

Appendix 1

Annual Governance Statement 2022/23

Scope of Responsibility

Buckinghamshire & Milton Keynes Fire Authority ('the 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.

This statement explains how the Authority has complied with the principles of the CIPFA/SOLACE 'Delivering Good Governance in Local Government Framework' (2016 Edition) and 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.

Under the Accounts and Audit Regulations 2015, the Authority must ensure that it has a sound system of internal control which—

- (a) facilitates the effective exercise of its functions and the achievement of its aims and objectives;
- (b) ensures that the financial and operational management of the Authority is effective; and
- (c) includes effective arrangements for the management of risk.

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 the 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 2023 and up to the date of approval of the Statement of Accounts.

The Governance Framework

The governance measures in place reflect the seven principles of good governance set out in the CIPFA/SOLACE 'Delivering Good Governance in Local Government: Framework (2016)'.

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Core Principle A: Behaving with integrity, demonstrating strong commitment to ethical values and respecting the rule of law.

Members' Code of Conduct and Register of Interests. A local [Code of Conduct](#) for all Members has been agreed by the Authority and a Register of disclosable pecuniary interests for each Member is reviewed annually and [published on the Authority's website](#). To ensure legal compliance and to avoid a conflict of interest arising, there is a panel of four "Independent Persons" appointed by the Authority in December 2020 until 30 September 2024 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.

In 2020 an audit was undertaken by officers to compare the Authority's procedures against the 15 best practice recommendations contained in the [Review by the Committee on Standards in Public Life - Local Government Ethical Standards](#) ('the CSPL Report'). The CSPL Report published January 2019 "represent a benchmark for ethical practice, and which we expect any local authority to implement."

The findings of the audit were considered by the Overview and Audit Committee on 11 November 2020 which made recommendations to the Authority at its meeting on 9 December 2020. In light of those recommendations the [complaints procedure](#) was revised and updated to reflect the recommendations in the CSPL Report.

Member Officer Protocol. [The Protocol on Member and Officer Relations](#) sets out the respective obligations and expectations and contains a reminder of the Authority's core values. This was subject to a quadrennial review and approved by the Overview and Audit Committee at its meeting on 17 July 2019 for recommendation to the Authority whereupon it was adopted on 18 September 2019.

Leadership. There are nominated [Lead Members](#) for various work streams and departments. This collaborative approach ensures levels of trust, confidence and awareness improve for the benefit of the public and the service. Following a recommendation from the Overview and Audit Committee meeting on 10 November 2021, at the Authority meeting on 8 December 2021 it was agreed that the Lead Member for Finance and Assets, Information Security and IT be appointed as Lead Member for Finance and Assets, Information Security, IT and Climate Change. To bring more focus on the issue of climate change, at its Annual Meeting on 15 June 2022, the Authority resolve that the Vice Chairman be appointed to lead on Climate Change (and to lead on the Authority's response to any matters relating to HMICFRS).

Ethical Framework. The Authority's objective is to embed Equality, Diversity and Inclusion (EDI) into everything it does, both internally and externally. The EDI objectives are set out and published against the Authority's core values: Diversity; Service to the Community; Improvement and People. The Authority has published its EDI [Policy Statement](#) and [Vision and Values Policy](#). An annual update on the EDI objectives is provided to the Fire Authority, this includes headlines and workforce data. The Authority's updated Code of Conduct for staff (below) incorporates the [LGA/NFCC Core Code of Ethics for Fire and Rescue Services – England](#) which sets out five ethical principles, intended to provide a basis for promoting good behaviour and challenging in appropriate behaviour thereby to help improve organisational culture and workforce diversity.

Code of Conduct for Staff. The Code provides individuals with an understanding of the standards expected when performing duties as an employee and guides behaviour, placing an obligation on all employees to take responsibility for their own conduct. An updated Code of Conduct was approved by the Executive Committee at its meeting on 22 March 2023, following scrutiny by the Overview and Audit Committee at its meeting on 15 March 2023. The updated Code of Conduct incorporates

Register of Gifts and Hospitality. In accordance with the Code of Conduct, staff are required to register offers and acceptances of gifts or hospitality in the [Register](#), summaries of the entries are publicly available.

