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Merseyside FIRE & RESCUE SERVICE

To: All Members of the Audit and Scrutiny Sub Committee
(and any other Members who may wish to attend)

J. Henshaw
LLB (Hons)
Clerk to the Authority

Tel: 0151 296 4000
Extn: 4113 Kelly Kellaway

Your ref: Our ref HP/DM Date: 30 May 2018

Dear Sir/Madam,

You are invited to attend a meeting of the **AUDIT AND SCRUTINY SUB COMMITTEE** to be held at **2.00 pm** on **THURSDAY, 7TH JUNE, 2018** in the Liverpool Suite.

Yours faithfully,

Clerk to the Authority

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MERSEYSIDE FIRE AND RESCUE AUTHORITY

AUDIT AND SCRUTINY SUB COMMITTEE

7 JUNE 2018

AGENDA

Members

Cllr James Roberts (Chair)
Cllr Sharon Connor
Cllr Joe De'Asha
Cllr Lesley Rennie
Cllr Pat Ireland

1. Preliminary matters

Members are requested to consider the identification of:

a) Declarations of interest by individual Members relating to any item of business on the Agenda
b) Any additional items of business which the Chair has determined should be considered as matters of urgency; and
c) There are no items of business which require the exclusion of press and public during consideration thereof because of the possibility of the disclosure of exempt information

2. Minutes of Previous meeting (Pages 5 - 14)

The minutes of the previous meeting held on 07/02/18 are submitted as a correct record and for signature by the Chair.

3. 2017/18 ANNUAL YEAR-END INTERNAL AUDIT REPORT (Pages 15 - 30)

To consider report CFO/036/18 of the Treasurer concerning the Annual Year End Internal Audit report for 2017/18.

4. THE ANNUAL GOVERNANCE STATEMENT 2017/2018 (Pages 31 - 44)

To consider report CFO/028/18 of the Treasurer concerning the Authority's Annual Governance Statement. This statement fulfils the Authority's statutory requirement to prepare a statement of internal control in accordance with proper practices, and to present an annual review of the effectiveness of the current system.

5. **TREASURY MANAGEMENT ANNUAL REPORT 2017/18** (Pages 45 - 54)

To consider report CFO/033/18 of the Treasurer concerning the activities of the Treasury Management operation and actual performance against the agreed Prudential Indicators in 2017/18. This report meets the requirements of the CIPFA Code of Practice on Treasury Management and the CIPFA Prudential Code for Capital Finance in Local Authorities. The Authority is required to comply with both Codes through Regulations issued under the Local Government Act 2003.

6. **2018/19 INTERNAL AUDIT PLAN** (Pages 55 - 60)

To consider report CFO/026/18 of the Treasurer concerning the proposed Internal Audit plan for 2018/2019 and to seek comments from Members on the plan.

7. **CORPORATE RISK REGISTER DEC - MARCH 2017-18** (Pages 61 - 110)

To consider report CFO/034/18 of the Chief Fire Officer concerning the current risks contained within the Corporate Risk Register, the status of the risks and associated control measures, including any updates for the period December 2017 to March 2018.

8. **Equality & Diversity Plan 2017-2020, Progress for Quarter 3 & 4 2017/18** (Pages 111 - 162)

To consider report CFO/032/18 of the Chief Fire Officer, concerning the agreed Equality and Diversity (E&D) plan for quarters 3 & 4 and progress against the actions for the first year; and an update on the Equality Objectives for 2017/18 as at 31st March 2018.

If any Members have queries, comments or require additional information relating to any item on the agenda please contact Committee Services and we will endeavour to provide the information you require for the meeting. Of course this does not affect the right of any Member to raise questions in the meeting itself but it may assist Members in their consideration of an item if additional information is available.

Refreshments

Any Members attending on Authority business straight from work or for long periods of time, and require a sandwich, please contact Democratic Services, prior to your arrival, for arrangements to be made.

MERSEYSIDE FIRE AND RESCUE AUTHORITY

8 FEBRUARY 2018

MINUTES

Present: **Cllr James Roberts (Chair)** Councillors Lynne Clarke, Sharon Connor, Joe De'Asha and Lesley Rennie

Also Present:

Apologies of absence were received from:

1. Preliminary Matters

Members considered the identification of declarations of interest, any urgent additional items, and any business that may require the exclusion of the press and public.

Resolved that:

a) no declarations of interest were made by individual Members in relation to any item of business on the Agenda

b) no additional items of business to be considered as matters of urgency were determined by the Chair; and

c) the following item of business required the exclusion of the press and public during consideration thereof because of the possibility of the disclosure of exempt information:

- **Agenda Item 11 – "Part 2 EXEMPT Minutes"**

2. Minutes of the Previous Meeting

The Minutes of the previous meeting of the Audit & Scrutiny Sub-Committee, held on 21st September 2017, where approved as a correct record and signed accordingly by the Chair.

3. 2016/17 Annual Audit Plan

Mike Thomas representing the Authority's External Auditors – Grant Thornton, presented their Annual Audit Letter for MFRA for the financial year 2016/17.

He introduced his colleague – Ged Small, who has recently been assigned as MFRA's new Auditor.

He explained that the Annual Audit Letter is a backward looking document, which re-iterates the information contained within the Audit Findings Report,

presented to the Policy & Resources Committee on 27th July 2017. Members were informed that the National Audit Office's Code of Practice stipulates the requirement for the Annual Audit Letter to be issued.

Members were advised that Grant Thornton had issued an unqualified statement and confirmed that MFRA has appropriate value for money arrangements in place.

Members Resolved that the content of the report be noted.

4. Audit Plan 2017/18

Mike Thomas representing the Authority's External Auditors – Grant Thornton, presented their Audit Plan for MFRA for the year ending 31st March 2018.

Members were provided with an overview of the report, which sets out the planned scope and timings of the audit work; and highlights the significant and other risks identified, materiality, and value for money arrangements.

With regards to significant risks identified, Members were advised that this refers to significant audit and business risks with a higher risk of material misstatement, several of which for MFRA were outlined at its recent Budget Strategy Day.

Members were informed that in order to meet the new statutory date for publication of audited local government accounts, it is expected that Grant Thornton will report back their Audit Findings for 2017/18, in July 2018.

Members Resolved that the content of the report be noted.

5. TREASURY MANAGEMENT INTERIM REPORT 2017/18

Members considered report CFO/006/18 of the Treasurer, concerning a review of the Authority's Treasury Management activities, to ensure they are consistent with its approved Treasury Management Strategy and have remained within the approved prudential indicators.

Members approved the current Treasury Management Strategy at the Budget Authority Meeting on 23rd February 2017, the report advised Members that Treasury Management activity up to November had been carried out in line with the approved strategy.

Members resolved that the content of this report, be noted.

6. FINANCIAL REVIEW 2017/18 - APRIL TO DECEMBER

Members considered report CFO/003/18 of the Chief Fire Officer, reviewing the financial position, revenue and capital, for the Authority for 2017/18, for the period April to December 2017.

Members were provided with an overview of the report, which updates on the Authority's financial position up to the end of Quarter 3.

Members were advised that the Revenue Budget has remained unchanged. All budget savings have been delivered, with the exception of those associated with firefighter pay award, for which negotiations are ongoing. Members were advised that for 2017/18, any pay award above the 1% budgeted for, will be met from the Inflation Reserve, but further savings would need to be identified through the budget process, to deal with the additional increase on an ongoing basis.

Members were informed that a £0.5m favourable revenue variance had been identified, and the report recommended that it be used to increase the Capital Reserve in light of the potential increase in costs due to rephrasing of the St Helens new fire station and the refurbishment of the TDA.

Members were provided with an outline of movements on the Capital Budget, which are mainly due to the re-phasing of key projects, such as the delay in finalising the refurbishment of the Training and Development Academy.

Information regarding the Authority's level of reserves was highlighted to Members. The report outlined the level of investments held as at 31st December 2017 and as requested by Members when they considered the last financial review report the table outlining the current investments included information regarding the interest rate for each investment.

Questions were raised by Members regarding the delays associated with the St.Helens station merger and the impact those delays have had financially; and also the potential involvement of Merseyside Police in any new station to be built.

Members were informed that £5m was assumed in the Capital Programme for the St.Helens merger and although the estimated costs are now likely to be significantly higher, the additional cost will be funded from the Capital Reserve and a report will be presented to members in the near future on the proposed scheme. It was confirmed to Members that the scheme is not at risk, but officers are planning for contingencies.

With regards to the potential involvement of Merseyside Police in the scheme, Members were advised that negotiations are currently ongoing. Merseyside Police are currently reviewing their Estates Strategy and wherever there is opportunity to co-locate, options are being explored with Merseyside Police and North West Ambulance Service.

Members resolved that:

a) the potential £0.500m favourable revenue position identified within this report, be noted;

b) the utilisation of the £0.500m favourable revenue position to increase the Capital Reserve in order to enable the Authority to manage its borrowing need and any potential additional investment in the new St Helen's fire station and TDA refurbishment schemes, be approved; and

c) the Treasurer be instructed to continue to work with budget managers to maximise savings in 2017/18.

7. CONFIRMATION OF EXTERNAL AUDITOR APPOINTMENT FOR 2018/19

Members considered report CFO/007/18 of the Treasurer, informing Members that following the Public Sector Auditor Appointment Limited (PSAA) Board meeting in December 2017, PSAA have now advised the Authority that Grant Thornton have been confirmed as the external auditor for the Authority from 2018/19 to 2022/23.

Members were advised that the current contract ends once the audit work for 2017/18 is concluded. It has been previously agreed by Members to utilise the LGA's Public Sector Auditor Appointment Limited (PSAA), as the Authority's "appointing person" for external audit services for 2018/19 onwards.

Members were informed that the PSAA Board have now ratified the decision to appoint Grant Thornton as the Authority's External Auditor.

Members resolved that the contents of the report, be noted.

8. Corporate Risk Register 2017-18 July to Nov Update

Members considered report CFO/011/18 of the Deputy Chief Fire Officer, informing Members of the current risks contained within the Corporate Risk Register, the status of the risks and associated control measures, including any updates for the period July to November 2017.

Members were provided with an overview of the report and were informed that any changes made to the Corporate Risk Register have been highlighted within the document.

Members were informed that a recent Internal Audit review, considering the Authority's approach to Risk Management, found compliance to be "good" overall, with some "substantial" elements. All comments and recommendations from that review have been taken on board, with the Authority now considering

appetite and tolerance of risk; and ensuring that the status of risks are always included.

Members were advised that the Authority have taken a generally cautious attitude and approach to risk; and for this year, the initial judgement of risks will remain on the register, so changes made can be easily identified.

Members were informed that the mitigated scores are predominantly green or amber, with the only red exceptions being around financial risks, as decisions around these have yet to be taken.
Questions were raised around the current situation with regards to Resilience Officers being co-located at the Joint Command and Control Centre (JCC) and how the Local Authority Resilience Officers feed in. Members were informed that Merseyside Police and North West Ambulance Service officers are currently co-located at the JCC and structural changes have been made recently, which have aided further collaborative working. In terms of the Local Authority Resilience Officers, Members were advised that further information would be obtained and provided regarding their involvement.

Clarity was also requested around the risk regarding Insurance Discount Rates; and Members were informed that this is around insurance companies charging, which is therefore largely out of our control. However, Members were advised that there is a robust process in place to monitor contracts and insurance information, which helps to mitigate risk as far as possible.

A further question was raised with regards to Technological Risks in light of the recent Wannacry Virus and the increased prevalence of loss of data; and whether there have been changes in policy as a result.

Members were reminded of a recent Exempt Report considered by Members around Cyber Security and they were assured that this is an area which is closely and continually reviewed to ensure that the Authority is as resilient as possible.

Members resolved that:

(a) the updated Corporate Risk Register for 2017/18 which incorporates the current status of those risks to November 2017, be approved.

(b) Further information be provided to Members around the involvement of Local Authority Resilience Officers.

9. Health, Safety And Welfare Annual Report

Members considered report CFO/001/18 of the Chief Fire Officer, concerning the Annual Health, Safety & Welfare Report which details the performance of the Authority against its performance indicators for Health Safety and Welfare (HS&W) for financial year 2016/17.

Members were provided with an overview of the report, which highlighted some key areas of performance.

Members were advised that 2016/17 had seen a 19% reduction in injuries to operational staff, with 43 injuries reported. Of those 43 injuries, 29 of the individuals remained on duty, indicating that the injuries were predominantly minor in nature. In terms of non-operational staff, there was an increase of 5 injuries on the previous year, however 14 of the 16 individuals injured remained on duty. This highlights the improved positive reporting culture.

With regards to near miss reporting, Members were informed that there has been a further significant increase in reporting, which has enabled issues to be dealt with before an incident occurs. Again, this demonstrates the improved reporting culture across the organisation.

Members were also informed of performance in relation to Road Traffic Collisions (RTC) involving Authority vehicles, which saw a reduction of 9 incidents on the previous year. It was highlighted to Members that although a total of 70 RTC's involving Authority vehicles appears to be high, when considered against the total number of vehicle mobilisations per year, this is not as significant as it may first appear, particularly as the Authority has recently introduced 20 new drivers into the service, who are less experienced.

Information was also provided to Members around the suite of station audits which are conducted.

Questions were raised around the procedure followed after an RTC has occurred. Members were advised that an investigation will take place following all reported incidents. All incidents will be scrutinised by the Road Risk Review Group, to consider all details, review any CCTV footage and driver performance. If the individual involved is identified as being a "repeat offender", then further training will be provided and learning points will be identified. Monthly review meetings also take place to share learning. Therefore, Members were assured that there is a robust process in place.

Members also raised questions around the identification of incident trends for operational crews and how such trends are targeted. Members were informed that the reporting system used enables additional scrutiny to be undertaken and any trends to be easily identified. Where trends are identified, the focus will be around education, development and support. There will be a focus on specific areas and/ or individuals, with staff engaged and "toolbox talks" undertaken.

Clarity was sought by Members around the criteria for the general Health & Safety Audits. Members were informed that 3 different types of audits are undertaken and reported on. Health & Safety Audits for each station are undertaken on a monthly basis, by the relevant Station Manager, with any issues identified reported to the Health and Safety Department. Quarterly Joint Health and Safety Inspections occur with Station Managers and the Fire Brigade Union (FBU) Health and Safety Representative, which cover areas outside of those considered during the monthly audits. In addition, the Health and Safety

Department undertake annual audits, to ensure compliance with all relevant legislation.

Members also requested further information regarding the number of days lost due to injuries. Members were informed that it was difficult to provide too much insight into this as largely, the number of days lost due to injuries is out of the control of the organisation. Measures can be taken to prevent injuries occurring in the first instance and once an individual has sustained an injury, Occupational Health will work closely with the individual to provide the relevant support and treatment to enable them to return to work as soon as possible. However, the Health and Safety Department will continue to focus on the preventative elements and will continue to review all incidents.

A further question was raised by Members in relation to understanding how the reduction in injuries has been achieved, to enable the downward trend to continue. Comments were also made that although the number of injuries has reduced, the number of days lost due to injuries has not. Members were advised that when injuries have occurred, redacted information has been shared to aid learning and share experience. Also, a healthy reporting culture has been encouraged, which is highlighted by the number of incidents reported, where the individual has remained on duty. Members were informed that encouraging reporting results in an increase in recorded incidents, however it is more important that the organisation is aware of all incidents and near misses, to enable issues to be addressed.

With regards to the number of days lost not being comparable with the reduction in injuries reported, Members were advised that this will be researched further and reported back in due course.

Members resolved that:

(a) the content of the Annual Health, Safety & Welfare Report for the period April 2016 to March 2017, be noted; and

(b) the performance outcomes of the Authority against its Health Safety & Welfare performance targets for the period April 2016 to March 2017, be noted.

10. Bonfire Period 2017

Members considered report CFO/002/18 of the Deputy Chief Fire Officer, requesting that Members scrutinise, review and consider the performance of the Service over the Halloween and bonfire period 2017.
Members were provided with an overview of the report, highlighting the significant number of campaigns undertaken throughout the Bonfire Period; and the significant reduction in the number of incidents during the period on the previous year.

Members were informed that for 2017, the Bonfire Period ran from the 19th October to 7th November. During this period, 392 calls were received, which is

187 less than in 2016, representing a 32% reduction in calls. Members were advised that the reductions were reflective across all districts, however North Liverpool observed the largest overall reduction in incidents.

It was highlighted to Members that during the Bonfire Period, there were 9 reported incidents of Violence at Work (VaW), which although being 9 is obviously too many, was 1 less than the previous year. Member were informed that out of the 9 VaW incidents, 2 incidents resulted in significant damage to fire appliances.

Members were informed that since 2013, which saw the lowest number of incidents reported during the Bonfire Period, the number of incidents has been rising year on year. However, 2017 saw a reverse in this upward trend.

Members were also provided with an insight into some of the activity undertaken during the Bonfire Period, including target hardening for hate crime, fly tipping reports from operational crews; and working closely with partners to deliver presentations within schools, aimed at reducing the number of incidents and injuries associated with fireworks. A significant number of bonfire sweeps also took place on the morning of 6th November, which were effective in reducing the number of incidents and calls; and for 2017 Arson Officers had responsibility for their own plans, which also proved to be very effective.

With regards to Equality and Diversity implications, it was highlighted that there is a correlation between Indices of Multiple Deprivation and the number of small deliberate fires' and in terms of risk management, during the Bonfire Period all calls were constantly reviewed and dealt with following a risk based approach.

Members were informed that Appendix A to the report provided a detailed breakdown of incidents by local authority area; and Appendix B provides more detailed Infographics.

Members congratulated staff and partners on their fantastic work during the Bonfire Period.

Members resolved that:

(a) the information provided in this report, be noted.

(b) the performance of the Service as set out within this report, be noted.

11. Part 2 EXEMPT minutes , 21/09/2017 Audit and Scrutiny Sub Committee

The Part 2 EXEMPT Minutes of the previous meeting of the Audit & Scrutiny Sub-Committee, held on 21st September 2017, were approved as a correct record and signed accordingly by the Chair.

Close

Date of next meeting Thursday, 7 June 2018

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MERSEYSIDE FIRE AND RESCUE AUTHORITY			
MEETING OF THE:	**AUDIT AND SCRUTINY SUB-COMMITTEE**		
DATE:	**07 JUNE 2018**	**REPORT NO:**	**CFO/036/18**
PRESENTING OFFICER	**IAN CUMMINS, TREASURER**		
RESPONSIBLE OFFICER:	**IAN CUMMINS**	**REPORT AUTHOR:**	**IAN CUMMINS**
OFFICERS CONSULTED:			
TITLE OF REPORT:	**2017/18 ANNUAL YEAR-END INTERNAL AUDIT REPORT**		

APPENDICES:	**APPENDIX A:**	**MFRS - ANNUAL INTERNAL AUDIT REPORT AND OPINION**

Purpose of Report

1. To present to Members the Annual Year End Internal Audit report for 2017/18.

Recommendation

2. That Members note the contents of the report.

Introduction and Background

1. Internal Audit is an independent appraisal function established by the management of an organisation for the review of the internal control system as a service to the organisation. It objectively examines, evaluates and reports on the adequacy of internal control as a contribution to the proper economic, efficient and effective use of resources (Source: Code of Practice for Internal Audit in Local Government).

2. The Authority has a statutory duty to ensure that it maintains an adequate and effective system of Internal Audit of its accounting records and control systems (Accounts and Audit Regulations 2015).

3. In order to fulfil these functions the Authority buy-in Internal Audit service's from Liverpool City Council. Each year Internal Audit submit a plan for their work following consultation with the Treasurer and other key officers. This plan is set based upon an assessment of risks, previous findings and the relationship with External Audit work. The 201718 plan was considered by the Audit Sub Committee on 21st September, 2017 (CFO/057/17).

4. The Internal Audit outturn report for 2017/18 is attached as Appendix A. On the basis of the reviews undertaken Internal Audit have concluded that ***"it is our opinion that we can provide Substantial Assurance that the system of***

internal control in place at Merseyside Fire & Rescue accords with proper practice….The 2017/18 fundamental systems audits have shown a substantial level of compliance and none of the audits have identified weaknesses that have required a corporate impact assessment of major or moderate. Based on the audit work carried out in 2017/18 we are not aware of any significant control weaknesses within the Service which impact on the Annual Governance Statement"

5. Appendix A provides a brief overview of the key findings of each audit carried out in 2017/18. During 2017/18 Internal Audit have completed eleven audits of major systems with a further two at the planning stage. One audit, the firefighters pensions payroll/administration, will now be carried out in 2018/19. All of the completed audit reviews found a high level of assurance in the current system of control and governance and that any potential corporate risk to the Authority was negligible. The table below summaries the audit review and findings:

Audit Title	Control Environment	Compliance	Corporate Impact
Payroll	Substantial	Substantial	Minor
General Ledger	Substantial	Substantial	Minor
Treasury Management	Substantial	Substantial	Minor
Creditors	Substantial	Substantial	Minor
Debt Management	Substantial	Substantial	Minor
Procurement (2016/17 cfwd)	Good	Good	Moderate
Compliance with Protective Security Strategy	Advisory memo	Advisory memo	Advisory memo
Medium Term Financial Plan	*In Review*	*In Review*	*In Review*
Budgetary Control	*In Review*	*In Review*	*In Review*
Avon Review (Governance)	*In Review*	*In Review*	*In Review*
Management of Ancillary Fleet	*In Review*	*In Review*	*In Review*
Procurement (2017/18)	*Planning Stage*	*Planning Stage*	*Planning Stage*
Counter Fraud Policies	*Planning*	*Planning*	*Planning*
Firefighters Pensioners Payroll	*Deferred*	*Deferred*	*Deferred*

6. Copies of any audit report can be made available to any member of the committee should they wish to review the contents and recommendations in greater detail.

