

## Annual Governance Statement 2017/18

### Scope of Responsibility

Buckinghamshire & Milton Keynes Fire Authority is responsible for maintaining a sound system of internal control that supports the achievement of its policies, aims and objectives whilst safeguarding the public funds and organisational assets. There is also a responsibility for ensuring that the Authority is administered prudently and economically and that resources are applied efficiently and effectively, which includes arrangements for the management of risk.

Buckinghamshire & Milton Keynes Fire Authority has approved and adopted a code of corporate governance, which is consistent with the principles of the CIPFA/SOLACE Framework 'Delivering Good Governance in Local Government'. This statement explains how Buckinghamshire & Milton Keynes Fire Authority has complied with the code and also meets the requirements of regulation 6(1) of the Accounts and Audit Regulations 2015 in relation to the review of its systems of internal control and the publication of an annual statement on its governance.

### The Purpose of the Governance Framework

The system of internal control is designed to manage risk to a reasonable level rather than to eliminate all risk of failure to achieve policies, aims and objectives; it 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 achievements of the strategic objectives of Buckinghamshire & Milton Keynes Fire Authority, to evaluate the likelihood of those risks being realised and the impact should they occur, and to manage them efficiently, effectively and economically. The system of internal control has been in place for the year ended 31 March 2018 and up to the date of approval of the Statement of Accounts.

### The Governance Framework

The governance framework derives from six core principles of good governance set out in the CIPFA/SOLACE guidance which was updated in 2007. The six core principles which underpin good governance are:

- 1. Focusing on the purpose of the Authority and on outcomes for the community and creating and implementing a vision for the local area*

The Public Safety Plan 2015-20 sets out the detailed future improvements of the services provided by the Authority to the community within the constraints that it faces whilst managing risk. The community was consulted and actively encouraged to engage in debating the issues and priorities set out in the plan, allowing the public to hold the Authority accountable for its decisions and actions in an open and transparent manner. The Public Safety Plan is available on our website at:

[http://bucksfire.gov.uk/files/8114/2116/4524/2015 -  
\\_20 PSP Updated after 17 Dec CFA.pdf](http://bucksfire.gov.uk/files/8114/2116/4524/2015_-_20_PSP_Updated_after_17_Dec_CFA.pdf)

A fundamental element of the Public Safety Plan is ensuring service delivery is linked closely to local requirements. A service delivery directorate plan covers the Milton Keynes and Buckinghamshire Area, supported by individual Station Plans. Operational staff work within the same teams as their protection and prevention colleagues leading to a more joined up approach. This has led to notable achievements in helping the most vulnerable people in our communities through the "safeguarding"

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procedures; working collaboratively internally as well as with local authorities to improve the lives of those most in need of support, and those who most often fall through society's "safety nets".

The 2015–20 Public Safety Plan was presented to the Fire Authority for approval in December 2014 following a public consultation. This plan supersedes the previous 2012-17 plan and took effect from April 2015.

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

The respective roles and responsibilities for members and officers are set out in the Combination Order (the statutory instrument that formed the Fire Authority in 1997). There are two ordinary committees of the Fire Authority: The Executive Committee, and the Overview & Audit Committee. There are terms of reference for each committee and the role of the lead members has been developed over recent years.

Members of the Fire Authority are also members of either Buckinghamshire County Council or Milton Keynes Council. Some members may also be members of district councils with which we may be working, or voluntary agencies. Members are reminded of their responsibility to declare interests at each meeting. There is a scheme of delegation from the Authority to the Chief Fire Officer and statutory officers. The Chief Fire Officer is also the Chief Executive of the Authority.

