

**SOURCES OF ASSURANCE:
LANCASHIRE FIRE AND RESCUE SERVICE/LANCASHIRE COMBINED FIRE AUTHORITY 2016/17**

Appendix 1

KEY ELEMENTS OF GOVERNANCE	ASSESS- MENT	COMMENTS
<p>Developing codes of conduct which define standards of behaviour for members and staff, and policies dealing with whistleblowing and conflicts of interests and that these codes and policies are communicated effectively</p>	<p>Good</p>	<p>Set of values agreed by the Authority - STRIVE</p> <p>Constitutional standing orders in place</p> <p>Updated Member and employee codes of conduct</p> <p>Register of interests, and on-going declaration of these</p> <p>Register of gifts and hospitality</p> <p>Appropriately qualified Clerk to the Authority</p> <p>Anti-bribery and whistle-blowing policies in place</p> <p>Register of complaints and compliments</p> <p>Complaints against Members considered as a standing CFA item</p> <p>Minimal number of complaints</p> <p>No substantiated complaints against the service</p>
<p>Ensuring compliance with relevant laws and regulations, internal policies and procedures, and that expenditure is lawful.</p>	<p>Good</p>	<p>All Committee and Authority reports contain section on financial implications. Legal implications are contained within the body of every report as appropriate.</p> <p>The Treasurer/Director of Corporate Services and Monitoring Officer examine all reports to the Authority and its committees to enable legal and financial implications to be considered and provision included where appropriate</p> <p>The Monitoring Officer and Treasurer/Director of Corporate Services attend Authority/Committee to provide advice as required</p>

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<p>Documenting a commitment to openness and acting in the public interest, and compliance with the principles of Data Transparency</p>	<p>Adequate</p>	<p>Compliance with Transparency code Publication scheme on the website. Compliance with FOI requirements Pay Policy Statement approved by the full Authority and published on the service website Annual Report Annual Assurance Statement Public meetings Publication of information on website, including Committee agenda and minutes Information Management Strategy needs to be completed.</p>
<p>Establishing clear channels of communication with all sections of the community and other stakeholders, ensuring accountability and encouraging open consultation.</p>	<p>Good</p>	<p>Comprehensive communication and consultations strategies in place Positive evidence of proposals being amended following outcomes of consultation Annual report published, including summary financial information Key documents published on internet and distributed to relevant stakeholders Constructive dialogue with representative bodies Register of complaints and compliments Annual Assurance Statement available on the website The External Auditors Annual Audit Letter did not identify any issues</p>

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		<p>Internal Audit provided substantial assurance over the internal control environment, governance and risk management arrangements</p> <p>Recommendations from audit reviews implemented</p> <p>Operational Assessment undertaken by Peer Review Team and found 'nothing of significance' that would cause problems, nor any issues 'with our self-awareness. Action Plan arising from this completed</p> <p>No substantiated complaints against the service</p>
<p>Developing and communicating a vision which specifies intended outcomes for citizens and service users and is used as a basis for planning.</p> <p>Translating the vision into objectives for the authority and its partnerships</p>	<p>Good</p>	<p>Updated Integrated Risk Management Plan agreed for 2017-2022</p> <p>Annual Service Plan, setting out Vision, Activities, Priorities and Values.</p> <p>KPIs identified for each of our priorities</p> <p>Suite of strategies/policies etc. regularly reviewed.</p> <p>Consultation and Communication Strategy setting out how we will consult with public and service users</p> <p>Assessment of compliance with National Framework</p> <p>Effective Corporate Programme Board arrangements, split into 3 Boards:-</p> <ul style="list-style-type: none"> • Business Process Improvement Programme • Workforce Development Programme • Service Delivery Change Programme. <p>All major projects and revise follow similar format and report to CPB</p> <p>Terms of reference for all Programme Board items agreed at outset and delivery against these monitored on a bi-monthly basis</p>

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<p>Reviewing the effectiveness of the decision-making framework, including delegation arrangements, decision making in partnerships, information provided to decision makers and robustness of data quality.</p>	<p>Good</p>	<p>Appropriate governance arrangements in place, CFA plus 5 Committees each with agreed terms of reference, supported by Standing Orders, Scheme of Delegation and Financial Regulations</p> <p>Performance Mgt information generated by Corvu is good</p> <p>Appropriate BCP arrangements in place in respect of systems and information, including regular backing up and storage of data.</p> <p>ICT Disaster Recovery Plan has been updated to reflect changes to the WAN and SAN infrastructure, and move to NWFC</p>
<p>Measuring the performance of services and related projects and ensuring that they are delivered in accordance with defined outcomes and that they represent the best use of resources and value for money.</p>	<p>Good</p>	<p>Comprehensive performance management information presented to SMT/Performance Committee on a regular basis</p> <p>KPIs agreed with monitoring arrangements in place</p> <p>Annual Report</p> <p>Organisational Assessment process via Peer Review</p> <p>Creation of Operational Assurance Audit Team to review:-</p> <ul style="list-style-type: none"> • operational preparedness • operational response • operational learning <p>External Audit review</p> <p>Comprehensive financial information reporting framework</p> <p>Medium Term Financial Plan and balanced budget in place</p> <p>Service reviews identified to deliver savings</p>

