

# SCRUTINY & AUDIT PANEL MONDAY 24 JULY 2017 at 14:00

#### **MEMBERS**

#### **East Sussex County Council**

Councillors Galley, Lambert, Osborne, Sheppard, Taylor

#### **Brighton and Hove City Council**

Councillors Peltzer Dunn, Penn

You are requested to attend this meeting to be held at County Hall, St Anne's Crescent, Lewes, East Sussex BN7 1UE at 14:00 hours.

#### **AGENDA**

Item No. 087.	Page No. 1	In relation to matters on the agenda, seek declarations of interest from Members relating to items to be considered at the meeting, in accordance with the provisions of the Fire Authority's Code of Conduct for Members.
088.	1.	Election of Chairman
089.	1	Apologies for Absence.
090.	1	Notification of items which the Chairman considers urgent and proposes to take at the end of the agenda/Chairman's business items.
		(Any Members wishing to raise urgent items are asked, wherever possible, to notify the Chairman before the start of the meeting. In so doing, they must state the special circumstances which they consider justify the matter being considered urgently).
<u>091</u> .	4	Non-confidential Minutes of the last Scrutiny & Audit Panel meeting held on 27

April 2017 (copy attached).

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092.	2	Callover. The Chairman 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.
<u>093</u> .	9	Assessment of the Corporate Framework and Annual Governance Statement for 2016/17 - report of the Interim Chief Fire Officer, Deputy Monitoring Officer and Assistant Director – Resources / Treasurer (copy attached).
<u>094</u> .	23	Provisional 2017/18 First Quarter Corporate Risk Register Review – report of the Assistant Director – Resources / Treasurer (copy attached).
<u>095</u> .	27	2016/17 Annual Performance Outcome Report – report of the Assistant Director – Planning & Improvement (copy attached).
<u>096</u> .	37	Health and Safety Year End Report 2016-17 – report of the Assistant Director – Training and Assurance (copy attached).
<u>097</u> .	47	2016/17 – Statement of Operational Assurance - report of the Interim Assistant Chief Fire Officer (copy attached).
<u>098</u> .	51	Fire in Waste and Recycling Facilities - report of the Interim Deputy Chief Fire Officer (copy attached).
099.		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.
		<b>NOTE:</b> 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.
100.	57	Confidential Minutes of the last Scrutiny & Audit Panel meeting held on 27 April 2017 (copy attached).
101.	61	Cyber Security - confidential report of the Assistant Director - Resources / Treasurer (copy attached). (Exempt category under paragraph 3 of the Local Government Act 1972).
102.	65	Sussex Control Centre – Progress Update – confidential report of the Interim Assistant Chief Fire Officer (copy attached). (Exempt category under paragraph 3 of the Local Government Act 1972).

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103.	71	Swift Water Rescue - confidential report of the Interim Deputy Chief Fire Officer (copy attached). (Exempt category under paragraph 4 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 County Hall, St. Annes Crescent, Lewes, East Sussex at 10:00 hours on Thursday 27 April 2017.

Members Present: Councillors Galley, Howson, Lambert, Peltzer Dunn and Taylor.

N.B. Councillor Howson attended the meeting in place of Councillor Buchanan having been nominated by the Deputy Monitoring Officer in consultation with the relevant Group spokesperson. Councillor Barnes was in attendance and was invited to sit at the table during the meeting.

#### Also present:

Ms. D. Whittaker (Interim Chief Fire Officer), Mr. M. O'Brien (Interim Assistant Chief Fire Officer), Ms. E. Woodley (Deputy Monitoring Officer), Mr. D. Savage (Assistant Director Resources / Treasurer), Mr. N. Chilcott (East Sussex County Council – Internal Auditor), Mr. K. McGrath (Ernst & Young External Auditor) and Mrs. K. Ward (Clerk).

#### 075. **DISCLOSABLE PECUNIARY INTERESTS**

1075.1 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.

#### 076. **APOLOGIES FOR ABSENCE**

- O76.1 Apologies for absence were received from Councillors Buchanan, Penn, Wincott and Mr. M. Andrews (Interim Deputy Chief Fire Officer) and Mr. P. King (Ernst and Young).
- 077. NOTIFICATION OF ITEMS WHICH THE CHAIR CONSIDERS URGENT / CHAIR'S BUSINESS
- 077.1 Nigel Chilcott and Kris McGrath were welcomed to the meeting.
- 078. NON-CONFIDENTIAL MINUTES OF THE SCRUTINY & AUDIT PANEL MEETING HELD ON 2 FEBRUARY 2017
- 078.1 **RESOLVED** That the non-confidential minutes of the meeting of the Scrutiny & Audit Panel held on 2 February 2017 be approved as a correct record and signed by the Chair. (Copy in Minute Book).

#### 079. CALLOVER

- 079.1 Members reserved the following items for debate:
  - 080. 2015/16 Service Benchmarking Report
  - 081. Internal Audit Annual Report and Opinion
  - 082. Internal Audit Strategy and Plan 2017/18
  - 083. Internal Audit Review Counter Fraud
- 079.2 **RESOLVED** That all other reports be resolved in accordance with the recommendations as detailed below.

#### 080. **2015/16 SERVICE BENCHMARKING REPORT**

- 080.1 Members considered a report of the Assistant Director Planning & Improvement that presented the Fire Statistics for 2015/16 and comparative benchmarking of East Sussex Fire & Rescue Service against its family group. (Copy in Minute Book).
- O80.2 The report provided a wide range of information about how East Sussex Fire & Rescue Service compared against its peers, in particular the thirteen fire and rescue services that made up family group 2, in delivering its service to the local community. This included the cost of service provision, current performance measures and organisational resourcing. The report also sought to help the Service understand performance levels, where performance varied and investigate why variations may occur.
- O80.3 Councillor Galley asked Officers to explain why East Sussex reported a higher number of firefighters and appliances compared to those in the family group. Interim ACFO O'Brien advised that the figures were as at 31 March 2016 and as a result of the implementation of the savings proposals, the number of wholetime firefighters had reduced by around 50. Reductions had been carried out in line with the Integrated Risk Management Plan (IRMP) which had included the removal of two appliances. Further work was scheduled for later this year across the service, to include a complete officer review.
- O80.4 Councillor Galley asked if the review would include support staff provision. Interim CFO Whittaker advised that a demand management strategy would be worked on which would cover all roles, both operational and non-operational. Members were advised that posts had been streamlined and redefined resulting in some operational staff classed as support staff, or green book conditions of service giving a blurred picture on numbers of support staff.
- O80.5 Councillor Peltzer Dunn informed the Panel that he had received a home safety visit which he found informative and he was impressed at how accommodating the staff were. Councillor Peltzer Dunn highlighted that a lot of people were afraid to let any authority figure in to their home for fear of what that visit may lead to. Interim CFO Whittaker noted the comments and suggested that many of the individuals that the Service find hard to reach are those with alcohol, drug and mental health issues. The Service's communication team were aware of the problems faced and work was being undertaken, such as utilising feedback, to reassure individuals that the Service only wished to undertake preventative work rather than authoritative work.
- O80.6 Councillor Barnes requested an explanation in relation to the entry and effect and lift releases figures as they appeared high. Interim CFO Whittaker explained that in relation to entry and effect figures, the Service were part of the Emergency Services Collaboration Project. A memorandum of understanding was in place which meant if the Police or Ambulance service attended an incident where life was at risk, the Service would respond to their call to effect entry. These types of incidents were not chargeable. Lift release figures reported were not a true reflection of the situation as there had been some issues with recording, however the Service was in discussions with the owners of the properties involved to try and get the number of incidents down.
- 080.7 **RESOLVED** That the Panel note the report.

# 081. <u>INTERNAL AUDIT ANNUAL REPORT AND OPINION FOR THE PERIOD 1 APRIL</u> 2016 TO 31 MARCH 2017

- 081.1 Members considered a report of the Assistant Director Resources / Treasurer which provided an Opinion on East Sussex Fire Authority's internal control environment and report on the work of Internal Audit for the period 1 April 2016 to 31 March 2017. (Copy in Minute Book).
- O81.2 Councillor Lambert highlighted that the IMD Transformation Contract Management audit had been deferred as the transfer to Telent Technology Services Limited had not taken place until November 2016. It was felt that a review would add more value if it was conducted once contract management arrangements had been in operation for a reasonable period. The days allocated for the audit would be carried over to 2017/18.

#### 081.3 **RESOLVED** – That the Panel:

- (i) note the Internal Audit Service's opinion on the Fire Authority's internal control environment for 2016/17; and
- (ii) confirms that the Fire Authority's system for internal audit has proved effective during 2016/17.