The Authority's Member:Officer Protocol sets out the respective obligations and expectations and contains a reminder of the Authority's core values. These were revised and approved by the Overview and Audit Committee at its meeting on 11 March 2015 for recommendation to the Fire Authority on 10 June 2015. These can be found at the following link:

[http://bucksfire.gov.uk/files/8414/1053/3511/Protocol\\_on\\_Member\\_and\\_Officer\\_Relations\\_v2\\_Sept\\_14.pdf](http://bucksfire.gov.uk/files/8414/1053/3511/Protocol_on_Member_and_Officer_Relations_v2_Sept_14.pdf)

The Authority approved and adopted its current Pay Policy Statement in February 2018 setting out its policies on the remuneration of its chief officers, the remuneration of its lowest paid employees and the relationship between the remuneration of its chief officers and the remuneration of its employees who are not chief officers. This is reviewed at least annually.

The Authority has identified and recorded all partnership arrangements. All partnerships are the subject of formal agreements ensuring that these articulate legal status; respective liabilities and obligations; governance and audit; dispute resolutions and exit provisions. A review of partnership arrangements is undertaken annually and reported to the Executive Committee in order to provide assurance on risks associated with delivering services through third parties. Other key services provided through third parties are overseen by specific governance arrangements, namely:

- The Thames Valley Fire Control Service (hosted by Royal Berkshire Fire and Rescue Service) is overseen by a joint governance board with representatives from each service at both Officer and Member level.

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- Firefighters Pension Administration is overseen by the Local Pension Board. The administrators (West Yorkshire Pension Fund) attend the Board twice a year to discuss performance against key performance indicators.

In Buckinghamshire & Milton Keynes Fire Authority the Chief Finance Officer and Monitoring Officer are both members of the Strategic Management Board, helping to develop and implement strategy and to resource and deliver the organisation's strategic objectives. All material business decisions are taken by the Strategic Management Board (SMB) or by Members. Papers submitted for decision-making purposes must be referred to the Chief Finance Officer and the Monitoring Officer for financial and legal scrutiny prior to any decision being taken. The Chief Finance Officer, supported by the Chief Fire Officer leads the promotion and delivery of good financial management so that public money is safeguarded and used appropriately, economically, efficiently and effectively. This is achieved by a finance team that is suitably resourced, professionally qualified and suitably experienced.

There are nominated lead Members for various work streams and departments. This collaborative approach ensures levels of trust, confidence and awareness constantly improve for the benefit of the public and the service.

### *3. Promoting values for the Authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour.*

2017/18 has continued to see a significant investment in our staff training/development at all levels and across both operational and support functions. This continued investment has contributed to the successful delivery of the on-going transformation programmes set for the organisation.

There is evidence of improved levels of engagement, morale and communication with staff members and this can be attributed to various development programmes including a number of Manager's Workshops where the CFO's vision for the Authority was communicated as well as guest speakers providing insight into effective leadership.

A Culture Survey was carried out in October 2017, which identified what the service does well and areas for continuous improvement. These areas have been included in the 2018- 19 employee engagement, career development, learning and communication plans.

The Authority Training Needs Analysis (TNA) process continues to assess the need for this type of training at least annually. This TNA is translated into prioritised learning programmes, approved by the Training Strategy Group and scrutinised to ensure alignment with business priorities and the business continuity succession plans.

Leadership development was a focus for 2017- 18, with 25 employees approved to commence management apprenticeships in 2018; to upskill future leaders and aid talent retention.

A report was presented to the Executive Committee, September 2017, demonstrating significant progress against the 'Independent Review of Conditions of Service for Fire and Rescue Staff (published 3 November 2016); particularly relating to equality, diversity, culture change, and leadership development.

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Performance appraisal year end reviews assess management and leadership behaviours. In 2017- 18 equalities objectives were introduced for all employees and the outcomes are being reviewed against the Authority's Public Sector Duty objectives.

The Authority Values have also been displayed across all sites on new policy posters rolled out in early 2016. The maintenance and promotion of high standards of its Members is within the purview of the Overview and Audit Committee.

To ensure legal compliance and to avoid a conflict of interest arising, [at its meeting on 19 October 2016](#) the Authority approved the appointment of a panel of five "Independent Persons" shared amongst five other authorities for the purposes of assisting both an individual member and the Authority itself in the event of an allegation being made that a member has breached the Authority's Code of Conduct.