Equality and Diversity Implications

7. There are no Equality or Diversity Implications contained within this report.

Staff Implications

8. There are no staff implications contained within this report.

Legal Implications

9. The Authority has a statutory duty to ensure that it maintains an adequate and effective system of Internal Audit of its accounting records and control systems. (Accounts and Audit Regulations 2015 s.5(1)).

Financial Implications & Value for Money

10. The cost of the Internal Audit Service from Liverpool City Council in 2017/18 was £35,500. The Authority had made adequate budget provision in 2017/18 to pay for these audit services.

Risk Management, Health & Safety, and Environmental Implications

11. None contained within this report.

Contribution to Our Mission: *Safer Stronger Communities – Safe Effective Firefighters*

12. The Authority is committed to ensuring strong internal control processes are in place to ensure all information and services delivered are transparent and fair and all audit requirements are adhered to. The Authority continues to strive to maintain the highest level of standards and commitment to the community it serves.

BACKGROUND PAPERS

CFO/057/17 Annual Internal Audit Plan 2017/18" Audit Sub-Committee 21/09/17

Account & Audit Regulations 2015

Code of Practice for Internal Audit in Local Government, CIPFA 2003

GLOSSARY OF TERMS

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Liverpool City Council

Internal Audit Service

Merseyside Fire & Rescue Service - Annual Internal Audit Report and Opinion 2017/18



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Reporting Officer:	Melanie Dexter – Audit Manager

1 Introduction

1.1 This report summarises the work that Internal Audit has undertaken across Merseyside Fire & Rescue Service (the 'Service') during the 2017/18 financial year; the service for which is provided by Liverpool City Council, Internal Audit Service.

1.2 The purpose of the Annual Internal Audit Report is to meet the Chief Audit Executive's (CAE) annual reporting requirements set out in the Public Sector Internal Audit Standards (PSIAS). It sets out the requirement for the CAE (for the service this is the Head of Internal Audit) to report to senior officers and the 'Board' (for the service this is the Audit & Scrutiny Sub-Committee) to help inform their opinions on the effectiveness of the framework of governance, risk and control in operation within the Authority. The PSIAS requirements are that the report must incorporate:

- An annual internal audit opinion on the overall adequacy and effectiveness of the organisation's governance, risk and control framework (the control environment);
- a summary of the audit work that supports the opinion; and
- a statement on conformance with the PSIAS and the results of the quality assurance and improvement programme.

1.3 The audit work has been carried out in accordance with the 2017/18 risk-based audit plan. The plan is designed to give reasonable assurance that controls are in place and working effectively. Opinions are formed in respect of each individual audit and the audit opinion is separated between control environment (the controls in place) and compliance (whether or not the controls have been adhered to) so it is easier to identify where corrective action is needed.

1.4 We have liaised with senior management throughout the year to ensure that internal audit work undertaken continues to focus on the high-risk areas and in the light of new and ongoing developments in the service; to help ensure the most appropriate use of our resources.

1.5 The Annual Internal Audit Report is an important source of evidence for the Annual Governance Statement, and this report is timed to support the preparation of this Statement for the 2017/18 year.

1.6 We would like to thank those officers throughout the Authority who provided their assistance and cooperation in the course of our work throughout the year.

2 Internal Audit Opinion 2017/18

2.1 Internal Audit works to a risk based audit plan. The plan is designed to give reasonable assurance that controls are in place and working effectively. From the Internal Audit work undertaken in compliance with the PSIAS in 2017/18, it is our opinion that we can provide **Substantial Assurance** that the system of internal control in place at Merseyside Fire & Rescue accords with proper practice.

2.2 The 2017/18 fundamental systems audits have shown a substantial level of compliance and none of the audits have identified weaknesses that have required a corporate impact assessment of major or moderate. Based on the audit work carried out in 2017/18 we are not aware of any significant control weaknesses within the Service which impact on the Annual Governance Statement.

2.3 We undertake individual internal audits with the overall objective of providing members, the Chief Fire Officer, the Treasurer and other officers with reasonable, but not absolute, assurance against material misstatement or loss and, accordingly, this opinion does not provide such an absolute assurance.

2.4 Internal Audit uses an overall opinion grading for audits and certain responsive work which is based on the ratings of the audit recommendations being made and is explained in more detail in section 8. The table below summarises the opinions given on internal audit work in 2017/18.

Fig 1 Summary of Opinions provided in 2017/18

Assurance Level	Control Environment	Compliance
Substantial	5	5
Good	1	1
Acceptable	0	0
Limited	0	0
None	0	0
Advisory	1	1
Sub-total	**7**	**7**
Audits not yet reported	4	4
Total Audits Completed	**11**	**11**
Audits at planning stage	2	2
Audits Deferred	1	1
Total	**14**	**14**

3 Summary of Audit Work Completed

3.1 The opinion of the Head of Internal Audit is informed significantly by the results of audits of the Authority's fundamental systems. These are the major systems which underpin the system of internal control and financial reporting.

3.2 No significant issues were identified in the course of the fundamental systems audits. The audit coverage during the year has provided sufficient evidence that controls in place to govern the core financial systems are sound and that they are substantially adhered to. A summary of the outcomes of the audits for these systems for the year is set out below in Fig 2.

Fig 2 Completed fundamental systems audits from the 2017/18 audit plan

Audit Title	Control Environment	Compliance	Corporate Impact
Payroll	Substantial	Substantial	Minor
General Ledger	Substantial	Substantial	Minor
Treasury Management	Substantial	Substantial	Minor
Creditors	Substantial	Substantial	Minor
Debt Management	Substantial	Substantial	Minor
Medium Term Financial Plan	*In Review*	*In Review*	*In Review*
Budgetary Control	*In Review*	*In Review*	*In Review*
Procurement	*Planning Stage*	*Planning Stage*	*Planning Stage*

Payroll

3.3 In addition to reviewing payroll key controls additional substantive testing was performed to ensure that voluntary and statutory deductions are processed accurately and paid promptly to the relevant bodies. No areas for improvement were identified and as a result we were able to provide a **substantial** level of assurance.

General Ledger

3.4 As standard practice with this audit area we made use of Computer Assisted Audit Techniques (CAATs) to confirm the accuracy and completeness of the information held on the system, and established that there were appropriate processes in place for the use of journals, suspense accounts and bank reconciliations. As above we were able to provide a **substantial** level of assurance.

Treasury Management

3.5 The audit work comprised of detailed testing on a sample of investments made throughout the year, involving a review of transactions and respective documentation. An agreed service level agreement between MFRA and Liverpool City Council was in place covering the provision of treasury management services for the period 1st April 2017 to 31st March 2018. We therefore also made reference and placed assurance on the audit work undertaken of the LCC Treasury Management system where the systems overlap. There were 5 short-term loans in the year (up to 22nd March) which were all repaid. There were the usual outs and ins re investments, with cash balances roughly the same at the end of the year, as at the beginning. No recommendations were made in this area, and as a result we were able to provide a **substantial** level of assurance.

Creditors

3.6 In line with the audit plan, an audit of the creditors system was performed. CAATs testing was utilised to enable a consideration of the full population. This testing found no duplicate supplier accounts or invoices for this period. Testing also showed that there is an adequate separation of duties to ensure that checks and authorisation controls are in place before payments are made. No

recommendations were made after this review, and we were able to provide a **substantial** level of assurance.

Debt Management

3.7 The review of sundry debtors involved reviewing the controls in place for the collection of sundry debts owed to MFRS. CAATs testing was also utilised in this audit review to provide a detailed level of analysis of debts raised on the financial system.

3.8 The procedures for both the raising and cancelling of invoices were reviewed and subsequent testing found that controls were working effectively. Testing also confirmed that regular reconciliations are undertaken between the number of invoices produced and the information in the financial system, to ensure that there are no missing invoices or duplications. The debtors' system was found to be working well, with no areas for improvement identified.

Medium Term Financial Plan

3.9 The Authority, like other organisations across the public sector, has faced, and is facing, some challenging issues in respect of financial sustainability. The focus of this audit is to ensure that the Authority's medium term financial position reflects this and that proposals have been developed for the majority of these savings requirements. The continued focus and delivery of these savings will be a key to the Authority delivering an efficient an effective service.

Budgetary Control

3.10 This review is examining the budget monitoring arrangements for the 2017/18 financial year in order to provide an overall opinion as to whether the controls in place were adequate and effective in order to underpin an effective budgetary control process. The audit is currently in review so it would be inappropriate at this stage to provide an overall opinion until it has been agreed by management.

Procurement

3.11 The objective of this audit review is to review the processes and controls that have been established as part of the new National Resilience Initiative.

Fig 3 Other Strategic/Client directed audits completed in 2017/18

Audit Title	Control Environment	Compliance	Corporate Impact
Procurement *(cfwd)*	Good	Good	Moderate
Compliance with Protective Security Strategy	Advisory memo	Advisory memo	Advisory memo
Avon Review (Governance)	*In Review*	*In Review*	*In Review*
Management of Ancillary Fleet	*In Review*	*In Review*	*In Review*
Counter Fraud Policies	*Planning*	*Planning*	*Planning*
Firefighters Pensioners Payroll	*Deferred*	*Deferred*	*Deferred*

Procurement (old year)

3.12 The objective of this audit review was to provide assurance on the adequacy and effectiveness of the process of evaluating tenders, to ensure that it is applied consistently, fairly and transparently and to ensure compliance with requirements as set out in the UK Public Contracts Regulations (2015) and locally agreed Contract Standing Orders.

3.13 The audit identified that whilst Creditsafe checks were performed on tenderers the approach to undertaking due diligence checks could be formalised so that there is consistency in approach by the authority. The audit established that the decision to award a £650,000 contract was not supported by a documented approved Authority decision, and was therefore contrary to Contract Standing Orders 13.1. We were informed that retrospective approval would be sought in this instance. We also recommended that it is good practice for potential conflicts of interest to be identified by each member of the evaluation team for every tender evaluation exercise they participate in. Testing also established that an error had occurred with regards to the inclusion of a tenderer at the pricing stage of a tender exercise although they should have been eliminated by that point. Their inclusion however did not affect the outcome, although it did effect the scores awarded.

3.14 Based on the testing undertaken, although the audit review produced seven recommendations to improve working practices, we were able to provide a **good** level of assurance that the controls tested were operating effectively.

Compliance with Protective Security Strategy

3.15 As part of the agreed planned work for 2017/18, Internal Audit were asked to review the process followed by MFRS to establish how they would assess their compliance with the Fire and Rescue Protective Security Strategy 2012. Although this document, along with a Framework and Toolkit is still on the Chief Fire Officers Association website the Framework was updated by the Cabinet Office in early 2014. We therefore have used the more recent framework to perform the review.

3.16 We have detailed on both areas of compliance and any areas where there are potential gaps / improvements required. As this was a piece of advisory work no opinion has been given.

Avon Review (Governance)

3.17 The scope of this audit is to review governance and leadership arrangements in MFRA against the scope and the subsequent findings of the Statutory Inspection of Avon Fire and Rescue Authority. The audit is currently in review so it would be inappropriate at this stage to provide an overall opinion until it has been agreed by management.

Management of Ancillary Fleet

3.18 The objective of this review was to ensure that the ancillary fleet is utilised and managed effectively and efficiently to establish whether current operating practices represent best value for MFRS. The review is considering whether current records

available offer sufficient detailed information to allow senior management to ensure that best use is made of the ancillary fleet.

Counterfraud Policies

3.19 The scope of this review is currently being discussed with management.

Firefighters Pensioners Payroll

3.20 This audit review has not been undertaken but as this year's planned days will have been utilised with the completion of other work; it has been agreed that the audit will be carried forward to the 2018/19 audit plan.

Contingency/Responsive/Advice and Assistance

3.21 Internal Audit were asked to provide advisory support in relation to CIPFA's Technical Information Service's web pages for Fire Services. Advisory support was also provided in relation to external audit assurance requirements.

4 Recommendation Implementation

4.1 It is our policy to follow up all recommendations that are given either a three star (essential/strategic) or a two star (high) priority rating. There were four recommendations made in 2017/18 in respect of Procurement Tender Evaluation audit which were followed up within 6 months and we are awaiting confirmation of implementation. All other recommendations followed up were from previous years and were confirmed as implemented. There are also a few other recommendations outstanding relating to four former audits; the implementation dates have been extended for three and we are awaiting information for the other.

5 Quality Assurance and Improvement Programme

5.1 It is a requirement of PSIAS for the Chief Audit Executive to develop and maintain a QAIP that covers all aspects of internal audit activity.

5.2 The Internal Audit Service has had long-standing governance arrangements in place for quality assurance and improvement that pre-date the introduction of the PSIAS and the QAIP. In the main, the development of the QAIP involved bringing together the existing arrangements in a formalised framework.

5.3 The QAIP is made up of internal and external assessments. It is a requirement of the PSIAS for the results of assessments against the QAIP to be reported in the Annual Report.

5.4 Based on the results of the internal assessments we can conclude that Internal Audit complied with the main requirements of the standards. Areas for improvement were identified and actions have been put in place against these. Specifically, the assessment identified that the Internal Audit Charter required updating to be brought in line with the updated Standards, this was completed and a decision made to review annually. The annual review of both the Charter and the QAIP is scheduled to take place shortly and will be brought to the next Audit Committee.

5.5 External assessments are required to be undertaken at least every five years. During 2016/17 Internal Audit were subject to an external assessment by Glasgow

City Council. The assessment concluded that Internal Audit complies with the main requirements of the standards. Of these recommendations made, all have been fully implemented.

5.6 During the year the Internal Audit Service also retained ISO accreditation (to a new ISO standard) following an audit of the quality system arrangements. This was based on an external assessment.

5.7 Based on the results of the QAIP for 2017/18 the Head of Internal Audit can confirm that internal audit activity conforms with the International Standards for the Professional Practice of Internal Auditing and with the requirements of PSIAS and the Code of Ethics.

6 Organisational Independence

6.1 PSIAS require the Head of Internal Audit to confirm to the Audit and Scrutiny Sub Committee the organisational independence of the internal audit activity. Organisational independence is effectively achieved when the Head of Internal Audit reports functionally to the Board.

6.2 The arrangements in place to ensure organisational independence of the Internal Audit Service are outlined in the Internal Audit Charter. Key elements of this include:

- Approval of the Internal Audit Charter by the Audit and Scrutiny Sub Committee.
- Approval of the Annual Audit Plan by the Audit and Scrutiny Sub Committee.
- Reporting to the Audit and Scrutiny Sub Committee on the audit activity for the year.

6.3 Underpinning the Internal Audit Charter, operational procedures are in place to govern day-to-day audit activity and this includes arrangements to ensure independence and objectivity.

7 Statement of Conformance with PSIAS

7.1 Internal Audit has been assessed internally by the Chief Audit Executive, and through and external peer review by Glasgow City Council, as conforming to PSIAS.

7.2 The table below summarises budgeted and actual audit days for information, based on an agreed 112 days' work. It is expected that the remaining balance will be used finalising the audits that are currently in review/in progress.

Fig 5 Actual v Budgeted Days

Audit Title	Planned	Actual
Fundamentals	40	38
Strategic reviews/client directed/ad-hoc reviews	45	48
Contingency	14	5
Follow Up	5	3
Audit management	8	8
Finalising audit reports		10
Total	112	112

8 Definitions of audit assurance

8.1 Internal Audit uses an overall opinion grading for audits and some responsive work. Where no issues surrounding the control environment are found, a substantial level of assurance will be given on the controls tested. However, where weaknesses with controls have been identified, depending on the potential impact of those weaknesses, a lower graded assurance level will be given.

8.2 The grades, which are summarised in the table below, are based on the ratings of the audit recommendations being made. The corporate impact rating sets the audit findings in context based on the overall risk to the Service.

Control Environment Assurance – Opinion on the design and suitability of the current internal controls.	
Level	**Definition**
Substantial	There are minimal control weaknesses that present very low risk to the control environment
Good	There are minor control weaknesses that present low risk to the control environment
Acceptable	There are some control weaknesses that present a medium risk to the control environment
Limited	There are significant control weaknesses that present a high risk to the control environment
None	There are fundamental control weaknesses that present unacceptable level of risk to the control environment
Compliance Assurance – Opinion on the level of compliance with current internal controls.	
Level	**Definition**
Substantial	The control environment has substantially operated as intended.
Good	The control environment has largely operated as intended although some minor errors have been detected
Acceptable	The control environment has mainly operated as intended although errors have been detected
Limited	The control environment has not operated as intended. Significant errors have been detected
None	The control environment has fundamentally broken down and is open to significant error or abuse
Organisational impact – The potential impact on the organisation if the recommendations are not implemented.	
Level	**Definition**
Major	The weaknesses identified during the review have left the Council open to significant risk. If the risk materialises it would have a major impact upon the organisation as a whole.
Moderate	The weaknesses identified during the review have left the Council open to moderate risk. If the risk materialises it would have a moderate impact upon the organisation as a whole.
Minor	The weaknesses identified during the review have left the Council open to a low level of risk. If the risk materialises it would have a minor impact on the organisation as a whole.

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MERSEYSIDE FIRE AND RESCUE AUTHORITY			
MEETING OF THE:	**AUDIT AND SCRUTINY SUB COMMITTEE**		
DATE:	**7TH JUNE 2018**	**REPORT NO:**	**CFO/028/18**
PRESENTING OFFICER	**IAN CUMMINS, TREASURER**		
RESPONSIBLE OFFICER:	**IAN CUMMINS**	**REPORT AUTHOR:**	**IAN CUMMINS**
OFFICERS CONSULTED:	**STRATEGIC MANAGEMENT GROUP**		
TITLE OF REPORT:	**THE ANNUAL GOVERNANCE STATEMENT 2017/2018**		

APPENDICES:	**APPENDIX A:**	**2017/18 ANNUAL GOVERNANCE STATEMENT**

Purpose of Report

1. The purpose of this report is to present to Members the Authority's Annual Governance Statement. This statement fulfils the Authority's statutory requirement to prepare a statement of internal control in accordance with proper practices, and to present an annual review of the effectiveness of the current system.

Recommendation

2. That Members approve the 2017/2018 Annual Governance Statement.

Introduction and Background

3. The Annual Governance Statement (AGS) is the formal statement that recognises, records and publishes a Council or Authority's governance arrangements. Attached as Appendix A to this report is the 2017/18 AGS for MFRA which explains the processes and procedures in place to enable the Authority to carry out its functions effectively. The AGS also links into the Annual Statement of Assurance by providing assurance about the Authority's governance framework.

4. The CIPFA/SOLACE – Delivering Good Governance in Local Government Framework is deemed to represent best practice in relation to internal control. This framework recommends that the review of the effectiveness of the system of internal control should be reported as part of the AGS. The annual review of the effectiveness of the Authority's internal control system has been undertaken and, in accordance with the CIPFA guidance, incorporated in the attached AGS. The AGS identifies the ways in which the Authority has ensured that its control mechanisms are adequate during the year, including internal and external audit. The overall conclusion of the AGS is that the system of internal control is

adequate (any control system can provide only reasonable assurance and not absolute assurance).

Equality and Diversity Implications

5. Good governance and sound internal control includes having effective practices to manage equality and diversity issues.

Staff Implications

6. There are no staff implications arising from this report.

Legal Implications

7. Regulation 6(1) of the Accounts and Audit (England) Regulations 2015 requires that the relevant body must conduct a review at least once a year of the effectiveness of its system of internal control and to prepare a statement on internal control in accordance with proper practices. Regulation 6(2) require that the findings of a review of an organisation's system of internal control is to be considered by a Committee of the relevant body, or by members of the body meeting as a whole, once a year. The AGS fulfils that obligation.

Financial Implications & Value for Money

8. A sound system of internal control is essential for the overall control of the Authority's finances. There are, however, no direct financial implications arising from the Statement.

Risk Management, Health & Safety, and Environmental Implications

9. Good governance and sound internal control arrangements will ensure the Authority's policies, procedures and objectives are being fulfilled.

Contribution to Our Mission: *Safer Stronger Communities – Safe Effective Firefighters*

10. Good governance and sound internal control arrangements will ensure the Authority's mission is known by all and drives and directs the Service outcomes.

11. Merseyside communities are safer, stronger and the firefighters who serve the County are safer and more effective because the Authority has effective leadership and makes decisions that deliver strong financial management and efficient and effective service delivery. Robust and comprehensive governance arrangements are integral to this performance.

BACKGROUND PAPERS

CFO/020/17 Code of Corporate Governance, Policy and Resources Committee 23rd March, 2017.

Delivering Good Governance in Local Government – Guidance Notes for English Authorities, C.I.P.F.A. (2016)

Delivering Good Governance in Local Government – Framework, CIPFA/SOLACE (2016)

Account and Audit (England) Regulations 2015

GLOSSARY OF TERMS

SOLACE	Society of Local Authority Chief Executives and Senior Managers
CIPFA	Charted Institute of Public Finance and Accountancy
AGS	Annual Governance Statement

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APPENDIX A

2017-2018 MERSEYSIDE FIRE AND RESCUE AUTHORITY ANNUAL GOVERNANCE STATEMENT

1.0 SCOPE OF RESPONSIBILITY

1.1 Merseyside Fire and Rescue Authority (the Authority) is responsible for ensuring that its business is conducted in accordance with the law and proper standards, that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. The Authority also has a duty to make arrangements to secure continuous improvements in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.

1.2 In discharging this overall responsibility, the Authority is responsible for putting in place proper arrangements for the governance of its affairs, delivering its functions, and arrangements for the management of risk.

