

SCRUTINY & AUDIT PANEL

THURSDAY 15 SEPTEMBER 2016 at 10:00 hours

MEMBERS

East Sussex County Council

Councillors Buchanan, Galley, Lambert, Taylor and Wincott.

Brighton and Hove City Council

Councillors Peltzer Dunn and Penn.

You are requested to attend this meeting to be held at East Sussex Fire & Rescue Service Headquarters, 20 Upperton Road, Eastbourne, at 10:00 hours.

AGENDA

Item No.	Page No.	
040.	1.	In relation to matters on the agenda, seek declarations of any disclosable pecuniary interests under Section 30 of the Localism Act 2011.
041.	1.	Appointment of Chairman.
042.	1.	Apologies for absence.
043.	1.	Notification of items which the Chair considers urgent and proposes to take at the end of the agenda / Chair's business items.
		(Any Members wishing to raise urgent items are asked, wherever possible, to notify the Chair before the start of the meeting. In so doing they must state the special circumstances which they consider justify the matter being considered urgently).
044.	3.	Non-confidential Minutes of the last Scrutiny & Audit Panel meeting held on 26 May 2016 (copy attached).

Item Page No. No.

045. 2. Callover

The Chair will call the item numbers of the remaining items on the open agenda. Each item which is called by any Member shall be reserved for debate. The Chairman will then ask the Panel to adopt, without debate, the recommendations and resolutions contained in the relevant reports for those items which have not been called.

- 046. 13. External Auditor's Audit Results Report (ISA 260) and Statement of Accounts 2015/16 joint report of the Chief Fire Officer and Assistant Director Resources / Treasurer (copy in Minute Book).
- 047. 15. Fatal Fire Report 2015 2016 report of the Assistant Chief Fire Officer (copy in Minute Book).
- 048. 29. 2015/16 Statement of Operational Assurance report of the Assistant Chief Fire Officer (copy in Minute Book).
- 049. 33. 2016/17 First Quarter Performance Report report of the Deputy Chief Fire Officer (copy in Minute Book).
- 050. 43. 2016/17 First Quarter Corporate Projects & Programmes Report report of the Assistant Director Planning & Improvement (copy in Minute Book).
- 051. 45. 2016/17 First Quarter Corporate Risk Register Review report of the Assistant Director Resources / Treasurer (copy in Minute Book).
- 052. 2. Exclusion of the Press and Public

To consider whether, in view of the business to be transacted or the nature of the proceedings, the press and public should be excluded from the remainder of the meeting on the grounds that, if the public and press were present, there would be disclosure to them of exempt information. NOTE: Any item appearing in the confidential part of the Agenda states in its heading the category under which the information disclosed in the report is confidential and therefore not available to the public. A list and description of the exempt categories are available for public inspection at East Sussex Fire & Rescue Service Headquarters, 20 Upperton Road, Eastbourne, and at Brighton and Hove Town Halls.

053. 59. Confidential Minutes of the last Scrutiny & Audit Panel meeting held on 26 May 2016 (copy attached). (Exempt categories under paragraphs 1, 2 and 3 of the Local Government Act 1972).

ABRAHAM GHEBRE-GHIORGHIS

Monitoring Officer

East Sussex Fire Authority
c/o Brighton & Hove City Council

EAST SUSSEX FIRE AUTHORITY

Minutes of the meeting of the SCRUTINY & AUDIT PANEL held at East Sussex Fire & Rescue Service Headquarters, 20 Upperton Road, Eastbourne, at 10:00 hours on Thursday 26 May 2016.

Members Present: Councillors Barnes, Buchanan, Lambert (Chair), Peltzer Dunn, Taylor and Wincott.

N.B. Councillor Barnes attended the meeting in place of Councillor Galley, having been nominated by the Group Leader and approved by the Deputy Monitoring Officer.

Councillors Howson and Sheppard also attended the meeting.

Also present:

Mr. G. Walsh (Chief Fire Officer), Mr. S. Apter (Deputy Chief Fire Officer), Mr. M. O'Brien, (Temporary Assistant Chief Fire Officer), Mr. M. Andrews (Assistant Chief Fire Officer designate), Ms. L. Woodley (Deputy Monitoring Officer), Mr. D. Savage (Assistant Director Resources / Treasurer), Mr. I Young (Ernst & Young Auditors), Mr. R. Banks (East Sussex County Council), and Mrs. S. Klein (Clerk).

020. **DISCLOSABLE PECUNIARY INTERESTS**

1020.1 It was noted that, in relation to matters on the agenda, no participating Member had any disclosable pecuniary interest under Section 30 of the Localism Act 2011.

021. APOLOGIES FOR ABSENCE

021.1 Apologies for absence were received from Councillor Galley.

022. ANY OTHER ITEMS CONSIDERED URGENT BY THE CHAIR / CHAIR'S BUSINESS

- The Chair reminded Members that Steve Apter would be returning to Hampshire Fire & Rescue Service on 1 June 2016. Mr. Apter had been seconded to East Sussex as Deputy Chief Fire Officer for six months, pending the permanent appointment of Dawn Whittaker, who would be joining East Sussex on 1 June 2016. Members thanked Mr. Apter for the work he had done and wished him well for the future. A presentation was made to Mr. Apter at the start of the Policy & Resources Panel meeting, following this meeting of the Scrutiny & Audit Panel.
- The Chair welcomed Mark Andrews to the meeting. Mr. Andrews had been appointed as Assistant Chief Fire Officer and would be taking up his employment with East Sussex Fire & Rescue Service on 1 June 2016.
- 022.3 Ian Young (Ernst & Young Auditors), and Russell Banks (East Sussex County Council) were also welcomed to the meeting.

- 022.4 Fire & Rescue Service Reform
- O22.4.1 The Chief Fire Officer briefed Members on the speech made by the Home Secretary, the Right Honourable Theresa May MP, on 24 May. A précis of her speech had been emailed to all Members and the CFO highlighted the significant plans that Ms May had in mind for the Fire & Rescue Service under the Policing & Crime Bill, following her significant reforms of police.
- 022.4.2 Ms. May had hailed the achievements made by the Fire & Rescue Service over a very short period of time and Members noted that, now that the Service was under the remit of the Home Office, she wanted to inject more pace into the changes. The CFO was concerned about the capacity of the Service to deliver agreed changes while other pressures were inevitable and would increase workloads but would keep Members informed of developments.

022.5 <u>Marlie Farm</u>

O22.5.1 The CFO informed Members that he had received a verbal communication from the Authority's Insurer's solicitors that all civil compensation had now been paid and the case was now officially closed. The Service was still learning from the incident and improving firefighters' safety was an on-going process. The CFO was now involved in carrying out a peer review in Hampshire following a fireworks incident there highlighting that the problem of fireworks storage was still an issue.

023. NON-CONFIDENTIAL MINUTES OF THE SCRUTINY AND AUDIT PANEL MEETING HELD ON 4 FEBRUARY 2016

023.1 **RESOLVED** – That the non-confidential minutes of the meeting of the Scrutiny & Audit Panel held on 4 February 2016 be approved as a correct record and signed by the Chair. (Copy in Minute Book).

024. CALLOVER

- 024.1 Members reserved the following items for debate:
 - 025. External Audit Update
 - 029. Assessment of the Corporate Framework and Annual Governance Statement for 2015/16
 - 030. Performance Results 2015/16 4th Quarter
 - 033. Attending Calls to Automatic Fire Alarms Policy Review
- 024.2 **RESOLVED** That all other reports be resolved in accordance with the recommendations as detailed below.

025. **EXTERNAL AUDIT UPDATE**

Members considered a joint report of the Chief Fire Officer and Assistant Director Resources / Treasurer that informed them of the content of the External Audit Plan 2015/16 and the proposed fee for 2016/17. (Copy in Minute Book).

- The External Audit Plan set out the work that the Authority's external auditors, Ernst & Young LLP (EY), intend to carry out in order to audit the Authority's 2015/16 accounts and form their judgement on the Authority's value for money arrangements. Members noted that EY had not identified any specific risks relating to the Authority's accounts.
- The fee for the 2016/17 audit was confirmed as £30,766 which was in line with the nationally set fee scales and was unchanged from 2015/16. Members noted that this was dependent on a number of factors including the quality and timeliness of the accounts and their associated working papers, and the ability of the external auditors to rely on the work carried out by internal audit.
- O25.4 Councillor Lambert asked about the timetable for bringing forward the statutory deadlines for completing the accounts and Mr Young explained that these needed to be in place for the audit of the 2017/18 accounts. EY had set up a working group to work with some of the bigger clients, and was looking at different approaches to controls, including bringing forward some of their audit work to earlier in the year and initiatives around auditing accounts for nine months, then conducting shorter audit of the final accounts rather than waiting until end of year.

025.5 **RESOLVED** – That:

- i the External Audit Plan for 2015/16 be approved; and
- ii the external audit fee for 2016/17 be noted.

026. CHANGES TO ARRANGEMENTS FOR APPOINTMENTS OF EXTERNAL AUDITORS

- Members considered a joint report of the Chief Fire Officer and Assistant Director Resources / Treasurer that advised them of the options for approval of new External Auditors and sought their approval to indicate to the Local Government Association (LGA), that we will opt in to a Sector Led Body (SLB). (Copy in Minute Book).
- O26.2 The report summarised the changes to the arrangements for appointing External Auditors following the closure of the Audit Commission and the end of the transitional arrangements at the conclusion of the 2017/18 audits. The Fire Authority now needed to consider the options available and put in place new arrangements in time to make a first appointment by 31 December 2017. Initial indications locally and across the fire sector were that most authorities would seek to appoint their external auditors through the LGA's Sector Led Body.

026.3 **RESOLVED** – That:

- i the Local Government Association (LGA) be supported in setting up a national Sector Led Body (SLB) by indicating an intention to "opt-in"; and
- ii it be noted that a further report will be brought to the Fire Authority to seek final approval to appoint its external auditors, through the national SLB, in December 2016, including details of any associated costs.

027. <u>INTERNAL AUDIT ANNUAL REPORT AND OPINION FOR THE PERIOD 1</u> <u>APRIL 2015 TO 31 MARCH 2016</u>

- Members considered a joint report of the Chief Fire Officer and Assistant Director Resources / Treasurer that provided an Opinion on East Sussex Fire Authority's internal control environment and reported on the work of Internal Audit for the period 1 April 2015 to 31 March 2016. (Copy in Minute Book).
- O27.2 The Auditors reported that, on the basis of the audit work completed, East Sussex County Council's Head of Assurance was able to provide reasonable assurance that the Fire Authority has in place an adequate and effective framework of governance, risk management and internal control for the period 1 April 2015 to 31 March 2016. Individual reports on the systems evaluated by internal audit included recommendations to enhance controls and management had drawn up action plans to implement these recommendations.
- 027.3 Members noted that all reports had received full or substantial assurance opinions. They also noted the intention to carry forward up to 20 days to conduct a Management Control Compliance review at the Service Training Centre in 2016/17. Information on the Internal Audit Service's performance compliance with the Public Sector Internal Audit Standards (PSIAS) was also noted.