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		<p>Resources redirected into priority areas such as prevention and protection</p> <p>Consistently exceeded efficiency targets</p>
<p>Defining and documenting the roles and responsibilities of the executive, non-executive, scrutiny and officer functions, with clear delegation arrangements and protocols for effective communication in respect of the authority and partnership arrangements.</p>	<p>Good</p>	<p>Appropriate governance arrangements in place, CFA plus 5 Committees each with agreed terms of reference, supported by Standing Orders, Scheme of Delegation and Financial Regulations (these need reviewing and updating)</p> <p>Strategy Group meetings take place throughout the year, informing members of developments in a less formal manner</p> <p>Member/Officer protocol in place setting out respective roles and relationships etc.</p> <p>Member champions</p> <p>Job descriptions for all staff</p> <p>Regular briefing sessions before Committees and as and when required</p> <p>Induction/training provided to all members</p>
<p>Ensuring the authority's financial management arrangements conform with the governance requirements of the CIPFA Statement on the Role of the Chief financial Officer in Local Government and, where they do not, explain why and how they deliver the same impact.</p>	<p>Good</p>	<p>Self-assessment of the role of the Treasurer is compliant with the governance requirements set out in CIPFAs Statement on the Role of the Chief Financial Officer in Local Government</p> <p>Qualified Treasurer, sits on Exec Board and reports directly to Chief Fire Officer</p> <p>Regular appraisal</p> <p>Contract standing orders, financial regulations, budget holder instructions all updated</p> <p>Comprehensive budget setting/monitoring arrangement in place, linked to corporate objectives and priorities. Budget is delegated appropriately and aligned with operational responsibility</p>

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Ensuring effective arrangements are in place for the discharge of the monitoring officer function.	Good	<p>Clerk to the Authority is the monitoring officer</p> <p>Appropriately qualified/experienced</p> <p>Regular appraisal</p> <p>Procedural standing orders</p> <p>Scheme of delegation</p>
Ensuring effective arrangements are in place for the discharge of the head of paid service function.	Good	<p>CFO is the head of paid service</p> <p>Regular appraisal with Chairman</p>
Providing induction and identifying the development needs of members and senior officers in relation to their strategic roles, supported by appropriate training	Good	<p>Member Training and Development Committee</p> <p>All Members subject to a one to one to identify training and development needs. Specific Member training budget to address outcome s of this.</p> <p>Senior Officers subject to appraisal system, including identification of training and development needs</p>
Reviewing the effectiveness of the framework for identifying and managing risks and demonstrating clear accountability.	Good	<p>Comprehensive Risk Mgt Strategy</p> <p>Corporate Risk Register</p> <p>Corporate Programme Board items include an assessment of risk</p> <p>Revised BCP arrangements agreed. All departments have completed Business Impact Assessments and Recovery Plans. Strategic Plan is completed in place and tested on a regular basis.</p> <p>Additional resilience built into ICT network</p> <p>Appropriate insurance arrangements</p>

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Ensuring effective counter-fraud and anti-corruption arrangements are developed and maintained.	Good	Anti-fraud policy Fraud risk assessment undertaken in 2016/17 Full compliance with National Fraud Initiative
Ensuring the assurance arrangements conform with the governance requirements of the CIPFA Statement on the Role of the Head of Internal Audit and, where they do not, explain why and how they deliver the same impact.	Good	Internal Audit is outsourced to Lancashire County Council Internal Audit Charter in place Internal Audit Service Quality Assurance and Improvement Programme process agreed Lancashire County Council comply with CIPFA statement Head of Internal Audit has direct access to Audit Committee, Treasurer, Clerk and Chief Fire Officer as well as Members of the Authority
Undertaking the core functions of an audit committee, as identified in CIPFA's Audit Committees: Practical Guidance for Local Authorities.	Good	Audit Committee established and terms of reference agreed (these need reviewing and updating) All core functions of an Audit Committee, with the exception of approving the statement of accounts which is undertaken by Resources Committee, are covered by the existing terms of reference Self-assessment completed in 2015/16 Audit Committee have access to both Internal and external auditors, and are provided with an opportunity to discuss issues without Officers being present
Ensuring that the authority provides timely support, information and responses to external auditors and properly considers audit findings and recommendations	Good	Audit Committee established and terms of reference agreed All core functions of an Audit Committee, with the exception of approving the statement of accounts which is undertaken by Resources Committee, are covered by the existing terms of reference