<http://bucksfire.gov.uk/files/3314/0732/6551/10CODEOFCONDUCT.pdf>

[At its meeting on 15 February 2017](#) the Authority approved a revised Code of Conduct complaints procedure in order that, in the event of an allegation being made of misconduct by Members, any allegation could be dealt with more speedily.

#### *4. Taking informed and transparent decisions which are subject to effective scrutiny and managing risk*

To support the service there are structured meetings at all levels within the service, with appropriate delegated authority. Timelines are in place so that SMB and Member meetings will be followed by Directorate and then team meetings to ensure the flow of information throughout the whole organisation. Although this is an evolving process, the culture is steadily changing so that minutes from meetings are available both internally and externally through the website.

Further developments to improve the effectiveness and transparency of decision making within the Service were made following the launch of new internal, officer 'boards' aligned to the Authority committee structure. These comprise:

- A Strategic Management Board, which replaced the previous senior officer meetings and focuses on strategic direction, strategic risk and acts as a gateway to the Fire Authority;
- A Performance Management Board which focuses on in year performance against agreed targets and budgets;
- A Business Transformation Board which focuses on strategic change and project portfolio management.

At its meeting of 15 February 2017 the Authority undertook careful consideration as to its number of Members, including whether to increase or decrease its size. On balance taking into account the balance between being large enough to allow scrutiny whilst not becoming burdensome in diverting resources away from operational delivery, it resolved to retain the same number of Members (17).

All Directorates have their own risk registers which are regularly reviewed at Directorate meetings. Corporate risks are reviewed quarterly by the Performance Management Board, monthly by the Strategic Management Board and by Members at each Overview and Audit Committee meeting.

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In addition to the development of performance software to improve service delivery, the HR and Finance (SAP) system has been replaced by more modern and fit for purpose systems. As well as improving the efficiency of the service the in-built electronic workflow and cloud-based reporting have further improved the level of system based control and resilience.

This improved control has supported managers to monitor and manage attendance levels. It also ensures that the management and administration of employee benefits and payments are linked to establishment control through an integrated system with the approved budgets and the financial ledger.

Although the shared service arrangement with Royal Berkshire Fire Authority for procurement has come to an end, the team are continuing to work collaboratively across the Thames Valley fire authorities. New software under a national initiative is being piloted and this, alongside the existing electronic ordering technology will ensure a continued and more effective proactive, open and transparent approach to procuring supplies and services.

### *5. Developing the capacity and capability of members and officers to be effective*

A number of policies are in place to support and underpin the "fit for purpose" structure. These policies have empowered managers to take responsibility and be accountable for their staff issues with HR advice as required.

A key part of the performance monitoring continues to be an individual performance management (appraisal) system which ensures that strategic aims are translated into individual objectives creating a "Golden Thread" throughout the service. This is an evolving process with particular challenges in applying this process to the retained duty system staff who have very limited time available.

The performance management system also identifies training and development needs and these are aggregated into a service wide Training Needs Analysis. The service increasingly benefits from more efficient and effective menu driven training delivery more aligned to budget planning timetables and delivered in a variety of formats (including face to face and e-learning).

Continuation of the Strategic Training Partnership with the Fire Service College was again a prominent feature in the way operational training was delivered during 2017/18. This progressive approach toward training delivery, once more enabled the operational competencies of front-line firefighters and supervisory commanders to be independently assessed and scrutinised, under realistic conditions in breathing apparatus and Level 1 incident command respectively.

Operational Assurance has continued to be progressed. Operational Assurance Limited (OAL) revisited the Service in November 2017 to undertake a checkpoint review of our progress against the recommendations in their report from 2016. They issued a very positive report. This was again made available in the public domain on our website. The benefits of having external scrutiny of our operations have been extensive. The Fire Authority sanctioned the funding of a further three years of external scrutiny. After a competitive procurement process a contract was awarded to OAL.