Whistleblowing Policy. A procedure is in place and published for employees or contractors to raise concerns about a dangerous or illegal activity that they are aware of through their work. An updated Whistleblowing procedure was approved by the Overview and Audit Committee at its meeting on 15 March 2023. At its meeting on 22 March 2023, the Executive Committee received a presentation on the steps the Service is taking to highlight the importance of staff raising concerns. As part of this, the Service has re-branded its independent reporting service for staff to raise potential issues in confidence as part of its wider 'Speak Up' campaign to encourage our staff to report wrong-doing.

Complaints process. The [procedure](#) is published explaining how complaints from the public will be handled and investigated. All concerns and complaints are treated seriously, and people asked what resolution they are seeking. We keep them up to date with

progress and check that they are satisfied when the issue is resolved. We take any learning from the investigation and incorporate it in our processes. We are a learning organisation.

Counter-Fraud and Corruption Policy. The Authority has a zero tolerance approach to fraud, bribery and corruption, whether it is attempted from inside or outside the organisation. A copy of the policy is available on our [website](#).

Statutory Officers. The Monitoring Officer provides advice on the scope of the powers and responsibilities of the Authority and has a statutory duty to ensure lawfulness and fairness of decision making and also to receive allegations of breaches of the Code of Conduct by Authority Members. The Director of Legal & Governance acts as the Authority's Monitoring Officer and is governed by the professional standards set by the Solicitors' Regulation Authority.

The Monitoring Officer acted as the Authority's Data Protection Officer (DPO) for 2022/23 following an interim designation by the Chief Fire Officer/Chief Executive while, in accordance with the Authority's succession plan opportunities for options were explored for GDPR compliance including via an appointed external DPO on a service contract or a single DPO to act for more than one authority. This led to an agreement being entered into with Buckinghamshire Council in January 2023 for one of its staff to undertake key aspects of the DPO role.

The Chief Finance Officer and Monitoring Officer are both members of the Strategic Management Board (SMB), helping to develop and implement strategy and to resource and deliver the Authority's strategic objectives.

Core Principle B: Ensuring openness and comprehensive stakeholder engagement.

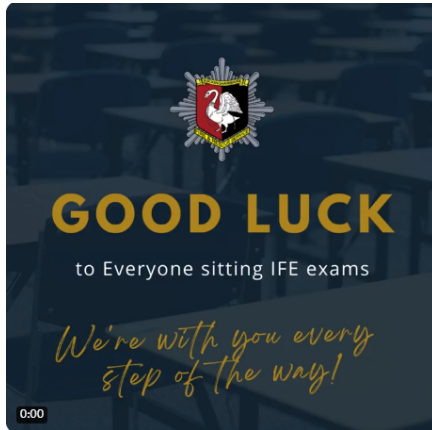
The Public Safety Plan 2020-25. This is the Authority's Integrated Risk Management Plan that sets out future improvements to the services provided by the Authority to the community within the constraints that it faces whilst managing risk. The community was consulted and encouraged to engage in debating 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.

A fundamental element of the [Public Safety Plan 2020-25](#) is ensuring service delivery is linked closely to local requirements. The strategies for Prevention and Response cover the Milton Keynes and Buckinghamshire Area, supported by service delivery area objectives reflecting local data led issues and actions. Operational staff work closely with their protection and prevention colleagues leading to a more joined up approach.

The Public Safety Plan 2020-25 was approved by the Authority on 12 February 2020 following the outcomes of a [public consultation](#) which took place between 23 September and 18 November 2019. This plan superseded the previous 2015-2020 plan and took effect from April 2020.

During 2022/23 the Service commenced planning for its next Public Safety Plan, which in line with new guidance, will be known as the Community Risk Management Plan and cover the period 2025-2030. An outline timeline for the planning process was presented to the Fire Authority on 7 December 2022 - <https://bucksfire.gov.uk/documents/2022/11/item-10-fire-authority-meeting-7-december-2022-2025-2030-service-planning.pdf/>

Public engagement. In 22/23 we invested in a temporary resource, Digital Marketing Apprentice to increase the Communication and Marketing team, this has allowed the team to increase our presence both on social media and through community events. The messages delivered range from 'Why BFRS is a great place to work' through to 'How to keep your home safe'



As stated above (Core Principle A) our complaints [procedure](#) is published explaining how complaints from the public will be handled and investigated. To encourage communications with us, our privacy statement aims to reassure people how we will protect their privacy. It explains their rights to personal information we hold about them and how to access this. We have a [Subject Access Request](#) form on our website which people may choose to use to contact us although they may contact us in other ways if they prefer