027.4 **RESOLVED** – That:

- i the Internal Audit Service's opinion on the Fire Authority's internal control environment for 2015/16 be noted; and
- ii the Fire Authority's system for internal audit had proved effective during 2015/16

028. INTERNAL AUDIT STRATEGY AND PLAN 2016/17

- 028.1 Members considered a joint report of the Chief Fire Officer and Assistant Director Resources / Treasurer that provided an Internal Audit Plan for East Sussex Fire Authority covering the period 1 April 2016 to 31 March 2017. (Copy in Minute Book).
- The Auditor informed Members that ESCC had provided the internal audit service to the Fire Authority since 1 April 1997 and this service was usually delivered based on a standard annual budget of 70 audit days.
- The Internal Audit Strategy and Plan for 2016/17 had been produced on a risk basis, following consultation with senior officers and ESFA's external auditor, Ernst & Young. The Strategy sought to achieve a balance between ensuring that existing controls were maintained and that assurance could be given on key projects within the Authority's transformation programme. It was noted that this draft strategy was based on a standard 70 day programme, but there were also 20 days carried forward from 2015/16 which were intended to resource a delayed audit of Management Control Compliance at the Service Training Centre and internal audit input to a criminal prosecution which is due to take place in May 2016. This meant that the overall cost of the internal audit plan in 2016/17 was £32,850. Members were informed that there was provision for the 70 day standard plan within the Finance budget and the additional 20 days would need to be funded from centrally held contingencies.

028.4 **RESOLVED** – That the 2016/17 Internal Audit Strategy and Plan be approved.

029. ASSESSMENT OF THE CORPORATE FRAMEWORK AND ANNUAL GOVERNANCE STATEMENT FOR 2015/16

- Members considered a joint report of the Chief Fire Officer, Assistant Director Resources / Treasurer and Monitoring Officer that set out how the Fire Authority had assessed the effectiveness of its governance arrangements and sought approval of the Annual Governance Statement in line with the Accounts and Audit Regulations 2015. (Copy in Minute Book).
- The Fire Authority is required under the Accounts and Audit Regulations 2015 to conduct an annual review of the effectiveness of its system of internal control and to prepare an annual governance statement in accordance with proper practices to accompany its Statement of Accounts. The review had been carried out by the Governance Group of senior officers in line with the Fire Authority's Local Code of Corporate Governance.
- O29.3 As part of this review officers had not identified any gaps in assurance over key risks or significant governance issues but had identified a range of improvements to the Authority's corporate Health & Safety arrangements and, specifically, at the Service Training Centre, as a result of an accident investigation and Peer Review. It was noted that Action Plans were now in place to address the necessary improvements and these would be monitored during the year. The draft Annual Governance Statement had been endorsed by the Corporate Management Team.

029.4 **RESOLVED** – That:

- i Members were satisfied with the level of assurance provided to them through this report and the Authority's governance framework and processes;
- ii no significant governance issues were identified that should be included in the Authority's Annual Governance Statement; and
- the Annual Governance Statement be approved to be signed by the Chair of this Panel and the Chief Fire Officer.

030. **PERFORMANCE RESULTS 2015/16 FOURTH QUARTER**

- Members considered a report of the Chief Fire Officer that presented the fourth quarter performance results 2015/16. (Copy in Minute Book).
- The report provided the Panel with a summary of service performance for the fourth quarter of 2015/16 and contained the revised measurement for response standards as agreed by the Panel in November 2015. It was noted that this was an interim measure pending a comprehensive review of attendance standards to be undertaken in this year's IRMP.

- O30.3 Councillor Wincott thought that there was a lot to be pleased about in the report but raised two concerns. The first was the number of inspections completed of high risk premises this indicator had not met its target and was in the 'worst' quartile. The CFO explained that this downturn in inspection time could be attributed to a number of factors, including the high-risk incident at St. Michael's Hospice, and the turnover of staff and need for more training. He explained that the Service was trying to increase inspections, with operational firefighters undertaking lower level audits freeing up officers to carry out more inspections of higher risk premises. The CFO added that Mark Andrews would be bringing a lot of experience in this area when he joins the Service on 1 June and CFOA was also looking at the processes and time taken on inspections of high risk premises. Councillor Barnes suggested that it would be helpful to have a future report on high risk premises and Councillor Wincott agreed with this suggestion.
- O30.4 Councillor Wincott also queried the Service's performance against the Equality & Diversity targets. These had declined in the last year, with fewer RDS female firefighters, minority ethnic staff and disabled employees as new entrants to the Service. The CFO explained that the statistics were operationally focussed, so excluded the make-up of support staff, and the Service had not been recruiting wholetime firefighters, so could not show improvement. There had been some success recruiting RDS firefighters, but this was not sufficient to improve performance against the targets, and there was still work to be done to address the issue.
- O30.5 Councillor Peltzer Dunn had previously raised the issue of staff sickness levels, and noted that this had improved slightly. He was, however, concerned at the human cost of the ongoing uncertainty at the Sussex Control Centre (SCC) and asked for quantification of the figures; he felt that specific circumstances could be distorting the figures. The CFO explained that long term sickness, i.e. over 28 days, had increased and there was also a problem that, once an employee had been identified as a possible ill-health retiree, this process could take 12-18 months, and the employee would be counted as 'sick' during that period. In order to alleviate potential issues at the SCC additional staff had been recruited. A new Occupational Health provider was coming on stream from 1 July their emphasis would be on well-being support with faster referrals and an Employee Assist Programme to help staff get well and return to work more quickly. Councillor Peltzer Dunn suggested including a footnote in future reports to reflect the effects of long term sickness on the figures.
- O30.6 Councillor Taylor asked whether the performance in Home Safety Visits (HSVs) was enough to reduce fires and the CFO explained that he had asked for a review of accidental dwelling fires and to ask the question should the Authority raise the targets; was a target of 10,000 visits high enough, and were the right people being targeted? In some ways, the Service had been too successful with its HSVs, which had led to an increase in calls, but a decrease in injuries and the severity of fires. Councillor Howson congratulated the Community Safety Team and operational staff on the high number of visits.

030.7 **RESOLVED** – That:

- i the 2015/16 performance results for Quarter 4 be noted, as set out in the report and complementary separate Appendix A; and
- ii the information included within the exception report set out in Appendix B be noted.

031. PROJECT PROGRESS 2015/16 FOURTH QUARTER

- 031.1 Members considered a report of the Chief Fire Officer that informed them of progress against key milestones, identified slippage, and reported compliance with project governance. (Copy in Minute Book).
- 131.2 It was noted that the report now included a 'heat map' showing which projects were delayed, and which had budget reporting, compliance or resourcing issues.
- O31.3 Members noted key points from the project portfolio, including that the Sussex Control Centre project was awaiting strategic decisions, following a visit by Remsdaq; SHQ Relocation had been rescheduled for March 2017; IMD Transformation was proceeding well; the Emergency Services Mobile Communications Programme (ESMCP) was in the project initiation phase; Firewatch stage 1 was currently delayed and Phase 2 was in a deferment phase, while requirements around Health & Safety were being finalised; and Respiratory Protective Equipment (RPE) was about to become an active project again.
- 031.4 **RESOLVED** That the report be noted.

032. CORPORATE RISK REGISTER REVIEW 2015/16 FOURTH QUARTER

- 032.1 Members considered a joint report of the Chief Fire Officer and Assistant Director Resources / Treasurer on the latest quarterly review of Corporate Risk which sought their agreement on outcomes. (Copy in Minute Book).
- Members were informed of the established procedures in place for ensuring that risks were identified and managed for all corporate projects, with all high risks identified in the Project RAID (Risks, Assumptions, Issues, and Dependencies) logs being collated and reported to Corporate Management Team (CMT) to allow any themes to be identified and risks to be escalated to the corporate risk log as necessary. The latest series of meetings with Corporate Risk Owners was carried out during April 2016 to update risk management action plans and review the position of each risk.
- 032.3 Members noted that two new risks had been added to the Corporate Risk Register relating to Health & Safety (risk plan 9) and Operation Tin (risk plan 10). All project plans were being reviewed to ensure the pre-scoring and post- scores were appropriate; this would identify whether the mitigation plans were adequate and appropriate, and reduce risk to the individual project.
- 032.4 **RESOLVED** That the latest Corporate Risk Register be approved.

033. ATTENDING CALLS TO AUTOMATIC FIRE ALARMS – POLICY REVIEW

- Members considered a report of the Chief Fire Officer that updated them on the implementation of the Automatic Fire Alarm (AFA) Attendance Policy and outlined proposals for modifying pre-determined attendances (PDAs) in certain circumstances. (Copy in Minute Book).
- At the meeting of the Policy & Resources Panel in May 2014, Members had given approval to reduce the PDA to calls to AFA activations to one pumping appliance. Following detailed policy development, risk assessment and consultation processes, the new PDA standards came into force on 1 July 2015.
- Members were informed that a review of incident data since the new policy went live in July 2015 indicated that the data which helped inform the original Fire Authority decision was sound, and provided a risk and evidence based rationale for supporting a reduced PDA to AFA activations.
- Members noted that the AFA attendance policy made provision for the local station manager to make a case for a temporary or permanent increase in the PDA to individual identified premises based on risk. This was reported to Members of the Panel in November 2015, at which time the CFO confirmed that a suitable methodology on which to base such a judgement was being developed.
- O33.5 The new policy recognised that there may be premises which sit outside the normal attendance parameters where an enhanced PDA might be justified. Two examples of potential categories which may warrant an enhanced PDA were high rise premises and domestic properties. Domestic properties had been discounted but it was recommended that the PDA for AFA mobilisations to high-rise premises be enhanced to two appliances. Councillor Wincott was pleased that this was being recommended and asked whether firefighters and the FBU were satisfied with the proposal the CFO confirmed that he had met with the FBU on 25 May and they were comfortable with the direction of travel.
- O33.6 In addition, a proposed working methodology on which to base a premises by premises individual assessment had been developed and was recommended for implementation.
- O33.7 The CFO confirmed that the number of AFA call-outs was still high, and further work was needed to address this. Councillor Barnes was concerned at the number of repeat offenders and asked for this to be revisited it was noted that an annual report on AFAs is provided to Members.

033.8 **RESOLVED** – That:

- i the contents of the report be noted;
- ii it be noted that incident data since the new policy went live in July 2015 supported the Fire Authority decision to provide a rationalised and proportionate response to AFA calls; and
- the outcomes from the work to identify an appropriate methodology on which to base an enhanced level of attendance to specific premises be noted.