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In June 2017 an assurance team from the Home Office visited the Service to examine our progress in delivering the Joint Emergency Services Interoperability Principles (JESIP). We received a very positive report with only one firm recommendation which was to improve the way we embed JESIP in aspects of Incident Command refresher training.

All captured learning derived from the training partnership and assurance arrangements, will ensure continuous improvement remains a key organisational driver in the operational arena for BFRS.SMB has engendered a collegiate approach with Members through holding "Member Workshops" where future options are aired and discussed with Members before a narrower range of formal proposals are taken forward.

### *6. Engaging with local people and other stakeholders to ensure robust public accountability*

In terms of the organisational structure, committee meetings are accessible to the public and the dates are published on the website as are the agendas and committee papers, minutes and decisions for those meetings and those of the Thames Valley Control Service Joint Committee to which the Authority appoints 2 Members.

The service complies with the Data Transparency Code (latest version published February 2015) and ensures all the relevant information is published on our external website.

At a more local, direct level there are many examples of how we engage with the public and ensure public accountability:

- The service regularly reviews its partnerships to ensure they are appropriate and effective for both the organisation and the public.
- Memoranda of Understanding with other fire and rescue authorities and the police when carrying out fire investigation to improve collaborative working and ensure a more consistent approach to the way we investigate fires / arson.
- BMKFRS is a key stakeholder at a strategic level on both the Safer Stronger Bucks Partnership Board and the Safer MK Partnership. Officers are also engaged and involved in practitioner groups and fora where appropriate, ensuring public engagement and safety initiatives are focussed, effective and measured, whilst working with partner organisations with similar goals and objectives.

### **Review of effectiveness**

Buckinghamshire & Milton Keynes Fire 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 the executive managers within the Authority who have responsibility for the development and maintenance of the governance environment.

In addition, the Chief Internal Auditor's annual report, comments made by the external auditors (Ernst & Young), the Operational Assessment, other review agencies and inspectorates (referred to earlier) and the Overview & Audit Committee are all

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sources providing scrutiny and recommendations upon which the management have drawn to compile the action plan set out in Appendix B.

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Audits undertaken and assurance opinion:

<b>Audit assignments</b>	<b>Level of assurance that risks material to the achievement of the system's objectives are adequately managed and controlled.</b>	
	<b>Days</b>	<b>Overall Assurance</b> (all audits undertaken during 2017/18 unless stated)
Core Financial Controls	50	Substantial
Corporate Governance	15	Substantial
Fleet Management	10	Substantial
Property Management	10	Substantial
Follow Ups	10	
Corporate work/Audit Management	10	
<b>Total</b>	<b>105</b>	

It is a management responsibility to develop and maintain the internal control framework and to ensure compliance. It is the responsibility of Internal Audit to form an independent opinion on the adequacy of the system of internal control.

This opinion should be used as a key strand of the assurance framework which management use to develop their Annual Governance Statement.

The role of the internal audit service is to provide management with an objective assessment of whether systems and controls are working properly. It is a key part of the Authority's internal control system because it measures and evaluates the adequacy and effectiveness of other controls so that:

- The Fire Authority can establish the extent to which they can rely on the whole system; and
- Individual managers can establish the reliability of the systems and controls for which they are responsible.



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This is presented as the Chief Internal Auditor's opinion:

### **Opinion on the Fire Authority's Internal Control Environment Summary**

In my opinion the system of internal control provides reasonable assurance regarding the effective, efficient and economic exercise of the Authority's functions. During 2017/18 there has been continued improvement to Bucks & Milton Keynes Fire Authority's system of internal control through the on-going development of policies and procedures covering the key control processes. This demonstrates a continued robust and effective internal control and risk management environment that will facilitate the effective exercise of the Authority's functions.