Fundamentally, Prevention performance is viewed in terms of the number of Home Fire Safety Visits (HFSV) delivered, with this being the only performance measure reported annually to the Home Office. Not including post incident advice, with or without the provision of risk reduction equipment (e.g. smoke detection) the number of HFSVs completed in 2022/23 increased by 93 percent to its highest level in five years with 2,403 pure HFSVs visits completed. When the post incident activity eligible for Home Office reporting is added to the HFSVs completed, the total prevention activity for 2022/23 is 2,678, a 76 percent increase on the combined prevention activity total of 1,524 reported in 2021/22.

During the peak of the Covid pandemic in 2020 and 2021, reluctance to permit entry to homes was experienced from people with a disability or aged 70 or above who were advised to self-isolate, however this has subsequently been overcome with 85 percent of people receiving a HFSV in 2022/23 having a disability or age-related vulnerability.

38 percent of Home Fire Safety Visits completed in 2022/23 were in Milton Keynes which is slightly higher than the proportion of the population residing there in the 2021 census data (34 percent). The most likely reason for this is the proactive work undertaken at high-rise premises in Milton Keynes, which has a 69 percent of the residential high-rise premises in the Service's area.

Engagement with partners. The Authority fulfils its role as a statutory community safety partner in the Safer MK Partnership and the Safer Buckinghamshire Board where it is the deputy sponsor for Priority One (Neighbourhood Crime) of the Safer Buckinghamshire Strategy 2023-2026, raising awareness of fraud, scams and hate crime during its work in the community.

In January 2023, Fire and Rescue services became a statutory specified authority under the Serious Violence Duty and as such the Service is a member of the Violence Reduction Partnership Strategic and Operational Boards and the Buckinghamshire Serious Violence Task Force. Aligned to this is membership of the Thames Valley Violence Against Women and Girls (VAWG) Strategic Board.

The Service also has representation on the MK Together Management Board; Milton Keynes Exploitation Network, Buckinghamshire Anti-slavery & Exploitation Network and Buckinghamshire Safeguarding Adults Board. Service personnel are also engaged and involved in a number of Community Boards, 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.

The Chairman was the Authority's representative on the Thames Valley Fire Control Service Joint Committee (together with a Lead Member) and for the year 22/23 was its appointed Chairman. Through the Chairman the Authority participates in the Thames Valley Collaboration Steering Group through which the Authority complies with its obligations under Section 2 of the Policing and Crime Act 2017 to keep collaboration opportunities with the Thames Valley Police and South Central Ambulance Service under review and, where

it would be in the interests of efficiency or effectiveness of at least two of the services, for those services to give effect to such collaboration.

Authority meetings. The [meetings](#) of the Authority and its 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 Fire Control Service Joint Committee](#) to which the Authority appoints two Members.

Internal Boards. To improve the effectiveness and transparency of decision making within the Authority there are internal, officer 'boards' aligned to the Authority committee structure. These comprise:

- A Strategic Management Board, which focuses on strategic direction, strategic risk and acts as a gateway to the Authority;
- A Performance Monitoring Board which focuses on in year performance against agreed performance indicators and budgets;
- A Business Transformation Board which focuses on strategic change and project portfolio management.

The Joint Consultation Forum. The objective of the Joint Consultation Forum is to continuously improve organisational performance by developing greater trust and increased job satisfaction through employee engagement. Its current membership comprises a senior management representative, the Head of HR, the HR Advisory and Development Manager and up to two representatives from each of the recognised Representative Bodies namely Fire Brigades Union, Fire Officers' Association, and UNISON. The Forum facilitates joint examination and discussion of issues of mutual interest with the aim of seeking acceptable solutions to matters through a genuine exchange of views and information. Consultation does not remove the right of managers to manage – they must still make the final decision – but it does require that the views of employees will be sought and considered before significant decisions are taken. The Forum membership has the ability to extend its membership to representatives of other recognised Representative Bodies, such as the Fire and Rescue Services Association, and non-affiliated staff representatives, should the request for employee representation arise.

Core Principle C: Defining outcomes in terms of sustainable economic, social and environmental benefits.