1.3 Corporate Governance is a phrase used to describe how organisations direct and control what they do. For Fire and Rescue Authorities this also includes how an Authority relates to the communities that it serves. The 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*" (2016). The key principles of the Authority's Code of Corporate Governance are outlined below;

1. Three high level principles underpin Corporate Governance:-
   - Openness and inclusivity
   - Accountability
   - Integrity

2. These high level principles are supported by seven detailed principles of good governance which are:
   - Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law
   - Ensuring openness and comprehensive stakeholder engagement
   - Defining outcomes in terms of sustainable economic, social, and environmental benefits
   - Determining the interventions necessary to optimise the achievement of the intended outcomes
   - Developing MFRA capacity, including the capability of its leadership and the individuals within it
   - Managing risks and performance through robust internal control and strong public financial management
   - Implementing good practices in transparency, reporting, and audit to deliver effective accountability

1.4 This statement fulfils the Authority's statutory requirement to prepare a statement of internal control in accordance with proper practices, and to present an annual review of the effectiveness of the current system.

2.0 THE PURPOSE OF THE GOVERNANCE FRAMEWORK

2.1 The governance framework comprises the systems and processes, culture and values, for the direction and control of the Authority and its activities through which it accounts to, engages with and leads the community. It enables the Authority to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate and cost-effective services.

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

2.3 The governance framework has been in place at the Authority for a number of years and in particular for the year ended 31st March 2018.

3.0 THE GOVERNANCE FRAMEWORK

3.1 Summarised below are some of the key elements of the systems and processes that underpin the Authority's governance arrangements:

3.2 Identifying and Communicating the Authority's Mission and outcomes for citizens and service users:

3.2.1 After consulting with the citizens of Merseyside and service users, assessing current risks and service priorities, the Authority prepares an Integrated Risk Management Plan (IRMP) that sets out the mission, aims and service objectives for the organisation. The Authority approved a new IRMP, 2017/20, on 23rd February 2017. The IRMP established the service priorities for 2017/20.

3.2.2 The Authority's Mission reflects a clear focus on the core duties and functions in relation to Operational Preparedness, Operational Response and Prevention and Protection. The Authority's mission is to ***achieve; Safer Stronger Communities – Safe Effective Firefighters.*** To deliver this the Authority has established four key corporate aims:

- **Excellent Operational Preparedness**
  We will provide our firefighters with the training, information, procedures and equipment to ensure they can safely and effectively resolve all emergency incidents.

- **Excellent Operational Response**
  To maintain an excellent emergency response to meet risk across Merseyside with safety and effectiveness at its core.

- **Excellent Prevention and Protection**
  We will work with partners and our community to protect the most vulnerable.

- **Excellent People**
  We will develop and value all our employees, respecting diversity, promoting opportunity and equality for all.

3.2.3 The Mission statement is focused upon outcomes around operational preparedness, response and prevention and protection. It is very important that the organisation's priorities are unambiguous and easily understood by members, staff, communities and other stakeholders. In particular, it is essential that the safety and effectiveness of firefighters is seen as a fundamental factor in the achievement of safer, stronger communities.

3.3 Monitoring the achievement of the Authority's objectives through a comprehensive performance management framework:

3.3.1 IRMP and other service projects are incorporated into one document – the Service Delivery Plan. There is an ongoing system of monitoring and reporting on the achievement of projects in the Service Delivery Plan via regular reports to the Community Safety and Protection Committee (or any other committee if applicable) and the Strategic Management Group. Station Community Safety Plans have also been developed to give details of the activities taking place throughout Merseyside. The reporting process applies traffic light status to for each performance indicator in the Service Delivery Plan and attention is drawn to progress achieved and matters to be addressed. Copies of the Service Delivery Plan can be found on the Authority's website.

3.4 The Internal Control Environment:

3.4.1 The Authority's internal control mechanism comprises many systems, policies, procedures and operations, however the system can not eliminate all risks of failure to achieve the Authority's aims and objectives. Once a risk has been identified the Authority where possible eliminates the risk. If this is not possible then procedures are established to manage the risk effectively, efficiently and economically. Some of the significant control processes are outlined below:

3.4.2 Policy and decision making process

The Authority has meaningful democratic control over its activities via an **approved committee structure** with agreed Terms of Reference that are reviewed once a year by the Authority at its Annual General Meeting. The Authority has a **written Constitution** that was reviewed in 2017/18 and approved by the Authority at its meeting on 13th June 2017 (CFO/032/17), which is published and sets out how the Authority operates, how decisions are made, and the procedures which are followed to ensure these are efficient, transparent and accountable to local citizens. The Constitution is reviewed every year by the Authority at its AGM.

The Authority meet with Strategic Managers and other stakeholders as required to consider the strategic vision and instigate future plans/targets for the Authority.

The Authority also runs member away-days and “learning lunches” to help Members discuss issues in more detail and in an informal environment.

3.4.3 Management Structure

Management Structure - The Authority has a **clear management structure** with defined roles and responsibilities. A Strategic Management Group (SMG), meet on a fortnightly basis to review and agree on issues that arise during the year. The Authority has an **approved scheme of delegation within its Constitution** that is reviewed by members on an annual basis.

3.4.4 Established Policies, Procedures & Regulations

The Authority ensures compliance with established policies, procedures, laws and regulations. Information regarding policies and procedures is held on the intranet, and these are continuingly enhanced and developed through the introduction of new policies and procedures as and when required. The Authority has established policies on anti-fraud, fraud response and confidential reporting. The Authority carries out an annual review of standing orders, financial instructions and the scheme of delegation which clearly define how decisions are taken and the processes and controls required to manage risks. The list below outlines some of the **key policies and process in place to enhance the internal control system** that are reviewed as and when required:

- Treasury Management Strategy
- Procurement Strategy
- Financial Regulations, Procedural & Contract Standing Orders, Scheme of Delegation
- Anti Fraud & Corruption Policy & Strategy
- Fraud Response Plan
- Confidential Reporting Policy
- Complaints procedure
- Security & Information Governance
- Code of Corporate Governance
- Constitution
- Code of Conduct
- Full range of Equality and Diversity policies and procedures
- Staffing Model
- Full range of robust policies and procedures to underpin the conduct of staff from operational procedure, discipline process, through to performance development reviews
- Information Governance and Security – Policies and Service Instructions to protect the Authority’s information, data, and assets

3.4.5 SMG carries out a continuous assessment of the implementation of policies and procedures throughout the organisation, including following up on progress against the action plans.

3.4.6 Internal Audit function

The Authority has a strong Internal Audit function arrangement with Liverpool City Council, and has well-established protocols for working with External Audit.

3.4.7 Risk Management Strategy

The Authority has a well established and embedded risk management strategy. The Audit Sub-Committee has corporate ownership of the risk register and receive regular updates on any new risks or changes to risks. As all Authority and service reports to SMG have a standing section on risk this allows SMG an opportunity to regularly consider new and updated risks facing the Service at their fortnightly meetings.

3.4.8 Financial Management

The Authority produces a five year financial plan that takes into account Revenue, Capital, Reserves and Prudential Borrowing forecasts. The Authority has a history of strong and effective financial management, as confirmed in the Grant Thornton 2016/17 Annual Audit Letter and Audit Findings Report;

"We are satisfied that in all significant respects, the Authority put in place proper arrangements to secure economy, efficiency and effectiveness in its use of resources for the year ended 31 March 2017"

Financial management in the Authority and the reporting of financial standing is undertaken through a comprehensive Finance system including a general ledger, accountancy and budgeting. Monthly budget statements are sent out to all cost centre managers and the Authority receives regular comprehensive financial review reports to update members on the current and anticipated year-end financial performance.

4.0 REVIEW OF EFFECTIVENESS

4.1 The Authority has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of effectiveness is informed by the work of the SMG and other senior managers within the Authority who have responsibility for the development and maintenance of the governance environment, the Internal Audit annual report, and also by comments made by the external auditors and other review agencies and inspectorates.

4.2 Maintaining and reviewing the effectiveness of the governance framework throughout the financial year has been carried out by the following:

- The Authority and its Committees
- Management Review
- Internal audit
- External bodies

4.3 The Authority and Its Committees

4.3.1 The Authority

The Authority considered at its Annual General meeting on 13th June 2017 the format and structure of its democratic decision process by approving the powers and make-up of the approved committees. The full and detailed list of

committee responsibilities can be found in the Constitution document on the Authority's web site, but are summarised as follows;

- The Authority – approves the Authority's budget and precept, considers variations to standing orders & financial regulations; the revenue budget and capital plan; issuing of a precept; adopting a members' allowance scheme; appointment to committees; scheme of delegation to officers; any matters which by law must be reserved to the Authority itself; maintain a Constitution.

- The Policy and Resources Committee – to determine new strategies, policies or changes in strategy relating to the development and delivery of services. Exercise financial control over expenditure within the approved revenue budgets and capital programme of the Authority. Establish and direct procedures for the implementation, monitoring and amendment of the revenue budget and capital programme and all other financial matters that impact on the Authority's financial position. Consider all matters related to the management of the Authority's assets including buildings, land, ICT and other assets.

- The Community Safety and Protection Committee – Consider all matters related to the development and delivery of services appropriate to this Committee. This includes matters relating to: Operational Preparedness; Operational Response; and Prevention and Protection. Considers all matters related to the delivery of services to the diverse communities of Merseyside, and the development, promotion and delivery of a coordinated strategy for developing and maintaining safer communities.

- The Joint Police & Fire Collaboration Committee – to act as a Strategic Board to oversee collaboration between Merseyside Police (MP) and the Authority. To consider any reports on proposals for collaboration and potential budget savings or working arrangements.

- The Audit and Scrutiny Sub-Committee – To consider the internal audit's annual report and opinion, and a summary of internal audit activity and the level of assurance it can give the Authority's corporate governance arrangements. To consider the external auditor's annual letter, relevant reports, and the report to those charged with governance. To monitor the risk register and effective development and operation of risk management. To determine allegations made under the Members Code of Conduct Procedure and refer sanctions proposed and any complaint allegation requiring further investigation to the full Authority. To act as Investigating and Disciplinary Committee where an allegation which could constitute misconduct or gross misconduct is made against the Chief Fire Officer, Deputy Chief Fire Officer or the Monitoring Officer.

  Receive reports on the effectiveness of internal control processes, including probity and to receive Internal Audit reports in this respect. Liaise with the external audit function over the appointment of the external auditor. Comment on the scope and depth of external audit work and consider in detail the recommendations of the external auditor's annual audit's letter. Consider all matters relating to internal and external audit activity and all matters relating to the regulatory framework.

To appoint Task and finish Groups to undertake detailed work, involving relevant Scrutiny Members, key reference holders and relevant officers.

- The Appeals Committee – to consider whether to assent to applications for specific licences as may be referred to the Committee by the Health and Safety Executive or the Chief Fire Officer.

4.4 Management Review

4.4.1 Included in the day to day management of the organisation are a number of key officers, systems and procedures designed to provide core elements of the internal control mechanism, with a nominated lead officer responsible for reviewing the effectiveness of these systems.

4.4.2 There is a comprehensive system of performance management and review embedded within the Authority management structure and processes. The 2017/18 Service Delivery Plan broke down the Authority's key objectives for the year and identified a lead officer for each project. A "traffic light" system identified the actual progress against performance indicators throughout the year and any areas of concern with options to bring the project back on track were reported to management and the Community Safety and Protection Committee. SMG received regular updates from managers on the delivery of services against targets throughout the year and this allowed senior management an opportunity to scrutinise progress. Performance against Local Performance Indicators is considered in depth each month by the Performance Management Group.

4.4.3 The Risk Register was updated for new risks and the status of existing risks was re-assessed during the year. The Register considers the Authority's tolerance for risk and any mitigating actions that can reduce the likelihood/severity of the perceived risk. Risk management continued to be an integral part of the project management process and was a fundamental aspect of the business of the Authority.

4.4.4 The Authority employed appropriate professional staff:

- A Statutory Monitoring Officer (Section 5 LGHA) responsible for ensuring the legality of Authority actions and supporting the Committee decision making process. The Director of Legal Services fulfils this role and is a qualified and experienced lawyer. The Director of Legal Services is supported by a suitably robust and fit for purpose legal team. No actions of the Authority were deemed ultra vires in the year and all relevant laws and regulations have been complied with so far as is known by the Monitoring Officer.

- A Responsible Finance Officer (Section 73 LGA 1985) to ensure the proper and effective administration of the financial affairs of the Authority. The Treasurer fulfils this role and is a qualified and experienced accountant. The Treasurer is supported in this role by a Head of Finance and finance team that includes a number of professionally qualified and experienced finance staff. The Treasurer ensures the Authority has an approved, realistic and affordable five year financial plan for revenue and capital expenditure which links to the IRMP and the Service Delivery Plan.

The financial planning process is well embedded and understood across the Authority by staff and members. Details of the approved budget are available to all stakeholders in a simple and summarised statement on the Authority's website.

The above statutory posts are key members of SMG

4.4.5 Budget monitoring remained robust at strategic and service levels via the production of monthly financial monitors for cost centre managers. The "funds management" system prevents orders being raised against accounts with insufficient budget and provides an affective enhancement to the budget control process.

4.4.6 Grant Thornton approved an unqualified Statement of Accounts for 2016/17 and it is anticipated this will be repeated in 2017/18. A detailed year-end report is presented to the Authority in a clear and understandable format. A simplified summary statement of accounts is available on the Authority's Website to ensure the outturn position is communicated effectively to all stakeholders.

4.5 Internal Audit

4.5.1 The Authority procured its internal audit service under a service level agreement from Liverpool City Council and the arrangement and service was in accordance with the CIPFA Code of Practice for Internal Audit in Local Government 2006. The internal audit plan for 2017/18, prioritised by a combination of the key internal controls, assessment and review on the basis of risk, was approved by the Authority during the year. All internal audit reports included an assessment of the internal controls and prioritised action plans, if relevant, to address any areas needing improvement. These reports were submitted to the relevant managers as appropriate and the Treasurer. An interim and year-end Internal Audit Plan reports are submitted to the Audit sub Committee that included summary findings of all completed audit reports and implementation of any agreed recommendations. The Annual Review of Internal Audit Report concluded that:

"it is our opinion that we can provide Substantial Assurance that the system of internal control in place at Merseyside Fire & Rescue Service for the year ended 31st March 2018 accords with proper practice. The 2017/18 fundamental systems audits have shown a substantial level of compliance and none of the audits have identified weaknesses that have required a corporate impact assessment of Major or Moderate. Based on the audit work carried out in 2017/18 we are not aware of any significant control weaknesses within the Service which impact on the Annual Governance Statement"

The service has in place a system of policies, procedures and processes to enable it to support the seven core CIPFA/SOLACE Principles of good governance.

4.6 External Review

4.6.1 External audit services are carried out by Grant Thornton. The scope of the work undertaken by External Audit is;

- The audit of the financial statements
- To reach a conclusion on the economy, efficiency and effectiveness in the use of resources (the value for money (VFM) conclusion
- To work on the whole of government accounts return.

4.6.2 External Audit will comment upon the Authority's 2017/18 statutory financial statements and make a VFM conclusion during the 2018/19 financial year in the Annual Audit Findings report and Annual Audit and Inspection Letter. These documents reflect the Auditor's findings and conclusions from auditing the Statement of Accounts. During 2017/18 the Auditor's Annual Audit Findings Report and Audit Annual Letter covering 2016/17 confirmed the Authority's overall performance continues to be strong and the Authority received an unqualified opinion on the 2016/17 financial statements.

SIGNIFICANT GOVERNANCE ISSUES

4.7 Following the announcement of the 2016/17 - 2019/20 Local Government Finance Settlement the Authority faced a significant reduction in the level of government grant support over this period. The reduction in Government support over this period has meant the Authority faces at least an £11m financial challenge, assuming all budget assumptions remain valid. The Authority approved a financial plan to meet this challenge at the 2016/17, Budget Authority meeting, and ratified the plan at the 2017/18 Budget Authority meeting and again at the 2018/19 Budget Authority meeting on 22nd February 2018.

4.8 Whilst no significant weaknesses have been identified in control systems at present, the following have been identified as critical internal control issues for the forthcoming year;

4.9 The Authority's proposals to deliver the approved savings required in the current financial plan involves significant rationalisation of front line and support services. The Authority has already reduced the number of front line appliances from 42 to 22 whole-time and 4 retained appliances. It also has plans to merge a number of fire stations that will see the number of stations fall from 24 to 22. In order to deliver the required savings by 2019/20 the Authority will need to continue with its plan to reduce the number of firefighters to 620 (FTE) by 2018, and consider to ensure that appliance and fire station availability is the most efficient and effective possible within the available resources. The Authority has and will continue to consult with the Merseyside community on any changes to its strategic plans to deliver the operational changes as part of the IRMP planning process. The Authority will need to ensure its control frameworks deliver the required efficiencies and improvements.

4.9.1 The assumptions made in the medium term financial plan, particularly around inflation, pay awards, firefighter pension contributions and future government grants (whilst based on the best information available) are subject to potential change in such volatile times. The delivery of the savings in cash terms also assumes an estimate of the rate of staff turnover and in particular firefighter retirements. Taken together these factors result in a significant potential risk

to the Authority's medium term financial plan. Reliable monitoring and forecasting processes are in place and the Treasurer will ensure any variation to assumptions made in the medium term financial plan are identified at the earliest possible time. The Financial Review reports will keep Members informed on the impact of any variation to the assumptions in the financial plan and recommended corrective action. SMG will work to develop a range of contingency plans for managing risks.

4.10 The future governance arrangements of the Merseyside Fire and Rescue Service is currently being considered by the Authority. The 2017 Police and Crime Bill places a statutory duty on the three emergency services (Ambulance, Fire and Police) to keep collaboration opportunities under review and to collaborate where this would improve efficiency and effectiveness. The Authority continues to maintain ongoing discussions with Merseyside Police and North West Ambulance Service on developing opportunities for greater collaboration. Following an invitation by the Authority the Merseyside Police Crime Commissioner now sit on the Authority meeting.

4.11 Under the Cities and Local Government Devolution Act (2016), in November 2015, the Government agreed to devolve a range of powers and responsibility to the Liverpool City Region Combined Authority. The model includes a directly elected City Region Mayor over the Combined Authority Area, who was elected in May 2017. The Mayor is currently seeking direction from the Government over possible options to take over the future governance of Merseyside Fire and Rescue Authority and the Merseyside OPCC at some future point.

4.12 Over the coming year the Authority will work with the Merseyside Police, the Office of the Police and Crime Commissioner and the Liverpool City Region Mayor to establish the future governance arrangement for Merseyside Fire and Rescue Service.

Signed…… Signed……
L.BYROM P. GARRIGAN
CHAIR of Policy and Resources Committee ACTING CHIEF FIRE OFFICER

Signed ……
I. CUMMINS
TREASURER

MERSEYSIDE FIRE AND RESCUE AUTHORITY			
MEETING OF THE:	**AUDIT AND SCRUTINY SUB COMMITTEE**		
DATE:	**7TH JUNE 2018**	**REPORT NO:**	**CFO/033/18**
PRESENTING OFFICER	**IAN CUMMINS, TREASURER**		
RESPONSIBLE OFFICER:	**IAN CUMMINS**	**REPORT AUTHOR:**	**IANCUMMINS**
OFFICERS CONSULTED:	**SMG**		
TITLE OF REPORT:	**TREASURY MANAGEMENT ANNUAL REPORT 2017/18**		

APPENDICES:	**APPENDIX A:**	**TREASURY MANANGEMENT 2017/18 ANNUAL REPORT**

Purpose of Report

1. To advise Members of the activities of the Treasury Management operation and actual performance against the agreed Prudential Indicators in 2017/18. This report meets the requirements of the CIPFA Code of Practice on Treasury Management and the CIPFA Prudential Code for Capital Finance in Local Authorities. The Authority is required to comply with both Codes through Regulations issued under the Local Government Act 2003.

Recommendation

2. That Members note the Treasury Management Annual Report 2017/18 (attached as Appendix A)

Introduction and Background

3. Treasury management is defined as:

"The management of the organisation's cash flows, its banking, money market and capital market transactions; the effective control of the risks associated with those activities; and the pursuit of optimum performance consistent with those risks."

4. The CIPFA Code of Practice for Treasury Management in Local Authorities has been adopted by the Authority and a Treasury Policy Statement incorporated in Financial Regulations in accordance with the requirements of the Code. The arrangements for reporting Treasury management activities to Members are that a minimum of three reports are presented to members: -
   - An Annual Treasury Strategy Report before the start of a financial year.
   - An interim report during the second half of a financial year. Other interim reports will be prepared if necessary.

- An annual outturn report by 30th September following the financial year to which it relates.

Annual Treasury Management Strategy

5. The Authority determines before the start of each financial year an agreed treasury management strategy to set certain parameters and guidelines around which the treasury management function will operate. The 2017/2018 – 2021/2022 Budget and Financial Plan report, CFO/015/17, considered by Members at the Authority meeting on 23rd February 2017, set the Authority's treasury management strategy for 2017/18:

   The strategy sets limits for the next three years on:-
   - overall Level of External Debt
   - operational Boundary for Debt
   - upper limits on fixed interest rate exposure
   - upper limits on variable rate exposure
   - limits on the maturity structure of debt
   - limits on investments for more than 364 days

   The strategy covers:
   - prospects for interest rates;
   - capital borrowing and the portfolio strategy;
   - annual investment strategy;
   - debt rescheduling;
   - external debt prudential indicators;

6. As short term interest rates were expected to be lower than long term borrowing rates the Authority, as part of its approved treasury management strategy, agreed to reduce investments and borrow for short periods when necessary. The interest rate market was monitored throughout the year for any changing circumstances requiring a review of the current strategy.

Interim Treasury Management report

7. The interim treasury management report, CFO/016/18, was considered by Members at the Audit and Scrutiny Sub-Committee on 8th February, 2018. The report confirmed that to date treasury management activity in 2017/18 had been carried out in compliance with the relevant Codes and Statutes and within the borrowing and treasury management limits set by the Authority under the prudential code.

Annual Outturn Treasury Management report

8. The Treasury Management Annual Report 2017/18 is as attached at Appendix A to this report and demonstrates that treasury management activity has been carried out in-line with the approved Treasury Management Strategy and therefore within the borrowing and treasury management limits set by the Authority throughout the year. Treasury Management practices have maintained full compliance with the relevant Codes and Statutes.