The audit activity in 2017/18 has demonstrated that the Authority continues to improve and develop its key governance processes, and remains focussed on creating a strong system of internal control. The opinion is consistent with the outcomes of the individual audits, in which of the four audits completed, all were assessed as "substantial" assurance. 82% of previous audit actions had been fully implemented. The internal audit activity is limited to the scope of the audits within the plan, which represent a sample of the key controls across the Authority, hence we are unable to provide more than a reasonable level of assurance.

A summary of our assignment outcomes and work completed during the year is shown in the table on the previous page.

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### Conclusion

As a result of the extensive work undertaken by the management team in reviewing internal structures and reviewing roles and responsibilities as well as the introduction of new systems and processes, working together with the Chief Internal Auditor, the External Auditors and our own Audit Committee, a plan (see Appendix B) is in place to address the weaknesses identified and ensure continuous improvement of the governance system is in place. Appendix A sets out progress against the delivery of the 16/17 Annual Governance Statement action plan.

Further to the Chief Internal Auditor's comments, we propose over the coming year to take steps set out in Appendix B to address the above matters to further enhance our governance arrangements. We are satisfied that these steps will address the need for improvements that were identified in our review of effectiveness and will monitor their implementation and operation as part of our next annual review.

Signed ..... Date ..... 2018  
Councillor Roger Reed – Chairman of the Buckinghamshire & Milton Keynes Fire Authority

Signed ..... Date ..... 2018  
Jason Thelwell – Chief Executive and Chief Fire Officer of the Buckinghamshire & Milton Keynes Fire Authority

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### Appendix A

#### Significant Governance Issues addressed in 2017/18

	Issue	Action Plan (as per 2016/17 Statement – Appendix B)	Lead Officer	RAG Status	Progress	Target/ Completion Date
1.	Compliance with the General Data Protection Regulation (GDPR)	<p>The Information Commissioner’s Office (ICO) has put together a 12 step plan that outlines the basic pre-implementation requirements of the GDPR.</p> <p><b>1. Awareness</b> Ensure that decision makers and key people in the Authority are aware that the law is changing to the GDPR and the impact this is likely to have.</p> <p><b>2. Information held</b> Document what personal data is held by the Authority, where it came from and who it is shared with. – This is being extended to include all types of information held and where and is being undertaken as an information audit.</p> <p><b>3. Individuals’ rights</b> Review procedures to ensure they cover all the rights individuals have, including how personal data will be stored and deleted.</p>	Director of Legal & Governance	Green	<p>1. A number of Authority employees have received classroom based GDPR training as well as continuing to complete the mandatory “Responsible for Information” training every two years. Employees with specific roles in handling personal information will have additional training and procedures are being revised and refreshed to reflect the changes in legislation.</p> <p>2. The <a href="#">records retention and disposal schedule</a> /<a href="#">information asset register is reviewed and revised regularly to ensure that all personal information types are</a></p>	March 2018

