ensuring financial management supports both long term achievement of outcomes and short-term financial and operational performance	The use of short to medium term planning ensures that officers and members can consider the impact of any decisions or events both now and over the foreseeable planning period. Plans will be put in place for current organisational requirements but reserves and precept strategies will ensure that future financial commitments can also be met.
6.5.2 Ensuring well-developed financial management is integrated at all levels of planning and control, including management of financial risks and controls	A robust and structured budget setting and management system is in place and is well documented through Authority and senior management reporting. In addition, project management processes include financial implications and monitoring. The Service will be introducing a new Portfolio Management Officer and developing its portfolio and project management processes. In terms of financial risks and control, the corporate and departmental risk registers and the Authority's reserves are aligned.

Principle 7 - Implementing good practices in transparency, reporting, and audit to deliver effective accountability

Accountability is about ensuring that those making decisions and delivering services are answerable for them. Effective accountability is concerned not only with reporting on actions completed but also ensuring that stakeholders are able to understand and respond as the organisation plans and carries out its activities in a transparent manner. Both external and internal audit contribute to effective accountability.

7.1 Implementing good practice in transparency	Supporting Text
7.1.1 Writing and communicating reports for the public and other stakeholders in a fair, balanced and understandable style appropriate to the intended audience and ensuring that they are easy to access and interrogate	The Fire Authority and its Committees each has an annual work plan which sets out the reports required for each meeting and the officers involved in producing them. The information provided by officers in these reports is to a standard format and is relevant, timely and clear, thus facilitating the decision-making process. Prior to publication, Authority and Committee papers are assessed by Legal Services and the Head of Finance, for legal and financial comment. Agendas and reports are available to the public and publicised on its website and intranet in advance of meetings. Meetings are minuted to a standard format and include a summary of debate, motions, results, and decisions resolved. Officers at all levels have been offered plain English and grammar check skills courses. Report writing forms part of the Management Development Programme.
7.1.2 Striking a balance between providing the right amount of information to satisfy transparency demands and enhance public scrutiny while not being too onerous to provide and for users to understand	The Information Officer (Planning and Programmes Officer) ensures that the requirements of the Transparency Scheme and the Publication Scheme are met. The Authority and Monitoring Officers preference is that as far as possible information should be considered in public session with exempt reports kept to a minimum. To avoid conflicts of interest, the Fire Authority requires that, having disclosed a pecuniary interest in a matter, a Member should leave the room whilst the matter is discussed. Specialist officers are available at public meetings to expand the information contained within reports. Reports are written in a clear consistent manner and the use of technical terms and acronyms is kept to a minimum.

7.2	Implementing good practice in reporting	Supporting Text
7.2.1	Reporting at least annually on performance, value for money and stewardship of resources to stakeholders in a timely and understandable way	The Authority and its Committees receive quarterly reporting on operational and financial performance. Value for money is also reported by external auditors as part of their Annual Audit Report. Reports detailing Use of Assets are taken to the S&R Committee.
7.2.2	Ensuring members and senior management own the results reported	Each report has a main author named on the front of the report as a point of contact for further information. The author will present the report at the meeting and take questions from Members.
7.2.3	Ensuring robust arrangements for assessing the extent to which the principles contained in this Framework have been applied and publishing the results on this assessment, including an action plan for improvement and evidence to demonstrate good governance (the annual governance statement)	Internal Audit carry out a bi-annual review and produce a report on the Annual Governance Statement. Any recommendations/actions falling out of the review will be monitored by RMG and progress reported to SAP. Any high-level actions that carry a significant risk would be included within the AGS improvement plan and reported to SAP on a quarterly basis.
7.2.4	Ensuring that this Framework is applied to jointly managed or shared service organisations as appropriate	The Service maintains a strategic alliance with H&WFRS. Any joint workstreams as a result of the alliance will be covered by this framework.
7.2.5	Ensuring the performance information that accompanies the financial statements is prepared on a consistent and timely basis and the statements allow for comparison with other, similar organisations	The Statement of Accounts contains a narrative report, which details the Authority's performance over the financial year. This is consistent with budgets set and reported upon during the year. The backward-looking Annual Report also includes financial information, which is consistent with other financial reporting.
7.3 Assurance and effective accountability		Supporting Text
7.3.1	Ensuring that recommendations for corrective action made by external audit are acted upon	On completion of the external audit on the Statement of Accounts, the external auditor produces an audit findings report. Where recommendations are made within the report, these are incorporated into the following year's closedown process.