9. The Authority's Treasury Management function is carried out by Liverpool City Council via a service level agreement.

Equality and Diversity Implications

10. None arising from this report.

Staff Implications

11. None arising from this report.

Legal Implications

12. This report meets the requirements of the CIPFA Code of Practice on Treasury Management and the CIPFA Prudential Code for Capital Finance in Local Authorities. The Authority is required to comply with both Codes through Regulations issued under the Local Government Act 2003.

Financial Implications & Value for Money

13. The cost of Treasury Management Services was £21,139 in 2017/18 and was provided by Liverpool City Council.

14. The Authority's overall debt outstanding during the year reduced from £39.1m to £38.1m:-

	For Periods ending (2017/18)													
	Opening Position	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	**Closing Position**
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	**£'000**
PWLB	**39,100**		0	0	-1,000	0	0	0	0	0	0	0	0	**38,100**
	39,100	0	0	0	-1,000	0	0	0	0	0	0	0	0	**38,100**

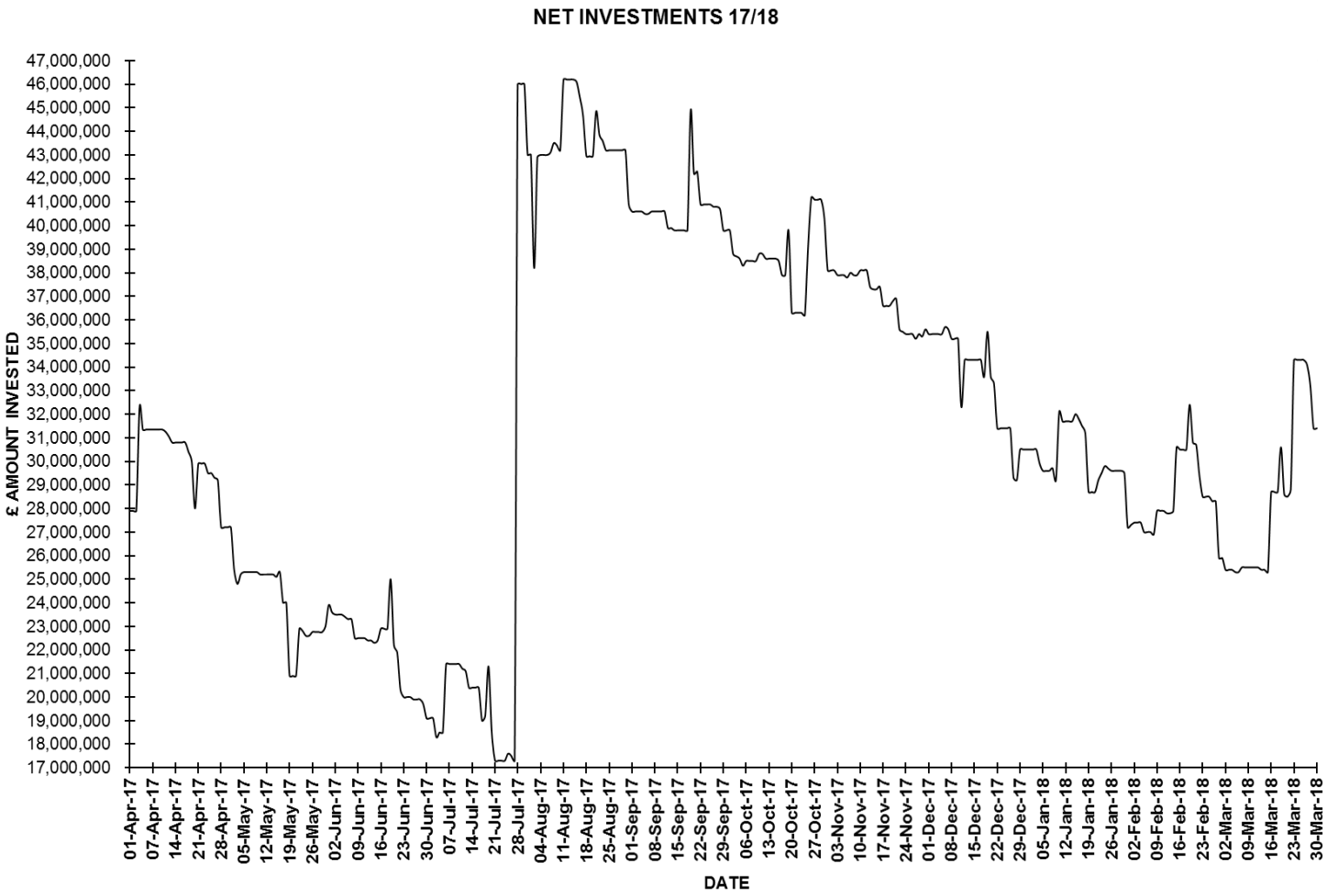
15. The reduction in debt of £1.0m was due to the repayment of a £1m loan that matured in the year.

16. The Authority paid total interest of £2.0m on all the debt during the year which was consistent with the budget. The reason for no new loans being taken out in the year (and as a consequence lower interest payments) is due to the current strategy of using available cash to fund capital investment rather than seek new loans while investment interest rates are so low.

17. The movement on the level of opening and closing investments is summarised below:

	£'m
01/04/17	27.9
31/03/18	31.4

Total investment levels moved during the year as outlined in the graph below:



18. The reason why the level of investments increased in the year is that the Authority receives significant grant income in advance of actual expenditure. For example the firefighter pension grant of £28.7m was paid in July but actual pension payments are spread throughout the year.

19. A combination of the grants received in advance of expenditure and the cash available as a consequence of the current reserve strategy meant the Authority had £31.4m of investments at the year-end.

20. The investments are held in institutions that reflect the approved investment strategy. The table overleaf outlines the £31.4m of investments held as at 31st March 2018;

ANALYSIS OF INVESTMENTS END OF QUARTER 4 2017/18

Institution	Credit Rating	MM Fund*	Bank / Other	Building Society	Local Authority	Average Interest
		£	£	£	£	%
Federated Investors	AAA	1,200,000				0.44
JP Morgan Sterling Liquidity Fund	AAA	3,000,000				0.25
Legal & General	AAA	200,000				0.32
Standard Life	AAA	3,000,000				0.38
Close Brothers	A		2,000,000			1.10
Goldman Sachs	A		2,000,000			0.73
Handelsbanken	AA		2,000,000			0.20
Santander UK	A		2,000,000			0.85
Sumitomo/SMBCE	A		2,000,000			0.83
Cumberland BS				1,000,000		0.67
Nationwide B Soc	A			2,000,000		0.59
Newcastle B Soc				1,000,000		0.80
Nottingham B Soc				1,000,000		0.77
Principality B Soc				1,000,000		0.75
Skipton B Soc	A-			1,000,000		0.75
West Bromwich B Soc				1,000,000		0.80
London Borough of Brent					2,000,000	0.55
North Lanakshire Council					2,000,000	0.85
Slough BC					2,000,000	0.67
Totals		**7,400,000**	**10,000,000**	**8,000,000**	**6,000,000**	**0.63**
Total Current Investments					**31,400,000**	

**MM Fund - Money Market Funds -these are funds that spread the risk associated with investments over a wide range of credit worthy institutions.*

21. Income earned on investments was £0.177m which was £0.005m above the amount budgeted for, reflecting the increase in the value of investments held in the year.

Risk Management, Health & Safety, and Environmental Implications

22. Robust management of the Authority's cash, investments and loans reduces the risk of poor security of investments, the lack of availability of funds when required, and a poor return on investments.

Contribution to Our Mission: *Safer Stronger Communities – Safe Effective Firefighters*

23. A good Treasury Management Strategy ensures that funds are available to meet the approved financial plan and therefore the delivery of services required to achieve the Authority's mission.

BACKGROUND PAPERS

CFO/015/17 2017/2018-2021/2022 Budget and Financial Plan report, Authority 23rd February, 2017

CFO/016/18 Interim Treasury Management report, Audit Sub-Committee 8th February, 2018.

GLOSSARY OF TERMS

APPENDIX A

TREASURY MANAGEMENT ANNUAL REPORT 2017/18

INTRODUCTION

1. The CIPFA Code of Practice for Treasury Management in Local Authorities has been adopted by the Authority. The Code requires that Treasury Management activities are subject to regular reports to Members. This report represents the final report on Treasury Management for 2017/18.

2. The strategy for the year was identified in the Treasury Management Strategy Statement 2017/18. The strategy covers the following areas:

   (a) prospects for interest rates;
   (b) capital borrowing and debt rescheduling;
   (c) annual investment strategy;
   (d) external debt prudential indicators;
   (e) treasury management prudential indicators.
   (f) performance indicators;
   (g) treasury management advisors

PROSPECTS FOR INTEREST RATES

3. During the calendar year 2017 there was a major shift in expectations in financial markets in terms of how soon the bank rate would start on a rising trend. Growth was disappointingly weak in the first half of the year and was the slowest since 2012. The main reason was a sharp increase in inflation caused by the devaluation of sterling after the EU referendum, feeding increases into the costs of imports into the economy. This caused a reduction in consumer disposable income and spending power as inflation exceeded average wage increases. Growth did start a modest pick-up in the second half of 2017 and consequently market expectations of a rate increase began to rise during the autumn. The Monetary Policy Committee (MPC) increased rates from 0.25% to 0.50% at its meeting on 2 November 2017.The MPC has subsequently issued further warnings of more imminent and faster paced increases in Bank Rate than had previously been expected. Market expectations for increases in Bank Rate, therefore, shifted considerably during the second half of 2017-18 and resulted in investment rates from 3-12 months increasing during the spring quarter of 2018.

4. During 2017/18 longer term Public Works Loans Board (PWLB) rates were volatile but with little overall direction, whereas shorter term PWLB rates were on a rising trend during the second half of the year. The overall movement during 2017/18 was that longer term PWLB rates fell by 0.08% from 2.57% at the start of the year to 2.49% at the end of the year.

5. The strategy indicated that the overall structure of interest rates whereby short term rates are lower than long term rates was expected to remain throughout 2017/18. In this scenario, the strategy would be to reduce investments and borrow for short periods and possibly at variable rates when required.

CAPITAL BORROWINGS AND DEBT RESCHEDULING

6. The borrowing requirement comprises the expected movements in the Capital Financing Requirement and reserves plus any maturing debt which will need to be re-financed. The Authority did not envisage that any new long term borrowing would be required in 2017/18 and no new borrowing was arranged. Market conditions continued to be unfavourable for any debt rescheduling.

ANNUAL INVESTMENT STRATEGY

7. The investment strategy for 2017/18 set out the priorities as the security of capital and liquidity of investments. Investments are made in accordance with central government regulations and CIPFA Code of Practice. Investments are made in sterling with an institution on the counterparty list and for a maximum of one-year duration.

8. Extreme caution was taken in placing investments to ensure security of funds rather than rate of return. The use of deposit accounts with high rated or nationalised banks and AAA rated money market funds has enabled reasonable returns in a low interest rate environment. The credit ratings and individual limits for each institution within the categories of investments to be used by the Authority in 2017/18 are as follows:

UK Government (including gilts and the DMADF)	Unlimited
UK Local Authorities (each)	Unlimited
Part Nationalised UK banks	£4m
Money Market Funds (AAA rated)	£3m
Enhanced Money Market (Cash) Funds (AAA rated)	£3m
UK Banks and Building Societies (A- or higher rated)	£2m
Foreign banks registered in the UK (A or higher rated)	£2m

The average rate of return achieved on average principal available in 2017/18 was 0.54%. This compares with an average seven day deposit (7 day libid) rate of 0.22%.

9. The Investment Strategy specified that investments are only made with banks with a high credit rating. UK banks must have at least an “A” long term rating for inclusion on the Authority’s counterparty list. The money markets are continually monitored for information regarding the creditworthiness of financial institutions and notifications are received of any changes to credit ratings made by any of the rating agencies. An institution is immediately suspended from the Authority’s list of institutions should any doubt arise about its financial standing regardless of whether its credit rating is downgraded.

EXTERNAL DEBT PRUDENTIAL INDICATORS

10. The external debt indicators of prudence for 2017/18 required by the Prudential Code were set in the strategy as follows:

Authorised limit for external debt:	£77 million
Operational boundary for external debt:	£59 million

Against these limits, the maximum amount of debt reached at any time in the financial year 2017/18 was £39.1 million.

TREASURY MANAGEMENT PRUDENTIAL INDICATORS

11. The treasury management indicators of prudence for 2017/18 required by the Prudential Code were set in the strategy as follows:

a) Interest Rate Exposures

Upper limit on fixed interest rate exposures: 100%
Upper limit on variable interest rate exposures: 50%

The maximum that was reached in the financial year 2017/18 was as follows:

Upper limit on fixed interest rate exposures: 100%
Upper limit on variable interest rate exposures: 0%

b) Maturity Structure of Borrowing

Upper and lower limits for the maturity structure of borrowing were set and the maximum and minimum that was reached for each limit at any time in the financial year 2017/18 was as follows:

Maturity Period	Upper Limit	Lower Limit	Maximum Actual	Minimum Actual
Under 12 months	50%	0%	3%	0%
12 months and within 24 months	50%	0%	2%	1%
24 months and within 5 years	50%	0%	10%	9%
5 years and within 10 years	50%	0%	0%	0%
10 years and above	90%	0%	86%	89%

c) Total principal sums invested for periods longer than 365 days

The limit for investments of longer than 365 days was set at £2 million for 2017/18. No such investments were placed during 2017/18.

PERFORMANCE INDICATORS

12. The Code of Practice on Treasury Management requires the Authority to set performance indicators to assess the adequacy of the treasury function over the year. These are distinct historic indicators, as opposed to the prudential indicators, which are predominantly forward looking.

13. The indicators for the treasury function are:

Borrowing - Average rate of long term borrowing for the year compared to average available. No new long term borrowing was arranged in 2017/18.

Investments – Internal returns compared to the 7 day LIBID rate. The return in the financial year 2017/18 was 0.32% above the benchmark.

TREASURY MANAGEMENT ADVISORS

14. The treasury management service is provided to the Authority by Liverpool City Council. The terms of the service are set out in an agreed Service Level Agreement. The Council employs treasury management advisers appointed under a competitive procurement exercise who provide a range of services which include: -

- Technical support on treasury matters, capital finance issues.
- Economic and interest rate analysis.
- Debt services which includes advice on the timing of borrowing.
- Debt rescheduling advice surrounding the existing portfolio.
- Generic investment advice on interest rates, timing and investment instruments.
- Credit ratings/market information service comprising the three main credit rating agencies.

15. Whilst Liverpool City Council and its advisers provide the treasury function, ultimate responsibility for any decision on treasury matters remains with the Authority.

CONCLUSION

16. Treasury Management activity in 2017/18 has been carried out in compliance with the relevant Codes and Statutes and within the borrowing and treasury management limits set by the Authority under the prudential code.

MERSEYSIDE FIRE AND RESCUE AUTHORITY			
MEETING OF THE:	**AUDIT AND SCRUTINY SUB COMMITTEE**		
DATE:	**7 JUNE 2018**	**REPORT NO:**	**CFO/026/18**
PRESENTING OFFICER	**IAN CUMMINS, TREASURER**		
RESPONSIBLE OFFICER:		**REPORT AUTHOR:**	**IAN CUMMINS**
OFFICERS CONSULTED:	**SMG**		
TITLE OF REPORT:	**2018/19 INTERNAL AUDIT PLAN**		

APPENDICES:	**APPENDIX A: 2018/19 AUDIT PLAN**

Purpose of Report

1. To notify Members of the proposed Internal Audit plan for 2018/2019 and to seek comments from Members on the plan.

Recommendation

2. That Members;
   a. consider any comments or opinions they might have on the proposed audit plan, and
   b. approve the 2018/19 Internal Audit Plan

Introduction and Background

3. Internal Audit – Definition;

   "Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes."(Source: Public Sector Internal Audit Standards).

4. The Authority has a statutory duty to ensure that it maintains an adequate and effective system of Internal Audit of its accounting records and control systems, (Accounts and Audit Regulations 2015). In order to fulfil this statutory requirement the Authority has entered into a contract with Liverpool City Council's Internal Audit Service. The Authority has utilised Liverpool City Council's Internal Audit Service (LCC IAS) since 1986. LCC IAS has established an Internal Audit Charter (IAC) and Quality Assurance & Improvement Programme (QAIP) to ensure compliance with the Public Sector Internal Audit Standards (PSIAS) and that LCC IAS delivers to the Authority an effective high quality service.

5. Each year Internal Audit submit a work plan following consultation with the Strategic Management Group, Treasurer, Head of Finance and other key officers. This plan is set based upon an assessment of risks, previous findings and the relationship with External Audit work. The two main strategic areas of work are:

    a. A review of fundamental financial systems and processes, and
    b. Specific project reviews requested by the Service.

6. The proposed 2018/19 audit plan is attached as Appendix A to this report and Members are asked to consider any comments or opinions they might have on the proposed audit plan, and subject to any proposed amendments approve the 2018/19 Internal Audit Plan

7. Arrangements have been set in place for monitoring progress against the plan on an ongoing basis and for closely managing any ad hoc work requirements during the year.

Equality and Diversity Implications

8. There are no Equality or Diversity implications contained within this report.

Staff Implications

9. There are no direct staffing implications contained within this report.

Legal Implications

10. The Authority has a statutory duty to ensure that it maintains an adequate and effective system of Internal Audit of its accounting records and control systems. (Accounts and Audit Regulations 2015).

Financial Implications & Value for Money

11. The annual cost of the audit is £35,500 and is contained within the approved budget for audit services.

Risk Management, Health & Safety, and Environmental Implications

12. There are no Risk Management, Health & Safety, and Environmental Implications contained within this report.

Contribution to Our Mission: *Safer Stronger Communities – Safe Effective Firefighters*

13. Internal Audit assists in the evaluation and enhancement of sound internal control arrangements that contribute towards ensuring the Authority's mission and approved policies and plans continue to drive decision making within the service.

BACKGROUND PAPERS

GLOSSARY OF TERMS

LCC IAS	Liverpool City Council's Internal Audit Service
QAIP	Quality Assurance & Improvement Programme
IAC	Internal Audit Charter
PSIAS	Public Sector Internal Audit Standards

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APPENDIX A

STRATEGIC AUDIT PLAN

	18/19 Audit Days	18/19 Audit Days
Fundamental Systems		**40**
Strategic Reviews / Client directed / Ad hoc reviews		
Review Special Services charging process		
Review GDPR (data protection) processes		
Review FPS Pension Administration controls		
Review Workshops arrangements for procurement of small value items		
PFI – review monthly payment and adjustment process between tripartite authorities		
Examine the governance and delivery processes for the procurement or internal development of MFRS applications		
Strategic Reviews / Client directed / Ad hoc reviews		**45**
Contingency - Investigations/Responsive / Advice & Assistance		**14**
Follow up		**5**
Audit Management		**8**
Total Planned Days		**112**

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MERSEYSIDE FIRE AND RESCUE AUTHORITY			
MEETING OF THE:	**AUDIT AND SCRUTINY**		
DATE:	**7TH JUNE 2018**	**REPORT NO:**	**CFO/034/18**
PRESENTING OFFICER	**CHIEF FIRE OFFICER**		
RESPONSIBLE OFFICER:	**DEB APPLETON**	**REPORT AUTHOR:**	**JACKIE SUTTON**
OFFICERS CONSULTED:	**STRATEGIC MANAGAEMENT GROUP**		
TITLE OF REPORT:	**CORPORATE RISK REGISTER DEC - MARCH 2017-18**		

APPENDICES:	**APPENDIX A:**	**CORPORATE RISK REGISTER DEC – MARCH 2017-18 REPORT**

Purpose of Report

1. To inform Members of the current risks contained within the Corporate Risk Register, the status of the risks and associated control measures, including any updates for the period December 2017 to March 2018.

Recommendation

2. That Members approve the updated Corporate Risk Register for 2017/18 which incorporates the current status of those risks to March 2018.

Introduction and Background

3. It is good practice to regularly review the internal and external risks to the on-going delivery of service by the Authority.

4. To that end, a Corporate Risk Register has been produced which focusses on the Mission and Aims of the Authority and aligns each risk to a specific aim. The Strategic Management Group (SMG) has reviewed the risks contained within the Corporate Risk Register and considered any new risks that might affect the Authority during 2017/18 (new risks are highlighted in yellow). The resultant risks have been scored against the original risk and re-scored following mitigation. The purpose of this report is to ask Members to review the updated Corporate Risk Register attached at Appendix 1 to consider any implications for the Authority.

5. SMG has previously considered the outcomes from an Internal Audit report from April 2017 that considered the Authority's approach to Risk Management. Overall compliance was found to be "Good", with some "Substantial" elements. The report also required the Authority to consider its risk appetite and tolerance and to ensure that the status of all risks is updated regularly. These actions have been completed.

Equality and Diversity Implications

6. There are no equality and diversity implications arising from this report.

Staff Implications

7. There are no specific staff implications arising from this report

Legal Implications

8. Management of corporate risk and the application of suitable mitigation strategies affords the Authority security that should a risk become an issue then suitable control measures are in place to mitigate any impact.

Financial Implications & Value for Money

9. There are no financial implications contained within this report.

Risk Management, Health & Safety, and Environmental Implications

10. The assessment and mitigation of risk is essential in ensuring a safe working environment for all MFRA employees and its agents and consideration of its actions on the environment is paramount.

Contribution to Our Mission: *Safer Stronger Communities – Safe Effective Firefighters*

11. Knowledge of and response to a risk being realised is an essential component of ensuring that the Authority continues to deliver an effective and efficient service to the communities of Merseyside.