#### 082. INTERNAL AUDIT STRATEGY AND PLAN 2017/18

- 082.1 Members considered a report of the Assistant Director Resources/Treasurer that provided an Internal Audit Plan for East Sussex Fire Authority covering the period 1 April 2017 to 31 March 2018. (Copy in Minute Book).
- 082.2 Members were advised that the internal audit Service has usually been delivered on a standard annual budget of 70 audit days. Following consultation with senior officers and the Authority's external auditor, Ernst & Young it was considered appropriate to increase the strategy to 75 days, totalling 85 days once the IMD Transformation Contract Management Contract audit was carried over.
- O82.3 The Fire Authority was undergoing a number of major change initiatives and it was important that internal audit activity provided a balance between assurance over those initiatives and, financial and non-financial controls within ongoing business activity. Details of the programme of work was provided within the report which would amount to 85 days if approved.
- 082.4 **RESOLVED** That the 2017/18 Internal Audit Strategy and Plan be approved.

#### 083. INTERNAL AUDIT REVIEW - COUNTER FRAUD - PRIVATE USE OF VEHICLES

- 083.1 Members considered a report of the Assistant Director Resources/Treasurer which informed the Panel of the outcomes of the Internal Auit Review Counter fraud Private use of Vehicles. (Copy in Minute Book).
- This review was agreed as part of the Authority's 2016/17 Internal Audit Plan and resulted in a partial assurance opinion. The audit highlighted areas where compliance with HMRC regulations was difficult to evidence and instances of service vehicles being driven at excessive speeds without any operational justification.

- Members were reassured that as a result of the findings, Corporate Management Team put in place a robust management action plan in order to ensure the health and safety of staff and the public.
- 083.4 **RESOLVED** That Management response to the Internal Audit Review of Private Use of Vehicles be endorsed.

#### 084. **EXTERNAL AUDIT FEE LETTER 2017/18**

- Members considered a report of the Assistant Director Resources/Treasurer which informed the Panel of the proposed external audit fee. (Copy in Minute Book).
- The fee for the 2017/18 audit was confirmed as £30,766. This was in line with the nationally set fee scales and was unchanged from 2016/17.
- 084.3 **RESOLVED** That the report and external audit fee for 2017/18 be noted.

#### 085. **2016/17 4TH QUARTER CORPORATE RISK REGISTER REVIEW**

- 085.1 Members received a report of the Assistant Director Resources / Treasurer which reported on the latest quarterly review of Corporate Risk. (Copy in Minute Book).
- Officers reported the Emergency Services Mobile Communications Project (ESMCP) may be subject to delay and whilst the delay in the project would be Home Office responsibility, failure to mobilise appliances would be the responsibility of the Fire Authority.
- 085.3 **RESOLVED** That the latest Corporate Risk Register be approved.

#### 086. **EXCLUSION OF THE PRESS AND PUBLIC**

086.1 **RESOLVED** – That item 087 be exempt under paragraph 3 of Schedule 12A to the Local Government (Access to Information) (Variation) Order 2006 and, accordingly, is not open for public inspection on the grounds that it includes information relating to the financial or business affairs of any particular person (including the Authority holding that information).

The meeting concluded at 11:15 hours

Signed Chairman

Dated this day of 2017

## Agenda Item No. 093

#### **EAST SUSSEX FIRE AUTHORITY**

Panel: Scrutiny & Audit

**Date:** 24 July 2017

Title of Report: Assessment of the Corporate Framework and Annual

Governance Statement for 2016/17.

By: Dawn Whittaker, Interim Chief Fire Officer

Liz Woodley, Deputy Monitoring Officer

Duncan Savage, Assistant Director - Resources/Treasurer

**Lead Officer:** Duncan Savage, Assistant Director - Resources/Treasurer

**Background Papers:** Local Code of Corporate Governance

**Appendices:** 1. Local Code of Corporate Governance – extract

2. Annual Governance Statement 2016/17

3. 2015/16 Action Plan - update

**Implications** 

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

PURPOSE OF REPORT: To set out how the Fire Authority has assessed the

effectiveness of its governance arrangements and to seek approval of the Annual Governance Statement in line with

the Accounts and Audit Regulations 2015.

**EXECUTIVE SUMMARY:** The 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 has been carried out by the Governance Group of senior officers in line with the Authority's Local Code of

Corporate Governance.

As part of this review we have not identified any gaps in assurance over key risks or significant governance issues. The Authority has, however, identified a range of improvements to its corporate governance framework. Action Plans are in place to address the necessary improvements and these will be monitored during the year.

The draft Annual Governance Statement (Appendix 2) has been endorsed by Corporate Management Team.

#### **RECOMMENDATION:**

The Panel is recommended to:

- confirm that Members are satisfied with the level of assurance provided to them through this report and the Authority's governance framework and processes;
- (ii) identify any significant governance issues that should be included in the Authority's Annual Governance Statement; and
- (iii) approve the Annual Governance Statement to be signed by the Chair of this Panel and the Chief Fire Officer.

#### INTRODUCTION

- 1. Sound Corporate Governance is crucial if the Authority is to continue to provide leadership, direction and control. The Annual Governance Statement provides an opportunity for the Authority to assess and report transparently to the public how it ensures that it is doing the right things, in the right way, for the right people, in a timely, inclusive, open, honest and accountable manner.
- 2. The Authority has a local Code of Corporate Governance based on the best practice guidance from the Chartered Institute of Public Finance and Accountancy (CIPFA) and the Society of Local Authority Chief Executives and Senior Managers (SOLACE). This guidance was updated during 2016/17 and the Authority's local Code will be reviewed to reflect it during the coming year.
- 3. The Accounts and Audit Regulations 2015 require the Authority to ensure that it has in place a sound system of internal control which facilitates the effective exercise of its functions and which includes arrangements for risk management. The Authority is required 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.
- 4. The production of an Annual Governance Statement is the final stage of an on-going process of review of our governance arrangements including risk management and internal control. In summary, the process must involve an organisation reviewing the adequacy of its governance arrangements, developing an action plan for improving those arrangements, and communicating the framework to users and stakeholders.

- 5. This report was prepared by the Governance Group of senior officers and has been considered and approved by the Corporate Management Team.
- 6. The Authority's corporate governance framework is underpinned by a number of key documents and processes. These are summarised in section 4 of the Annual Governance Statement (Appendix 2).
- 7. The main policies and strategies that make up the Authority's corporate governance framework are summarised in the Local Code of Corporate Governance (see extract at Appendix 1). The sources of assurance in place for each of these policies and strategies have been reviewed and where the need for improvement has been identified this is set out within the Annual Governance Statement.
- 8. Evidence shows that the Authority continues to have in place good arrangements for corporate governance and that they are working effectively.
- 9. The Annual Governance Statement is included at Appendix 2. It includes the mandatory disclosure of any significant governance issues identified through the Authority's governance and internal control arrangements. Appendix 3 sets out the progress made against the areas for improvement identified in the AGS for 2015/16.
- 10. Since 2013 the Authority has been required to produce a Statement of Operational Assurance on an annual basis in line with the requirements of the Fire and Rescue National Framework and DCLG guidance issued in May 2013. Whilst there is some overlap between this statement and the Annual Governance Statement, officers have decided to continue to publish them separately in order that their separate and distinct objectives are transparently fulfilled.
- 11. The Annual Governance Statement will be reviewed by our external auditors, Ernst & Young LLP, as part of their audit of the 2016/17 accounts.