034. <u>2015/16 ANNUAL REPORT OF THE ESFRS LOCAL FIREFIGHTERS' PENSION</u> BOARD

- Members considered a report of Councillor Carla Butler, Chair of the Local Firefighters' Pension Board that informed them of the matters considered by the Board during 2015/16. (Copy in Minute Book).
- On 12 February 2015 the Fire Authority approved the establishment of a Local Firefighters' Pension Board to fulfil the requirements of the Public Service Pensions Act 2013. The terms of reference of the Pension Board state that the Board shall report its activities periodically, but at least once each year to the Scrutiny & Audit Panel.
- Members noted that the Board has met on four occasions during the year, holding three Board meetings and one training session. The Board had considered local issues and national issues and their impact on the East Sussex Schemes and had not identified any matters of concern in the administration of the Firefighters' Pension Scheme.

034.4 **RESOLVED** – That:

- i the annual report of the Pension Board for 2015/16 be noted, and Members noted that the Board had not identified any matters of concern in the administration of the Firefighters' Pension Scheme; and
- ii it be noted that a further report will be considered by the Fire Authority at its meeting in June 2016 on the operation of the Pension Board and the position of the Board chair.

035. **EXCLUSION OF THE PRESS AND PUBLIC**

035.1 **RESOLVED** – That item number 036 be exempt under paragraphs 1, 2 and 3, and item number 037 be exempt under paragraph 2 of Schedule 12A to the Local Government Act 1972 as amended by the Local Government (Access to Information) (Variation) Order 2006 and accordingly are not open for public inspection on the grounds that they include (para 1) information relating to any individual, (para 2) information which is likely to reveal the identity of an individual, and (para 3) information relating to the financial or business affairs of any particular person (including the authority holding that information).

The meeting concluded at 10:40 hours

Signed	Chair	
Dated this	day of	2016

Agenda Item No. 046

EAST SUSSEX FIRE AUTHORITY

Panel Scrutiny & Audit

Date 15 September 2016

Title of Report External Auditor's Audit Results Report (ISA 260) and

Statement of Accounts 2015/16

By Chief Fire Officer and Assistant Director Resources /

Treasurer

Lead Officer Duncan Savage, Assistant Director Resources /

Treasurer

Background Papers None

Appendices 1. External Auditor's Audit Results Report (ISA260)

2. 2015/16 Statement of Accounts

3. Letter of representation

Implications

CORPORATE RISK	LEGAL ✓	
ENVIRONMENTAL	POLICY	
FINANCIAL ✓	POLITICAL	
HEALTH & SAFETY	OTHER (please specify)	
HUMAN RESOURCES	CORE BRIEF	
EQUALITY IMPACT ASSESSMENT		

PURPOSE OF REPORT

To present the results of the External Auditor's Results Report (ISA 260) and to report an unqualified opinion on the Authority's 2015/16 Statement of Accounts.

EXECUTIVE SUMMARY

The Authority's External Auditor, Ernst & Young, is obliged to produce an Audit Results Report (ISA 260) which reports formally on the outcome of the audit of the Authority's financial statements. The ISA 260 is appended as Appendix 1, as a separate document

As a result of the audit, Ernst & Young expects to issue an unqualified opinion and has not identified any material issues to be reported to Members. It is pleasing to note that Ernst & Young has made no recommendations for improvement as a result of its audit of the accounts, and raised no specific issues which require a response in the Letter of Representation. A set of accounts is appended as Appendix 2. The letter of representation is appended as Appendix 3.

The ISA 260 confirms that the Authority has in place proper arrangements for securing value for money.

RECOMMENDATION

The Panel is asked to:

- (i) note the External Auditor's Audit Results Report (ISA 260);
- (ii) authorise the Treasurer to sign the formal letter of representation to the External Auditor; and
- (iii) approve the Statement of Accounts for publication.

Agenda Item No. 047

EAST SUSSEX FIRE AUTHORITY

Panel Scrutiny & Audit

Date 15 September 2016

Title of Report Fatal Fire Report 2015 – 2016

By Mark Andrews, Assistant Chief Fire Officer and Director of

Service Delivery

Lead Officer David Kemp, Community Safety Manager

Background Papers CMT Paper, Fatal Fire Review, 2011/12

CMT Paper, Fatal Fire Review, 2012/13 CMT Paper, Fatal Fire Review, 2013/14 CMT Paper, Fatal Fire Review, 2014/15

Appendices Analysis report detailing fatal fires for the previous thirteen

years

Implications

CORPORATE RISK	Yes	LEGAL	
ENVIRONMENTAL		POLICY	
FINANCIAL		POLITICAL	
HEALTH & SAFETY		OTHER (please specify)	
HUMAN RESOURCES		CORE BRIEF	
FQUALITY IMPACT ASSES	SSMENT	·	

PURPOSE OF REPORT To inform Members of details of the fatal fires in East

Sussex which occurred during 2015/16.

EXECUTIVE SUMMARY Fatalities in accidental dwelling fires have significantly

reduced from 10 in 2011/12 to 2 in 2015/16.

The key to reducing risk from fire lies with effective partnership working, innovative preventative activity and data sharing agreements, alongside schemes to identify and work with the most vulnerable groups both within dwellings and

non-domestic premises.

RECOMMENDATION Members are asked to note the report; and that all future fire

deaths and fires involving serious injuries will continue be fully profiled to provide a wider data pool to enable the best

targeting of the preventative activity of the Service.

1. **INTRODUCTION**

- 1.1 The Corporate Management Team (CMT) considers on an annual basis the strategic issues relating to both accidental and deliberate fire deaths through an annual report detailing the previous year's fire deaths. This enables trends to be identified which may assist officers to take a strategic view on performance and interventions to prevent further fatal fires.
- 1.2 The report to CMT evolved following an abnormally high number of fatalities in 2011/12 where there were 12 fatal dwelling fires, 10 of which were as a result of accidental dwelling fires. The average number of fire deaths over the last 13 years remains at 4 fatalities per annum.
- 1.3 Following a detailed investigation into the background of the 2011/12 fatalities a number of actions were taken. These included instigating the annual fire death report, instigating an immediate internal review of serious and fatal fires to identify risk factors which could be immediately remedied and the development of collaborative work with partners and other agencies to identify vulnerable people who may be at significant risk from fire. Collaborative working included development and implementation of a data sharing agreement with East Sussex Adult Social Care and closer ties with the Adult Safeguarding Board and associated working groups.
- 1.4 In 2011/12 there were 12 fatal fires, of which 10 were classed as accidental. In 2012/13 there were 4 fatal fires, of which 3 were classed as accidental. In 2013/14 there were 5 fatal fires of which 4 were classed as accidental, in 2014/15 there was 1 fatality and in 2015/16 there were 3 fatalities of which 2 were as a result of an accidental dwelling fire. Both of these cases are awaiting a Coroner's Inquest.
- 1.5 The first fatal accidental dwelling fire occurred on 20 February 2016 in a flat on the 13th floor at Essex Place, Brighton. The fire appears to have started accidentally but was not related to any known vulnerabilities of the 48 year old victim that a Statutory Authority could have influenced. The rescue was, however, hampered by the victim's weight.
- 1.6 The second fatal accidental dwelling fire occurred on 18th March 2016 in Ringmer, East Sussex, involving an elderly resident who lived alone. This fire started accidentally and the cause is not considered to be linked to any vulnerability factors. A home safety visit had been undertaken in 2011 and whilst the victim was known to Adult Social Care & Health there had been no further contact after that date.
- 1.7 Detailed data on fatal accidental dwelling fires over the previous 14 years can be found as Appendix A. Note: Whilst the report (Appendix A) provides data for the period 2002/3 to 2015/16, the pie charts and graphs relate to the most recent 5 year period.

2. **FINDINGS OF THE REVIEW**

- 2.1 Previous reports to CMT highlighted the collaborative work that was developed post 2011/12 aimed at identifying the higher risk cohort and the key partners who could work with ESFRS to reduce that risk. Important work such as the information sharing agreement with East Sussex Adult Social Care, development of the County Tobacco Partnership aiming at developing innovative ways to support and promote smoking cessation, development of the partnership with the manufacturer and supplier of cooker shut off devices and the provision of fire retardant bedding have all played their part in the significant reduction in fatalities that resulted from accidental dwelling fires in private dwellings from 10 in 2011/12 to 2 in 2015/16.
- 2.2 This work continues with an emphasis on developing collaboration with Clinical Commissioning Groups, the East Sussex Hospital Trust, Sussex Partnership Trust to share data on their highest risk patients and to enable the Service to offer home safety visits to clients before they reach crisis or become injured.
- 2.3 The principle of collaboration between organisations has been demonstrated as being an effective method of targeting high risk clients and this approach continues to be embedded within community safety work across the Service.
- 2.4 The detail of every serious incident, near miss or fatality is examined within the Safer Communities Directorate to identify what happened and to put in measures to prevent, as much as possible, a repeat of such events. Where other agencies are involved they are invited to participate in the discussion or to contribute to it in a non-judgmental atmosphere, and the outcomes are shared with them.
- 2.5 The daily incident summary is analysed on a daily basis to take account of other intelligence such as home safety visit history, previous incident history, Mosaic household information, deprivation level and FSEC (Fire Services Emergency Cover) rating. This continues to lead to case meetings with partners to reduce the risk for some individual households.

3. **EMERGING RISKS**

- 3.1 Business premises are highly regulated in respect of fire safety, and compliance with the relevant regulations falls within the remit of the Business Fire Safety Department. Nonetheless, there have been a number of fatal fires in non-domestic properties, specifically in care and sheltered homes, since 2010 highlighting the overlap between business and community safety because, although a business, these premises are people's homes with many of the risks that individual dwellings hold, for example smoking and cooking.
- 3.2 Officers are working alongside a number of partner organisations to address this issue, specifically large care providers and social housing colleagues, to collect data and target the most vulnerable residents. Alongside this officers are producing an educational DVD which will be circulated across the care sector to assist premises with their evacuation plans and staff training.

- 3.3 Plans are also being developed to provide basic fire safety training to firefighters. This will enable them to carry out basic inspections of business premises in the community to spot and reduce fire safety hazards and educate business owners on key fire safety messages.
- 3.4 Officers will continue to promote the installation of fire sprinklers in premises where there is a business case to do so, for example where residents are vulnerable or unable to immediately react to a fire alarm. Alongside this, officers recognise the benefits of technology enabled care and telecare systems which we will continue to consider as part of the advice we give to care and social housing landlords.

4. **CONCLUSION**

- 4.1 The sustained reduction in accidental dwelling fire fatalities from a high of 10 in 2011/12 to 2 in 2015/16 would indicate that ESFRS is undertaking the correct preventative activity to protect the most vulnerable in our community.
- 4.2 There continues to be no room for complacency, however, and ESFRS will continue to promote key safety campaigns across all Boroughs to increase awareness of risk of fire.
- 4.3 The key to reducing risk lies with effective partnership working which this Service has embraced, with innovative working and data sharing agreements and schemes to identify and work with the most vulnerable groups. This approach is being broadened to include non-domestic premises. ESFRS will continue to seek opportunities to share best practice and to ensure that other organisations understand the benefits of closer collaboration with this Service.
- 4.4 Reviews of serious and fatal incidents have given us a better understanding of the complex factors that contribute to fire deaths and thus this indicates the right steps are being taken to continue to reduce the risk of fires resulting in injury and death.