7.3.2	Ensuring an effective internal audit service with direct access to members is in place, providing assurance with regard to governance arrangements and that recommendations are acted upon	The Authority's internal audit function is carried out by Worcestershire Internal Audit Shared Services. The audit plan is based on a risk assessment carried out by officers and auditors. Timely audit reports are issued, and any recommendations acted upon and monitored by RMG. Audit Services provide an annual assurance based on the audits carried out and this feeds into the AGS. There is an arrangement in place whereby both internal and external audit can meet with Members without officers present, to discuss any relevant issues.
7.3.3	Welcoming peer challenge, reviews and inspections from regulatory bodies and implementing recommendations	The Service is subject to audit and review by the Fire Service Inspectorate and actions plans are developed as a result of their findings. The Service is a participant in a Regional Health and Safety inspection programme which encourages the implementation of best practice. However, during 2020/21 and early 2022 this was put on hold due to the pandemic. The first Regional Health and Safety Peer Review audit following the pandemic was conducted in October 2022 within Staffordshire FRS and the second conducted within Shropshire FRS in May 2023. The programme will continue to be ongoing. The Service actively engages with external bodies such as British Standards Institute for environmental assessment and fleet transport association for fleet compliance.
7.3.4	Gaining assurance on risks associated with delivering services through third parties and that this is evidenced in the annual governance statement	The Service risk assesses contracts and contract providers to establish appropriate contract and risk management strategies.
7.3.5	Ensuring that when working in partnership, arrangements for accountability are clear and the need for wider public accountability has been recognised and met	Each partnership entered into is supported by a partnership agreement, which sets out clearly and succinctly what the partnership aims to achieve and what each of the partners will do. The agreement also states to which of the Fire Authority's strategic aims the partnership contributes. Officers have developed a method of assessing partnerships to ensure that officers, Members, and partners are clear in the aims and purpose of any partnership working and know their respective responsibilities and commitments. Partnership agreements formally set out the aims of the partnership, expectations, roles, and reporting requirements.

	Included on the partnership agreement template is a section that requires each partner to provide named individuals for complaints. The partnership process has been re-designed to include all the internal audit recommendations. Periodic audits are undertaken of the process and a partnership report is taken to the CFA annually.

Abbreviations

AGS	Annual Governance Statement	LGA	Local Government Association
AFSA	Asian Fire Service Association	LEO	Learning Environment Online
ACFO	Assistant Chief Fire Officer	MTFP	Medium Term Financial Plan
CFA	Combined Fire Authority	NCAF	National Co-ordination Advisory Framework
CFO	Chief Fire Officer	NFCC	National Fire Chiefs Council
CFS	Community Fire Safety	OH	Occupational Health
CPIs	Corporate Performance Indicators	ORS	Opinion Research Services
CRMP	Community Risk Management Plan	PRG	Performance and Risk Group
DPO	Data Protection Officer	RDS	Retained Duty System
EDI	Equality, Diversity and Inclusion	RMG	Risk Management Group
EQIA	Equality Impact Assessment	S&R	Strategy and Resources Committee
FOI	Freedom of Information	SAND	Safe and Ageing No Discrimination
FRA	Fire and Rescue Authority	SAP	Standards Audit Performance Committee
FRS	Fire and Rescue Service	SFRS	Shropshire Fire and Rescue Service
GDPR	General Data Protection Regulation	SGG	Systems Governance Group
HSWV	Home Safe and Well Visit	SIRO	Senior Information Risk Officer
H&WFRS	Hereford and Worcester Fire & Rescue Service	SPB	Service Programme Board
ICO	Information Commissioner's Office	SMT	Service Management Team
ILM	Institute of Leadership and Management	STAG	Strategic Advisory Group
IPDR	Individual Performance and Development Review	S151	Section 151 Officer
IRMP	Integrated Risk Management Plan	WFS	Women in the Fire Service