Dawn Whittaker
INTERIM CHIEF FIRE
OFFICER

Duncan Savage TREASURER

Liz Woodley DEPUTY MONITORING OFFICER

30 May 2017

East Sussex Fire Authority
Local Code of Corporate Governance – key policies and processes

Local Code of Corporate Governance – key policies and processes								
Policy or process	Owner	Purpose, vision & outcomes	Purpose, functions & roles	Values, good governance, conduct & behaviour	Decisions, value for money, scrutiny & risk management	Capacity & capability	Engagement & accountability	
Annual Plan	CFO (delegated to AD – P&I)	Υ	Y				Υ	
Constitution	AD – P&I / DMO	Υ	Υ		Y		Υ	
Integrated Risk Management Plan	ACFO	Y			Y		Υ	
Operational policies and processes	AD - OSR	Υ						
Risk Management Strategy	AD - Resources	Y		Y	Y			
Medium Term Finance Plan	AD - Resources	Y						
Budget and financial management (incl DFM scheme)	Finance Manager	Y			Y			
Statement of Accounts	AD - Resources				Y			
Standing Orders	DMO		Y	Υ	Y		Υ	
Contract Standing Orders	DMO	Y		Y	Y			
Financial Regulations	AD Resources			Y	Y			
Scheme of Delegation	DMO		Υ	Υ	Υ			

Policy or process	Owner	Purpose, vision & outcomes	Purpose, functions & roles	Values, good governance, conduct & behaviour	Decisions, value for money, scrutiny & risk management	Capacity & capability	Engagement & accountability
Code of Conduct for Members	DMO		Y	Υ			
Code of Conduct for Member and Employee Relations	AD – HR		Y	Y			
Information Transparency	ACFO						Y
Anti-fraud, Bribery & Corruption Strategy	AD – Resources			Y			
Member Learning & Development Strategy	AD – P&I	Y	Y			Y	
Whistleblowing Policy	AD – HR / DMO		Υ	Υ			Y
Complaints Policy	AD – P&I	Υ		Υ	Y		Υ
Code of Conduct and Conflict of Interest	AD - HR			Υ	Y		
Community Safety Strategy	DCFO / AD - SC	Y					Y
Business Safety Strategy	DCFO / AD - SC	Y					Y
Partnership Working Strategy	AD - SC	Y	Υ	Y	Y		
Comms Strategy	AD – P&I	Υ				Y	Υ
Inclusion & Diversity Strategy	AD - HR			Υ			
Health, Safety & Wellbeing Strategy	AD – T&A		Υ	Υ	Υ		

Policy or	Owner	9 P	2.5	& © <	⊒. 3 □	O	а
process		Purpose, vision & outcomes	Purpose, functions & roles	Values, good governance, conduct & behaviour	Decisions, value for money, scrutiny & risk management	Capacity & capability	Engagement & accountability
People & Organisational Development Strategy	AD - HR	Υ	Υ	Υ		Y	
Asset Management Strategy	AD – Resources / AD - OSR	Y	Υ	Υ	Y	Y	
Local Code of Corporate Governance	DCFO / DMO / AD - Resources	Y	Υ	Υ	Υ	Y	Υ
Information Management Strategy	AD - Resources	Y	Υ	Υ	Y		
Procurement Strategy	AD - Resources			Y	Y		
Environment Strategy	AD - Resources	Y	Υ	Υ	Y		
Sustainability Strategy	AD - Resources	Υ	Υ	Υ	Υ		
Response & Resilience Strategy	AD – OSR	Y					Υ
Project Management / Stage Gate processes	AD – P&I				Y		
Internal Audit Strategy	AD - Resources			Υ	Y		
Performance Management	AD – P&I	Υ	Υ	Υ		Y	
Freedom of Information Scheme	AD – P&I			Υ	Y	Y	
Data Protection Policy	DCFO		Y	Υ			
Regulation of Investigatory Powers Act Policy	DCFO (delegated to AD – OSR)				Υ		

**Core Principle 1** Focussing on the purpose of the authority and on outcomes for the community and creating and implementing a vision for the local area

**Core Principle 2** Members and officers working together to achieve a common purpose with clearly defined functions and roles

**Core Principle 3** Promoting values for the authority and demonstrating the values of good governance **Core Principle 4** Taking informed and transparent decisions which are subject to effective scrutiny and managing risk

**Core Principle 5** Developing the capacity and capability of members and officers to be effective **Core Principle 6** Engaging with local people and other stakeholders to ensure robust public accountability

#### **East Sussex Fire Authority**

#### DRAFT Annual Governance Statement for the year ended 31 March 2017

#### 1. Scope of responsibility

East Sussex Fire Authority (the Authority) is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. The Authority also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness. In discharging this overall responsibility, the Authority is responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, which includes arrangements for the management of risk. To this end the Authority has approved and adopted a local code of corporate governance, which is consistent with the principles of the CIPFA/SOLACE Framework Delivering Good Governance in Local Government. A copy of the Authority's code is on our website at

http://www.esfrs.org/about-us/east-sussex-fire-authority/members-handbook-strategies/ or can be obtained from fireauthorityclerk@esfrs.org. This statement explains how the Authority has complied with the Code and also meets the requirements of Accounts and Audit (England) Regulations 2015, regulation 6, which requires all relevant bodies to prepare an annual governance statement.

#### 2. The purpose of the governance framework

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

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

The governance framework has been in place at the Authority for the year ended 31 March 2017 and up to the date of approval of the statement of accounts.

#### 3. The governance framework

The key elements that comprise the Authority's governance arrangements are set out in the local code of corporate governance and they include:

- an annual integrated risk management plan (IRMP) that sets out our vision for the community and the outcomes we intend to achieve;
- an established service planning process, including the development of the medium term finance plan;

- a business planning and performance management framework which includes setting clear objectives and targets;
- regular reporting of performance against the Authority's key performance indicators to officers and Members;
- established budgeting systems, clear budget management guidance and regular reporting of financial performance against budget forecasts to officers and Members;
- clear arrangements for the discharge of the statutory functions of the Head of Paid Service, Monitoring Officer and Treasurer;
- compliance with the Chartered Institute of Public Finance and Accountancy's Statement on the Role of the Chief Finance Officer;
- clear arrangements for decision making, scrutiny and the delegation of powers to officers and Members:
- codes of conduct for Members and employees which set out clear expectations for standards of behaviour;
- a clear framework for financial governance based on Contract Standing Orders and Financial Regulations;
- a risk management strategy and risk management framework, which takes account of both strategic and operational risks and ensures that they are appropriately managed and controlled:
- Member Panels with clear responsibilities for governance, audit and standards;
- established arrangements for dealing with complaints and whistle-blowing, and combating fraud and corruption;
- schemes for identifying the development needs of Members and officers, supported by appropriate training;
- a strategy for communicating and consulting with the people of East Sussex and the City
  of Brighton & Hove and our key stakeholders;
- clear guidance that promotes good governance in our partnership working;
- a range of policies and processes designed to ensure best practice and legal compliance for personnel matters, ICT security, access to information, data protection and project management.

#### 4. Review of effectiveness

The Authority has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of effectiveness is informed by:

- the work of Members through the Fire Authority and its Panels, including Policy & Resources and Scrutiny & Audit;
- the work of senior officers and managers within East Sussex Fire & Rescue Service, who
  have primary responsibility for the development and maintenance of the internal control
  environment;
- the work of the Monitoring Officer and the Treasurer;
- the risk management arrangements, including the maintenance and regular review of corporate risks by the Corporate Management Team and Scrutiny & Audit Panel;
- the work of the internal audit service including their individual reports, and overall annual report and opinion;
- the external auditors in their annual audit letter and annual governance report;
- the judgements of external inspection and statutory bodies and the Operational Assurance Peer Review.

#### 5. Assurance and significant governance issues

No assurance can ever be absolute; however, this statement seeks to provide a reasonable assurance that there are no significant weaknesses in the Authority's governance arrangements. On the basis of the review of the sources of assurance set out in this statement, we are satisfied that the Authority has in place governance arrangements and a satisfactory system of internal control, both of which are fit for purpose and operating effectively.

As part of our review we have not identified any gaps in assurance over key risks or significant governance issues. The Authority has, however, identified a range of improvements to its corporate governance arrangements. Action Plans are in place to address the necessary improvements and these will be monitored during the year.

Both governance and internal control arrangements must be kept under review to ensure that they continue to operate effectively, meet changing legislative needs, and reflect best practice and our vision of achieving safer and more sustainable communities.

We propose over the coming year to take steps to further enhance our governance arrangements and these are summarised below. We are satisfied that these steps will address the need for improvements that were identified in our review of effectiveness and we will monitor their implementation and operation as part of our next annual review.