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		<p><b>4. Communicating privacy information</b> Privacy notices will be reviewed and where necessary amended.</p> <p><b>5. Subject access requests (SARs)</b> Review of procedures for handling requests SARs.</p> <p><b>6. Lawful basis for processing personal data</b> Confirm and document the lawful basis for processing activities in the GDPR, document it. (See also 4 privacy notices).</p> <p><b>7. Consent</b> Review how the Authority seeks, records and manages consent and whether any changes are needed to meet the GDPR standard.</p> <p><b>8. Data breaches</b> Put appropriate procedures in place to detect, report and investigate data breaches.</p> <p><b>9. Children</b> Consideration of the mechanisms for confirming the age of children and the need to obtain parental or guardian consent for any data processing activity.</p> <p><b>10. Data Protection by Design</b></p>			<p><a href="#"><u>identified and only kept for as long as is necessary.</u></a> Where personal information is processed, Departments are responsible for maintaining Records Of Processing Activities (ROPA) including the basis for the processing.</p> <ol style="list-style-type: none"> <li>3. As above.</li> <li>4. The overarching privacy statement has been amended and is supported by short statements on specific processing activities.</li> <li>5. The procedure for managing has been updated to reflect that SARs no longer need to be made in writing; that the time limit for response by the Authority has been reduced; and that the prescribe charge has been abolished.</li> <li>6. There are six available lawful bases for processing. No single</li> </ol>	
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		<p><b>and Data Protection Impact Assessments</b></p> <p>Consider whether the ICO’s code of practice on Privacy Impact Assessments is adequately reflected in the Authority’s Integrated Impact Assessment (IIA) and develop Implementation plans.</p> <p><b>11. Data Protection Officer (DPO)</b> Designate a Data Protection Officer</p> <p><b>12. International</b> – Not applicable.</p>			<p>basis is ‘better’ or more important than the others – which basis is most appropriate to use depend on the purpose and relationship with the individual. All processing activities are being considered to ensure that the most appropriate basis is selected.</p> <p>7. The Authority is a public authority. Recital 43 of the GDPR notes that there is likely to be a clear imbalance between a public authority and the data subject, and it is therefore unlikely to be the case that consent can be freely given for the purposes of the GDPR. As there are 5 other lawful bases (see 6. above) the intention is to rely on a basis for processing other than consent, where possible, when processing personal or special category (sensitive) personal data. These</p>	
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					<p>changes are reflected in the Authority's privacy statement (see 4. above).</p> <p>8. A procedure is being put in place to detect, report and investigate data breaches. This will also cover "out-of-hours" breaches.</p> <p>9. Children's ages will be confirmed by the parent or guardian or by the school or referring agency.</p> <p>10. Officers are using an Integrated Impact Assessment (IIA) process and this is under review to ensure it continues to meet the needs of the Authority. Where a process / software is designed specifically around the needs of the Authority greater scrutiny is exercised to ensure that adequate measures are in place to protect personal information.</p> <p>11. The Authority's</p>	
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					<p>Information Governance and Compliance Manager has been designated at the DPO.</p> <p>12.All contracts are subject to verification to ensure that they are processed within the EEA or transferred outside of the EU in compliance with the conditions for transfer set out in the GDPR.</p>	
2.	Currency of financial and contractual governance documents	<p><b>Contracts Standing Orders</b> – review and update.</p> <p><b>Financial Regulations</b> – review and update</p> <p><b>Financial Instructions</b>- review and update</p>	Chief Finance Officer	Green	<p>Standing Orders and Financial Regulations were reviewed and updated and approved by the Fire Authority at its meeting on 18 October 2017.</p> <p>The Financial Instructions were reviewed and updated and approved by the Chief Fire Officer and Director of Finance and Assets in January 2018</p>	October 2017 and January 2018
3.	Operational Assurance	<p>The main focus is implementation of the recommendations of the independent operational assurance report which was received in December 2016.</p> <p>As part of the recommendations an operational assurance group was formed under the</p>	Head of Service Development	Green	<p>In November 2017, Operational Assurance Limited were invited back into the Service, in order to undertake a further independent review of the progress made against the previously identified improvement recommendations,</p>	March 2018

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		<p>chairmanship of the Head of Service Development. The Operational Assurance team was constituted as part of a department restructure and delivering the action plan, embedding the assurance model throughout the organisation and developing the assurance process in preparation for forthcoming external inspection.</p>			<p>during the preceding 12 months. The subsequent 'checkpoint' report was extremely positive, highlighting the considerable progress made against all the previously accepted recommendations. Particular emphasis was placed upon the work undertaken to address Priority Recommendation 1, notably the training package based on the 'Balmoral Bar' incident and development of the operationally focused Operational Assurance monthly report, both of which were considered exemplars.</p> <p>Progress was presented to the Overview and Audit Committee at its meeting on 7 March 2018.</p> <p>The value of having such in depth independent scrutiny is so great, that Authority agreed to sanction the funding of a further three years of external assurance for our operations. After a procurement process a contract was awarded to OAL.</p>	
4.	Professional Standards	Ensure that the Fire Professional Framework is embedded throughout the organisation.	Director of People and	Green	The past 12 months have seen some notable refinements being	