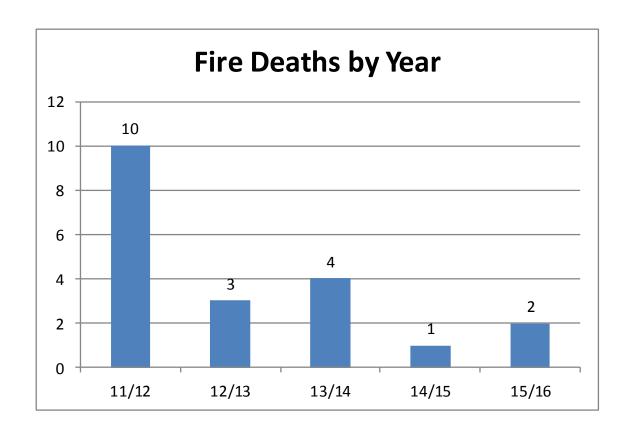
Appendix A

14 years - 02/03 - 15/16

Year	Total
02/03	3
03/04	2
04/05	4
05/06	2
06/07	4
07/08	4
08/09	8
09/10	2
10/11	2
11/12	10
12/13	3
13/14	4
14/15	1
15/16	2
Grand Total	51

most recent 5 years - 11/12 - 15/16

Year	Total
11/12	10
12/13	3
13/14	4
14/15	1
15/16	2
Grand Total	20



14 years - 02/03 - 15/16

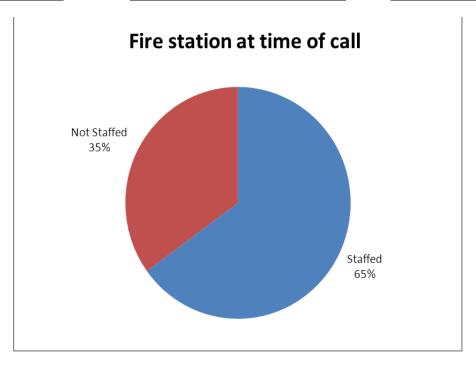
Fire station at time of call	Total
Staffed	36
Not Staffed	15
Grand Total	51

most recent 5 years - 11/12 - 15/16

Fire station at time of call	Total
Staffed	13
Not Staffed	7
Grand Total	20

2015/16 only

Fire station at time of call	Total
Staffed	1
Not Staffed	1
Grand Total	2



14 years - 02/03 - 15/16

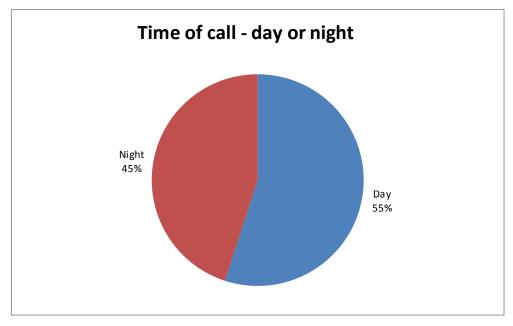
Day or Night Shift	Total
Day	21
Night	30
Grand Total	51

most recent 5 years - 11/12 - 15/16

Day or Night Shift	Total
Day	11
Night	9
Grand Total	20

2015/16 only

Day or Night Shift	Total
Day	1
Night	1
Grand Total	2



14 years - 02/03 - 15/16

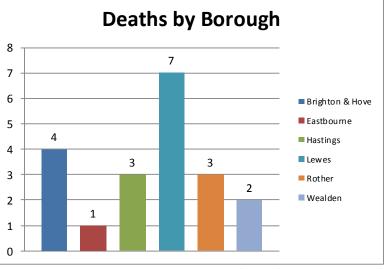
most recent 5 years - 11/12 - 15/16

2015/16 only

Borough		Total
u	Brighton & Hove	13
Urban	Eastbourne	7
) =	Hastings	8
Subtotal:		28
Į.	Lewes	10
Rural	Rother	6
	Wealden	7
Subtotal:		23
Grand Total		51

Borough		Total
us	Brighton & Hove	4
Urban	Eastbourne	1
1	Hastings	3
	Subtotal:	8
	Lewes	7
Rural	Rother	3
Н	Wealden	2
	Subtotal:	12
	Grand Total	20

E	orough	Total
u	Brighton & Hove	1
Urban	Eastbourne	0
) 5	Hastings	0
	Subtotal:	1
le le	Lewes	1
Rural	Rother	0
Н	Wealden	0
	Subtotal:	1
	Grand Total	2



14 years - 02/03 - 15/16

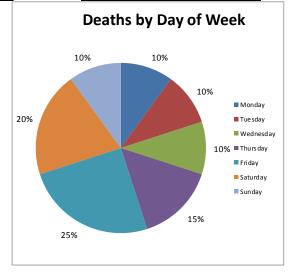
most recent 5 years - 11/12 - 15/16

2015/16 only

Day of Week		Total
	Monday	4
laγ	Tuesday	3
Weekday	Wednesday	7
š	Thursday	9
	Friday	9
Subtotal:		32
W'end	Saturday	13
·. M	Sunday	6
Subtotal:		19
	Grand Total	51

Day of Week		Total
	Monday	2
э́с	Tuesday	2
Weekday	Wednesday	2
š	Thursday	3
	Friday	5
Subtotal:		14
W'end	Saturday	4
, M	Sunday	2
Subtotal:		6
	Grand Total	20

Day of Week	
Monday	0
Tuesday	0
Wednesday	0
Thursday	0
Friday	1
Subtotal:	
Saturday	1
Sunday	0
Subtotal:	
Grand Total	2
	Monday Tuesday Wednesday Thursday Friday Subtotal: Saturday Sunday Subtotal:



14 years - 02/03 - 15/16

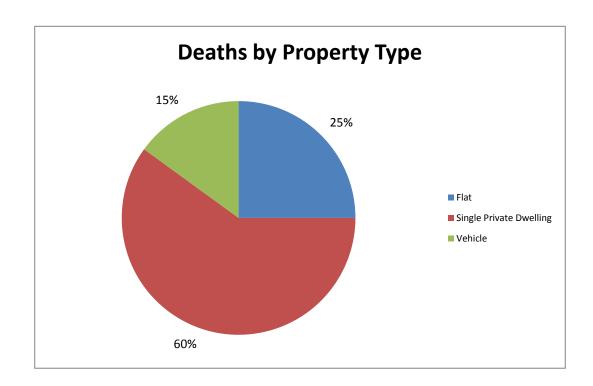
Type of Property	Total
Flat	17
Single Private Dwelling	30
Vehicle	4
Grand Total	51

most recent 5 years - 11/12 - 15/16

Type of Property	Total
Flat	5
Single Private Dwelling	12
Vehicle	3
Grand Total	20

2015/16 only

Type of Property	Total
Flat	1
Single Private Dwelling	1
Vehicle	0
Grand Total	2



14 years - 02/03 - 15/16

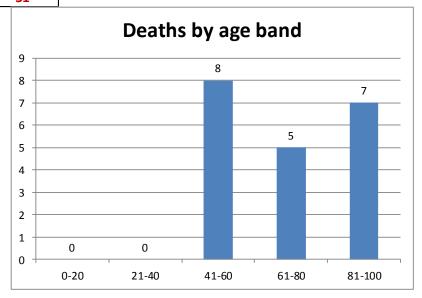
most recent 5 years - 11/12 - 15/16

2015/16 only

Age Band	Total
0-20	2
21-40	2
41-60	16
61-80	17
81-100	13
unknown	1
Grand Total	51

Age Band	Total
0-20	0
21-40	0
41-60	8
61-80	5
81-100	7
Grand Total	20

Age Band	Total
0-20	0
21-40	0
41-60	0
61-80	1
81-100	1
Grand Total	2



14 years - 02/03 - 15/16

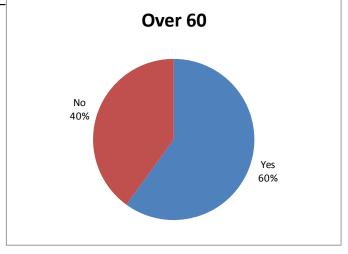
most recent 5 years - 11/12 - 15/16

2015/16 only

Over 60	Total
Yes	30
No	20
unknown	1
Grand Total	51

Over 60	Total
Yes	12
No	8
Grand Total	20

Over 60	Total
Yes	1
No	1
Grand Total	2



14 years - 02/03 - 15/16

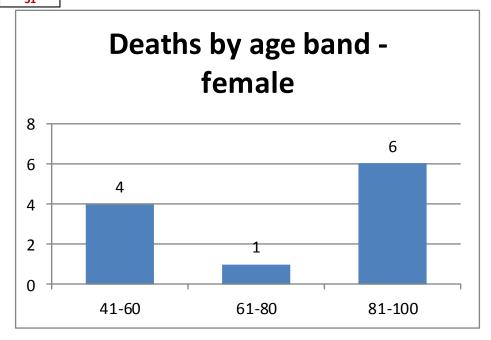
most recent 5 years - 11/12 - 15/16

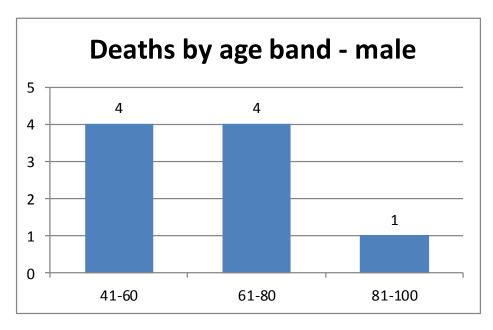
2015/16 only

Age Band by Gender		Total
<u>e</u>	41-60	8
Female	61-80	9
Fe	81-100	10
	Subtotal:	27
	0-20	2
	21-40	2
Male	41-60	8
Σ	61-80	8
	81-100	3
	unknown	1
Subtotal:		24
Grand Total		51

Age Band by Gender		Total
<u>e</u>	41-60	4
Female	61-80	1
Fe	81-100	6
	Subtotal:	11
	41-60	4
e e	61-80	4
Male	81-100	1
	Culatatali	0
Subtotal:		9
	Grand Total	20

Age Band by Gender		Total
<u>e</u> 81-100		1
Subtotal:		1
Male	41-60	1
Subtotal:		1
Grand Total		2