- Complete the development of our new Corporate Strategy to include priority outcomes and key performance indicators and develop the Integrated Risk Management Plan workstreams (ACFO) (continuing action from 2015/16 AGS action plan)
- Rationalise and align our suite of corporate strategies in line with the new Corporate Strategy and IRMP (ACFO) (continuing action from 2015/16 AGS action plan)
- Improve our performance monitoring against our Corporate Strategy / IRMP and revise our approach to monitoring key performance indicators (AD P&I) (continuing action from 2015/16 AGS action plan)
- Ensure that the Authority responds effectively to the Fire Reform Agenda (CFO)
- Put in place arrangements to deliver our statutory duty to collaborate including responding to proposals for changes of governance under the Policing and Crime Act (CFO)
- Complete the implementation of the Accident Investigation Action Plan for Service Training Centre (AD T&A) (continuing action from 2015/16 AGS action plan)
- Publish the new Inclusion and Diversity Strategy (AD HR) (continuing action from 2015/16 AGS action plan – planned for June 2017 CFA)
- Make improvements in the process for reporting compliments, complaints and enquiries to CMT and the Fire Authority to ensure transparency (AD – P&I)
- Review the arrangements for enforcement of Petroleum Certification to ensure that they remain fit for purpose (DCFO)
- Make improvements to Information Security arrangements, following changes in IT provision including increased use of mobile devices, with a focus on employee awareness.(AD R/T)
- Review the Management of Road Risk Policy and the effectiveness of arrangements for ensuring compliance in response the review by internal audit (AD – OSR)
- Improve the management and delivery of projects by establishing a Programme Management Office (AD – P&I)
- Review the Local Code of Corporate Governance against the most recent best practice guidance issued by CIPFA / SOLACE (AD – P&I / AD R/T)

Councillor xxxxxxxxx, Chair, Scrutiny & Audit Panel

Dawn Whittaker, Interim Chief Fire Officer

24 July 2017

# Status of improvement actions set out in the Annual Governance Statement 2015/16

Act	ion	Status
1.	Develop a new Corporate Strategy and Integrated Risk Management Plan (DCFO)	Partially complete – new Purpose, Commitments and IRMP consulted upon and agreed. Individual workstreams being developed and further work on corporate strategy planned for 2017/18 (carry forward)
2.	Rationalise and align our suite of corporate strategies in line with the new Corporate Strategy and IRMP (DCFO)	Underway – see 1. Above – further work planned for 2017/18 (carry forward)
3.	Improve our performance monitoring against our annual plan and revise our approach to monitoring key performance indicators (AD – P&I)	Underway – review of attendance standard commenced as part of IRMP and further work planned as part of corporate strategy development (carry forward)
4.	Put in place arrangements to meet the requirements of the Policing & Crime Bill (CFO)	Ongoing – national developments tracked via CFA / CMT and governance arrangements in place for engagement with PCC Business case development
5.	Ensure that the Authority is effectively engaged in local devolution proposals (DCFO)	Ongoing – engaged with 3SC development.
6.	Improve our approach to Health and Safety in line with the Peer review and implement the Accident Investigation Action Plan for Service Training Centre (AD – T&A)	Partially complete – delivery of action plan being monitored through Health, Safety & Wellbeing Committee. Expected to be complete December 2017 with final report to Scrutiny & Audit Panel. (carry forward).
7.	Ensure that the new Senior Management Structure operates effectively (CFO)	Complete – progress reported to Fire Authority June 2016
8.	Review the delivery of the Equality and Diversity Strategy (AD – HR)	Partially complete – new Inclusion and Diversity Strategy developed and due to be approved by Fire Authority June 2017.
9.	Publish the new Code of Conduct for Employees (AD – HR)	Complete – Code published in intranet.
	10. Deliver the remaining areas of improvement against the Transparency Code (AD – R/T)	Complete.

### Agenda Item No. 094

#### EAST SUSSEX FIRE AUTHORITY

Panel: Scrutiny & Audit

**Date:** 24 July 2017

Title of Report: Provisional 2017/18 First Quarter Corporate Risk Register

Review

By: Assistant Director - Resources/Treasurer

**Lead Officer:** Warren Tricker, Finance Manager

**Background Papers:** 2016/17 Fourth Quarter Corporate Risk Register Review

**Appendices:** Appendix A - RAID Log Scoring Matrix

Appendix B - Risk Management Mitigation Plans Appendix C - Corporate Project Risk Report

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

**PURPOSE OF REPORT:** To report on the latest quarterly review of Corporate Risk.

#### **EXECUTIVE SUMMARY:**

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. Risks are scored against a 4x4 scoring matrix as shown in Appendix A.

Reviews of corporate risks take place on a quarterly basis. Pressure on staffing resources means that updates in this report are the result of ad-hoc discussions and email correspondence however all risks have been reviewed. The updated position is shown in Appendix B.

This report discusses the provisional first quarter position, prior to the quarter being complete. This gives CMT the

opportunity to debate the risk registers before a report is submitted to Panel.

It was agreed by CMT that from Quarter 4 under the heading Key actions where an action was not complete a target date would be added. The resources pressure mentioned above has prevented this from happening and a revised target of 2017/18 second quarter is set.

Assistant Directors are currently progressing their departmental risk registers and plans within their respective directorates. These will give a route to the Corporate Risk Register any departmental risk scoring 9 or above.

Project Boards discuss the Project RAID log as a standing agenda item. At Appendix C is a summary of the Project RAID Log for all risks scored 9 or above.

All project plans have been reviewed to ensure the Pre-Scoring and post scores are appropriate.

#### **RECOMMENDATION:**

The Panel are recommended to approve the latest Corporate Risk Register.

# Agenda Item No. 094 Appendix A

#### **CORPORATE RISK REGISTER**

## Scoring for all Corporate Risk and Project RAID Log

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)	Tolerable (4)

## Corporate Risk and Project Raid Log Scoring Matrix

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)

## Agenda Item No. 095

#### EAST SUSSEX FIRE AUTHORITY

Panel: Scrutiny & Audit Panel

**Date:** 24 July 2017

**Title of Report:** 2016/17 Annual Performance Outcome report

By: Liz Ridley, Assistant Director – Planning & Improvement

**Lead Officer:** Sharon Milner, Performance Analyst

**Lead Member:** Cllr Roy Galley

Background Papers: None

**Appendices:** Appendix A – Annual performance outcome report 2016/17

Appendix B - Plain English indicator definitions

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 annual performance results for 2016/17.

**EXECUTIVE SUMMARY:** This report provides the Panel with details of East Sussex Fire

Rescue Service's performance for the period April – March 2016/17. Nine top level indicators improved or met the target set in 2016/17 (53%) and eight indicators stayed the same or

declined.

**RECOMMENDATION:** That the Panel note the annual outcomes performance results

for 2016/17 as set out in Appendix A.

#### 1. **INTRODUCTION**

- 1.1 This report, which is attached as a separate document, summarises the 2016/17 performance outcomes. The report aims to provide a single view of information which allows Elected Members, Auditors and members of the public to hold the Service's senior managers and staff to account in terms of the provision and performance of their Fire & Rescue Service for 2016/17. The report has been further developed through consultations with Cllr Galley, the Authority's lead member for performance.
- 1.2 The report provides a comparison against last year's performance, whether or not the target was achieved, where one has been set, and the direction of travel from the previous year for example, improved, stayed the same or declined.
- 1.3 East Sussex Fire & Rescue Service results are compared against the results for Fire and Rescue Services in the rest of England on a scale of best to worst performance based on the 2015/16 national data sets.
- 1.4 The report highlights a slight decline on last year's performance as 53% of indicators improved or met the target as opposed to 68.2% the previous year.
- 1.5 Two new performance indicators have been included this year under the 'educating our communities' priority to measure the service's engagement with the business and commercial sector.

#### 2. Main issues

2.1 The Fire Authority has five priority areas and an assessment of performance against each area is included in the report. Additional commentary is provided for other areas of interest.

#### 2.2 Reducing accidental dwelling fires

- 2.2.1 Accidental dwelling fires have been a priority area for the service for a number of years. Accidental dwelling fires have reduced by 38% from 2001/02 overall, but have plateaued in recent years. However in 2016/17 we saw a reduction of 2.4% from the previous year. We had a total of 540 accidental dwelling fires last year, sixty percent occurred in the kitchen, with cooking appliances being responsible for 78% of the fires. 42% of the fires required no firefighting intervention, and a further 31% were dealt with by small means, a portable extinguisher or were allowed to burn out under supervision by the crew. Analysis from a recent survey shows that along with cooking appliances being a factor, fires occurred when people were distracted for example, answering the telephone or television or dealing with children.
- 2.2.2 An accidental dwelling fire working group is in place with staff from stations, community fire safety, communications and planning and intelligence who are working together to develop behaviour change campaigns to tackle this area. Each station must run a cooking fire activity on their open days and materials have been produced to encourage families to learn about hazards in the kitchen. Immediate press releases are made after kitchen fires in order to raise awareness amongst the public on our web site and social media, together with important safety messages about owning and testing smoke alarms in homes.

#### 2.3 Responding quickly to a fire to stop it spreading from the room it started in

2.3.1 Although there was a slight decline in performance in comparison to last year, with 94% of fires confined to the room of origin in 2015/16 compared to 91.6% in 2016/17 we consistently perform well in this area. In real numbers this means that out of 540 fires attended we contained 495 to the room of origin.