Authority Corporate Plan. The 2020-25 Corporate Plan sets out how the Authority intends to equip and develop the Service and its people to meet the challenges that we face over the next five years, in particular the need to:

- develop the Service to address the strategic context and priorities set out in our 2020-25 Public Safety Plan;
- address the 'Areas for Improvement' identified by Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) in their report on the findings from their first inspection of the Service undertaken in 2019. Recommendations and Areas for Improvement from the 2021 HMICFRS inspection of the Service are addressed in an HMICFRS Action Plan which was presented to the Overview and Audit Committee in March 2021

The new plan became effective following approval by the Authority at its 10 June 2020 meeting, succeeding the previous [2015-20 Corporate Plan](#). In the last quarter of the 2020/21 financial year, a review and refresh of the Corporate Plan was undertaken in order to address the impact of the Covid-19 pandemic on the timing and scope of the projects and workstreams specified within the plan. The updated plan was submitted to the Authority for approval at its 16 June 2021 meeting. A year 2 progress review and year 3 updated was presented to the Fire Authority at its meeting on 15 June 2022 - <https://bucksfire.gov.uk/documents/2022/05/fa-item-15.pdf/> Following this initial review, the plan was updated in response to feedback from Authority Members and subsequently approved by the Fire Authority at its meeting on 12 October 2022 - <https://bucksfire.gov.uk/documents/2022/09/fa-item-11-121022.pdf/>

Environment and Climate Action Plan. The Authority approved the adoption of its [Environment and Climate Action Plan](#) at its meeting on 8 December 2021. At the same meeting, the Authority also approved that the Lead Member for Finance and Assets, Information Security and IT be appointed as Lead Member for Finance and Assets, Information Security, IT and Climate Change.

Partnership Register. The Authority has identified and recorded all partnership arrangements. All partnerships are the subject of formal agreements ensuring that these articulate their legal status; respective liabilities and obligations; governance and audit; dispute

resolutions and exit provisions. A review of partnership arrangements is undertaken regularly 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 committee with Member representatives appointed by the three participating fire and rescue services, supported by Officers from the three services.
- The Authority is represented at Officer and Member level on the three levels of decision-making bodies of the [Thames Valley Emergency Services Collaboration Programme](#).
- Firefighters Pension Administration is overseen by the Local Pension Board. The administrators (West Yorkshire Pension Fund) attend the Board on a quarterly basis to discuss emerging risks, issues and performance against key performance indicators. An annual report from the Local Pension Board is received by the Overview & Audit Committee and pensions issues are flagged in the corporate risk register which is regularly reviewed by the Overview & Audit Committee.

Core Principle D: Determining the interventions necessary to optimise the achievement of the intended outcomes.

Performance Management Framework. During 2022-23 a suite of 75 performance measures was introduced split across the four quadrants of: 1. Public Impact 2. Response 3. Great Place to Work 4. Public Value

This Key Performance Measures report has been designed as a rounded and balanced picture of how the Service is performing at a local level. The report is presented to Members quarterly and includes a summary of key measures to be highlighted, a performance measures overview (each quadrant on a single page) and performance measures details showing actual performance alongside relevant trend information and (where needed) commentary.

The report contains many types of targets and methods of comparison. Some targets are aspirational, some are there to ensure minimum standards are met and others are there to identify exceptions within trends, allowing us to identify possible needs for change/reaction.

Medium Term Financial Plan. This is approved annually by the Authority and sets out the resources needed to deliver services.

[Financial Strategy 2020-21 to 24-25](#) The financial strategy is the link between the organisation's long-term service objectives and its financial capacity. The long-term service objectives for the Authority are set out in the Public Safety Plan and Corporate Plan.

[Capital Strategy](#) The strategy outlines the Authority's approach to capital investment ensuring it is in line with its corporate priorities and objectives set out in the Public Safety Plan. It provides a strategic overview of how capital expenditure; capital financing and treasury management activity contribute to the delivery of outcomes, as well as overview of the management of risk and future financial sustainability.

[Corporate Risk Register](#) This identifies controls to mitigate identified risks and is monitored on an on-going basis with reporting to every Strategic Management Board and to the Overview & Audit Committee.