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		<p>Review and refresh the guidance, audit and recording of the maintenance of competence systems.</p> <p>Setup a fit for purpose, simple document management system to evidence and embed the main change programme processes and documentation, in order to provide evidence to external inspectors.</p>	<p>Organisational Development</p>		<p>made within the Hub of Education and Training (HEAT) system, in terms of content information and functionality, to support staff in maintaining operational competence.</p> <p>Operational front-line staff, within Buckinghamshire Fire &amp; Rescue Service (BFRS) work in ever-changing critical environments and can be called upon at any time to respond to a wide range of emergency situations.</p> <p>The operational information, performance criteria and training materials contained within HEAT has been mapped to correspond with accepted guidance and standards that relate to operational competence across the UKFRS, namely;</p> <ul style="list-style-type: none"> <li>• National Operational Guidance (NOG) and associated Training Specifications.</li> <li>• Fire Professional Framework and associated National</li> </ul>	
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					<p>Occupational Standards (NOS).</p> <p>This will ensure all operational firefighters and commanders within BFRS, have the right skills to effectively apply recognised operational procedures and comply with appropriate health and safety legislation.</p>	
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### Appendix B

#### Significant Governance Issues to be addressed in 2018/19

	Issue	Action Plan	Lead Officer	Target Date
1.	Compliance with the General Data Protection Regulation (GDPR)	<ul style="list-style-type: none"> <li>• Hold “decluttering events” to removed information that is no longer required and amend the retention and destruction schedule to reflect any additional information “types” and retention periods.</li> <li>• Amend process for requests to give or revoke access to common drives to limit permissions to Information Asset Owners and their authorised Information Stewards.</li> <li>• Verify that personally identifiable information (PII) records are held securely with no risk of degradation, obsolescence (of media type), damage or destruction or unauthorised access.</li> <li>• Ensure all departments that process PII maintain Records Of Processing Activity (ROPA).</li> <li>• Create an online Subject Access Request form.</li> <li>• Review and, where necessary, revise all procedures covering the handling and security of PII.</li> <li>• Consider additional training needs for departments / individuals handling PII.</li> <li>• Review and, where necessary, revise all extant contracts, information</li> </ul>	Director of Legal & Governance	March 2019

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		<p>sharing agreements and Memorandums of Understanding, and identify new requirements.</p> <ul style="list-style-type: none"> <li>• Review and revise existing privacy statements, identify and create any additional specific activity statements needed.</li> <li>• Review and revise existing Data Protection Impact Assessment (DPIA) screening questions to ensure that full DPIA's are created as necessary.</li> <li>• Ensure screening questions, for DPIA's, are completed whenever PII is likely to be involved in a project or process.</li> </ul>		
2.	Currency of financial and contractual governance documents	<p><b>Anti-Money Laundering Policy</b> – review and update</p> <p><b>Purchasing Card Guidelines</b> – review and update</p>	Chief Finance Officer	December 2018
3.	Currency of people governance documents	<p><b>Officers' Induction Guidance Notes</b> – review and update</p> <p><b>Equality and Diversity Policy</b> – review and update</p>	Director of People and Organisational Development	September 2018
4.	Pensions administration and reporting	The Authority's Pensions administrators continue to transfer increasing amounts of more complex information requirements on a monthly basis to Employee Services and Payroll. In addition there are a complex range of discretions across 4 main schemes. It is proposed to review the skills, capacity and level of internal pensions	Director of People and Organisational Development	March 2019

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		<p>officer support required within the service and also carry out a full review of all pension discretions, to ensure they are fit for purpose to support the Authority's People Strategy.</p> <p>It is also planned to review Pensions Communications within the service ; this reinforced by suggestions from the October 2017 Culture Survey.</p>		
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