# 2.4 Reducing false alarm calls, especially in properties with a previous history of this

2.4.1 50% of our total incidents in 2016/17 were to false alarm calls, of these 33.6% were from automatic fire detector systems. An unwanted fire alarm signal is where an automatic fire alarm (AFA) system activates and initiates a response from the fire service and on attendance it is found to be a false alarm. A call challenge policy is in place with responsible premise owners being asked to confirm the need for an attendance. We are undertaking more targeted work to ensure that we continually review and improve efficiencies across the Service. A demand management strategy is in development as part of the Authority's integrated risk management plan and will be looking at our attendance at non-life-threatening incidents. By reducing the demand on our Service for calls that are not deemed appropriate to attend, we will free up our resources to undertake meaningful community safety work that will make people safer in our communities.

# 2.5 Increasing the number of home safety visits that we complete with the more vulnerable members of our community

2.5.1 We delivered 90.7% of our home safety visits to vulnerable people within our community in 2015/16 and 2016/17. This means that out of 9,255 visits 8,394 were to vulnerable people in the community. We work with partners in adult social care and health to share data and are able to target vulnerable people more accurately. Home safety visits are also generated through station visits and through enquiries on our web site. The community safety strategy is currently being revised and will look at how we target people and how we deliver our visits. We will also need to determine how many HSVs we aim to carry out each year and ensure we are able to resource this accordingly.

#### 2.6 Reducing the number of absences of our employees due to sickness.

2.6.1 Sickness absence is another priority area for the service and performance has declined from the previous year, with 10.5 shifts lost against 8.7 in 2015/16. The main areas where sickness has increased has been in long term absences with 63% of total sickness falling in this category. Sickness in Sussex Control Centre and amongst support staff has increased whereas sickness amongst operational staff has improved in 2016/17. A reviewed focus on this area has seen the establishment of a Healthy Mind and Healthy Body sub groups of the Health Safety and Wellbeing committee with areas of work including TRiM (Trauma Risk Management), change management and mindfulness, along with general fitness guidance for firefighters and staff. The service will be utilising prevention with an emphasis on wellbeing, support for those staff who need occupational health services and management in terms of managing attendance and training our managers effectively to deal with these situations

#### 2.7 Other commentary

#### 2.7.1 Number of RIDDOR incidents

2.7.2 The majority of the RIDDOR notifications to HSE are for incapacitation over 7 days. The result in 2015/16 was unusually low for the service as the number of incidents historically has been between 7 and 10 incidents. Seven of the notifications in 2016/17 were for absences over 7 days and these were for musculo-skeletal injuries, mainly as a result of manual handling. In order to address this, the Health, Safety & Wellbeing Team are working with colleagues to identify specific equipment to reduce the likelihood of manual handling injuries e.g. for lifting bariatric size and will also be reviewing the delivery of manual handling training to ensure it meets the needs of the service. One report was for a Dangerous Occurrence (malfunction of BA equipment), one for a fracture (wrist) and one for a Reportable Disease (carpal tunnel syndrome).

#### 2.7.3 Compliments and complaints

- 2.7.4 The annual outcome report contains a summary of the complaints received against the service. Effective complaint management is an important element of maintaining the Service's reputation. Complaints are also a valuable tool in helping to understand residents' expectations of service delivery and should be an essential part in identifying improvements across the organisation.
- 2.7.5 Complaints received are formally recorded by the Service Complaints Officer (SCO) and, as far as possible, dealt with immediately. Where this is not possible, complaints are:
  - acknowledged within three working days
  - responded to within one month of the complaint being received by ESFRS
  - kept under review and the complainant kept informed of progress or any reasons which are causing a delay
  - monitored by the SCO to identify problem areas.
- 2.7.6 There were 20 complaints received in 2016/17, one more than the previous year. Of the complaints, 10 were considered justified, 3 partially justified and 1 unjustified. In two cases, these were unproven, two were not ESFRS related and two were logged for recording purposes. For example, one complaint was about the level of response sent to an animal rescue, and one concerned an insurance issue and who was responsible. Upon analysis, poor driving standards and employee conduct in the Service were the highest causes for complaints in 2016/17. In order to raise awareness and address issues of poor driving standards any future complaints will be considered by the Operational Assurance Group chaired by the Assistant Director of Operational Support and Resilience.
- 2.7.7 ESFRS is justifiably proud of its reputation for customer service. During the year we received 177 "thank you" letters from various members of the public as opposed to 157 received last year. Compliments are circulated to staff through the service brief on a monthly basis and cover all aspects of our service provision including home safety visits, incidents attended, school visits, education events etc.

	2015/16	2016/17
Complaints received	19	20
Compliments received	157	177

- 2.8 The performance outcome summary is set out in Appendix A attached as a separate document.
- 2.9 A list of useful definitions is attached for Members at Appendix B.

# Agenda Item No. 095 Appendix B

# **Plain English Descriptions of Indicators**

Indicator	Plain English description	Rationale	Good Performance
No of primary fires attended	The number of major fires involving property, casualties or involving 5 or more appliances.	This indicator measures the incidence of fire and related casualties, and is therefore a means by which individuals and	Lower numbers
No of deaths arising from primary fires	The number of people whose death was caused by fire in a major fire which involves property, casualties or 5 or more appliances.  The death may occur weeks or months later.	communities can assess the fire safety support provided by ESFRS.	Lower numbers
No of injuries (excl. precautionary checks) arising from primary fires	The number of people who required medical treatment beyond first aid given at the scene of the fire.  Precautionary checks are		Lower numbers
	persons sent to hospital or advised to see a doctor as a precaution, having no obvious injury or distress.		
No of deliberate primary fires (excl. primary fires in vehicles)	The number of fires where the cause of fire is suspected not to be an accident, involving property, casualties or involving 5 or more fire appliances.	Deliberate fires are a key component of Anti-Social Behaviour which is a national priority for Government.	Lower numbers
No of deliberate primary fires in vehicles	The number of fires in vehicles that are not derelict where the cause of fire is suspected as not to be an accident.		Lower numbers
No of deliberate secondary fires (excl. in vehicles)	The number of small fires where the cause of fire is suspected not to be an accident.		Lower numbers
	These include fires to: Derelict Buildings, Grass/Heath/Railway, Straw/Stubble, Refuse/Container, Tree/Fence/Lamp.		

Indicator	Plain English description	Rationale	Good Performance
No of deliberate secondary fires in vehicles	The number of fires where the cause of fire was not an accidental in derelict vehicles.	Deliberate fires are a key component of Anti-Social Behaviour which is a national priority for Government.	Lower numbers
No of home safety visits	The number of home fire safety visits where the householder was given fire safety advice and or had a fire alarm installed.	To raise awareness of the potential fire risks within the home in order to make them safer.	Higher numbers
Percentage of HSV to be delivered to vulnerable people	The number of home safety visits delivered to vulnerable people within our community.  Vulnerability is defined as lone pensioners, people over 65, people in rented accommodation, single parent families, hearing /sight impaired and those with a limiting long elderly.	In Rising to the Challenge, The Audit Commission reiterates that Home Fire Safety Checks should not be conducted indiscriminately, but targeted to those most at risk.	Higher percentage
No of accidental fires in dwellings attended	The numbers of fires in houses where the cause was accidental.	To ascertain the effectiveness of certain aspects of FRS activity including community safety education, where the public is prepared to cope with a fire event if it happens by closing doors and fitting smoke detection. And the rapid and effective response to the incident can confine the fire within the first compartment and reduce the damage and suffering.	Lower numbers
Number of fires in non-domestic properties	The number of fires in buildings such as agricultural, Industrial properties, Trade, hotels, catering etc.	To monitor the effectiveness of fire safety under the Regulatory Reform (Fire Safety) Order (RRO).	Lower number

Indicator	Plain English description	Rationale	Good Performance
Inspections of high risk premises to support compliance with the Fire Safety Order	The number of inspections undertaken in high risk premises.	Inspections within those premises covered by the fire safety order should reduce the perceived risk. Consequently, over time FRSs should see a positive reduction in inspection compliance outcomes within premise groups.	Higher number
Percentage of accidental dwelling fire confined to room of origin	The percentage of fires that did not spread past the room they started in.	To assess response effectiveness.	Higher percentage
No of working days/shifts lost due to sickness absence for all staff	The number of days/ shifts lost to sickness divided by the number of staff in post.	Sickness absence reduces the effectiveness of an organisation.	Lower number
Number of Workplace Reported Accidents / Injuries	The number of accidents/ injuries reported.	Staff safety is paramount, and it is important that the service measures	Lower number
Number of RIDDOR incidents	The number of injuries, deaths and dangerous occurrences reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.	whether health and safety procedures and initiatives to reduce physical attacks on firefighters are working. This is particularly important in light of any changes to types of station, appliances and crewing arrangements.	Lower number

# Agenda Item No. 096

#### **EAST SUSSEX FIRE AUTHORITY**

Meeting: Scrutiny & Audit Panel

Date: 24 July 2017

Title of Report: Health & Safety Year-End Report 2016-17

Hannah Scott-Youldon, Assistant Director - Training & By:

Assurance

**Lead Member:** Cllr Stuart Earl

**Background Papers:** Health, Safety & Wellbeing Strategy (2017-2020)

Appendices: Appendix A – Full breakdown of statistics

Appendix B – Timeline of activity and next 12 months

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

**PURPOSE OF REPORT:** To present the end of year health & safety statistics and provide

an update.