Departmental Risk Registers. Each Directorate maintains its own risk register. These are reviewed on a quarterly basis by the Performance Monitoring Board which considers whether there are any risks which require escalation to the Strategic Management Board for potential inclusion in the Corporate Risk Register. Corporate risks are also scrutinised by the Authority's at each of its meetings - <https://bucksfire.gov.uk/documents/2023/03/overview-and-audit-committee-meeting-15-march-2023-item-9-corporate-risk-management.pdf/>

Safeguarding. The Service works in partnership with local safeguarding, anti-slavery and exploitation, and domestic violence networks to support and improve the lives of the people at risk in its community. Assurance of safeguarding processes is provided through participation in the annual audits conducted under Section 11 of the Children Act 2004 and contributing to the formation of the safeguarding board Annual Report required under the Care Act 2014. Further assurance is provided through participation in the National Fire Chiefs Council (NFCC) safeguarding groups and alignment with national guidance on safeguarding processes developed by the NFCC.

Where safeguarding needs are identified, referrals are made in line with the safeguarding procedure, and escalation is used where an agency response is not in line with service expectations. Complex cases and those at heightened risk of fire through self-neglect or arson are supported through interaction between relevant agencies and the provision of an enhanced level of safety equipment. The Service participates in Safeguarding Adult Reviews and Domestic Homicide Reviews as required by the Care Act 2014 and the Domestic Violence, Crime and Victims Act 2004, ensuring multi-agency learning is acted upon.

In line with the Prevent Duty introduced under the Counter-Terrorism and Security Act 2015, the Service also has representation on the Prevent Board working in partnership to safeguard people and the community from the threat of terrorism and radicalisation, disseminating the information shared in the annual Counter Terrorism Local Profile to appropriate staff groups.

Core Principle E: Developing the Authority's capacity, including the capability of its leadership and the individuals within it.

Authority Constitutional Documents. The Authority's [Standing Orders](#) define the roles and responsibilities of the Authority, Committees, Members and Officers and the protocols to be followed. The respective roles and responsibilities for members and officers are set out in the [Combination Order](#) (the statutory instrument that formed the Authority in 1997). Members of the Authority are also members of either Buckinghamshire Council or Milton Keynes Council. Some members may also be members of other agencies with which we may be working. 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.

There are two ordinary committees of the Authority: the [Executive Committee](#), and the [Overview & Audit Committee](#).

Member Development. In 2022/23 two new members were appointed onto the Authority including a new Chairman. Members are given an induction welcome pack, which includes information on the Service's vision and values, Members' Allowances, Code of Conduct, Protocol on Member and Officer Relations, principal officers and a general overview of the Service. Members have a training and development programme with regular workshops and a dedicated Member Support Officer.

[People Strategy](#). The People Strategy's purpose, which is approved and endorsed by the Authority's Members, is to deliver the Authority's goals by linking strategic aims to service-wide initiatives and projects. This approach aims to develop the organisation through the promotion of a culture of employee involvement, ownership, responsibility and trust. It also ensures our employees, alongside our partners and key stakeholders, can see how strategic aims are translated into day-to-day business, highlighting the importance of every person's contribution to achieving the Authority's vision.

The strategic framework highlights the five key areas supporting our overarching People Strategy; Equality, Diversity and Inclusion, Employee Engagement, Organisational Development and Resourcing, Training, Learning and Development and Employee Health and Wellbeing. Within each area there are a number of strategic outcomes which are aligned with the direction of the Service.

All employees are required to have an annual appraisal, where their commitment to their behaviours linked to the Authority's values is an essential element. Quality assurance of appraisal returns is undertaken to identify themes, and to assist with training requirements. Performance Management forms part of the Authority's Leadership and Management Development Programme and will support and assist with the development of existing and newly recruited or promoted managers.

Staff Development Process. The Authority's succession planning processes continue to ensure replenished development pools at each level, resulting in staff with the required skills to fulfil the roles as and when needed.

Following a pilot to evaluate the impact of temporarily changing our promotion processes, whereby we enabled more people to apply for Development Centres prior to securing their Technical Qualifications, we are planning to adopt these changes for the longer term.

Feedback on our current development process and some of the perceived barriers to staff development has been received via staff engagement sessions. The introduction of a staff development pathway and the processes within it, which is aligned to the National Fire Chief Council's (NFCC's) Core Learning Pathway and Leadership Framework will provide clarity to staff looking to develop themselves either within their existing role, or with aspiration for the next level role. The pathway will improve the effectiveness and efficiency of existing managers by identifying the acquisition training required for their role, as well as provide development opportunities and pathways for future managers and leaders of the organisation.