14 years - 02/03 - 15/16

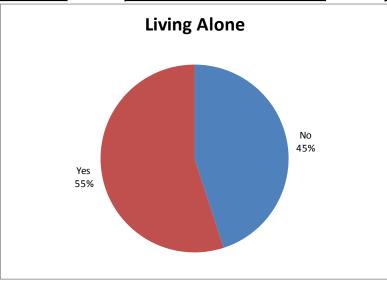
Lived Alone? (By Gender)		Total
o Female		8
Z	Male	11
No		19
Yes	Female	19
×	Male	13
Yes		32
Grand Total		51

most recent 5 years - 11/12 - 15/16

Lived Alone? (By Gender)		Total
No	Female	5
Z	Male	4
No		9
Yes	Female	6
Ж	Male	5
Yes		11
Grand Total		20

2015/16 only

Lived Alone? (By Gender)		Total
No	Female	0
Z	Male	0
	No	
Yes	န္မ Female	
×	Male	1
Yes		2
Grand Total		2



14 years - 02/03 - 15/16

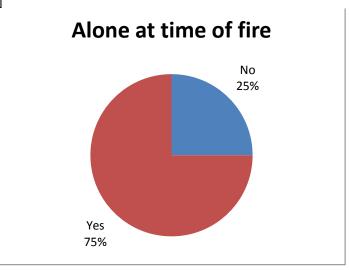
Alone at the time? (By Gender)		Total
No	Female	4
Z	Male	11
	No	15
Yes	Female	22
>	Male	13
		35
Unknown	Female	1
Unk	Male	0
		1
	Yes	36
	Grand Total	51

most recent 5 years - 11/12 - 15/16

Alone at the time? (By Gender)		Total
9	Female	2
Z	Male	3
No		5
S Female		9
×	Male	6
Yes		15
Grand Total		20

2015/16 only

Alone at the time? (By Gender)		Total
No	Female	0
Z	Male	0
	No	0
Female		1
×	Male	1
	Yes	2
	Grand Total	2



14 years - 02/03 - 15/16

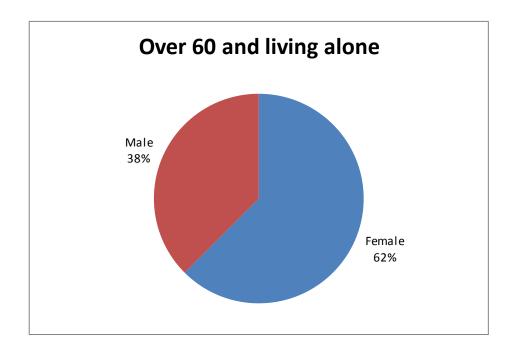
Over 60 and living alone	Total
Female	17
Male	7
Grand Total	24

most recent 5 years - 11/12 - 15/16

Over 60 and living alone	Total
Female	5
Male	3
Grand Total	8

2015/16 only

Over 60 and living alone	Total
Female	1
Male	0
Grand Total	1



14 years - 02/03 - 15/16

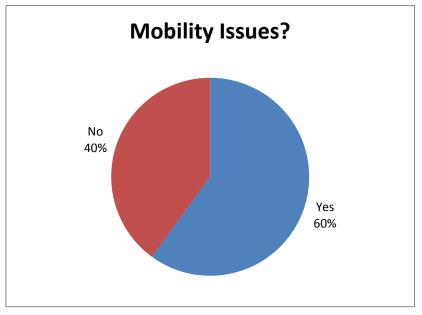
Mobility Issues?	Total
Yes	24
No	27
Grand Total	51

most recent 5 years - 11/12 - 15/16

Mobility Issues?	Total
Yes	12
No	8
Grand Total	20

2015/16 only

Mobility Issues?	Total
Yes	1
No	1
Grand Total	2



14 years - 02/03 - 15/16

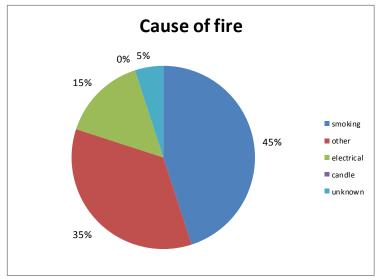
Cause of Fire	Total
smoking	22
other	10
candle	9
electrical	7
cooking	2
unknown	1
Grand Total	51

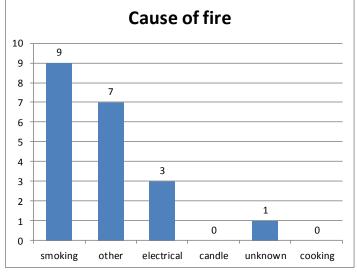
most recent 5 years - 11/12 - 15/16

Cause of Fire	Total
smoking	9
other	7
electrical	3
candle	0
unknown	1
cooking	0
Grand Total	20

2015/16 only

Cause of Fire	Total
smoking	0
electrical	1
other	1
candle	0
cooking	0
unknown	0
Grand Total	2





14 years - 02/03 - 15/16

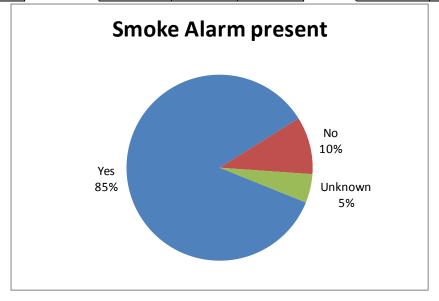
most recent 5 years - 11/12 - 15/16

2015/16 only

Smoke Alarm	Present	Raised Alarm
Yes	35	15
No	10	
Unknown	6	
Grand Total	51	15

Smoke Alarm	Present	Raised Alarm
Yes	17	6
No	2	
Unknown	1	
Grand Total	20	6

Smoke Alarm	Present	Raised Alarm
Yes	1	1
No	0	
Unknown	1	
Grand Total	2	1

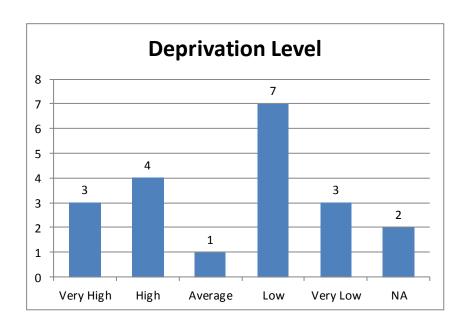


most recent 5 years - 11/12 - 15/16

2015/16 only

Deprivation Level				
Very High	3			
High	4			
Average	1			
Low	7			
Very Low	3			
NA	2			
Grand Total	20			

Deprivation Level				
Very High	1			
High	0			
Average	0			
Low	0			
Very Low	1			
Unknown	0			
Grand Total	2			



Agenda Item No. 048

EAST SUSSEX FIRE AUTHORITY

Panel Scrutiny & Audit

Date 15 September 2016

Title of Report 2015/16 Statement of Operational Assurance

By Mark Andrews, Assistant Chief Fire Officer

Lead Officer Liz Ridley, Assistant Director Planning & Improvement

Background Papers Guidance on statements of assurance for fire and rescue

authorities in England, Department for Communities and

Local Government May 2013.

Statement of Operational Assurance 2014/15

Home Office Progress Report published 5 July 2016 on fire and rescue authorities' compliance with the fire and rescue

national framework for England.

Appendices Appendix 1 – Statement of Operational Assurance 2015/16

Implications

CORPORATE RISK	LEGAL	✓	
ENVIRONMENTAL	POLICY		
FINANCIAL	POLITICAL	✓	
HEALTH & SAFETY	OTHER (please specify)		
HUMAN RESOURCES	CORE BRIEF		
EQUALITY IMPACT ASSESSMENT			

PURPOSE OF REPORT

To present the Statement of Operational Assurance 2015/16

for approval.

EXECUTIVE SUMMARY

The requirement to publish an annual Statement of Operational Assurance is contained within Chapter 3 of the Fire & Rescue National Framework for England. This report presents East Sussex Fire & Rescue Service's fourth Statement of Operational Assurance for approval by the Scrutiny & Audit Panel.

RECOMMENDATIONS

- Members are asked to approve East Sussex Fire & Rescue Service's Statement of Operational Assurance for formal sign off by the Chair of the Scrutiny & Audit Panel and the Chief Fire Officer & Chief Executive.
- 2. Members are also asked to approve that next year's Operational Assurance Statement is included within the Annual Governance Statement report and reflects the new guidance to be issued by the Home Office.

1. **INTRODUCTION**

1.1 Section 21 of the Fire and Rescue Services Act 2004 provides the statutory authority for the Fire and Rescue National Framework for England and requires FRAs to have regard to the Framework in carrying out their functions. In line with this, the Framework requires FRAs to provide assurance on financial, governance and operational matters and, in doing so, they must publish an Annual Statement of Assurance.

2. MAIN ISSUES COVERED BY THE REPORT

- 2.1 The Statement of Assurance is seen by Government as an important measure that will ensure that FRAs provide local scrutiny arrangements and access to a range of information to help communities influence, and be assured of the robustness of, local delivery arrangements.
- 2.2 In May 2013 the Department for Communities and Local Government issued light touch guidance as to what should be contained in Fire Authorities' Operational Assurance Statements.
- 2.3 The responsibility for ensuring compliance with the framework transferred with the move of the FRS to the Home Office and in July 2016 the Home Secretary provided their first report. The report states that 'The Home Secretary is satisfied that all are compliant, however there were some areas where practice could be strengthened'. She went onto say that further guidance on expectations would be forthcoming. CFOA has also issued some guidance on the future direction of the reporting on Operational Assurance.
- 2.4 East Sussex Fire & Rescue Service's Annual Statement of Operational Assurance has taken note of the original guidance and is attached as Appendix 1. Changes will be made to reflect any additional guidance issued in the future by the Home Office, and CFOA, and will be included in next year's statement.

3. LEGISLATIVE CONTEXT/NATIONAL/REGIONAL POSITION

- 3.1 The requirement to publish an annual Statement of Operational Assurance is contained within Chapter 3 of the Fire and Rescue National Framework for England. Section 21 of the Fire and Rescue Services Act 2004, requires that Fire and Rescue Authorities pay heed to the requirements of the Framework.
- 3.2 The Statement of Assurance is used as a source of information on which the Secretary of State bases a biennial report under Section 25 of the Fire and Rescue Services Act 2004. The report, laid in the July 2016, reported that The Home Secretary is satisfied that all 46 Authorities are compliant, however there were some areas where practice could be strengthened. An extract from the report reads as follows:

The Home Secretary is satisfied that all are compliant, however there were some areas where practice could be strengthened and the Home Office will liaise with fire and rescue authorities to explore where further guidance in relation to this would be valuable. These include the consistency of approach on how fire and rescue authorities present their evidence and the information in support of their Assurance Statement; sign off by the Chair of the fire and rescue authority; the timing of revisions to integrated risk management plans; the provision of more information on how National Resilience requirements were being met; and the value of highlighting examples that could constitute best practice on assurance statements such as including a table of the requirements of the National Framework with references to evidence showing how each requirement was met.