**EXECUTIVE SUMMARY:** This report provides the Scrutiny and Audit panel with a

summary of health and safety statistics for the year end of 2016/17, whilst providing some narrative around the statistics.

This report also provides a brief overview of health, safety and

well-being activity that has taken place over the previous 12

months.

RECOMMENDATION: The Scrutiny and Audit Panel is asked to:

note the 2016/17 health and safety statistics for the year end

as set out in the report.

note the health and safety activity over the last 12 months.

## 1. **INTRODUCTION**

- 1.1 This report contains the year end results for 2016/17, compared with 2015/16 of ESFRS performance against the Health & Safety lagging indicators. A full overview of the statistics can be found in Appendix A.
- 1.2 This report also outlines the health, safety and well-being activity that has taken place over the last 12 months.

### 2. MAIN ISSUES

- 2.1 This report provides a transparent, single view of information which allows the Scrutiny & Audit Panel to monitor how well the Service is performing in relation to Health & Safety as well as to raise Members', awareness of areas for improvement. This is the first time this report has been presented to the S&A Panel.
- 2.2 Lagging indicators are performance indicators that show the number and or severity of events which have occurred.
- 2.3 Whilst both the leading and lagging indicators have been previously approved by CMT, it is recognised that further work needs to be done to improve the Service's H&S intelligence systems. [Leading indicators are pre-incident measurements, for example, safety audits to try and eliminate the risk an incident occurring in the first place].
- 2.4 In February 2017, the Fire Authority signed off the revised Health, Safety & Wellbeing Strategy. At the same time the newly appointed Strategic Health, Safety & Wellbeing Manager commenced in role giving the Service a clear direction of travel in relation to priority areas for concentration.
- 2.5 In April 2017 staffing was significantly depleted in the team due to staff deciding the HQ move to Lewes was not for them. This highlighted significant vulnerabilities in both the staffing model and the systems / processes within the Health and Safety team.
- 2.6 In June 2017 the CMT approved a revised staffing model for the Health, Safety & Wellbeing team that will ensure the team partners each work group across the Service to provide support and expert advice in ensuring our performance against the health, safety and wellbeing indicators show an improvement year on year.

## 3. **PERFORMANCE**

- 3.1 In all but 1 of the lagging indicators there has been a decline in performance over the previous year.
- 3.2 The number of safety events received increased by 10 over the year however, looking back over the last 3 years, the Service has averaged a figure of 230 safety events having been reported. When statistically employing the 95% confidence level, last year's figure still falls within the 5% tolerance level.
- 3.3 There has been an increase in RIDDOR notifications to the HSE over the last 12 months. 7 out of the 9 notifications were for absences over 7 days and those were for musculo-skeletal injuries, mainly as a result of manual handling as part of operational duties.

- 3.4 To address this, the Health, Safety & Wellbeing team are working with operational colleagues to identify specific equipment to reduce the likelihood of manual handling injuries e.g. for lifting bariatric (large /overweight) size people.
- 3.5 1 was for a Dangerous Occurrence (malfunction of BA equipment) during training, 1 for a fracture (wrist) during training and 1 for a reportable disease (carpal tunnel syndrome) as part of general duties.
- 3.6 There was an increase in 1 in the figures for slips, trips and falls. Historically, this figure has remained quite static and given the nature of the work the service undertakes, the figure for slips, trips and falls remains consistently low.
- 3.7 There was a 36% decline in performance in the number of vehicle collisions that took place last year. Such a significant decline warrants an examination of the root causes into these incidents and this is now underway.
- 3.8 A spate of incidents in quarter 2 identified overgrown hedges and foliage being an issue resulting in local councils being written to.
- 3.9 Also a trend of low speed incidents, such as appliances hitting the bay doors has also been identified. This has been fed back to the Service Driving Instructors to ensure this is addressed.
- 3.10 Last year there was a 30% decline in performance for the number of incidents where there has been time lost from work. In the majority of cases the amount of working time lost was a few days or less.
- 3.11 HR & Borough Management teams are heavily focusing their efforts on sickness absence and how this can be reduced over the forthcoming year.
- 3.12 The Service has seen the number of incidents of work-related violence sadly increase over the last 12 months. 7 out of the 8 incidents reported were verbal abuse and all of these involved members of the public who were under the influence of drugs or alcohol. The other incident was a threat of physical violence, however, there was no injury.
- 3.13 There was an increase in the number of reported incidents of stress within the Service during 2016/17. A number of Service changes have had a detrimental impact on the level of workplace stress occurrences.
- 3.14 There was a 25% improvement in the number of near hits across the Service in 2016/17.
- 3.15 The performance outcome summary of lagging indicators is set out in Appendix A.

## 4. PROGRESS AND IMPROVEMENTS

- 4.1 On 2<sup>nd</sup> February 2016 Hereford & Worcester Fire and Rescue Service (HWFRS) were invited to undertake a peer review of East Sussex Fire & Rescue Service's (ESFRS) health and safety department and associated functions.
- 4.2 The audit team found a clear commitment to Health and Safety (H&S) at all levels, evidence of a positive health and safety culture and received positive engagement from staff at locations visited.
- 4.3 The audit report highlighted areas of good practice as well as 22 potential areas for improvement and enhancement.
- 4.4 Over the last 12 months the Health & Safety team, led by the Assistant Director of Training & Assurance has concentrated on the 22 recommendations made by HWFRS, in particular the governance and assurance structures that surrounds health, safety and wellbeing within the Service.
- 4.5 A timeline has been provided in Appendix B for further information. Further to this areas for the next 12 months have also been outlined in appendix B.

Agenda Item No. 096 Appendix A

Lagging Indicators	2014/15	2015/16	ESFRS Year End Position 2016/17	2016/17	Direction of Travel From 2015/16 Result	Narrative
Number of Safety Events Received	233	224	1 – 10% Improvement  1 – 10% Decline  11 – 100% Improvement  11 – 100% Decline	234	Decline	4% decline. Looking back over the last three years, the Service is averaging a figure of 230 safety events reported and when statistically employing the 95% confidence level, this year's figure still falls within that 5% tolerance level. A number of Service changes to operational procedures / equipment / vehicles has resulted in an increase in the number of safety events received.
Number of RIDDOR incidents	6	3	1 – 10% Improvement  1 – 10% Improvement  11 – 100% Improvement  11 – 100% Decline	9	Decline	Historically, the majority of RIDDOR notifications to HSE are for incapacitation over 7 days and the year 2016/17 was no exception. 7 of the notifications were for absences over 7 days and those were for musculo-skeletal injuries mainly as a result of manual handling. In order to address this the HS&W team are working with colleagues to identify specific equipment to reduce the likelihood of manual handling injuries eg for lifting bariatric size people. 1 was for a Dangerous Occurrence (malfunction of BA equipment), 1 for a fracture (wrist) and 1 for a Reportable Disease carpal tunnel syndrome).
Number of slips, trips and falls	14	18	1 – 10% Improvement  1 – 10% Improvement  11 – 100% Improvement  11 – 100% Decline	19	Decline	5% decline. As the figure for slips, trips and falls is so low, an increase of one incident has resulted in a 5% decline in performance. Historically, this figure has remained quite static and, given the nature of the work that the Service undertakes, this figure for slips, trips and falls remains consistently low.