Succession planning. Regular systematic and rigorous Strategic Workforce and Succession Planning processes are in place, which incorporate current Public Safety Plan requirements and horizon scanning of likely future external and internal challenges. Outcomes from these processes are subsequently translated into timely interventions to ensure the Authority continues to meet workforce capacity requirements and build capability. In addition, it provides opportunity to refresh the workforce through the identification of people; internal and where required external to fill identified key positions.

Health and wellbeing. Support is in place for employees and has regularly been communicated to employees through various means such as the intranet, wellbeing roadshows and the Health and Safety department update programme. The Employee Relations team support managers with attendance management cases, to ensure employees have tailored support whilst off work and can return to work in a timely manner. External support is available via our Employee Assistance Programme.

In addition to the internal and external physical and mental wellbeing support networks available to staff, there are 37 trained Mental Health First Aiders across the organisation. In Spring 2022, refresher training was undertaken for First Aiders, Champions were trained to First Aider level and the establishment strengthened with new representatives added to the mental wellbeing support network. Trauma Support was relaunched during 2021 and the trauma support debriefing team undertake sessions as requested.

In May 2022, we introduced a Hybrid working guidance providing a flexible approach to an employee's work location.

Training Needs Analysis. The 'TNA' process assesses the need for staff 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, business continuity succession plans and approved budgets. The Authority continues to invest in its staff by way of training and development. Across all staff groups, we spent £230k on training in 2022/23. We offer a broad portfolio of training and development, some generic and some tailored to individuals via their appraisal and development plans which factors into our TNA.

Fire Service College. The current contract the Service has with the Fire Service College (the FSC), commenced in June 2022 and will continue until the end of May 2025. A feature of the arrangement is that our instructors can take the lead and run the FSC instructor courses. This ensures that our instructors are kept up to date with best practice within other fire and rescue services, rather than becoming insular.

The FSC facilities are used to assess and maintain the competence of operational staff for Breathing Apparatus and 'Incident Command (IC) Level 1 and to deliver training on fire behaviour and road traffic collisions.

Refresher training and assessment for Incident Command Levels 2 and 3 is also covered in the arrangement with the FSC. This covers Station and Group Commanders. Furthermore, we have piloted Incident Command refresher training and assessment with L 4 commanders at the FSC.

The facilities at the FSC enable large scale exercises to be run which helps us to test operational capability under the Joint Emergency Services Interoperability Principles (JESIP), further developing relationships with partner agencies, such as South Central Ambulance Service and Thames Valley Police, who are keen to remain involved in these exercises.

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Core Principle F: Managing risks and performance through robust internal control and strong public financial management.

Managing Data. The Authority has a data management framework which includes a programme of auditing the quality and accuracy of data used in decision making and performance monitoring; a training programme; data quality policy; and procedures for identifying personal and other sensitive information, assessing the impact of systems, processes and procedures, and for sharing information with other agencies and members of the public. The Performance Monitoring Board (PMB) reviews and challenges performance against targets and objectives.

The Authority uses encrypted email for the transmission of information outside of its Virtual Private Network (VPN) and has resilient back-up arrangements to assist in compliance and accountability to the confidentiality, integrity and availability of information.

Overview & Audit Committee. This committee reviews arrangements for identifying and managing the Authority's business risks and the approval or recommendation of policies in respect of the Authority's governance framework.

Chief Finance Officer. The Director of Finance & Assets ensures the sound administration of the financial affairs of the Authority, as required by the statutory duties associated with section 112 of the Local Government Finance Act 1988 and the Accounts and Audit Regulations 2015. The Chief Financial Officer is required to adhere to professional and ethical standards set by CIPFA.

Risk Management Strategy. This ensures that the Authority identifies strategic risks and applies the most cost-effective control mechanisms to manage those risks and reduce impact on the service provided to the public. The Authority's [Risk Management Policy and Guidance](#) is reviewed and approved by the Executive Committee.

Business Continuity Management. This is to ensure the Authority is resilient to interruptions which have the potential to adversely affect the delivery of core functions. The Authority's business continuity management processes include specific guidance for the management of pandemics. Under these arrangements, a 'Pandemic Management Group' was formed to act as a focal point for contingency planning in relation to the emerging Covid-19 pandemic outbreak from 14 February 2020 and was active until 31 March

2022. The business continuity management process was invoked with effect from 17 March 2020 to comply with Government guidance relating to the management of the pandemic.