4. **CURRENT POSITION FOR ESFRS**

4.1 This is ESFRS's fourth Statement of Operational Assurance and has been written in order to ensure compliance with the DCLG's original guidance document (now Home Office). The original guidance indicated what should be included in statements of assurance, but it allows FRSs the flexibility to tailor the format and presentation. The guidance states that 'it is for fire and rescue authorities to decide how to best present the information with their communities in mind'.

It is proposed that future Operational Assurance Statements are written taking into account all new guidance issued and will be included within the Annual Governance Report to reduce duplication and to cut down on the number of reports published by the Service thus making it easier for the public to ensure that we are being transparent.

5. **IMPACT ASSESSMENT**

5.1 **POLITICAL**

5.1.1 The production of the Statement of Assurance ensures that we comply with the requirements set out in the Fire and Rescue National Framework for England. The DCLG guidance document (now Home Office) requires that the Statement of Assurance is signed off by an elected member of the relevant authority who is able to take responsibility for its contents. The guidance states that it is up to the individual authority to ensure that this is done by an appropriate person (or persons) who can approve it on behalf of the authority.

5.2 **LEGAL**

5.2.1 The production of the Statement of Assurance ensures that we comply with the requirements set out in the Fire and Rescue National Framework for England.

6. **CONCLUSIONS**

6.1 The requirement to publish an Annual Statement of Operational Assurance is contained within Chapter 3 of the Fire and Rescue National Framework for England. Section 21 of the Fire and Rescue Services Act 2004, states that Fire and Rescue Authorities must pay heed to the requirements of the Framework; the publication of this Statement ensures we meet that requirement. As and when further guidance is made available from the Home Office and CFOA we will ensure that future reports comply with the detailed requirements.

Agenda Item No. 049

EAST SUSSEX FIRE AUTHORITY

Panel Scrutiny & Audit

Date 15 September 2016

Title of Report 2016/17 First Quarter Performance Report

By Dawn Whittaker, Deputy Chief Fire Officer

Lead Officer Liz Ridley, Assistant Director Performance & Improvement

Background Papers Performance Indicators Review, Fire Authority 16 June 2016

Appendices Appendix A – Quarter 1 Performance Report 2016/17

Appendix B – Exceptions Report

Implications

CORPORATE RISK	✓	LEGAL	
ENVIRONMENTAL		POLICY	
FINANCIAL		POLITICAL	
HEALTH & SAFETY		OTHER (please specify)	
HUMAN RESOURCES		CORE BRIEF	
EQUALITY IMPACT ASSESSM	/IENT		

PURPOSE OF REPORT To present the first quarter performance results 2016/17.

EXECUTIVE SUMMARY This report provides the Panel with a summary of service

performance information for the first quarter of 2016/17.

RECOMMENDATIONS: The Scrutiny & Audit Panel is asked to:

- Note the 2016/17 performance results for Quarter 1 as set out in the report and complementary separate Appendix A, and consider the information included within the exceptions report set out as Appendix B;
- ii. Note that the report contains the rationalised list of indicators, as agreed by the Fire Authority in June 2016

 the list has been reduced to 21 indicators from 36;
- iii. Note that it was also agreed at the June Fire Authority meeting that the majority of the indicators would be reported as measures and that targets would only be reported for two indicators; and
- iv. Note that the list will be reviewed again once more is known about the Home Office proposals for a national indicator set as part of the ongoing Fire reform.

1. **INTRODUCTION**

- 1.1 This report contains the Quarter 1 performance indicator results for 2016/17, compared with the results for the same quarter in 2015/16, and provides projected year-end results.
- 1.2 Where indicators are showing a decline of greater than 10% in performance against the same quarter in the previous year, explanations from the relevant responsible officers form the exception report.

2. MAIN ISSUES

- 2.1 In comparison to last year, the overall performance for the first quarter of 2016/17 has improved, particularly in fires; three indicators are reporting a greater than 10% decline in performance against quarter 1 in 2015/16 and so will have additional commentary in the exceptions report these are:
 - (i) The number of Home Safety Visits completed
 - (ii) The number of working days / shifts lost due to sickness
 - (iii) The number of RIDDOR incidents
- 2.2 The Fire Authority has five priority areas for 2016/17:
 - (i) Percentage of HSVs to the vulnerable members of our community
 - (ii) Number of accidental fires in dwellings
 - (iii) Percentage of accidental dwelling fires confined to room of origin
 - (iv) Percentage reduction of automatic fire alarms
 - (v) Number of working days/shifts lost due to sickness absence for all staff



East Sussex Fire & Rescue Service Performance Results Quarter 1 2016/17

AUGUST 2016

Our Purpose

We make our communities safer

We will do this by:

Commitment 1: Delivering high performing services

Indicator No.	How will we measure performance?	2015/16 Q1 result	National Quartile Position 2014/15	2016/17 Quarter 1	2016/17 Projected Year end	Direction of travel from 2015/16 result
6	Total number of incidents attended	2,175	2 nd Q 3 rd Q Worst	2,156	8,648	Improved
7	Number of deaths in primary fires	0	2 nd Q 3 rd Q Worst	0	0	Same
8	Number of injuries in primary fires	13	2 nd Q 3 rd Q Worst	8	32	Improved
1 Priority	No of accidental dwelling fires	149	2 nd Q 3 rd Q Worst	110	441	Improved
9	Number of primary fires	330	2 nd Q 3 rd Q Worst	271	1,087	Improved
10	Number of deliberate fires	187	2 nd Q 3 rd Q Worst	174	698	Improved
11	No of Industrial and Commercial fires	50	2 nd Q 3 rd Q Worst	40	160	Improved

12. First arriving appliance	2014/15 England Average	2014/15 FG2 Average	Q1 2015/16	Q1 2016/17	2016/17 Projected year end
Primary fires	8.7	10	7.2 (326)	7.8 (281)	7.8 (281)
Dwellings	7.7	9.1	6.8 (161)	7.0 (118)	7.0 (118)
with any casualty or rescue	7.5	N/a	5.1 (10)	7.2 (4)	7.2 (4)
without any casualty or rescue	7.8	N/a	6.9 (151)	6.9 (114)	6.9 (114)
Other Buildings	8.5	9.6	7.3 (79)	8.2 (64)	8.2 (64)
Other Residential	7.8	N/a	6.0 (19)	7.9 (11)	7.9 (11)
Non-Residential	8.5	N/a	7.7 (60)	8.2 (53)	8.2 (53)
Road Vehicles	9.7	10.7	7.7 (60)	8.3 (67)	8.3 (67)
Other (Outdoor Primary)	10.4	11.7	8.2 (26)	9.3 (31)	9.3 (31)
RTC Persons trapped / enhanced	N/a	N/a	8.4 (55)	9.3 (66)	9.3 (66)
13. Second arriving appliance	2014/15 England Average	2014/15 FG2 Average	Q1 2015/16	Q1 2016/17	2016/17 Projected year end
13. Second arriving appliance Primary fires	England	FG2	Q1 2015/16 10.1 (228)	Q1 2016/17 11.1 (157)	Projected year
•	England Average	FG2 Average			Projected year end
Primary fires	England Average N/a	FG2 Average N/a	10.1 (228)	11.1 (157)	Projected year end 11.1 (157)
Primary fires Dwellings	England Average N/a N/a	FG2 Average N/a N/a	10.1 (228) 9.2 (143)	11.1 (157) 10.1 (93)	Projected year end 11.1 (157) 10.1 (93)
Primary fires Dwellings with any casualty or rescue	England Average N/a N/a N/a	FG2 Average N/a N/a N/a	10.1 (228) 9.2 (143) 8.5 (10)	11.1 (157) 10.1 (93) 11.4 (4)	Projected year end 11.1 (157) 10.1 (93) 11.4 (4)
Primary fires Dwellings with any casualty or rescue without any casualty or rescue	N/a N/a N/a N/a N/a	FG2 Average N/a N/a N/a N/a	10.1 (228) 9.2 (143) 8.5 (10) 9.2 (133)	11.1 (157) 10.1 (93) 11.4 (4) 10.0 (89)	Projected year end 11.1 (157) 10.1 (93) 11.4 (4) 10.0 (89)
Primary fires Dwellings with any casualty or rescue without any casualty or rescue Other Buildings	N/a N/a N/a N/a N/a N/a N/a	FG2 Average N/a N/a N/a N/a N/a	10.1 (228) 9.2 (143) 8.5 (10) 9.2 (133) 10.5 (60)	11.1 (157) 10.1 (93) 11.4 (4) 10.0 (89) 11.4 (48)	Projected year end 11.1 (157) 10.1 (93) 11.4 (4) 10.0 (89) 11.4 (48)
Primary fires Dwellings with any casualty or rescue without any casualty or rescue Other Buildings Other Residential	N/a N/a N/a N/a N/a N/a N/a N/a N/a	FG2 Average N/a N/a N/a N/a N/a N/a N/a N/a N/a	10.1 (228) 9.2 (143) 8.5 (10) 9.2 (133) 10.5 (60) 9.5 (19)	11.1 (157) 10.1 (93) 11.4 (4) 10.0 (89) 11.4 (48) 8.1 (6)	Projected year end 11.1 (157) 10.1 (93) 11.4 (4) 10.0 (89) 11.4 (48) 8.1 (6)
Primary fires Dwellings with any casualty or rescue without any casualty or rescue Other Buildings Other Residential Non-Residential	N/a	FG2 Average N/a	10.1 (228) 9.2 (143) 8.5 (10) 9.2 (133) 10.5 (60) 9.5 (19) 11.0 (41)	11.1 (157) 10.1 (93) 11.4 (4) 10.0 (89) 11.4 (48) 8.1 (6) 11.9 (42)	Projected year end 11.1 (157) 10.1 (93) 11.4 (4) 10.0 (89) 11.4 (48) 8.1 (6) 11.9 (42)

We make our communities safer

We will do this by:

Commitment 2: Educating our communities

Indicator No.	How will we measure performance?	2015/16 Q1 result	National Quartile Position 2014/15	2016/17 Quarter 1	2016/17 Projected Year end	Direction of travel from 2015/16 result
2 Priority	% of Home Safety Visits to vulnerable people	91.8%	This is an ESFRS indicator only, no National data is available for comparison	90.6%	90.6%	Declined
14	Undertake 10,000 Home Safety Visits	2,355	2 nd Q 3 rd Q Worst	2,123	8,515	Declined
15	Number of safe and well visits conducted	N/a	This is an ESFRS indicator only, no National data is available for comparison	199	798	New Indicator
16	Inspections of high risk premises completed	62	2 nd Q Best Worst	81	325	Improved
17a	Number of business safety engagement events	N/a	This is an ESFRS indicator only, no National data is available for comparison	6	24	New Indicator
17b	Number of attendees at business safety engagement events	N/a	This is an ESFRS indicator only, no National data is available for comparison	56	225	New Indicator

We make our communities safer

We will do this by:

Commitment 3: Developing a multi-skilled, safe and valued workforce

Indicator No.	How will we measure performance?	measure Q1 National Quartile Position Q		2016/17 Quarter 1	2016/17 Projected Year end	Direction of travel from 2015/16 result
3 Priority	The number of working days/shifts lost due to sickness not to exceed 7.5 per employee	2.1	This is an ESFRS indicator only, no National data is available for comparison	2.4	9.6	Declined
18	Number of RIDDOR incidents	1	2 nd Q 3 rd Q Worst	2	8	Declined
19	Number of workplace reported accidents / injuries	37	2 nd Q 3 rd Q Worst	19	76	Improved

We make our communities safer

We will do this by:

Commitment 4: Making effective use of our resources

Indicator No.	How will we measure performance?	2015/16 Q1 result	National Quartile Position 2014/15	2016/17 Quarter 1	2016/17 Projected Year end	Direction of travel from 2015/16 result
4 Priority	A 32% reduction of automatic fire alarms (AFA) from the base year result of 2009/10	-43.6%	This is an ESFRS indicator only, no National data is available for comparison	-38.3%	-38.3%	Declined
20	% of AFA mobilised calls to properties covered by the RRO that were classified as a primary fire	3.9%	This is an ESFRS indicator only, no National data is available for comparison	2.3%	2.3%	Improved
21	% of AFA calls challenged by SCC	10.2%	This is an ESFRS indicator only, no National data is available for comparison	10.2%	10.2%	Stayed the same
5 Priority	% of accidental dwelling fires confined to room of origin	94.6%	This is an ESFRS indicator only, no National data is available for comparison	94.5%	94.5%	Declined

SCRUTINY & AUDIT PANEL 15 SEPTEMBER 2016 AGENDA ITEM NO. 049 APPENDIX B

EXCEPTIONS REPORT – QUARTER 1 2016/17

Indicator	Commentary	Actions to be taken
7. Home safety visits completed	In Q1 2016/17 2,123 HSVs were completed, this gives a projected year end result of 8,515, against a target of 10,000. There were 2,355 completed in the same quarter of 2015/16. The crews completed 1,405 in 2015/16 and 997 in 2016/17.	Historically crews perform lower numbers of HSVs in quarter 1, this situation is expected to improve throughout the remainder of the year. The central community safety team have also contacted station crews to ascertain if there is a HSV paperwork backlog that are yet to be entered on the system. AD Safer Communities
5. The number of working days/shifts lost due to sickness	In Q1 2016/17 2.4 shifts were lost per employee due to sickness, this gives a projected year end result of 9.6 against a target of 7.5 This was 2.0 in Q1 2015/16. Please note the table overleaf for further detail	A trend analysis was reviewed at CMT which did not identify an overall trend of sickness absence. However, a review of attendance management will be undertaken together with further analysis of causal reasons for absence.
29. Number of RIDDOR incidents	In Q1 2016/17 there were two RIDDOR incidents (one in the same period in the previous year)	No trends have been identified but the Team will continue to monitor reports as they are submitted. Health and Safety Team Leader

Table 1: Breakdown of Sickness Q1 2015/16 against Q1 2016/17

Q1	WT 15/16	WT 16/17	% diff	Control 15/16	Control 16/17	% diff	Support 15/16	Support 16/17	% diff	Total 15/16	Total 16/17	% diff
Long term	578.5	522.5	-9.7%	55	93.5	70.0%	151	167	10.6%	784.5	783	-0.2%
Medium term	122.5	130.5	6.5%	0	54.5	5400.0%	28	85	203.6%	150.5	270	79.4%
Short term	137	205.5	50.0%	31	21.5	-30.6%	60.5	99	63.6%	228.5	326	42.7%
Total	838	858.5	2.4%	86	169.5	97.1%	239.5	351	46.6%	1163.5	1379	18.5%
Staff	384	361	-6.0%	43	49	14.0%	148	158	6.8%	575	568	-1.2%
Av no of days	2.2	2.4	9.0%	2.0	3.5	73.0%	1.6	2.2	37.3%	2.0	2.4	20.0%

Agenda Item No. 050

EAST SUSSEX FIRE AUTHORITY

Panel Scrutiny & Audit

Date 15 September 2016

Title of Report 2016/17 First Quarter Corporate Projects & Programmes Report

By Liz Ridley, Assistant Director Planning & Improvement

Lead Officer Helen George, Projects Co-ordinator

Background Papers None

Appendices Report attached as Appendix 1.

Implications

CORPORATE RISK	LEGAL					
ENVIRONMENTAL	POLICY					
FINANCIAL	POLITICAL					
HEALTH & SAFETY	OTHER (please specify)					
HUMAN RESOURCES	CORE BRIEF					
EQUALITY IMPACT ASSESSMENT						

EXECUTIVE SUMMARY

- SHQ Relocation project has just appointed a Programme Manager and team from ESCC. A major checkpoint is being established and plans will be put through an assurance process.
- SCC project is expecting realignment of project staffing.
- IMD Transformation is about to sign contract with telent. The programme will now assess governance structures going forward.
- Bridging the Savings Gap training strategy being developed
- ESMCP (ESN) still waiting for aspects of national governance to be clarified.
- RPE Business case coming to CMT in August
- Firewatch Phase 1 finishing soon. Firewatch Phase 2 being rescoped in light of CMT's recent comments
- CRM for Community Safety on hold
- Procurement cards manager awaiting extra BAU temporary resource to give time to progress this.

RECOMMENDATION

The Panel is asked to note the contents of the report

Agenda Item No. 051

EAST SUSSEX FIRE AUTHORITY

Panel Scrutiny & Audit

Date 15 September 2016

Title of Report 2016/17 First Quarter Corporate Risk Register Review

By Assistant Director Resources/Treasurer

Lead Officer Daryll Luxford, Corporate Risk Support & Security Compliance

Manager

Background Papers 2015/16 4th Quarter Corporate Risk Register Review –

26 May 2016

Appendices Appendix A Corporate Risk and RAID Log Scoring Matrix

Appendix B Corporate Risk and Project Scoring Identifiers

Appendix C Risk Management Mitigation Plans Appendix D Corporate Project Risk Report

Implications

CORPORATE RISK	$\sqrt{}$	LEGAL	
ENVIRONMENTAL		POLICY	
FINANCIAL		POLITICAL	
HEALTH & SAFETY		OTHER (please specify)	
HUMAN RESOURCES		CORE BRIEF	
EQUALITY IMPACT ASSESSI	MENT		

PURPOSE OF REPORT To report on the latest quarterly review of Corporate Risk and

agree outcomes

EXECUTIVE SUMMARY

1. The Authority has in place established procedures for ensuring that risks are identified and managed for all corporate projects. All high risks identified in the Project RAID (Risks, Assumptions, Issues, and Dependencies) logs are now collated and reported to Corporate Management Team (CMT) to allow any themes to be identified and risks to be escalated to the corporate risk log as necessary. At Appendix D is a summary of the Project RAID Log for all risks scored 9 or above, these are assessed against a 4x4 scoring matrix as shown in Appendix A with the score identifiers at Appendix B. Reviews of corporate risks take place on a quarterly basis. The latest series of meetings with Corporate Risk Owners was carried out during July 2016 to update risk management action plans and review the position of each risk as shown at Appendix C.

- 2. The internal audit review of Risk Management Arrangements and the recent Health and Safety Peer review have both recommended that risk registers are put in place below corporate level and subsequent approval was agreed at May 2016 CMT. Directorate / functional risks scored 9 or above will be reported to CMT from the 2nd quarter report.
- 3. All project plans (Appendix D) have been reviewed. All project plans have been reviewed to ensure the Pre-Scoring and post scores are appropriate. Some post scores are expected to reduce during the next quarter (quarter 2) as mitigations implemented start to impact on risks identified.

RECOMMENDATION

The Panel is recommended to approve the latest Corporate Risk Register

CORPORATE RISK REGISTER

Scoring for all Corporate Risk and Project RAID Log

Appendix A

Impact / Likelihood	Moderate (1)	Significant (2)	Serious (3)	Critical (4)
Certain/High (4)	Tolerable (4)	Moderate (8)	Substantial (12)	Intolerable (16)
Very Likely (3)	Tolerable (3)	Moderate (6)	Moderate (9)	Substantial (12)
Low (2)	Tolerable (2)	Tolerable (4)	Moderate (6)	Moderate (8)
Unlikely (1)	Tolerable (1)	Tolerable (2)	Tolerable (3)	Moderate (4)

Corporate Risk and Project Raid Log Scoring Matrix

Appendix B

Impact	Moderate	Significant	Serious	Critical
Score	1	2	3	4
Financial	≤ £10000	≤£100,000	≤£500,000	≤ £1 m +
Reputation	Damage limitation	Adverse Publicity	Poor Reputation	Complete loss of public confidence
Service Delivery	would not restrict or service delivery	Could restrict service delivery or restrict delivery of an ESFRS Aim	Could stop service delivery or unable to delivery an ESFRS Aim	Would affect service delivery to our communities

Likelihood	Unlikely	Low	Very Likely	Certain/High
Score	1	2	3	4
Frequency	One case reported in the past 5 years, may re-occur if only limited control measures are not applied and continued monitoring. (0-24% probability)	One or two cases in the past 2 - 5 years or may re occur if not all control measures are not applied within the next 6 months and continue to monitor. (25-49% probability)	One or two cases in past 2 years or expected to happen if controls measures are slow being applied, and failure to monitor progress. (50-74% probability)	One or more cases in past 2 years. Failure to take immediate action could impact on service delivery or safety of personnel/ community. (75-100% probability)

Appendix C

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
1 Financial	4	Failure to identify and deliver savings to meet the expected funding gap to 2020/21 and the uncertainty of future funding resulting in an unclear service delivery model for the future.	4	4	16	 MTFP updated as part of the Feb CFA budget report and now shows balanced budget to 2019/20 with further savings of £0.3m in 2020/21. Assumes 1.94% p.a. increase in Council Tax and delivery of all agreed savings including Riding at Standard. Government is due to commence consultation on 100% devolution of Business Rates soon – situation being monitored alongside impact of budget announcements which impact on BR income i.e. extension of small business rate reliefs, RPI to CPI and move for all schools to become academies. Delivery of savings monitored on a monthly basis ensuring savings delivery now subject to closer monitoring and latest position built into revised MTFP. Opportunities for further collaboration with public sector partners being examined especially around support services and through Emergency Services Collaboration Project. Bridging the Savings Gap project underway to ensure delivery of Riding at Standard and other associated savings. Work is also being carried out to review the management of the operational pay budget and the pressures identified through budget monitoring. Ongoing work through ESFOA seeking to maximise income from council tax and non- domestic rates. Business Rate Pool approved by CLG – monitoring risk posed by NHS Trusts seeking charitable relief and also impact of other changes to BR including 2017 valuation on prospects for Pool beyond 2016/17. Improvement and Efficiency reserve established to fund transformation initiatives. Work started on the review of the IRMP will more clearly link service provision to the public, to the MTFP. 	3	a	9 (Moderate)	CFO	AD Resources/ Treasurer