BACKGROUND PAPERS

CFO/111/11 If this report follows on from another, list the previous report(s)

GLOSSARY OF TERMS

MFRA **M**erseyside **F**ire and **R**escue **A**uthority

MFRS **M**erseyside **F**ire and **R**escue **S**ervice

CORPORATE RISK REGISTER 2017/18

Aims: - 1) Excellent Operational Preparedness 2) Excellent Operational Response 3) Excellent Prevention & Protection 4) Excellent People

April 2017 –March 2018

December 2017 to March 2018 update

CORPORATE RISK REGISTER 2017/18

MFRA RISK MATRIX

Increasing Impact B		Increasing Likelihood A				
		1	2	3	4	5
		Remote	Unlikely	Possible	Likely	Frequent
1	Slight	Manage for continuous improvement	Manage for continuous improvement	Manage for continuous improvement	Manage for continuous improvement	Manage for continuous improvement
2	Minor					Develop Reduction measures
3	Significant			Develop Reduction measures	Compulsory Risk reduction	
4	Major		Develop Reduction measures	Compulsory Risk reduction		
5	Massive	Develop Reduction measures	Compulsory Risk reduction			

CORPORATE RISK REGISTER 2017/18

Introduction

All organisations face risks that can impact on their operations, by establishing a systematic approach to identifying, assessing, and managing risk, Merseyside Fire and Rescue Authority (MFRA) intends to continually improve the organisation's governance, increase accountability and enhance overall performance.

The Director of Strategy and Performance reports directly to the Deputy Chief Fire Officer on matters relating to corporate risk management and maintains this risk register in collaboration with other members of the Strategic Management Group (SMG).

As part of this process the organisation considers the level and type of risk the Authority will accept while conducting its business and puts in place measures to reduce or eliminate that risk. This includes a careful evaluation of how risks affect the Authority's ability to achieve its Mission and Aims and its appetite for taking those risks.

The following categories of risk appetite are considered in relation to each identified Strategic Corporate Risk within this register:

- **Low –** The level of risk will not substantially impede the ability to achieve MFRA's Mission and Aims. Controls are prudently designed and effective**.**
- **Moderate –** The level of risk may delay or disrupt achievement of MFRA's Mission and Aims. Controls are adequately designed and are generally effective.
- **High –** The level of risk will significantly impede the ability to achieve MFRA's Mission and Aims. Controls may be inadequately designed or ineffective.

Risk Appetite by Strategic Corporate Risk Category

MFRA has an overall conservative risk appetite. The organisation will act in accordance with this to achieve strategic objectives and deliver high quality fire and rescue services to the people of Merseyside within a framework of reducing budget provision.

MFRA will employ sound risk management principles, transparent decision-making and effective communication to prioritise risk. The Authority manages seven strategic corporate risk categories to effectively supervise and ensure a safe and effective fire and rescue service that delivers prevention, protection and response services to Merseyside and beyond. MFRA has a low appetite for most types of risk (see table below), being aware of the need to ensure the prudent use of public money, maintain staff safety and deliver reliable and effective services.

Corporate Risk Category	Risk Appetite	Explanation
Budget and financial	Low	**The appetite for Budget and financial risk is low.** MFRA will exercise prudent management of its financial resources to achieve its mission. MFRA will maintain strong internal controls and ensure compliance with applicable legislation and accounting standards. MFRA will make prudent decisions to mitigate the financial impact of internal and external factors that affect it.
Legal and legislative	Low	**The appetite for Legal and legislative risk is low.** MFRA will always endeavour to comply with the laws that govern its activity and adopt appropriate governance processes. MFRA has no risk appetite for non-compliance with applicable laws and regulations.
Loss of strategic sites and assets	Moderate	**The appetite for risk in relation to strategic sites and assets is moderate.** Risk appetite in relation to vehicles and equipment is low, as safety and usability must be achieved through the use of detailed specifications of requirements. Risk appetite in relation to FRS sites (e.g. for a new fires station) is higher, as it is acknowledged the options are more limited and the end result in relation to the provision of a new fire station is not entirely predictable at the beginning of the process.
Environmental and Political	Moderate	**The appetite for risk in relation to environmental and political matters is moderate.** MFRA acknowledges that activity in relation to collaborative work with partners, for example, is not entirely predictable and some risks will be taken whilst attempting to improve service delivery or make savings through the use of new arrangements.
Loss of key staff	Moderate	**The appetite for risk in relation to loss of key staff is moderate.** MFRA recognises that it may need to adopt new and untried ways of working to deliver its services during periods of industrial action or reductions in the size of the workforce.
Technology	Low	**The appetite for Technology risk is low.** Information systems must support core MFRA functions with adequate capability, capacity, resiliency, and security from internal and external threats. The organisation relies on a mobile and technologically dependent workforce to carry out its Mission.
Procurement	Low	**The appetite for Procurement risk is low.** MFRA is bound by legislation and regulations that are designed to ensure that public finance is spent appropriately. As a result processes are designed to ensure that all procurement activity is properly governed and carried out in a way that ensures compliance.

CORPORATE RISK REGISTER 2017/18

Mission :- Safer Stronger Communities: Safe Effective Fire-fighters

RISK	STRATEGIC CORPORATE RISK	RISK No.	SPECIFIC CORPORATE RISKS	SUB RISK No.	AIMS AFFECTED	IMPACT	RISK SCORE	MITIGATION	MITIGATED SCORE	RISK/ACTION OWNER
1.	**Budget /Financial Risks**	**1.1**	Insufficient staff to maintain current levels of operational planning, training and management of intelligence	**1.1.1**	**1,2,3,4**	Increased risk to all MFRS staff safety - increased numbers of injuries.	**15**	Resilience exists within departments to task staff with priority work steams in the event of insufficient staffing becoming a concern. Business Continuity Plans in place. **July-Nov Update** No change this period **Dec-Mar update** No change this period	**12**	**AM Operational Preparedness**
				1.1.2	**1,2,3,4**	increased risk of property loss	**12**		**10**	
				1.1.3	**1,2,3,4**	Reducing ability to respond or maintain competent workforce.	**15**	The Authority continues to utilise the most agile working systems to ensure a high level of service delivery and response, integrated with appropriate skill audits and training delivery to ensure a high level of competence in all staff **July-Nov Update** No further update **Dec-Mar update** The Authority continues to have a clear recruitment strategy, bringing highly qualified and motivated individuals into the organisation to meet its succession planning.	**10**	**Director of POD**

1.	**Budget/Financial Risks**			**1.1.4**	**1,2,3,4**	Reduced ability to maintain FF safety	**15**	<u>AM Response</u> Maintenance of competency is managed on station through SPA and the training planner for all operational staff. TRM staff utilise VAH to ensure appliances on fully staffed. **July-Nov Update –**There are no further changes, the update remains the same as 1st qtr **Dec - Mar Update** There are no further changes, the update remains the same as 1st qtr <u>AM Preparedness</u> Safe Person Assessments and Learn pro modules continue to be completed by operational crews as part of their work routine. Confirmation of knowledge and understanding is confirmed through station audit processes. **July-Nov Update** No change this period **Dec-Mar update** No change this period	**10**	**AM Operational Response/ Preparedness**
		1.2	Insufficient staff to maintain current	**1.2.1**	**1,2,3,4**	Increased fires, deaths and injuries		MFRA continues to deliver its Home Safety Strategy, our focus is targeted at the over 65's and those who are		**AM Community**

1.	**Budget/Financial Risks**		prevention and protection work. Inability to maintain performance (e.g. Care Act)				15	most vulnerable, we have seen advocate performance lift by over 45% this past year and we continue to monitor ADFs and Fire Fatalities through PMG. The impact of the Grenfell Tower Fire is yet to be fully understood but there is the likelihood of increased Protection teams as such a review is underway **July-Nov Update** The Arson team is continuing in the reduction of deliberate fire setting by proactively engaging with partners, carrying out target hardening within the local community whilst actively investigating incidents that have been suspected of deliberate ignition. The team has adopted a risk based approach towards deliberate fire setting understanding the local intelligence picture using the Polices Threat, Harm and Risk matrix. The aim is to be people, place and premise centric delivering community reassurance in the high demand wards across the Merseyside. We will look to collaborate with Merseyside Police, Local Authorities and other CSP partners to set clear objectives to Prepare, Prevent, Protect and	10	**Risk Management**
1.	**Budget/Financial Risks**									

								Pursue in our duties of arson reduction. During November 5 Multi Agency Campaigns have taken place with partners and over 200 HFSCs were completed along with 6 target hardening reports and 15 Fly tipping reports. A collaborative approach with Partners saw MFRS record a 32% reduction in ASB fires during the bonfire period. MFRS carried out 132 Community Risk Management routes and completed 143 target hardening visits. In total MFRS collected over 49 tonnes of waste which resulted in 189 fewer calls than 2016. **Dec-Mar update** Following the return of the fewest fire fatalities and the fewest accidental dwelling fires ever attended by MFRA, the function appears able to continue to deliver its service without a compromise in terms of fire death and injury. The Home Safety team (Prevention) are to review the Home fire safety strategy which has run from 2015-2018 with evident success.		
		1.3	Insufficient FF's to	**1.3.1**	**1,2,3,4**	Increased risk of	**15**	MFRA undertakes continual review,		**AM**

			maintain current levels of response and current number of fire stations			property loss in the community		analysis and testing of necessary operational response changes resulting from budget reductions to ensure effectiveness against Authority response standards. **July-Nov Update–**There are no further changes, the update remains the same as 1st qtr **Dec - Mar Update** There are no further changes, the update remains the same as 1st qtr	**10**	**Operational Response**
				1.3.2	**1,2,3,4**	Increased fires, deaths and injuries	**15**	MFRA undertakes continual review, analysis and testing of necessary operational response changes resulting from budget reductions to ensure effectiveness against Authority response standards. **July-Nov Update–**There are no further changes, the update remains the same as 1st qtr **Dec - Mar Update** There are no further changes, the update remains the same as 1st qtr	**10**	**AM Operational Response**
		1.4	Pay increases-impact on ability to maintain a balanced budget	**1.4.1**	**1,2,3,4**	The 2017/18 MTFP assumes 1% annual pay increase for all staff in 2017/18 to 2019/20 and then 2%	**9**	For 2017/18 financial year the inflation reserve, £0.5m, can cover short term funding of the 2017/18 firefighter pay offer, 2%.	**9**	**Treasurer**

						thereafter. Each additional 1% increase in pay equates to approximately £0.3m for firefighters and £0.1m for other staff. For 2017/18 the latest indication is that firefighters will receive a minimum of a 2% pay increase. This will permanently increase expenditure by £0.3m p.a. above the budgeted amount. An additional 3% may be awarded in April 2018, but this is dependent upon the Government funding this, and therefore although unlikely the assumption is that without Gov support the 3% will not be awarded.		However permanent additional savings must be identified (during the 2018/19 budget process) to cover the increase on a permanent basis. **July-Nov Update** Non-uniform staff have been offered a 2 year (2018/19 – 2019/20) pay increase of 2% p.a. The 2018/19 budget process will consider what this means for the MTFP and what action is required. **Dec-Mar update** Non-uniform staff have accepted a 2 year (2018/19 – 2019/20) pay increase of 2% p.a. The 2018/19 budget included a provision to meet this and a 2% 2017/18 – 2019/20 firefighter pay award		

		1.4	Pay increases-impact on ability to maintain a balanced budget	**1.4.1**	**1,2,3,4**	The 2017/18 MTFP assumes 1% annual pay increase for all staff in 2017/18 to 2019/20 and then 2% thereafter. Each additional 1% increase in pay equates to approximately £0.3m for firefighters and £0.1m for other staff. For 2018/19 to 2019/20 the updated MTFP is likely to see the assumption that the future pay awards may be 2% p.a. of higher. Increasing the financial challenge by £0.8m by 2019/20, plus the £0.3m from the 2017/18 Firefighter pay award.	**25**	For 2018/19 & 2019/20 the 2018/19 budget making process must identify permanent savings to cover any change in the pay assumptions. At the present moment no specific saving options have been worked up to cover the increased cost. **July-Nov Update:** Non-uniform staff have been offered a 2 year (2018/19 – 2019/20) pay increase of 2% p.a. The 2018/19 budget process will consider what this means for the MTFP and what action is required. **Dec-Mar update** Non-uniform staff have accepted a 2 year (2018/19 – 2019/20) pay increase of 2% p.a. The 2018/19 budget included a provision to meet this and a 2% 2017/18 – 2019/20 firefighter pay award	**25**	**Treasurer**
		1.5	Insufficient support staff to maintain services to front line and maintain good governance.	**1.5.1**	**1,2,3,4**	Reduced ability to maintain fleet, PPE, pay FF's and maintain the buildings.	**15**	Processes are redesigned when cuts to staffing are made Stopping performing specific activities considered Remaining staff are trained in processes/services that are still required	**10**	**SMG**

								July-Nov Update No change this period **Dec-Mar update**		
		1.7	Loss of National Resilience funding from Home Office			Loss of operational response/service/training/lack of equipment/vehicles not maintained.		Utilising MFRS resources to fulfil Role and responsibilities. Budget constantly reviewed with Home Office Colleagues **July-Nov Update** Budget constantly reviewed with Home Office Colleagues **Dec-Mar update** Continual review with Home Office		**AM Preparedness**
		1.8	Changes to insurance discount rates	**1.8.1**	**1,2,3,4**	Increased insurance premiums		This is largely out of the control of MFRA but careful negotiation and management of all contracts assist with mitigating the effect. **July-Nov Update** This continues to be out of direct control but mitigated as above **Dec-Mar update** This continues to be monitored by careful management of contracts despite being out of MFRA direct control		**Director of Legal, Procurement & Democratic Services**

CORPORATE RISK REGISTER 2017/18

Aims: 1) Excellent Operational Preparedness. 2) Excellent Operational Response. 3) Excellent Prevention & Protection. 4) Excellent People										
2.	**Legal & Legislative Risks**	**2.1**	Non-compliance with the National Framework	**2.1.1**	**1,2,3**	Damage to MFRS reputation. Impact on public and partner goodwill.	**15**	The IRMP process is thorough and consulted on widely. SWOT and PESTEL activities are carried out Community risks are assessed and strategies and processes adopted to deal with them Data is analysed and considered **July-Nov Update** Work continues to take place as detailed above in relation to planning and delivery of objectives. **Dec-Mar update** New National Framework has been published and details of FRS inspection which will seek evidence of performance in relation to National Framework duties and powers. Preparation for this is underway. Strategic approach to IRMP planning is also under review.	**8**	**SMG**
				2.1.2	**1,2,3**	Inability to respond to major national resilience incidents	**15**		**8**	**SMG**
				2.1.3	**1,2,3**	Increased fires, deaths and injuries	**15**		**12**	**SMG**
2.	**Legal & Legislative Risks**	**2.2**	Corporate Manslaughter Act	**2.2.1**	**1,2,3,4**	Sanctions, fines and or arrests resulting from death of Personnel	**25**	This can be mitigated to some degree by all staff taking care at incidents and events to avoid injury and damage. **July-Nov Update** No change this period	**12**	**SMG**

								Dec-Mar update No change this period		
2.	**Legal & Legislative Risks**	**2.3**	Changes introduced by the Localism Act 2011	**2.3.1**	**1,2,3,4**	Judicial Review – other legal challenges	**15**	This can be mitigated to some degree by careful consideration of consultation outcomes and other forms of community input into decisions. However any person can apply for JR regardless of the perceived merits or otherwise of such an application. No challenges in the form of Judicial Review or other have been received within this period. **July-Nov Update** No change this period **Dec-Mar update** No change this period	**8**	**Director of Legal, Procurement & Democratic Services**
		2.4	Equality Act - not maintaining compliance with the Public Sector Equality Duty	**2.4.1**	**4**	Potential impact on reputation Potential legal action	**15**	The Equality and Diversity Policy is regularly reviewed (most recently 2017) An Equality Action Plan has been in place for five years, with outcomes and risks reviewed in full every year and progress monitored quarterly An E&D Annual Report details outcomes in line with the Equality Act and Action Plan	**8**	**Director of Strategy & Performance**

2.	**Legal & Legislative Risk**							A Public Sector Equality Duty data report is produced annually and analysed to feed in the action planning process Equality Impact Assessments are carried out for plans, policies, guidance, instructions and organisational change A desk top exercise was carried out in 2016/17 to gather information in relation to the LGA Equality and Diversity Framework Two staff surveys have been carried out (2014 and 2016) and action taken to address concerns. Training and support is given to staff to assist them in complying with Equality and Diversity related duties. **July-Nov Update** All the above comments are still relevant and work has continued nationally and regionally to influence E&D policy. The new E&D objectives have been reviewed to allocated measures to each of them to ensure progress can be monitored. They have also been mapped against national requirements such as the NJC strategy and E&D Framework. **Dec-Mar update** The end of year review of the E&D Action plan has shown that progress has been made in many areas of the		

								plan including: • Hate Crime awareness interventions • Celebrating International Women's Day at MFRS HQ • Dementia Pledge training for staff • Progress on our Knowing our Communities work • Progress on national Engaging Diverse Business project that was started by MFRS • Positive Action has taken place for firefighter recruitment • Operational Response staff engagement has focussed on how staff view difference, diversity and unconscious biases. • Implementation of the Estates Access Audit has continued • MFRS has recruited diverse volunteers • Over 160 firefighters have completed the Light Mental Health First Aid course and the roll-out continues.		
		2.6	Policing and Crime Act 2017	**2.6.1**	**2,3**	Potential change to Governance		Police and Crime Commissioner (PCC) representative model on the Fire Authority. A business case would need to be completed and submitted to the		**AM Strategic Change and Resources**

							15	Secretary of State. If disputed an independent panel would review the business case. Continue to maintain dialogue with the PCC through Blue Light Collaboration Programme Board and Fire Authority. **July-Nov Update** No change this period **Dec-Mar update** No change this period	12	
				2.6.2	**2,3**	Inability to deliver collaboration across Blue Light Services in line with Policing and Crime Act 2017	**12**	The Policing and Crime Act 2017 places a duty on MFRA to keep collaboration under review. We will update, review and monitor our local collaboration overview. We will continue with the Blue Light Collaboration Programme Board. **July-Nov Update** No change this period **Dec-Mar update** No change this period	**8**	**AM Strategic Change and Resources**
		2.7	Increased Litigation costs	**2.7.1**	**4**	Staff shortages resulting in dissatisfaction of staff and customers,	**15**	SMG will take care to ensure staffing levels are appropriate to deal with statutory functions	**12**	**Director of Legal, Procurement & Democratic**

						causing increases in claims.		**July-Nov Update** No change **Dec-Mar update** No change this period		**Services**
				2.7.2	**4**	Increasing insurance and settlement cost provision	**12**	Close work with the Health and Safety team and ongoing training and development **July-Nov Update** No change **Dec-Mar update** No change this period	**6**	**Director of Legal, Procurement & Democratic Services**
				2.7.3	**2,4**	Increased incidents/costs/injuries whilst travelling under blue lights/speeding	**12**	Close work with the Health and Safety team and ongoing training and development **July-Nov Update** No change **Dec-Mar update** There have been 2 incidents in this period. Mitigation continues	**6**	**Director of Legal, Procurement & Democratic Services**
				2.7.4	**2,4**	Potential for increased litigation arising from shared premises with partners.	**12**	Estates team monitor shared use and advise partner agencies as appropriate.	**6**	**Director of Legal, Procurement**

								July-Nov Update No change **Dec-Mar update** There have been two or three incidents however nothing resulting in litigation or claims this period		**& Democratic Services.**
		2.9	Failure to comply with Government Transparency agenda	**2.9.1**	**1,2,3**	Damage to reputation of MFRS by not publishing policies and data as required	**12**	A Transparency Service Instruction has been produced to set out the Authority's commitment There is a transparency section on the website with advice and guidance as well as the data that the Authority is required to publish **July-Nov Update** No change this period **Dec-Mar update** No change this period	**8**	**SMG**

		2.10	Health & Safety audits, failures and investigations	**2.10.1**	**1,2,3**	H&S audits, failures and investigations from HSE resulting in sanctions and or fines	**15**	MFRA has a robust suite of H&S audits with findings responded to by the central team in liaison with Estates. All incidents follow an investigatory process to maximise learning which includes advice from Legal to ensure protection. **July-Nov Update –**There are no further changes, the update remains the same as 1st qtr **Dec - Mar Update** There are no further changes, the update remains the same as 1st qtr	**10**	**AM Operational Preparedness & Operational Response**
		2.11	Lead Authority for National Resilience	**2.11.1**	**1,2,3,4**	Increased responsibility and liability; capacity issues and reputational risk.	**15**	Mitigation in part through careful contract management. **July-Nov Update** No change **Dec-Mar update** No major change although LFB refuse to sign terms of access. Negotiations continue via Home Office	**10**	**Director of Legal, Procurement & Democratic Services.**

Aims: 1) Excellent Operational Preparedness. 2) Excellent Operational Response. 3) Excellent Prevention & Protection. 4) Excellent People										
3.	**Loss of Strategic sites/Assets**	**3.1**	Loss of strategic sites/assets and inability to provide services to Merseyside	**3.1.1**	**1,2,3,4**	Inability to respond to major local and national resilience incidents	**20**	Treasurer Finance Staff can operate applications from any MFRS site. Application hosted externally with ABS having fall back sites as well. **July-Nov Update – no change** Head of Technology & AM Preparedness Secondary Fire Control is available at TDA for relocation. A fall-back 'buddy' agreement is in place with Surrey FRS and BT to redirect and manage Emergency 999 calls during periods of outage, spate and spike. Enhanced buddy arrangements with Surrey including DEIT are under investigation **July-Nov Update** No change this period – *Head of Technology & AM Operational Preparedness* **Dec-Mar update** The Enhanced buddy arrangements with Surrey including DEIT was reviewed but was too costly. Secondary Fire Control & NR is available at TDA for relocation NR has Airwave and Mobile tele-	**8**	**Head of Technology, Treasurer, AM Operational Preparedness**
		3.2	Loss of FSHQ, FIRE CONTROL, TADA, fire stations and National Resilience Control	**3.2.1**	**1,2,4**	Inability to respond, delay in providing core services	**20**		**8**	
		3.3	Loss of utilities due to infrastructure failure.	**3.3.1**	**1,2,3,4**	Inability to provide core services temporarily whilst fall-back site is brought online	**20**		**8**	**Head of Technology, Treasurer, AM Operational Preparedness**