Number of vehicle collisions	53	44	1 – 10% Improvement  11 – 100% Improvement  11 – 100% Decline	60	Decline	36% decline. Such a significant decline in performance warrants an examination of the root causes of these incidents. The top 3 causes have been recorded as 1. Fault of Another (25%) where Service vehicles have been struck by another party or swerve to avoid other road users; 2. Attention Distracted (25%) human factors are more challenging to address, particularly low speed reversing accidents; 3. Unsafe practice (20%) which is appliances or other service vehicles striking other vehicles (wing mirrors on parked cars most often) or stationary items such as bollards, low walls, branches, hedges etc. A spate of accidents in Q2. Overgrown hedgerows and foliage was identified as an issue and the local Councils written to. Also a trend of low speed incidents such as appliances hitting the bay doors have also been identified.
Number of incidents where work time lost	16	20	1 – 10% Improvement  1 – 10% Improvement  11 – 100% Improvement  11 – 100% Decline	26	Decline	30% decline. In the majority of cases the amount of working time lost was a few days or less. There are some individuals who have had longer periods of absence and these fall into the category of physical injury e.g. manual handling, slips/trips/falls and the category of wellbeing e.g. stress.
Incidence of work- related violence	5	4	1 – 10% Improvement  1 – 10% Improvement  11 – 100% Improvement  11 – 100% Decline	8	Decline	100% decline. Seven of the eight incidents reported were verbal abuse and all of these involved members of the public who were under the influence of drugs or alcohol. The other incident was a threat of physical violence and was recorded as a near hit, so there was no injury. Service personnel are encouraged to report incidences of violence in order that the Service can mitigate the risks as far as reasonably practicable and this seems to be well supported in the reporting behaviour.

Incidence of stress	15	3	1 – 10% Improvement 11 – 10% Decline	9	Decline	A number of Service changes has had a detrimental impact on the level of workplace stress occurrences.
Number of near hits	59	61	1 – 10% Improvement	46	Improvement	25% improvement. Although this shows a significant improvement it may be an anomaly and this figure should be viewed over a longer historical period to give it context.

## **Health & Safety Timeline over Last 12 Months**

Month	Activity
Feb 2016	Hereford and Worcester undertake peer audit
March 2016	Top level restructure with an Assistant Director taking the lead for Health, Safety & Wellbeing
July 2016	Health, Safety & Wellbeing Committee (HSWC) terms of reference revised, with a number of sub-groups being developed
Sept 2016	Lead Member for Health, Safety & Wellbeing nominated (Cllr Earl)
Oct 2016	HSWC approve the new ToR for the group and agree to the formation of a number of sub-groups that sit under the HSWC
Nov/Dec 2016	Sub-Groups of HSWC developed Background work aligning the Workplace Safety Rep meeting to the revised HSWC takes place
Jan 2017	WPSR meeting re-invigorated and new ToR developed and agreed
Feb 2017	Fire Authority sign off the HS&W Strategy The Strategic Health, Safety & Wellbeing Manager commences in role Healthy Mind and Healthy Body Groups are established
April 2017	Health & Safety Team Leader and the Administrator both leave the Service due to the move of HQ to Lewes
May 2017	All roles in the H&S team are reviewed and a new staffing structure for H&S proposed for CMT

#### **Next 12 months Focus**

- To develop a Business Partner approach that provides advice to the Organisation on all matters pertaining to HS&W
- To develop a three-year action plan to determine how the Health, Safety & Wellbeing Strategy will be met.
- To review each component part of the Health & Safety Management System providing assurance to the Organisation that it remains fit for purpose and has the necessary reporting systems in place to support the overarching management system.
- To ensure each Assistant Director business area has a risk profile for both People and Estate.
- To develop an assurance programme of audits for delivery.
- To develop a new suite of leading and lagging indicators that provide intelligence and enable trend analysis and assurance to both CMT and the Fire Authority.

#### **EAST SUSSEX FIRE AUTHORITY**

Panel: Scrutiny & Audit

**Date:** 24 July 2017

**Title of Report:** 2016/17 Statement of Operational Assurance

By: Mark O'Brien, Interim 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 2015/16.

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 2016/17

**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 2016/17 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 fifth Statement of Operational Assurance for approval by the Scrutiny & Audit Panel.

It should be noted that at the September 2016 meeting of the Scrutiny and Audit Panel it approved that future Statements of Operational Assurance should be included within the Annual Governance Statement. However, since that agreement, the Home Office are due to provide further guidance on the National Framework and specifically with regard to the format and content of future Statements of Operational Assurance. This is linked to the provision of a new independent inspectorate body for the fire and rescue service. Given this fact it should be noted that this Statement of Operational Assurance has only had a "light touch" update to the one published in September 2016.

#### **RECOMMENDATIONS:**

The Panel is 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.
- ii. note that next year's Statement of Operational Assurance will be published in the format, and contain the detail, as required by the Home Office once the relevant guidance has been published.

## 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 fire and rescue authorities (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. The Chief Fire Officers Association (CFOA) has also issued some guidance on the future direction of the reporting on Operational Assurance. Since July 2016 it has been announced that further guidance will be published but this is still awaited.
- 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 the newly created National Fire Chiefs Council (NFCC), and will be included in next year's statement.
- 2.5 This is ESFRS's fifth 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'.

2.6 It is proposed that future Operational Assurance Statements are written taking into account all new guidance issued as detailed above.

## 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 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. **IMPACT ASSESSMENT**

#### 4.1 **POLITICAL**

4.1.1 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.

## 4.2 **LEGAL**

4.2.1 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.

#### 5. **CONCLUSIONS**

5.1 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 NFCC we will ensure that future reports comply with the detailed requirements.

# Agenda Item No. 098

### **EAST SUSSEX FIRE AUTHORITY**

**Date:** 24 July 2017

**Title of Report:** Fires in Waste and Recycling Facilities

By: Interim Deputy Chief Fire Officer Mark Andrews

**Lead Officer:** Group Manager Mark Hobbs

Background Papers: None.

**Appendices:** None.

Implications:

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

PURPOSE OF REPORT: To report on the issues arising from a number of waste and

recycling site fires across East Sussex.

**EXECUTIVE SUMMARY:** This paper provides some background on the expansion of

the waste and recycling sector in the UK and the impacts on fire and rescue services. It provides a review of the waste site fires that have occurred in East Sussex. It then sets out the current powers and responsibilities held by different public bodies relating to fire safety in recycling and waste management sites, along with a proposal for a joint working agreement to be signed by East Sussex Fire & Rescue

Service (ESFRS) and the Environment Agency.

**RECOMMENDATION:** That the Panel:

1. note the report

2. support the signing of the Joint Working Agreement between ESFRS and the Environment Agency

## 1. BACKGROUND

- 1.1 The recycling and waste management industry has been expanding in recent years with increased pressure to meet Government and European targets for recycling rates. There have been a number of high profile and protracted fires across East Sussex and the UK involving waste recycling, landfill and waste wood sites. Since 2012 there were 32 of these fires in East Sussex involving 272 fire engines; such fires have the potential to burn for days and can have a huge impact not only on the local community and environment, but also on the wider economy via enforced road closures and the commitment of significant firefighting and local authority resources.
- 1.2 The most recent large waste site fire occurred on the 25 May 2017 at the Light Brothers site at Southerham, Lewes and resulted in a total of 35 appliances being mobilised to the site, including the Command Support Unit, two Bulk Water Carriers, including one from West Sussex Fire & Rescue Service. The protracted incident, involving 200 tonnes of scrap metal continued to burn for nearly 24 hours. The incident closed the A27 overnight and significant disruption was caused to traffic throughout the evening. A further smaller fire occurred at the site 12 June 2017 requiring 3 appliances.
- 1.3 On 18 August 2016, a fire occurred at PJ Skips Hailsham. The incident involved a large scale fire in wood chip which was started by heat from a shredding machine. The fire resulted in a total of 35 appliances being mobilised to site including Command Support Unit, two Bulk Water Carriers, High Volume Pump and one Aerial Ladder Platform. This incident resulted in the full closure of the A22 overnight causing significant traffic disruption and crews being detained at the scene for over 24 hours damping down.
- 1.4 In 2014, crews attended 3 large waste fires all in North Quay, Newhaven. In April a total of 7 appliances attended a fire at Sussex Skips involving a large scale fire in waste transfer building followed by 2 separate fires at the 'Skip It' waste site. Both these incidents involved hundreds of tonnes of loose household waste in a covered storage area; the 2 incidents attracted a total of 104 appliances including a range of specialist appliances between them.
- 1.5 To address all the issues above, ESFRS and its partners, including the Environment Agency (EA), are working together on increasing the safety and reducing the fire risk at these sites.