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
2 Technology	4	1) Sustained Technological failure, and 2) Failure to deliver organisational change as a result of a lack of a robust and effective modern ICT infrastructure and a lack of supported infrastructure and systems through fewer and less skilled staff. 3) Failure to manage effective transition to new outsourced service	4	4	16	 IMD transformation has in scope suppliers who can offer a suitable Disaster Recovery data centres and levels of technological and human resource resilience that will mitigate this service risk to an appropriate level for ESFRS. Ongoing and revised assessment, clarity and understanding of the underlying business processes and their relative business criticality will drive the exact nature of the offered solution, service levels and recovery approach. The longer-term process will refine and embed as the organisation matures and builds a complete view of the business output specifications. IMD Transformation will introduce external resource capacity and knowledge to run our technological estate. ESFRS will drive growth and transformation by introducing new levels of portfolio, programme and IT Governance. The PMO IMD client will ensure organisational change will be aligned to corporate strategy, based on our agreed understanding of the business and informational needs in the future. Future growth and transformation investment in the business and IT will be facilitated by our PMO and IMD client through managed services from our portfolio of suppliers and partners' The IMD Transformation Programme has continued to progress with support from external consultants Spirit Acuity. Approval for contract award is being sought from Urgency Panel on 7 July 2016 with service transition expected in Q4 2016. As part of the 2016/17 Budget Report, Members agreed to set up a £2m IMD Transformation reserve to fund the anticipated one off costs of implementation. 	4	3	12 (Substantial)	DCFO	AD Resources / Treasurer

	5) The transition of ownership of the project to the new DCFO. AD Resources / Treasurer is overseeing the project and working closely with the IMD Manager and the Strategic Programme Support Officer is continuing in his role. CMT has agreed to additional support from Spirit Acuity through Phase 4 (due diligence, transition and implementation) funded from the IMD Transformation reserve. 6) The project team is continuing to engage closely with both the preferred supplier and CMT through the Due Diligence process to and any outstanding issues will be resolved prior to contract signature. 7) An Outline IMD Strategy has been developed and will be progressed to a final version ready for Member approval in Q1 2017. This will set out how the Authority will deliver against its ambition for IMD transformation and include high level costings to allow overall investment decisions to be made. 8) Internal capacity being managed carefully during transition planning phase and supplemented with external resources where necessary to maintain core business functions. 9) Work progressing toward establishment of new client management function and associated governance arrangements.	
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Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
3 Partnership	4	1) Sussex Control Centre does not deliver effective mobilisation service or planned savings 2) Failure to deliver full specification for MOBs leading to contractual issues.	4	4	16	Remsdaq Project 1) The Factory Acceptance Test (FAT) is now preceded by a joint pre-FAT program overseen by the SCC Implementation Project Board. 2) The Site and User Acceptance Tests will ensure specification and functionality tested after installation at Hayward's Heath. 3) Any milestone payments are not triggered until pass of acceptance tests and these are staged. 4) SCC 'go live' will be subject to sign off by both Senior Users, and the 'switchover' operation will be agreed and validated by SCC Implementation Project Board 5) Regular monthly progress and financial reporting to SCC Implementation Board, both Management Teams and the Executive Governance Board. 6) Savings target for 2016/17 revised to reflect delays in implementation. 7) Additional resources made available due to extension of the go live date to ensure interim service is maintained in accordance with Section 16, these costs are shared. 8) The project has been subjected to scrutiny by internal audit — report findings are now progressed and monitored by the SCC Implementation Board. Business as usual 1) Section 16 and SCC Concept of Operations provide the strategic operational framework for the SCC, including arrangements under which call handling, mobilisation and related functions are discharged. 2) SCC Operational Governance Board, made up of reps of Services, meets monthly to ensure that the Joint Control is effective, efficient and resilient and that any issues and areas of concern are reported and acted upon. 3) ESFRS specific operational and performance matters considered at the monthly Response & Resilience management team meetings.	4	3	12 (Substantial)	ACFO	AD Operational Support & Resilience

	4) SCC staffing is a significant concernCurrent establishment levels and working arrangements are challenging for staff and managers. There is higher sickness levels and potential increase in attrition. Current arrangements include fixed term contracts with a review once 4i is installed, tested and operational		
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Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
4 Leadership	4	Failure to effectively lead/manage the Service through a period of significant change as a result of lack of corporate capacity, management competences and poor staff engagement	4	3	12	1) Planning & Improvement AD and Communications and Marketing Manager to review staff communication strategy to promote effective organisational communications. Completed and will be reviewed 2016 following restructure. 2) Members are to consider proposals for a Talent Management Scheme to address and support mitigations on future risks and succession planning. Now part of the restructure programme – ACFO to develop with Head of HR&OD 3) Restructure to address a number of strategic roles and management structures. 2 New POs started June 2016 (DCFO & ACFO). Restructure complete and reported to Members. 4) Develop a strategy to ensure a clear, effective sustainable framework for future staff engagement. 5) Develop an Organisational Development Strategy which will include leadership as a key component alongside a workforce and career development plan	3	3	9 (Moderate)	CFO	ACFO

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
5 Community	1	1) Longer term Industrial Action (IA) could impact on the ability to deliver services, impact on the relationships with the workforce and has the potential for reputational damage 2) Short to medium term impact of Action Short of Strike (ASOS)	3	3	9	 Constant Review of Business Continuity and Industrial Action Contingency Plans. Maintain consultation and negotiation with trade unions. Maintain effective communications. Monitor impact on service delivery. CFA advised of progress through regular updates and impact of changing FBU strategy on contingency plans and resilience. Impact on training delivery, L&OD have provided additional resource to manage training plans and expected backlog during and following IA/ASOS periods. Additional communications resource provided to reassure the community and inform staff. The FBU has made a legal challenge to the FPS 2015 on the grounds of potential discrimination – the NJC is managing the claim on behalf of all FRS on a shared cost basis and has signed up Bevan Brittan LLP to act on our collective behalf. FBU have advised no industrial action to take place under this dispute until at least June 2017. BC plans to be reviewed in early 2016 is underway 		3	6 (Moderate)	ACFO	AD Operational Support & Resilience

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
6 Communica -tion	3	Key stakeholders including the public, members, employees and partners are insufficiently informed about/engaged in the difficult choices the Authority faces.	S	3	9	1) Stakeholder and staff have been encouraged to participate in pre engagements sessions regarding the development of the new IRMP 2) Utilisation of various modes of communication from face to face, twitter hard copy and online responses in line with the communication strategy. 3) Presentation given at the Members Seminar to inform members of the plans for public consultation and discussed at the IRMP development day held with CMT to ensure consultation activity is affordable and appropriate 4) The pre plan will be subject to public and staff consultation planned for Sept 2016 as part of the IRMP process, Stakeholder and staff have been encouraged to participate in pre engagements sessions regarding the development of the new IRMP	2	2	4 (Moderate)	DCFO	AD Planning & Improvement
7 Resource	6	Failure to maintain staff morale, motivation and attitudes will adversely impact on service delivery/ performance and the ability to successfully deliver service transformation/ ESFRS change programme.	4	3	12	 Support middle and senior managers to ensure regular meetings and engagement with staff and to review feedback from managers. Ensure staff representative bodies are engaged with and informed of emerging issues. Continue to develop communication opportunities including where appropriate, social media and new Communications Strategy. Staff briefings and engagement for SHQ relocation proposals. Trade Union and management briefings in place October 2015 to discuss outcome of local consultations on savings proposals – proposals accepted by trade unions and implementation being considered for April 2016. Bridging the savings board is now managing implementation with engagement of staff and rep bodies from 1st April 2016. Develop a strategy to ensure a clear, effective sustainable framework for future staff engagement. 	3	3	6 (Moderate)	ACFO	СМТ

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
8 Leadership/ Resource	4,5,7	Failure to successfully relocate ESFRS to shared Headquarters building with Sussex Police in Lewes	ω	3	9	1) CFA Members and SHQ staff have been fully sighted on the reasons (opportunity and cost) for this relocation and the likely changes regarding technology and dispersal locations. 2) Funding for the one off costs of the project both revenue and capital has been agreed 3) Following 18 June 2015 an implementation plan was agreed by CMT and this will mitigate many of the risks, such as security, travel plan, technology, communications and timescales. 4) The Strategic Programme Support Officer has been working to ensure linkages / dependencies between SHQ Project and IMD Transformation are identified and managed. 5) Programme management and associated resources have been provided by ESCC. 6) Programme Board is in place and governance structures have been reviewed to ensure their effectiveness. 7) The CFA and PCC are committed to this collaboration project. Joint management team meetings between ESFRS and Sussex Police have been put in place.	Э	2	6 (Moderate)	DCFO	AD Resources / Treasurer

Number / Reference	Aligned to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigation scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
9 Health & Safety	1,2,4,7	1) An incident occurring which could impact on the health and safety of our staff, specifically in a training environment and the risk of HSE intervention 2) The Authority's H&S approach is not effectively targeting the highest risk areas	4	3	12	 An action plan has been put in place in response to the Accident Investigation report which will reduce the risk of recurrence of heat stress incidents in a training environment. Changes to the management and staffing structure at CMT and STC agreed and started. The Authority has agreed to £300k capital scheme to make improvements to its 4 BA Chambers (incl those at STC). Broader changes are being made to our H&S approach following a H&S Peer Review carried out by a third party. Restructure of H&S Team approved by CMT. Changes to governance structures for Health, Safety & Welfare approved by CMT and being put in place 	3	2	6 (Tolerable)	DCFO	AD Training & Assurance

Number / Reference	Aligne d to ESFRS Aim	Strategic Risk	Pre Impact Score	Pre Likelihood Score	Pre mitigatio n scoring	Key Actions	Post Impact Score	Post Likelihood Score	Current Status (by colour) and total score (Previous score shown)	Corporate Risk Owner	Risk Delivery Manager
10 Operation Tin	1,2,4,7	Potential risk to the health & wellbeing of current and ex- employees and their families relating to the presence of asbestos identified at the Brighton Bombings in Oct 1984. Consequent potential financial, legal or reputational risk to the Authority.	4	3	12	1)ESFRS representation on Sussex Police Gold Group 2) ESFRS / WSFRS Op Tin Gold Group, agreed terms of reference and joint working arrangements. 3) Identify personnel who may be affected or families that may require assurance and emotional support 4) Establish procedures and implement communication channels for insurance claims and legal requirements subject to various legislations, including but not limited to The Health and Safety at Work Act 1978 and The Data Protection Act 1998 5) Ensure appropriate health, wellbeing advice, support and guidance available for all personnel who may be affected 6) Risk may be further reduced subject to insurance and legal arrangements	3	3	9 (Moderate)	DCFO	ACFO