3.	**Loss of Strategic Sites/Assets**							communication		
		3.4	Protective security- potential risks resulting from non-compliance with FRS Protective Security Strategy.	**3.4.1**	**1,2,3,4**	Potential security risk in relation to all FRS assets, particularly in relation to Personnel, information and premises risk.	**20**	A Protective Security Group is led by the DCFO and includes representatives of several departments with security responsibilities. There is a Protective Security Policy and three Service Instructions that deal with Information, Physical and Personnel security In 2017/18 an Internal Audit review of arrangements will take place. **July-Nov Update** The internal audit review is now likely to take place in early 2018 **Dec-Mar update** Internal audit review gap analysis has been received and due to be reviewed by Protective security Group on 17th May. Preparation for GDPR is assisting in relation to information security.	**9**	**Director of Strategy & Performance**
		3.5	Station Change Programme doesn't	**3.5.1**	**1,2,3,4**	Programme management direction and led by PO's.	**20**	The key risk is that not all the three merged stations will be built as planned. However, Prescot is on	**6**	**AM Strategic Change and Resources**

			achieve desired outcomes. Mergers and closures of Merseyside stations in light of cuts.			Prescot		target to be operational by March 2018. **July-Nov Update** Prescot is now due to be operational in late January 2018. **Dec-Mar update** Prescot became operational on 24th January 2018		
				3.5.2	**1,2,3,4**	Saughall Massie	**25**	Planning permission has now been received for Saughall Massie and Authority approval will be sought later in 2017 for the build to commence, once the land has been obtained. **July-Nov Update** Wirral Cabinet have now approved transfer of the land to MFRA. Authority will be recommended to approve scheme and budget at meeting on 14th December 2017. **Dec-Mar update** Authority approved scheme & set budget on 14th December 2017. Wirral BC published statutory notices for land transfer in the Wirral Globe for two consecutive weeks in February 2018. As no objections were received, Wirral BC have sent Lease & Agreement to	**9**	

								Lease documentation for approval/signature. It is hoped to start build in June 2018.		
				3.5.3	**1,2,3,4**	St Helens	**25**	In St. Helens a suitable site has been identified & negotiations are currently underway to resolve the various issues that are currently preventing progress. If this site falls through, an alternative site will be sought. If nothing appropriate can be found, Eccleston will close completely and the current St. Helens site continue to be utilised for response in the wider St. Helens area. **July-Nov Update** Negotiations continue to obtain the preferred site. **Dec-Mar update** Site investigation work has been programmed to start in April 2018. Costs for this work are to be shared between Pilkington & MFRS (with a contribution from NMWAS). The outcomes of this work will determine whether a cost-effective solution can be progressed on this site.	**12**	

		3.6	Potential elevated target risk for terrorist action in regards to cyber crimes	**8.1.1**	**1,2,3,4**	Loss of Fire Control ICT services and information assets		See 6.2 and 6.9. As a further mitigation, cyber security is also increased by having the Fire Control infrastructure on its own firewalled network, with limited access in and out. However, ICT, at this point in time, would increase the risk level from 6 to 12 in line with other cyber risks (6.2 and 6.9). **July-Nov 2017 Update** No change this period – *Head of Technology.* **Dec 2017-Mar 2018 Update** In line with the Emergency Services Mobile Communications Programme (ESMCP) – following an Information Technology Health Check (ITHC) – the station turnout equipment is being replaced		**Head of Technology**
Aims:	**1) Excellent Operational Preparedness.**	**2) Excellent Operational Response.**	**3) Excellent Prevention & Protection.**	**4) Excellent People**						
		4.1	Increase in Environmental	**4.1.1**	**1,4**	HSE and legislative impacts from illegal		Action plans are in place with Fire Control to inform the Environment		

4.	**Environmental And Political**		incidents resulting in the inability to respond			discharges (impact from fire-fighting activity)	**15**	Agency when operational activity may impact the environment to assist with mitigation. HMEPO support officers are available across all flexi duty groups to support incident commanders. **July-Nov Update–**There are no further changes, the update remains the same as 1st qtr **Dec - Mar Update** There are no further changes, the update remains the same as 1st qtr	**10**	**AM Operational Response**
4.		**4.2**	Insufficient water pressure resulting in the inability to fight fires effectively.	**4.2.1**	**1,2**	Potential for major consequences, FF injuries	**25**	High volume pumps (HVP's) and hose layer units available to support water supplies. Additional HVP's available via NCAF arrangements. Availability of mapping for water mains to be accessible on the command support unit. Currently awaiting sign off of a Data Licence agreement with United Utilities to share "Safe Dig" Software **July-Nov Update** Water Mains Mapping has been made available and will be added to the MDT and Tablets that are to be supplied to each appliance and senior officer. This will enable	**4**	**AM Operational Preparedness**

	Environmental And Political							Incident Commanders to understand water main sizes and position to lessen over running of the water supply at incidents **Dec-Mar update** Mains mapping and United Utilities hydrants have been added to MDT. Emergency Water Supplies is changing to show capacity.		
		4.3	Changing demographics in Merseyside brings about a changing in vulnerability profile and higher unemployment.	**4.3.1**	**1,2,3**	Increased economic costs from increases in arson	**15**	Increased economic costs from increases in arson – The arson reduction strategy focuses multi-agency community safety campaigns in high demand wards in order to support and community cohesion, develop community resilience and reduce the tolerance of anti-social behaviour (ASB), domestic abuse (DA), serious organised crime (SOC) and the associated deliberate fire setting. Increased economic costs from increases in fraud – The newly funded communications and media post will raise awareness of community safety priorities coordinating media messages and campaigns across a digital platform. Increased road traffic collisions (RTC) – As above (but add 50% Merseyside Road Safety Partnership funded).	**12**	**AM Community Risk Management**
				4.3.2	**1,2,3**	Increased economic costs from increases in fraud.	**15**		**12**	
				4.3.3	**1,2,3**	Increased incidents eg. fires	**15**		**12**	
4.	**Environmental And Political**			**4.3.4**	**1,2,3**	Increased antisocial behaviour (ASB)	**15**		**12**	

								Increased antisocial behaviour (ASB) – The arson reduction strategy focuses multi-agency community safety campaigns in high demand wards in order to support and community cohesion, develop community resilience and reduce the tolerance of ASB, DA, SOC and the associated deliberate fire setting. The Street Intervention Team are also deployed via the Voluntary Organisation Support Service (VOSS) and Merseyside Police to engage and divert children and young people away from anti-social behaviour and towards more meaningful activities. Increased incidents e.g. Fires – Community Risk Management risk reduction strategies are designed to put measures in place to reduce risk and mitigate high call demand outputs and outcomes are reported via Performance Management Group. **Dec-Mar Update** There is no change in the risk mitigation measures as described in Q1		
4.	**Environmental And Political**	**4.4**	Reputation	**4.5.1**	**1,2,3,4**	Negative changes to the Community perception of MFRS	**15**	Corporate Communications activity is focussed on protecting the reputation of the Service whilst	**12**	**Director of Strategy and Performance**

						may be detrimental to Prevention, protection and partnership activities eg. failure to deliver safety messages.		providing advice and guidance to communities and promoting the services provided Social media is closely monitored (but not 24/4). Press and media queries are dealt with promptly with senior officers providing information Events are promoted and provided with communications support Staffing levels have been very low – this will improve during 2017/18. **July-Nov Update** All the above still apply. A social media audit will take place to develop a new strategy. A new communications Strategy will also be developed. **Dec-Mar update** Capacity issues including the loss of a member of the team have hampered this work. The strategy development process is due to start in May and this will reflect a realistic appraisal of the needs of the organisation balanced against the resources available. The development of a new website is now underway.		
		4.5	Increased flood risk	**4.6.1**	**1,2**	Ability to respond to major flooding	**15**	<u>Response</u> Operational Crews train for and are equipped for water rescue incidents.	**10**	**AM Operational Preparedness**

						incidents from spate conditions.		Senior Officers train against national standards for flood response. Specialist Teams are available for local, national and inter-national flood response. Additional resources are available to the Service if required for increased levels of activity. Increased Alert Level protocols can be implemented by Senior Officers for anticipated events. **July-Nov Update–**There are no further changes, the update remains the same as 1st qtr **Dec - Mar Update** There are no further changes, the update remains the same as 1st qtr <u>Preparedness</u> Service Instruction 0415 Provision of Resources during Periods of Sustained Operational Activity and or Spate Conditions Service Policy PREPOL07 Spate Conditions All front line crews are trained and equipped for still water response. Swift water trained personnel available for deployment, including boats, to support major flooding events. Further resilience available		**& Operational Response**
		4.6	Extreme Weather	**4.7.1**	**1,2**	Spate conditions will impact on ability to respond	**15**		**10**	**AM Operational Preparedness & Operational Response**

								through retained personnel. Further assistance available via NCAF arrangements. Fire control have increased activity level procedures to respond to appliance availability 4x4 vehicles available for officers. **July-Nov Update** As above, MFRA continue to monitor extreme weather alerts with multi agency partners across Merseyside and also Nationally for potential deployments via for National Resilience Fire Control **Dec-Mar update** Out of hours the GM staffing picks up the alerts to disseminate to all MFRS. GM have been asked to subscribe to met office alerts		
		4.7	Civil Unrest	**4.8.1**	**1,2,3**	Inability to respond effectively to civil unrest	**15**	MFRS continually liaises and trains with Merseyside Police and other agencies through formal Local Resilience Forum channels to ensure a coordinated approach to Civil Unrest following the principles of JESIP (Joint Emergency Services Interoperability Protocol). **July-Nov Update–**There are no	**10**	**AM Operational Preparedness & Operational Response**

								further changes, the update remains the same as 1st qtr **Dec - Mar Update** There are no further changes, the update remains the same as 1st qtr		
		4.8	Impact of increased focus on high rise buildings following the Grenfell Towers fire.	**4.8.1**	**1,2**	Required focus on fire safety in high rise buildings following the Grenfell Tower fire has a negative impact on the current MFRS Home Safety Strategy resulting in fewer HFSC's being delivered to over 65's (the group most vulnerable to fire in the home).	**15**	MFRA approach at this time (and subject to continuous review) has established a community reassurance campaign for the 43 high rise buildings initially identified with cladding, MFRA is also cognisant of all communications from Government Departments, National Fire Chiefs Council, housing and others. We will continue to engage proactively with key stakeholders locally to mitigate any risks were possible. We will continue to monitor Home Fire Safety Check (HFSC) performance in the short term (set against the status reports) from operational crews given that July and Augusts focus will be given to high rise premises. This has been reported and acknowledged by the Service's Performance Management	**10**	**AM Community Risk Management**

								Group. Advocates will still predominately focus on core business in the delivery of high risk visits" **July-Nov Update** No change this period **Dec-Mar update** No change this period		
		4.9	Air pollution charges - Report/regulations due out July 2017 on City Centre car charges for diesel vehicles	**4.9.1**	**1,2,3**	Cost of MFRS ancillary vehicles entering City centre zone – anticipate fire appliances will be exempt.		MFRS Transport Manager will closely monitor the situation **July-Nov Update** Awaiting further information of local enforcements, this will also link in with 4.11 below. **Dec-Mar update** Still reviewing report. At present no impact on MFRS.		**AM Preparedness**
		4.10	Fuel Strike			Loss of fuel available due to strike. Critical services only to utilise MFRS diesel tanks.		Merseyside Resilience Forum Fuel plan for strike conditions. MFRS fuel tank supplies utilised for critical services only during strike conditions **July-Nov Update** BC plans being refreshed due to recent update to national Fuel strike plan		**AM Preparedness**

								Dec-Mar update MRF and MFRS BC plans have been refreshed and published. Fuel Cards and MFRS diesel tanks in use. MFRS diesel tanks will provide resilience in a fuel strike situation		
		4.11	Diesel fuel vehicles being phased out in the future	**4.11.1**	**1,2,3**	Impact on fleet and lease vehicles		Long term planning for vehicle and asset refresh. **July-Nov Update** Transport Manager to carry costings for introduction of alternative fuel/powered vehicles for ancillary fleet and infrastructure to support them. **Dec-Mar update** Electric cars continually reviewed but costly at present		**AM Operational Preparedness**
Aims:	**1) Excellent Operational Preparedness.**	**2) Excellent Operational Response.**	**3) Excellent Prevention & Protection.**	**4) Excellent People**						
5.	**Loss of Key staff**	**5.1**	Sudden Mass Absenteeism Pandemic, Strike,	**5.1.1**	**1,2,3,4**	Loss of Key staff, Inability to provide core services	**15**	<u>AM Response</u> The Authority maintains a resilience team capable of providing the	**10**	**AM Operational Preparedness &**

			CBRNE incident, significant incident					necessary operational response provision as required within the 10 key locations during contingency situations. In addition section 13-16 arrangements are maintained to supplement internal resilience arrangements. **July-Nov Update–**There are no further changes, the update remains the same as 1st qtr – AM Response **Dec - Mar Update** There are no further changes, the update remains the same as 1st qtr <u>AM Preparedness</u> Business Continuity arrangements supported by Resilience contracts		**Operational Response**
		5.2	Industrial Action resulting in the Inability to provide suitable response	**5.2.1**	**1,2,3,4**	Inability to attend incidents, provide core services		The Authority maintains a resilience team capable of providing the necessary operational response provision as required within the 10 key locations during contingency situations. In addition section 13-16 arrangements are maintained to supplement internal resilience arrangements. **July-Nov Update** No further update at this time **Dec-Mar update**	**12**	**Director of POD**

								The Authority continues to maintain a resilience team capable of providing the necessary operational response provision as required within the 10 key locations during contingency situations. In addition section 13-16 arrangements are maintained to supplement internal resilience arrangements.		
		5.3	Change resulting in loss of Key staff and increasing workloads to set strategy and deliver services	**5.3.1**	**1,2,3,4**	Loss of key skills, lack of momentum going forward, reduced ability to respond to changes.	**15**	The Authority continues to manage its staffing requirements through the Workforce strategy group, appraisal process, and Gateway promotion process. All combining to identify potential staff or skill shortage, and ensure adequate training, promotion or recruitment to address those needs **July-Nov Update** No update at this time **Dec-Mar update** As previously detailed the Authority continues to manage its workforce requirements effectively, through its Workforce Strategy Group , and its succession planning processes. Station Manager Recruitment has just been concluded, and Workforce Development Board meetings will continue monitor all roles	**12**	**Director of POD**

Aims:	**1) Excellent Operational Preparedness.**		**2) Excellent Operational Response.**		**3) Excellent Prevention & Protection.**			**4) Excellent People**		
6.	**Technology Risks**	**6.1**	Management of 3rd Party Technology Suppliers Software & Applications Training requirements.	**6.1.1**	**1,2,3,4**	Loss or reduction in the quality of services provided	**12**	Head of Technology A test environment exists for training on systems, upgrades, etc. before any change is made to the live system. telent and the internal ICT client team manage suppliers to achieve the required service levels and ensure suppliers are appropriate to support the needs of MFRA, both across the ICT infrastructure *and* the commodity & fire control applications used by the Authority. This ensures the suppliers deliver continuous service improvement, show best value and are fit for purpose to meet the business needs. **July-Nov 2017 Update** No change this period – *Head of Technology.* This area is also being considered as part of the preparation for the implementation of the General Data Protection Regulation in May 2018. *Director of Strategy and Performance* **Dec 2017-Mar 2018 update** No change this period – *Head of*	**6**	**Head of Technology** **Director of Strategy & Performance** **FMIS Manager**

6.	**Technology Risks**							*Technology.*		
		6.2	Infrastructure sharing with partners. Security from Virus and hacking, loss of data (Laptops, CD etc.).	**6.2.1**	**1,3,4**	Data compromised, loss of data, complaints, legal action, fines	**15**	Director of Strategy & Performance ICT and Information Management Strategy Group considers and responds to strategic risks A Protective Security Group focuses on information security Governance arrangements for applications were been reviewed and formalised in 2016. **July-Nov Update** Head of Technology An Exempt report on Cyber Security Attacks was presented to MFRA on 6th June 2017. This informed Members of the arrangements in place – both proactive and reactive – in response to the escalating threat of cyber-attacks. As can be appreciated, releasing full details of security measures is a security risk in itself In August 2016, as part of the requirement to prepare for connection to the Emergency Services Network (ESN), MFRSA undertook an IT Health check engaging 3rd Party Security consultants CNS to undertake the IT Health Check (ITHC).	**12**	**Head of Technology** **Director of Strategy & Performance**

6.								The ITHC remedial Action Plan will contribute to increase Cyber Security for MFRA. This area is also being considered as part of the preparation for the implementation of the General Data Protection regulation in May 2018. *Director of Strategy and Performance* **Dec-Mar update** Management of contracts with ICT suppliers has been considered as part of the preparations for GDPR with the Procurement team including standard terms and conditions in contracts to reflect the changes. [Director of Strategy and Performance] *Head of Technology* - The ITHC remedial action roadmap is in place and activities on the road map are underway.		
		6.3	The inability to keep pace with technology changes.	**6.3.1**	**1,2,3,4**	Loss or reduction in the quality of services provided	**15**	MFRA has forgone a concrete roadmap for its newly launched ICT strategy and has instead adopted a strategic framework which reviews planned activities and outcomes in a	**12**	**Head of Technology**

6.	**Technology Risks**							yearly cycle of meetings. This ability to 'evolve' the strategic outcomes allows the Authority to match the fast pace of change in the ICT sector, taking advantage of appropriate innovations, whilst having an ICT infrastructure that is robust, secure, reliable and resilient. For this reason, our ICT strategy is encapsulated in our ICT strategic framework and our asset management plan, and is then aligned to wider organisation strategy at the 'ICT and Information Management Strategy' meetings. **July-Nov 2017 Update** No change this period – *Head of Technology and Director of Strategy and Performance.* **Dec 2017-Mar 2018 Update** No change this period – *Head of Technology.*		
		6.4	Poor data/information management resulting in loss of data, legal redress from Information Commissioner.	**6.4.1**	**1,2,3,4**	Data compromised, loss of data, complaints, legal action, fines	**15**	There are polices for Information Security and Governance, Acceptable use of ICT equipment and Protective Security. There are also several Service	**12**	**Director of Strategy & Performance**

6.	**Technology Risks**		Particularly in relation to failure to implement the General Data Protection Regulation.					Instructions covering the key issues associated with this, including data protection, retention period, destruction of information assets, records management and Freedom of Information. Work has commenced to implement the General Data Protection Regulation with a working group considering its implications. This includes: Developing an information asset register, privacy impact assessments, access to information and the role of the Data Protection Officer. Collaborative work with Merseyside police and other FRAs is being considered to share best practice. **July-Nov Update** Work to implement the General Data Protection Regulation (GDPR) is progressing steadily, but the large amount of work required may require a small amount of additional resources for a short period. **Dec-Mar update** Considerable work has been undertaken to prepare for GDPR including: • Preparation of Privacy notices		

	Technology Risks							• Alteration of a LearnPro package for MFRS use • Policy and Service Instruction review • Data Privacy Impact Assessments • Changes to the Portal and Website • Staff briefings • Changes to Subject Access processes • Review of the recording of phone calls • Preparation of an Information Asset Register • Preparation of a template for recording data processing • Changes to supplier contracts		
		6.5	The Emergency Services Mobile Communication Programme (ESMCP) and transition to the emergency services network	**6.5.1**	**1,2,3**	Radio voice services cannot be guaranteed for the transition	**16**	The ESMCP presents a high-risk potential for MFRA, dependent on external factors beyond its day-to-day control; the main issue being slippage at the national level. A watching brief is in place and any opportunities to influence national/regional aspects of ESMCP will be taken. The project risks are being managed by the MFRA ESMCP project board and the national programme risk	**9**	

								register is being maintained by the Home Office central team. A key risk mitigation is that the Airwave contract has been extended and Motorola has now bought Airwave as a company. The Home Office will work closely with FRS & Airwave to ensure that our current voice communication network remains in place and effective. ESMCP will replace the communication service delivered by Airwave with a national mobile communication service for all three emergency services. ICT staff regularly attend ESMCP updates at Fire Control North West to gain the latest information on the progress of the project. **July-Nov 2017 Update** No change this period – *Head of Technology.* **Dec 2017-Mar 2018 update** No change this period – *Head of Technology.*		**Head of Technology**

		6.7	Withdrawal and transition arrangements from SOPHTLOGIC to new MIS for Community Fire Protection.	**6.7.1**	**1,2,3,4**	Robust transitional arrangements are required to ensure the Authority can carry out its statutory duty as the Enforcing Authority under the RRO (Fire Safety) 2005.	**15**	The replacement of the SOPHTLOGIC system is programmed in for development and options are being explored. The transitional arrangements remain part of that process. **July-Nov Update** No change this period **Dec-Mar update** The development of the SIRAH application (to replace SSRI Progress) has an impact on the subsequent development of the Protection application (which will result in MFRA being able to withdraw from Sophtlogic). The SIRAH app is progressing, but being the first key application to be developed in this way, some challenges have arisen which are being addressed by all the parties involved.	**12**	**Director of Strategy & Performance**
		6.9	Increase potential for Cyber Attack as we move to the Cloud			Loss or reduction in the quality of services provided	**15**	ICT deploys a number of security measures to protect our networks and information; See 6.2. In addition to these measures, members of ICT have joined the	**12**	**Head of Technology**

								Cybersecurity information Sharing Partnership (CiSP), which is a joint industry and government forum for cybersecurity practitioners to share advice and warnings. **July-Nov 2017 Update** No change this period – *Head of Technology*. **Dec 2017-Mar 2018 update** No change this period – *Head of Technology*.		