These arrangements were also put in place 27 June 2022, to enable planning and preparations ahead of potential Industrial Action, due to the Fire Brigade Unions National Pay Dispute. September 13 2022 a Strategic Manager was put in place to oversee Business Continuity arrangements, specifically in relation to Industrial Action. Tactical and Strategic groups were set up to monitor and support planning activities and decision making. Review and debriefing have been undertaken to capture any challenges or opportunities, to inform future planning.

Governance Structure. All material business decisions are taken by the Chief Fire Officer in consultation with 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. The Chief Finance Officer meets regularly with the Lead Member responsible for Finance, as well as with the leaders of the political groups represented on the Authority.

Core Principle G: Implementing good practices in transparency, reporting and audit to deliver effective accountability

Pay Policy Statement. This is reviewed at least annually (most recently approved by the Authority in February 2023) 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.

Gender Pay Gap Reporting. This is reported annually to the Authority's Executive Committee (most recently approved in March 2023). The Authority publishes six pieces of prescribed data about the pay and bonuses of male and female workers within the organisation. The report is published annually on the <https://gender-pay-gap.service.gov.uk> website as well as the Authority's website.

Transparency Information. Data is published on the website in accordance with the [Local Government Transparency Code](#) (latest version published February 2015) to promote openness and accountability through reporting on local decision making, public spending and democratic processes.

Agendas, minutes and decisions. These are published on the website and include the rationale and considerations on which decisions are based.

Internal Audit. Buckinghamshire Council Internal Audit service provides the internal audit function for the Authority and reports to the Overview & Audit Committee. Regulation 5 of the Accounts and Audit Regulations 2015 states that the Authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance. Proper internal audit practices are defined in the Public Sector Internal Audit Standards 2017. The Chief Internal Auditor provides this opinion in an annual report on the System of Internal Control, which is used to inform the Authority's Annual Governance Statement.

External Audit. Ernst & Young LLP provides the external audit services to the Authority and reports regularly to the Overview and Audit Committee. They provide an opinion on whether the financial statements of the Authority give a true and fair view of the financial

position and of the income and expenditure for the year. They also provide a conclusion on the Authority's arrangements to secure economy, efficiency and effectiveness, as well as reporting to the National Audit Office on the Authority's Whole of Government Accounts return.

His Majesty's Inspectorate of Constabulary and Fire & Rescue Services. The 'HMICFRS' [published the findings](#) from its latest inspection of the Service on 15 December 2021. The report identified 22 areas for improvement and two causes of concern accompanied by eight recommendations. The Fire and Rescue Service National Framework requires fire and rescue services to give due regard to HMICFRS reports and recommendations. Where recommendations are made, the receiving Service is required to prepare, update and regularly publish an action plan detailing how such recommendations are actioned ([Fire and Rescue National Framework](#), section 7.5). The Service's latest inspection report was presented to the Fire Authority at its 16 February 2022 meeting and the revised Action Plan was published and approved by the Overview and Audit Committee at its 16 March 2022 meeting.

On the 31 March 2023, HMICFRS released a report focused on the values and culture of all 44 fire and rescue services (FRSs) in England and draws on the evidence collected through the inspections of FRSs since 2018. The Service has fed this into their Culture Action plan.

[Statement of Assurance.](#) This provides staff, partners and local communities with an assurance that the Authority is doing everything it can to keep them safe and that it is providing value for money.

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

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

“The results of the audit work undertaken, when combined with our experience and knowledge of previous years’ performance and the current climate in which the Authority is operating, form the basis for the overall opinion. As such, in my opinion the system of internal control provides **reasonable assurance** regarding the effective, efficient and economic exercise of the Authority’s functions. The work undertaken during 2022/23 has identified areas that require further improvements to ensure that the internal control framework remains adequate and effective. Findings raised from the 2022/23 internal audit reviews have not identified any material weaknesses. Overall, the Fire Authority has continued to demonstrate a robust and effective internal control and risk management environment.”

Source: Internal Audit Service Annual Report of the Chief Internal Auditor 2022/23 July 2023

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 Overview & 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 21/22 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

Cllr Simon Rouse - Chairman of the Buckinghamshire & Milton Keynes Fire Authority

Signed Date

Jason Thelwell – Chief Executive and Chief Fire Officer of the Buckinghamshire & Milton Keynes Fire Authority