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		<p>Head of Internal Audit has direct access to Audit Committee, Treasurer, Clerk and Chief Fire Officer as well as Members of the Authority</p> <p>Audit Committee have access to both Internal and external auditors, and are provided with an opportunity to discuss issues without Officers being present</p> <p>No issues identified by either Internal or External Auditor,</p>
<p>Incorporating good governance arrangements in respect of partnerships and other joint working and ensuring that they are reflected across the authority's overall governance structures.</p>	<p>Adequate</p>	<p>A framework has been developed to review potential partnership arrangements utilising the following criteria:</p> <ul style="list-style-type: none"> • Will it make Lancashire Safer? • Will undertaking the activity potentially damage our brand? • Does it fit with the public image of the FRS? • Will it detract from our ability to undertake other operational or preventative functions, if so to what extent? • Is there a significant negative financial impact? • Is the activity likely to fit comfortably with our stakeholders (Trade Unions, Firefighters, CFS staff, Partners, Home Office, etc.)? <p>In terms of specific work streams previously reported the following update is provided:-</p> <ul style="list-style-type: none"> • Safe and Well visits – identified 6 key areas that have been re-occurring themes to date; falls prevention, social isolation, diabetes, dementia, home security, healthy homes. A pilot commenced Dec 2nd 2016 involving operational crews and Community Safety Advisors across the county. Initial feedback from both staff delivering and recipients within local communities is positive. Developing an automated referral process and evaluating the model (with the support of the NFCC) are currently key work streams. • Information sharing work stream to consider LPRES (Lancashire Patient Record Exchange System); meeting to be progressed with suppliers, internal stakeholders and with other services. Development through the CFOA Strategic Health Group opens up access to the Exeter Data set (a live database of all GP patient registrations across Lancashire and South Cumbria.) and Information Sharing Agreements developed with Unitary Authorities, are viewed as key enablers in improving outcomes for vulnerable people.

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		<ul style="list-style-type: none"> • Fire Safety Model for social care work stream is progressing the development of a jointly owned action plan. The implementation of a revised Domiciliary Care contract, commissioned via Lancashire County Council, and how LFRS continue to strengthen the working relationships (specifically in terms of the provision of training) with those care providers meeting the contract specification, being a significant work-stream for 2017/18. • Volunteer work stream is embedded with the use of volunteers in delivering Fire Cadets. <p>Develop strategic alliance with Lancashire Constabulary</p>

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<p>Staff resources are adequate in numbers and skills to deliver the service objectives. The roles and responsibilities of staff and members have been clearly defined and are understood, and appropriate guidance and training are in place</p>	<p>Good</p>	<p>Workforce Development Strategy agreed</p> <p>Agreed establishment in line with approved budget. Agreed process for revising establishment.</p> <p>Job descriptions in place</p> <p>Appropriate recruitment checks undertaken</p> <p>Updated code of conduct in place and provided to all staff as part of induction. Revised staff induction programme planned for 2017/18</p> <p>Appropriate performance management arrangements</p> <p>Updated appraisal system, including identification of training and development needs</p> <p>Introduction of:-</p> <ul style="list-style-type: none"> • Action Learning Sets • Team Talks • Coaching and Mentoring • Leadership Conference planned for 2017/18 <p>Coaching and mentoring programme introduced</p> <p>Creation of Operational Assurance Audit Team to review:-</p> <ul style="list-style-type: none"> • operational preparedness • operational response • operational learning <p>Updated staff engagement strategy and improvement action plan agreed and implemented.</p> <p>Further work required to look at reviewing staff recognition and developing staff sounding board.</p>

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<p>There are adequate contingency procedures to ensure that services can be resumed in case of emergency.</p> <p>Contingency procedures are well communicated</p>	<p>Good</p>	<p>Revised BCP arrangements agreed. Strategic Plan is completed All departments have completed Business Impact Assessments and Recovery Plans.</p> <p>BCP is considered as a standing item on SMT</p> <p>BCP plan tested on a regular basis, and amended as required</p> <p>Active member of Lancashire Resilience Forum</p> <p>Appropriate BCP arrangements in place in respect of systems and information,</p>
<p>Processes have been established to ensure that corporate and local service policies and procedures are implemented effectively and are periodically reviewed</p>	<p>Good</p>	<p>System of internal control established</p> <p>Policies and service orders are regularly reviewed, in line with an agreed timetable</p> <p>Internal audit reviews have not identified any significant weaknesses</p> <p>External audit reviews have not identified any significant weaknesses</p>