		6.10	Loss of system signal to Vesty building			In extreme weather (fog or snow) and if foliage is overgrown there is a loss of systems in the Engineering Centre		Business Continuity plans are in place for these eventualities. **July-Nov Update** This is becoming more frequent for approx. 2 hrs in the morning time 2-3 times a week depending upon the weather **Dec-Mar update** Very frequent loss of service. With ICT to review. *AM Preparedness* A new solution has been designed and costed and it within ICT budgets. The new solution will be implemented was Landlord permission is given to erect a mast on the Vesty site …. *Head of Technology*		**AM Preparedness Head of Technology**
Aims: **1) Excellent Operational Preparedness.** **2) Excellent Operational Response.** **3) Excellent Prevention & Protection.** **4) Excellent People**										
7.	**Procurement**	**7.2**	Poorly Managed contracts/Partnerships the Financial impacts, onerous T&Cs	**7.2.1**	**1,2,3,4**	Negative impact on service delivery, legal issues, poor quality Partnerships undertaken	**12**	Regular, documented contract management in place for key contracts with priorities agreed between the Authority and the supplier. **July-Nov Update** No change this period **Dec-Mar update** No change this period	**8**	**Director of Legal, Procurement & Democratic Services**

		7.3	Key suppliers of goods and services ceasing to trade	**7.3.1**	**1,2,3,4**	Immediate impact on availability of goods and services required to operate efficiently, legal issues, alternative sources of supply needed.	**15**	Use of Creditsafe alerts to identify and financial changes to contracted suppliers. **July-Nov Update** No change this period **Dec-Mar update** No change this period	**12**	**Director of Legal, Procurement & Democratic Services**

Mission

MERSEYSIDE FIRE AND RESCUE AUTHORITY			
MEETING OF THE:	**AUDIT AND SCRUTINY SUB COMMITTEE**		
DATE:	**7 JUNE 2018**	**REPORT NO:**	**CFO/032/18**
PRESENTING OFFICER	**DEPUTY CHIEF FIRE OFFICER**		
RESPONSIBLE OFFICER:	**DEB APPLETON**	**REPORT AUTHOR:**	**WENDY KENYON**
OFFICERS CONSULTED:	**MEMBERS OF DIVERSITY ACTION GROUP AND STRATEGIC EQUALITY GROUP**		
TITLE OF REPORT:	**EQUALITY & DIVERSITY PLAN 2017-2020, PROGRESS FOR QUARTER 3 & 4 2017/18**		

APPENDICES:	**APPENDIX A:**	**EQUALITY & DIVERSITY ACTION PLAN 2017-2020, PROGRESS FOR QUARTER 3 & 4 2017/18**
	APPENDIX B:	**EQUALITY OBJECTIVES 2017 – 2020 ANNUAL UPDATE**

Purpose of Report

1. The purpose of the report is to provide Members with :

   a. An update on the agreed Equality and Diversity (E&D) plan for quarter 3 & 4 together with an update on progress against the actions for the first year;

   b. An update on the Equality Objectives for 2017/18 as at 31st March 2018.

Recommendation

2. That Members note the content of the Equality and Diversity progress report and Equality Objectives and provide feedback on the progress made.

Introduction and Background

3. The E&D Action Plan was first introduced in April 2013, to help MFRA progress its long term Equality and Diversity objectives, to ensure compliance with the Equality Act 2010 and the Public Sector Equality Duty (PSED) and to reflect the fact that E&D was embedded and delivered across all Functions of the Organisation.

4. A new plan was developed for 2017-2020 which is aligned to the Authority's Integrated Risk Management Plan and linked to the Authority's new Equality Objectives.

5. This update provides progress for Quarter 3 and Quarter 4 of 2017-18, year 1 E&D Action Plan and will contribute to the E&D Annual report and the Annual

Public Sector Equality Duty Report which members will approve in the summer 2018.

Progress

6. Appendix A includes updates for the 56 action priorities established to deliver against the 5 Equality & Diversity Objectives under the heading “Quarter 3 & 4 update” where there has been activity delivered. Progress has been made against 50 (amber) priorities, 6 (green) have been fully completed and 1 (red) have yet to start. Members should note that the actions will be delivered over the life of the action plan 2017 – 2020 and as such the report does not necessarily reflect the amount of resources and time taken to achieve and deliver the actions, which will need to be considered when scrutinising progress. Some actions can be delivered very quickly and others could take months or even years to be fully implemented.

7. The following sections a) to j) include highlights of the exceptional work undertaken by our staff and volunteers in quarter 3 and quarter 4 to help to progress our E&D objectives:

a. **Hate Crime**
As part of the hate crime awareness week 14-21 October, street intervention team in conjunction with the LCC held a number of sessions with students across Liverpool district to raise awareness of hate crime. The events were successful in helping students to gain a greater understanding of what hate crime is, how it can affect individuals and their lives. Leaflets were issued to the public during the week. Members should also note that Fire stations also act as Safe Havens and third party reporting centres across the districts which can be accessed by individuals who feel under threat including hate crime.

b. **Celebrate International Women’s Day.**
Following on from the success of the coffee and conversation morning held at MFRA headquarters in 2016 to celebrate International Women’s Day. A second event, was held on Wednesday 7th March, at Service Headquarters. This was an opportunity to celebrate how women and their achievements have contributed to our society, culture, politics, and charity work at MFRA. Along with the achievements of the Fire and Rescue Service, our roles across Merseyside and how we can work towards this year’s pledge which is **#pressforprogress**.

Approximately 60 people attended the event including, MFRA staff from across the organisation, colleagues from Merseyside Police, Authority Members, partners, members of the Fire Cadets from Archbishop Blanch and our guest speakers who shared their inspirational stories about their role and how they support women and communities of Merseyside. These included:

- Kathy Wright – CEO of Maggie's Centre Wirral – A centre to support people with Cancer and their families and friends
- Chief inspector Tony Jones – member of Merseyside Police Parity 21 network – Tony regularly attends the network to advance gender equality in the police.
- Dr Paula Brigg – Consultant in women's sexual and reproductive health
- Rachel Fitzsimmons - Relationships and sex education Specialist for young people
- MFRS SM Lauren McCormack - A representative of the Female Firefighter Forum (E.V.E) discussing the role of the group.
- MFRS SM Steve Gadsdon – on how we can work together, support our colleagues, by making small changes and leading by example.
- Leah Davin – British Transport Police, who has recently become an ambassador for the RNLI.

As part of this year's event we have launched "Small change – Big Impact" jar's which members of staff and guests could take if they wished to get involved. The purpose of the jars are to gather small change which when added up in September will make a big impact to different charities that support women. Cllr Stapleton, who attended the event was greatly touched by the work of the Maggies centre based in Clatterbridge Hospital and has kindly passed in her own and her son's small change, with a generous donation to the Maggies Centre. Cllr Meadan has also made a contribution. With the help of MFRA members and the ICT team the Small Change – Big Impact collection is off to a great start.

Feedback from the event was good highlighting the good mix of presentation styles and subjects and women from different backgrounds with different experiences.

c. **Dementia Pledge update**

Forty Prevention staff from MFRA attended Liverpool Museum in March for their award winning House of Memories training specifically designed to support people with dementia. This training will support staff who are delivering home safety initiatives to vulnerable communities across Merseyside. Fire Service Direct were included in the training as it is important to recognise and understand some of the techniques for communicating with dementia sufferers effectively, this becomes especially difficult over the phone. The training compliments the strategic dementia pledge signed in September 2017, with NWAS and Merseyside Police.

d. **Knowing our Communities**

As part of our ongoing Strategic project, “Knowing our Communities”. The service has engaged with a Faith and Culture consultant Kaushar Tai to assist with gaining access to different Faiths and Cultures mainly Asia, Muslim, Hindu and Sikh. Mr Tai delivered awareness training for MFRA Staff. In total 6 training sessions have been held since September with 103 members of staff from MFRA including Advocates, Youth Engagement team, CRM and POD and Authority Members attending along with colleagues from Merseyside Police as part of collaboration with support services. The recent sessions held in March were delivered in our local Mosques. Mr Tai brings a lot of experience in community engagement and community cohesion work and his excellent inter-personal skills coupled with his commitment to work in this field has assisted in making contact with key members of the Muslim Communities and mosques from across Merseyside.

At a recent meeting held at the Al-Rahma Mosque in Liverpool representatives from MFRA including DCFO Garrigan, our Diversity and Consultation Manager, representatives from Prevention and Protection and our recruitment team met with 12 Muslim community leaders and Imam’s to discuss how MFRA can work more closely together, around all aspects of our organisation, including business fire safety, fire prevention and recruitment. Through these new contacts fire safety information, career opportunities and key community messages can be circulated across the whole Muslim community of Merseyside, and we will be continuing to develop this work relationship with further engagement and projects over the coming year.

This work contributes to a number of local and national projects and supports achievements of equality objectives 1, 2 and 4. Work will continue in 2018/19/20.

e. **Engaging Diverse Business update (EDB)**

The Engaging Diverse Businesses is a NFCC project which was established by MFRA in 2015. The project is now part of the NFCC Protection strategy 2018 – 2020 action plan. The project seeks to engage with diverse business owners to help breakdown cultural barriers to deliver fire safety messages and actions. The project is making good progress and to date a draft research report has been developed which will assist FRS and other regulation bodies with understanding how business owners (BAME) react and treat Health & Safety and Fire Safety. The second phase of the project is to develop a comprehensive educational toolkit with examples of resources and notable practise in the project area. To date 5 case studies have been identified and are being developed. The next stage is to promote the project outcomes so far at future FRS conferences including Institute of Fire Engineers and Asian Fire Service Association in November.

f. **Positive Action Update**

The Positive Action team continue to promote the wide range of career opportunities at MFRA. As well as “Have a go days” held at the Training and Development Academy, for people considering a career as a Firefighter, the positive action team have also arranged open days at Kensington and Aintree Fire Stations, to give those who have attended the “Have a Go days” an idea of what life is like on station. They also have the opportunity to speak to the crews and see whether this is a career for them.

Staff continue to meet with stakeholders in the community, e.g. Wirral Change, Liverpool John Moores University, the University of Liverpool and the Chinese community, to promote opportunities and run workshops. The positive action team also attended a meeting organised by Culture and Faith Consultant Kaushar Tai at the Al-Rahma Mosque in Liverpool. At the meeting it was agreed that the Imam and community leaders would assist with promoting career opportunities within MFRA. Since that meeting staff have circulated information for two roles, one with of Corporate Communications team, and Fire Control vacancies, along with information for “have a go” days taking place in March and April.

g. **Operational Response staff engagement**

As part of the ongoing work to support staff engagement across Operational Response, focus groups are being delivered to gather a degree of understanding from the staff on their perception of working on station and how staff view difference, diversity and unconscious biases.

The work is part of an ongoing operational response staff engagement project which will continue with further focus groups in 2018/19 and will also use staff survey results in 2018 to assist with developing the engagement practise across the department.

h. **Estates and ICT update on Access Audit**

As part of ongoing access audits implementation, the Diversity and Consultation Manager, Head of Estates and Head of ICT have been working together to ensure that Service Headquarters is accessible to all visitors. A visibly enhanced access button has been installed at the entrance to reception, and the disabled parking bays at the front of the building repainted to ensure that visitors to service headquarters can access the building easily.

The PFI team have identified that hearing loops have been installed in the community rooms of all PFI stations. It has been confirmed that the hearing loops on the PFI stations are tested regularly and are all working correctly. Appropriate signage and instructions on how to use the loops is being updated and will be displayed in the relevant rooms. It should be noted that the hearing loops were installed during the station builds in 2012 & 2013. They are analogue & therefore not accessible by those using digital hearing aids. There is currently no plan to upgrade these

loops but this option will require consideration and if appropriate, budgetary provision.

i. **MFRA Volunteers**
At MFRA there are currently 33 volunteers and more are expected to join in the first 6 months of 2018/19. The diversity of current volunteers is as follows:

- 3 have disclosed a disability
- 26 are male and 7 female
- 1 volunteer is aged 66+
- 4 volunteers are aged 16-21 and the majority are within age range of 22-30 and 31-40.

The aim is to ensure that all volunteers are able to join in the campaigns they are asked to participate in, should they wish to be. Over the last 6 months, volunteers have taken part in various campaigns such as Arson, High rise /Protection campaigns (following Grenfell), reassurance campaigns, careers fairs, Restart a Heart campaign, Bonfire season, road safety campaigns aimed at over 65 year old and homeless campaigns led by Whitechapel centre.

Staff are currently working with One-Vision housing to offer a de-cluttering service. The programme will see the MFRA volunteers help tackle issues of hoarding over a long period of time, acting as friends they will continue to visit residents to ensure that homes remain free of clutter and tackle any further hoarding issues should they arise.

j. **Mental Health First Aid**.
Over 160 firefighters have completed the Light Mental Health First Aid course. It was hoped that all staff would have received training within the first two years of the project. Due to changes in the programme, reduction in the number of trainers, (two members of staff have left), and the work commitments of the remaining 6 trainers, it is expected that the project may take a little longer to complete. Two trainers have already undertaken the 6 day course for the revised Mental Health First Aid programme with remaining 4 members of staff expected to complete the course during the summer. Once all staff have received the training for the revised package, training sessions will be scheduled for staff who have not yet received the training.

8. Appendix B to this report provides Members with the five new Equality Objectives for 2017 -2020. The equality objectives have been reviewed against the draft HMICFRS key line of enquiries (KLOE) and other NJC and Local Government Association benchmarks for equality and diversity. This demonstrates that the equality objectives set for MFRA are also providing evidence for a significant number of national standards, benchmarks and audits.

Equality Objective 1 – Create a strong cohesive organisation that is positive to rising to the future challenges we face:

This objective measures the diversity of MFRA's workforce, which aims to better represent the makeup of communities and staff will work to encourage applications from underrepresented groups when carrying out any internal or external recruitment. Progress so far includes:

When reviewing the gender equality data by position the following observations are made:

- Overall females make up 24.8% (248) of the total staffing at MFRA, a slight increase on the 22.2% seen during 2015/16.
- Operational staff have a gender split of 92.1% (582) males to 7.9% females (50), which is marginally higher than the UK FRS female FF average of 5%.
- Control staff have a gender split of 9.4% (3) male to 88.9% (29) female, which is a slight increase in male staffing when compared to the previous year, this is due to 2 female members of Fire Control leaving the authority. Due to the traditional nature of Fire Control work, this is generally in line with sector averages, as Control is normally a female dominated occupation.
- Support staff have an approximate 50% split between male (166) and female (169) staff. There are more females in the lower paid roles – including staff working grades 1-5 (65.8%, 54 out of 82). Within medium pay bands (grades 6-11) there is a difference in the male to female balance, with 46.4% (98 from 211) being female.

The figures show that 93.9% (938) of staff at MFRA are White British or Irish origin, with 4.7% (47) being BAME - which is marginally lower than the Merseyside BAME population Figure at 5.5%. 100% of Control Staff are White British or Irish.

TheGender Pay Gap analysis as at March 2017 shows that MFRA has a mean gender pay gap across the organisation of -12.1 %, lower than the average UK at 18.1%. There are large differences between the genders when reviewing the gender pay gap in quartiles with the upper quartile showing the biggest difference in pay gap where Females average hourly pay is £15.71

and Male average Pay rate is £67.87. This is being progressed through our Positive Action Strategy as the pay gap is due to the lower number of Females in higher paid senior roles.

More detailed analysis will be captured as part of our Annual Public Sector Equality Duty in summer 2018 with more up to date Gender pay gap information.

Equality Objective 2 – Ensure that people from diverse communities equitable services that meet their needs.

By understanding people's needs from different protected groups and carrying out engagement with and monitoring of those groups we can ensure that those groups are fully supported to reduce fire and rescue risk.

Progress is as follows:

HFSC Equality Monitoring data

- 1.2% of HFSCs were delivered by Advocates to over 65's across Merseyside in the Black Asian and Minority Ethnic (BAME) community. This compares well to the overall over 65's BAME population which is currently 1.6% in Merseyside.
- Our operational crews have also delivered HFSCs to over 65's of which 0.63% were to the BAME community.
- During 2017/18 19.4 % of the occupier's ethnicity were not recorded when delivering HFSC's.

The figures are benchmarks for the first year of the new E and D Objectives and will be monitored annually. The E and D action plan ref 2.2 and 2.10 is focusing on the improvement of gathering more ethnicity and religion data during HFSC visits.

HFSC Satisfaction Survey
HFSC satisfaction surveys are underway and these will be analysed to gather any E and D issues or impacts in relation to service delivery to protected groups in July/August

Princes Trust equality monitoring data
There have been a total of 116 Princes Trust students attend courses during 2017/18 of which:

- 67% were Male and 32% were Female (one student did not identify their gender) % (86 feedback forms)
- 17.2% were from a BAME background
- 9% identified themselves as Lesbian, Gay or Bisexual (LGB)

- 36% declared having a disability or long term health condition.
- Most populated age group was 17

This shows that there is a high diversity within the students who attend the programmes. It should be noted that all those students who responded to the feedback survey (86), stated they would recommend the programme to others.

Cadets equality monitoring data

- 12% were from a BAME background
- 23.5% declared having a disability or long term health condition.
- Most populated age group is 14

Complaints and Compliments
Currently we do not collect equality data for either of these as often they are anonymous and is not something we are in a position to provide at this time

After the Incident satisfaction data
After the incident satisfaction ratings will be available for the PSED report in mid to late June and equality data will be analysed to assess any impacts for underrepresented groups.

Objective 3 – Reducing fires and other incidents amongst the vulnerable protected groups. By better understanding the impacts for diverse communities in terms of fires and other incidents we can measure whether there are any disproportionate outcomes for relevant protected groups.

Progress is as follows:

Accidental Dwelling fires data
As of 17th April 2018, there have been a total of 915 Accidental Dwelling fires attended across Merseyside for 2017/18. It is highly likely that this will be the lowest count of incidents on record. The incidents take place in the most deprived areas of Merseyside with 48% (418) taking place in the 1-10% most deprived deciles. Some of those are also areas with the most Diversity in terms of ethnicity and religion. During 2017-18 , there were a total of 4 accidental fire dwelling fatalities, this is the lowest figure achieved in the history of the service with Sefton, Knowsley and St Helens all having zero fatalities

Objective 4 - To ensure that staff are better equipped to deliver their roles whilst:

- **Showing due regard to the need to eliminate unlawful discrimination, harassment, victimisation and other conduct prohibited by the equality act.**
- **Advance equality of opportunities for under representative groups**
- **Foster good relations between people who share protected groups and those who don't.**

Progress is as follows:

B and H claims, Disciplinary and Grievance data
There have been a total of 33 disciplinary proceedings during 2017/18, of which:

- 31 involved male members of staff
- 2 female.
- Ethnicity was 32 White British
- Irish and 1 from another White Background.

There have also been a total of 19 grievances of which:

- 17 involved male members of staff
- 2 female.
- Ethnicity 17 were White British / Irish,
- 1 Black / Black British
- 1 Other Mixed Background.

Employment Tribunals
2 (joint) claims were registered at tribunal in relation to equal pay, these were withdrawn before the ET hearing

A further National (All FRA'S) Sex Discrimination Claim is ongoing in relation to Pension issues and is partly agreed but subject to Appeal by FRA's

Equality Objective 5 – to continue to aspire to achieving excellence, or equivalent in a Fire and Rescue service Equality Framework

Taking part in assessment helps us to benchmark and continuously improve around the equality, diversity and inclusion agenda and gives an external assessment on our progress in relation to our equality objectives.

Progress as follows:

A self-assessment desk top exercise was competed prior to the Framework being revised during 2017.The framework changed and has been in development phase for some time. The Diversity and Consultation manager is reviewing the current arrangements for FRS framework along with other frameworks and benchmarks including the Employers Network for Equality and Inclusion (ENEI).

Equality and Diversity Implications

9. This report focuses on Equality and Diversity progress, implications of which are critical to MFRA maintaining its legal duty under the Equality Act 2010- Public Sector Equality Duty and working towards the achievement of the LGA Equality Excellence framework.

Staff Implications

10. Staff have been integral to the creation of this report through a number of processes including attending planning meetings, attending the Diversity Action Group Forum, meeting with the Diversity and Consultation Manager and providing regular written communication updates. Staff attending the DAG also receive regular E & D training and briefings to help them better engage with their communities and staff.

Legal Implications

11. The Equality and Diversity Report demonstrates the work that is being conducted to meet the Equality Act 2010 and Public Sector Equality Duty requirements and this shows our progress to meeting our Equality Objectives which is a requirement from the PSED.

Financial Implications & Value for Money

12. There are no direct financial implications arising from this report.

Risk Management, Health & Safety, and Environmental Implications

13. There are no risk management, health and safety or environmental implications arising from this report.

Contribution to Our Mission: *Safer Stronger Communities – Safe Effective Firefighters*

14. Delivering services in a way that meets Equality and Diversity legal duties and best practice is essential for a public sector organisations. This report contributes to demonstrating how we make our diverse communities safer and stronger and how MFRA support the needs of our staff in relation to their protected characteristics.