#### 2. **NATIONAL PICTURE**

- 2.1 Following a number of major waste site fires, the Chief Fire Officers Association (CFOA) arranged a Fire Futures Forum in October 2013 in order to respond to these challenging incidents by developing a multi-agency roadmap of solutions that were proportionate to the risk, cost effective and achievable for both the industry and enforcing authorities.
- 2.2 The outcome was the forming of a national Working Group who have since agreed a national Memorandum of Understanding with the Environment Agency which was formally signed in October 2015 and developed new National Operational Guidance (NOG) to enhance the operational response to waste fires.

- 2.3 Despite the significant work and progress made by the Waste Fires group and the reduction of overall numbers, major fires do continue to occur across the UK. The common factor at these incidents that leads to a protracted and costly attendance by fire and other emergency services tends to be the size of the stack and the level of management facilities and response made by the site at the time of the fire.
- 2.4 To support the management of these facilities the Waste Industry Safety and Health (WISH) forum have recently released an updated version of the WISH guide Reducing Fire Risk at Waste Management Sites. This guidance provides operators with clear information on stack sizes to reduce the size of fires if they do occur.

## 3. **ESFRS RESPONSE**

### **Operational Response**

- 3.1 Following the fires in 2014, operational risk information has been improved across the service, to ensure all operational staff are aware of the location of all higher risk sites and have suitable operational response plans in place. This work has been further improved as part of the outcome of operational debriefs following a number of further significant incidents.
- 3.1.1 As part of the November 2016 officer training program, a specific training package has been delivered to all officers on the new Tactical Operational Guidance and the hazards, risks and specialist tactics when dealing large scale waste fires.

### **Business Fire Safety**

- 3.2 Prior to the fire at Skip It December 2014 Business Safety inspectors would engage with sites post fire, providing advice on reducing the hazards and risks at these premises, however they would not routinely be audited. This was in part due to the low life risk and the Environment Agency being the lead authority for these premises.
- 3.2.1 Following the 2014 fires, working with Environment Agency, all waste sites are now identified on the Business Safety database, currently there 83 waste site permits recorded. To ensure this information remains current, the Environment Agency now provide an updated list of permitted waste sites on a six monthly basis.
- 3.2.2 Business Safety are working with Operational Planning to apply the risk scoring process contained within the EA/FRS MOU to identify higher risk sites. The initial desk top review of waste sites in East Sussex has identified;
  - 15 High Risk Sites
  - 30 Medium Risk Sites
  - 38 Low risk Sites
- 3.2.3 Business safety also ensure that borough management teams are aware of joint inspections of waste sites, to ensure they are aware of the firefighting facilities on site and this information is recorded as part of the firefighter safety database.

- 3.2.4 Since December 2014, all fires at waste sites have generated a post fire audit, however we still do not currently proactively audit waste sites due to relatively low life risk. Following the joint EA/FRS MOU these audits where possible take the form of a multi-agency approach with joint inspections carried out post fire.
- 3.2.5 In June 2015 in an effort to engage with site operators, consultants and Environment Agency, a seminar was held at Uckfield Civic Centre. This seminar was supported by a range of industry experts including ESFRS staff and was well attended with representatives from industry and regulators across the South East taking part.
- 3.2.6 In October 2016 ESFRS hosted a joint workshop at Service Training Centre between ESFRS officers and Environment Agency Inspectors to discuss greater collaboration and partnership working at Waste Sites and embed the EA/FRS MOU working protocols.
- 3.2.7 A draft local joint working agreement is in the process of being agreed which will result in all high risk waste sites across East Sussex being jointly inspected by officers from ESFRS and the EA. This joint agreement will also promote the exchange of data regarding high risk waste sites so that officers can target these sites more effectively before an incident occurs.
- 3.2.8 Following the fire at Southerham a joint visit was undertaken which has resulted in an agreed set of actions and recommendations to the site in order to reduce the risk of fire. The EA have stopped the shredding of Waste Electrical Equipment (WEE) due to breach of permit conditions, this process was responsible for the recent large fire.

# **Waste Fires Testing**

- 3.3 ESFRS has been involved in a project to test the burn characteristics of a number of waste types (plastics, wood, tyres) in order to provide evidence for national fire safety guidelines for storage of waste.
- 3.3.1 The second part of this test programme involves burning of various waste materials and comparing tactics of firefighting to determine which has the most effective knock down and extinguishing characteristics, whilst limiting impact on the environment through run-off. The testing will compare foam, water and wetting agents. This test is due to take place during October 2017.
- 3.3.2 The project has also now been extended to include the Fire Industry Association and a Fires of Special Interest Group has been established to assist with the research and testing of foam, which will assist FRS's in extinguishing these fires more quickly. These are the first and only tests of their kind, and will enhance national operational guidance for waste site fires.

# 4. <u>CURRENT POWERS AND RESPONSIBILITIES RELATING TO FIRE SAFETY</u> IN RECYCLING AND WASTE MANAGEMENT SITES

4.1 There are at least four different public bodies involved in the management of these sites – the Environment Agency (EA), local authority, Health and Safety Executive (HSE) and the Fire and Rescue Service. A mutual understanding of the respective roles and responsibilities of these agencies is required to deal with these sites.

### 5. **ENVIRONMENT AGENCY**

- 5.1 Waste management sites are regulated primarily by the EA, under the Environmental Permitting Regulations 2010 and are subject to certain conditions. If you keep, treat or dispose of waste, a permit is required to regulate the operation of the site. This is in order to control the risk to the environment, including the risk of fire. The site owner has to provide a "site working plan" which has to be agreed as part of the permit. Fire risk is something that has to be covered in the site working plan and it has to be addressed by control measures being put into place for both fire precautions and fire prevention.
- 5.2 The EA has greater powers to enforce and close sites through the use of their legislation than any other agency. The EA can take various enforcement actions if a permit is breached or looks like it will be breached. The simplest is to serve an Enforcement Notice which requires compliance with the permit. If there is a risk of serious pollution they can suspend the permit by serving a Suspension Notice (which suspends the operation of the permit). Non-compliance with either of these is a criminal offence and can result in a fine and five years in prison. The EA can also ask the High Court to oversee enforcement, which can make the penalties for non-compliance heavier and more varied such as getting a flexible court order requiring specific acts by specific times rather than just punishment. There are also a variety of other environmental protection offences that operators might commit.

### **Health and Safety Executive**

5.3 HSE is mainly concerned with process fire precautions which, together with other health and safety considerations, fall within the Health and Safety at Work etc. Act 19749 ("the 1974 Act") and its subordinate provisions (regulations and some older Acts of Parliament). Process fire precautions are the special fire precautions required in any workplace in connection with the work process that is being carried out there (including the storage of articles, substances and materials relating to that work process). They are to prevent or reduce the likelihood of a fire breaking out and if a fire does occur, to reduce its spread and intensity.

#### **East Sussex FRS**

- 5.4 Whilst the Regulatory Reform (Fire Safety) Order 2005 (FSO) covers all premises other than single private domestic premises, the FSO is focused on life safety and therefore not specific in its application to waste sites.
- Waste sites are predominantly large open areas and are a relatively low life risk and therefore in the past have not been prioritised, however the environmental, social and financial impact of waste site fires is disproportionate and therefore more focus has been placed on waste sites by Business Safety.

Waste sites have small fires on an almost daily basis due to the high risk process performed at the sites, however these risk are controlled through process fire precautions. Process fire precautions are specific fixed installations to protect and control the process, due to the perceived complexity and specialist nature of process risks these are enforced by the HSE and excluded from the FSO.

#### **Local Authority**

- 5.7 Local Authorities are the enforcing authority under public health legislation for dealing with "statutory nuisances" under Part III of the Environmental Protection Act 1990.
- This applies to waste and recycling sites as well as many other sorts of premises. The act places a duty on a local authority to investigate complaints of statutory nuisance from people living within its area. Some issues which may constitute statutory nuisances include:
  - noise
  - odour
  - insects
  - dust
  - fumes or gases

#### 6. **CONCLUSION**

- As the waste and recycling industry continues to expand small fires are inevitable given the high risk processes that occur at these sites. Better fire safety prevention is crucial to ensure that these fires are identified as early as possible and dealt with on site or when fire and rescue intervention is needed these fires are limited to small secondary fires.
- Overall, significant progress has been made towards tackling the issue of problematic waste and recycling sites over the last year. There are very strong stakeholder relationships now firmly established with key deliverables complete. There remains work to do specifically with the wider roll out and cascade of the local joint agreement which should ensure reduced fire risk at known sites.