BACKGROUND PAPERS

GLOSSARY OF TERMS

AGI	Advice, Guidance & Information
BAME	Black, Asian, Minority, Ethnic
BSL	British Sign Language
C&PY	Children & Young People
CLGA	Communities and Local Government Association
CFO	Chief Fire Officer
CRM	Community Risk Management
CRR	Community Risk Register
DAG	Diversity Action Group
DCFO	Deputy Chief Fire Officer
EIA	Equality Impact Assessment
E & D	Equality and Diversity
ESMCP	Emergency Services Mobile Communications Programme
FRS	Fire & Rescue Service
GMFRS	Greater Manchester Fire & Rescue Service
HFSC	Home Fire Safety Check
JCC	Joint Control Centre
KLOE	Key Line of Enquiry
LGA	Local Government Authority
MFRA	Merseyside Fire & Rescue Authority
NFCC	National Fire Chiefs Council
NJC	National Joint Council
NOG	National Operational Guidance
NWAS	North West Ambulance Service
PCC	Police Crime Commissioner
POD	People and Organisational Development
PPE	Personal Protection Equipment
PSED	Public Sector Equality Duty
SEG	Strategic Equality Group
SMG	Strategic Management Group
SOP	Standard Operational Procedure
TDA	Training and Development Academy
WMFRS	West Midlands Fire & Rescue Service

Equality & Diversity Action Plan 2017-2020



Progress for Quarter 3 and Quarter 4 2017/18

Equality Objective 1 **Create a strong cohesive organisation that is positive to rising to the future challenges we face.**					
Function	**Actions**	**Progress**	**Year 1**	**Year 2**	**Year 3**
People and Organisational Development	**To continue to develop a range of comprehensive strategies and training to support our staff and the organisation.**				
	1.1 To develop an organisational Positive Action Strategy using information gained from past Positive action activities and EIAs to produce a Strategy for all recruitment to increase the number of underrepresented applicants	A Positive Action Strategy has been produced, and will be circulated to DAG and SEG members for further consideration and inclusion in the People Strategy. The strategy will also include progression.	Amber		
	1.2 To carry out ongoing development of functional fitness tests as opposed to simulation tests and base tests on what is required in operational roles and to move simulated testing out of health screening 2017/18. This will equate to fairer firefighter tests based what they are required to do in their role.	The new fitness tests for operational staff are scheduled to start in July 2018. The new tests are not aerobic but are based on functional performance. The simulated tests will remain as part of the medical testing, on alternating yearly basis, during the current occupational health service contract and will be review as part of the tender process before the contract renewal date in 2020. The functional tests will be subject to ongoing Equality Impact Assessment which will be taking any impacts in relation to different protected groups and will be consulted with key stakeholders.	Amber		
	1.3 To review and disseminate information from the national working group on ageing workforces to Strategic Equality Group to inform further action .	EIA required to support the Ageing workforce strategy once more information is collated.	Amber		

Community Risk Management (CRM) Youth Engagement	**To continue embed Equality & Diversity across all aspects of Youth Engagement from course recruitment, course leaders, programme delivery through to inclusion in all youth engagement activities.**				
	1.4 We will look to include aspects of mental health first aid and mindfulness on Prince's Trust Programmes to assist young adults develop additional coping mechanisms in preparation for working life and development as young adults.	Staff within Youth Engagement have received Mental Health training. However, due to growth within the department, we have recently employed new people. They will be receiving Mental Health training. In February 2018 Youth Engagement were reassessed and have retained the Matrix Quality Standard for Information, Advice and Guidance. This ensures that MF&RS provides quality assured advice and guidance to all our youth engagement programmes, to enable them to move their lives positively forward into volunteering, training, return to education & employment which contributes to their overall wellbeing.	Amber		
	1.5 Ensure inclusivity is built into all aspects of the Youth Engagement Department which will include all contract tendering processes, recruitment & programme planning.	Throughout the year Youth Engagement has welcomed inclusivity into all of its programmes. We endeavour to make appropriate moderations to enable children & young people from different protected groups to take part in all activities and have the same opportunities as their peers to move their lives forward. The Youth Engagement recruitment strategy actively invites children & young people who need additional support and this consideration will be included when staff are planning and putting together schemes of work.	Amber		

		Reasonable adjustments are part of our policies and are made for those students with disabilities or mental health conditions around all aspects of the programme e.g. • By finding alternative methods evidence can be submitted to examining bodies; e.g. the use videos for those student whose first language is not English. • Taking a holistic approach to the qualifications offered on the Princes Trust Course and identifying alternative qualifications which can be tailored to suit the student. • Making adjustments to the residential course to ensure that all team members have been able to participate. • Alterations to uniform for members of our Fire Cadets.			
Community Risk Management (CRM) Volunteers	**To ensure that MFRS volunteers are diverse and equipped to deliver across all our diverse communities**				
	1.6 To continue working with the Diversity Team to ensure that all volunteers that have specific needs have the appropriate support in place such as: • Equality & Diversity training to be delivered to all new volunteers as part of their Induction. • Volunteers to be included in any Equality & Diversity related campaigns throughout the year.	The Diversity Team will be informed of any volunteers that join the programme that may need additional support due to having specific needs and appropriate support will be put in place. E&D training is to be included as part of any further induction training that takes place. All volunteers are fully included and invited to take part in any campaigns	Amber		

		that are taking place. (Subject to request for volunteers). Including fire safety and road safety campaigns, career fairs and de-cluttering services. Volunteers did an excellent job of engaging with attendees (mostly older residents from Knowsley) about services MF&RS offer, fire safety and how to stay warm and safe this winter The volunteers also distributed leaflets which give information on Home Fire Safety Checks and the importance of having working smoke alarms in the home These volunteers are a credit to MF&RS volunteers team and although all have a registered disability, they are always keen to get involved in campaigns and events and do not allow their disabilities to stop them from helping everyone involved in making our communities and residents safer.			
Legal, Procurement and Democratic Services	**To ensure that Legal, Procurement and Democratic Services have the skills and knowledge to support colleagues, Members and the community equitably.**				
	1.7 Ensuring staffing structures and recruitment activity is inclusive for all staff by revisiting the support for staff around : • family friendly working • flexible working options • Requirements for staff with disabilities. Across the department during the plan.	This is always considered whenever recruitment activity is carried out however there has been no recruitment activity this year.	Amber		

Finance	1.8 To ensure that the Gender Pay Gap Finance data is provided to ensure that the Authority can meet its Public Sector Equality Duty around Gender Pay Gap Reporting and provide gender pay gap raw data to enable the completion of the Annual Gender Pay Gap as at 31st March and to be reported in the Equality Annual Report and the Equality Analysis of Workforce and Employment Data reports each spring.	Currently working on gathering data to provide to the Business Intelligence Manager for inclusion in the PSED annual report in quarter 1 of 2018/19	Green		

Equality Objective 2 **Ensure that people from diverse communities receive equitable services that meet their needs.**					
Function	**Actions**	**Progress**	**Year 1**	**Year 2**	**Year 3**
Community Risk Management (CRM). Community Fire Prevention.	**To ensure that CRM Prevention teams have the skills, knowledge and resources to engage and support members of the community to reduce risk of fire or serious injury**				
	2.1 To increase the use of partnerships to support Knowing our Communities and deliver campaigns. We will continue to develop diverse community engagement and partnership work to ensure that we meet the needs of diverse communities.	A meeting was arranged by the Diversity and Consultation Manager with Kaushar Ta, our Culture and Faith Consultant, who is helping with the Knowing our Communities project to improve our links with members of the Muslim, Sikh and Hindu communities on Merseyside. At the meeting held at the Al Rahma Mosque in Liverpool, representatives from MF&RS including our Diversity and Consultation Manager, DCFO Garrigan, representatives from Prevention and Protection and our recruitment team, met with 12 Muslim community leaders and Imams to discuss how we can work more closely together, around all aspects of our organisation, including Business Fire Safety and recruitment. Through these new contacts we are able to circulate fire safety information, career opportunities and key community messages across the whole Muslim community of Merseyside, and we will be continuing to develop this work relationship with further engagement and projects over the coming year.	Amber		
	2.2 To Improve the Equality Monitoring data collected from Home Fire Safety Checks (HFSC) by; • Reviewing the HFSC leaflets and information given out to the public about Equality Monitoring and Equality related information such as Deaf alarms and update in line with best practice.	A review of HFSC leaflets and information is ongoing. The forms were recently changed to incorporate the Safe and Well questions. It was agreed at the DAG meeting on the 13th April that the HFSC Equality Monitoring report for 2017/18 will be written using the data for the 10,000 HFSC carried out by our Prevention teams as it was a more complete picture than including HFSC's from all crews.	Amber		

	• Producing an annual Equality Monitoring report to show where HFSC have been delivered in relation to the Protected Groups	This data will be included in the PSED and Annual report which will be circulated to SEG and Authority Members at the end of quarter 1.			
	2.3 To continue to deliver and embed a MF&RS Safeguarding Strategy for young people and adults and carry out an EIA.	Training has been secured with the Knowsley Safeguarding team for the delivery of level 2 and level 3 training for relevant MF&RS Staff members. A level 1 video is being considered as a way to provide basic safeguarding knowledge for all staff. And the EIA has been completed and published to support the Safeguarding Strategy.	Amber		
Community Risk Management (CRM). Community Fire Protection	**To ensure that CRM Protection teams have the skills, knowledge and resources to engage and support the business communities of Merseyside.**				
	2.4 Continue to carry out and review positive action strategies and campaigns when recruiting for departments within CRM for: • Recruitment of bi-lingual Business Safety Advisors • Recruitment of Business Safety Advisors	As part of the work carried out by Kaushar Tai, our Culture and Faith Consultant we have made strong links within the Muslim Communities of Merseyside. Kaushar is also ensuring that advertisements for the roles such as firefighter “Have a Go Days”, Fire Control staff and the Business Safety Advisor posts are circulated within the Muslim community and that community leaders and imams are encouraging staff to consider MFRA as an employer of choice.	Amber		
	2.5 Following on from the National Conference ‘Engaging with Diverse Businesses’ to establish best practice and lessons learnt across the FRS sector in relation to Engaging with BME businesses. The national project has been established to: • Develop a national toolkit. • Gain approval from NFCC Business Safety Group for taking the “Engaging Diverse Workforce “ Report forward; including commissioning more research in Fire Safety behaviours of Diverse	The NFCC Project is on track. The Diversity and Consultation Manager has chaired two meetings with GMFRS & WMFRS to progress the project. To date a research report has been drafted which describes some of the issues diverse businesses face with fire safety. The report will be approved by NFCC and then circulated at a variety of conferences later in the year. Currently five case studies are being developed showcasing different FRS approaches to engaging with diverse business owners including MF&RS which has been working with 12 Muslim leaders to cascade business safety advice to the wider Muslim	Amber		

	communities and the development of a toolkit to support Business Safety staff • Supporting further research on diverse businesses and their attitude and behaviours to fire legislation, safety and risk. • Provided case studies of good practice engaging with diverse business	business community. This project will span the full three years of the action plan.			
	2.6 Develop appropriate Business Safety Diversity campaigns to support and engage with the diverse businesses across Merseyside to enable them to comply with business safety legislation more effectively.	Community Fire Protection Business Safety Diversity Campaigns new progress includes: • Ongoing work to make connections with local mosques so as to be able to provide fire safety information within the Muslim business communities, the next event will take place in Mosques as Business Safety advice events. • Ramadan campaigns being organised, alongside Prevention, to provide a drop-in facility for local businesses during the month. • Contact has been made with the Chambers of Commerce to facilitate dissemination of business fire safety information to diverse business groups • 75 members of the Muslim and Asian business Communities across Merseyside have received a bespoke booklet highlighting the business and home safety messages with clear links to the Quran for enforcement of why it is important to protect life and property. This helps to provide a trust angle on the Health & Safety requirements of business owners to help encourage them to take fire safety seriously.	Amber		

	2.7 Work with Equality & Diversity and Business intelligence to review the Business section of the Community Profiles tool to include ethnic/cultural backgrounds of businesses (and/or owners) within Merseyside and utilise it for future business safety campaigns	Work is still ongoing to implement the new phase of the Knowing our Communities project.			
Operational Preparedness:	**To ensure that operation preparedness plans, services information and operational guidance and training is taking Equality & Diversity impacts into account, to make them fully inclusive for all staff.**				
	2.8 To ensure that Operational Preparedness information is accessible by reviewing the Community Risk Register and Merseyside Prepared websites and Operational Information for accessibility (font type, and format etc.) and to ensure its availability to all.	Merseyside Prepared website has a language translator and zooming facilities. CRR font type is being reviewed but the reader can zoom when viewing on the website. Mobile Data Terminal improvements are ongoing with training package being prepared prior to roll out, preparations for ESMCP on going and service tablets for appliances also on going. This will continue into 2018/19	Green		
Operational Response	**To continue to develop Operational Response staff through continued engagement to deliver a positive impact on our communities and workplace**				
	2.9 Build on the feedback from the 2016 and 2018 Staff Survey and our Service aim 'Excellent People' through a range of staff engagement methods such as focus groups and functional communication.	A report has been produced by an external facilitator, Alan Heckman outlining the outcomes of the facilitated engagement meeting, which were held with a cross section of operational staff. The findings are to be discussed with the original group and will provide the benchmark for E & D engagement into 2018. The engagement report stated that those who attended found the opportunity to have their views heard and reported through an external representative incredibly helpful. There were some key points which need to be reviewed further and more discussions with staff from protected groups who were not represented in the session.	Amber		

	2.10 To ensure that operational staff contribute to Knowing our Communities and engage with them to ensure they are safer from fire and risk through equality assurance audits of HFSC's, particularly in relation to recording Equality & Diversity monitoring data. The importance of collecting monitoring data is to be reinforced through diversity briefings and improvements made where a need is identified.	Through Standardisation processes, Operational Response Managers are continually made aware of the importance of ensuring that E & D data is captured to assist with reporting and ensuring our resources are directed accordingly. An exercise will take place to evaluate the change in terms of data completion by each station during quarter 1 and quarter 2 of 2018/19. This will inform any further actions.			
Strategy and Performance	**To enhance and develop Equality & Diversity further for the organisation, staff, partners and services we provide.**				
	2.11 To increase staff network to support diverse groups within the organisation.	The Diversity & Consultation manager attended a Police Staff Networks event which enabled her and a number of Diversity Champions to learn more about how other sectors run successful forums and networks in relation to supporting underrepresented groups. An outcome of the event was invitations for MF&RS staff to attend any Police network in the future. This will be considered as part of the next SEG meeting where a paper will be presented on ideas to develop staff networks further at MF&RS.	Amber		
	2.12 Ensure that the new website and all forms of communication on the site (surveys, forms etc.) are fully accessible including translations and read aloud functions which are easy to use. Through the design and testing phase utilise diverse groups and Disability Business Forum to provide feedback	Work to develop the new website is progressing well following a comprehensive procurement process. The project is expected to be complete in the late summer. The new website will use up to date branding and all aspects of accessibility are being considered throughout the development process.	Amber		

People and Organisational Development	**To continue to develop a range of comprehensive strategies and training to support our staff and the organisation.**				
	2.13 To work towards being a dementia friendly employer with suitable employment policies and procedures in place, to ensure staff have the necessary awareness, skills and understanding to recognise and support people with dementia by: • Reviewing all relevant staff policies and practices to ensure that they support staff with or caring for dementia – including career breaks and flexible working arrangements • To support MFRA staff who may be living with dementia, or caring for someone with dementia o Provide links to dementia Support groups and resources on the Portal o Survey staff to determine number of staff affected by dementia, provide a list of trained Dementia Champions on the Portal	Review will be required as all of these actions are part of the MF&RS Dementia Pledge signed by the CFO, and PCC	**Red**		

Strategic Change and Resources	**To continue to ensure that Equality & Diversity considerations are identified and mitigated against where required to ensure that:** • **buildings are accessible** • **Collaboration is inclusive** • **ICT systems are fully accessible and cognisant of different diverse groups and their needs.**				
	2.14 The development and implementation of a five year Asset Strategy for the estate. • To ensure Equality & Diversity are considered from an access point of view and inclusion in relation to specific firefighter facilities and providing SEG with updates on progress where required	The five year Asset Strategy has been updated and approved by Authority. E&D matters are considered on all projects e.g. station mergers/TDA/Heswall refurbishment. Estates Governance has been reviewed with the formation of a new Executive strategic Estates Group.	Green		
	• Making MF&RA accessible for people with disabilities especially those who are Deaf or have a hearing impairment, visually impaired or are wheelchair users • Ensure that all barriers and intercoms are accessible (e.g. hearing loops), suitable parking is available, at the front of the building and suitable signage installed, while still meeting our security needs	New accessible car parking bays have been marked at the front of the SHQ building. A solution for the hearing loop on the intercoms is being developed.	Amber		
	2.15 Equality & Diversity will be considered when identifying and reporting on collaboration opportunities through the completion of EIA's for any significant collaboration proposals and decisions, at the design stage of the project in conjunction with the Diversity & Consultation Manager.	No collaboration proposals are at the design stage yet; therefore, no EIAs are required at this stage. This will be kept under review by the team.	Amber		

	2.16 Engage accessible technology and ensure it supports the Equality & Diversity agenda through the roll out of public WiFi to stations for staff use and as a resource in community rooms.	There are currently three stations that have access to public WiFi; Belle Vale, Bootle & Netherton and Kirkdale. The plan is to begin the site surveys on 03.04.2018 to determine the number of points required on each station to ensure we provide adequate WiFi coverage across all sites. The surveys will potentially take two weeks to complete. There is currently no plan to upgrade these loops but this option will require consideration and if appropriate, budgetary provision.	Amber		
	2.17 Ensuring hearing loops are in key community fire stations and working to support communities and staff. • Following on from the installation of the new hearing loops system at Service Headquarters, investigate the introduction further hearing loops at key community fire stations in the community spaces e.g. Safe Havens, reception, and community rooms. • Identify and evaluate any existing hearing loop systems within MF&RA premises, such as the TDA. Ensure that the system is fully functional, that all staff are aware that the facility is there, where it is available, e.g. conference rooms, class rooms, lecture theatre and that guidance is available on how to use the system.	It has now been identified that hearing loops have been installed in the community rooms of all PFI stations. It has been confirmed that the hearing loops on the PFI stations are tested regularly by eNGie's sub-contractor & are all working correctly. eNGie are currently checking that appropriate signage is in place & instructions on how to use the loops is displayed in the relevant rooms. It should be noted that the hearing loops were installed during the station builds in 2012 & 2013. They are analogue & therefore not accessible by those using digital hearing aids.	Amber		

Legal, Procurement and Democratic Services	**To ensure that Legal, Procurement and Democratic Services have the skills and knowledge to support colleagues, Members and the community equitably.**				
	2.18 To create a website page specifically for Authority Members, to enable easy access to relevant information from one place by • Identify information that would be beneficial for Members to have access to. Utilisation of Member's knowledge of their communities	Work has been undertaken to identify information which it would be beneficial for Members to have access to. This will be progressed further once the new website has been developed and consideration will be given as to how Authority Members knowledge of their communities could be utilised to best effect. This action will be carried over to 2018/19.	Amber		
	2.19 Where sufficient data is available, our legal department will monitor age and socio economic characteristics for public liability insurance claimants to determine any particular area of Merseyside where there may be an issue.	A system has been created to capture the characteristics for any public liability claims made against MF&RS. Due to the low number of claims we are unable to produce any meaningful data currently. The legal team will continue to collate and monitor our public liability information.	Amber		
	2.20 Our Legal team will monitor the ongoing impartiality of legal advice to Fire Safety Officers to prosecute, to ensure that such advice is not influenced by any protected characteristic.	Prosecution files which are received by our legal department do not include person profiles, the only personal information included will be a name for the person concerned. This ensures that all advice given is impartial and not influenced in any way by any protected characteristic. There have been no prosecutions undertaken by MF&RS during 2017/18.	Amber		
	2.21 Consideration of the most appropriate procurement process to encourage a diverse supply base (e.g. splitting contracts into Lots to encourage SMEs).	Our procurement team continue to review each new contract to ensure that the most appropriate procurement method is used to support a diverse supplier base, such as breaking into smaller lots. Unfortunately with our recent contracts we have been unable to do this as they have formed part of the regional and national agreement.	Amber		
	2.22 Identify efficiencies and implement improvements in procurement activity and development of the supplier base.	Procurement, Finance and Workshops, who currently have the largest supplier base, have been working together to streamline their current supplier database to ensure that we continue to use our suppliers as effectively as possible	Amber		

	2.23 To carry out staff engagement across the departments to improve staff morale and challenge issues raised in the staff survey to improve staff perceptions/morale through ongoing staff engagement activities with functional staff.	A number of staff engagement day workshops have been held at the TDA across different services within the function. Further workshops are to be arranged and held at SHQ to ensure that staff who may not have been able to attend earlier workshops can attend.	Amber		

Equality Objective 3 **Reducing fires and other incidents amongst the vulnerable protected groups**					
Function	**Actions**	**Progress**	**Year 1**	**Year 2**	**Year 3**
Community Risk Management (CRM). Community Fire Prevention	**To ensure that CRM prevention teams have the skills, knowledge and resources to engage and support members of the community to reduce risk of fire or serious injury.**				
	3.1 To review Safe & Well delivery and to ensure that the Service takes into account the needs for different Protected Groups in relation to health, fire and wellbeing by: • Producing regular reports for the Safe and Well visit, which will provide us with a better understanding of the vulnerable people we are engaging with. • Provide equality data for the Safe and Well visits, so we are able to identify those protected groups we are engaging with in the over 65 age group. • Ensure there is a consistent approach to information sharing for vulnerable persons across the five local authorities	As part of the Safe and Well visits launched, in January, a three month trial to include blood pressure checks has been included. Funding has been received from the British Heart Foundation to provide staff with blood pressure monitors and training. The trial will see staff offering residents over 65 and at risk groups in the community a blood pressure check, advice and referrals as part of the health interventions offered as part of the Safe and Well visits. A further consideration of ethnicity and cultural impacts on health and wellbeing will be used to inform any future campaigns in areas of Merseyside where residents form the Asian & Black Caribbean communities may reside. British Heart foundation research suggests that those ethnicities could be at more risk than European communities of heart disease.	Amber		

Community Risk Management (CRM). Hate Crime	**To improve the Hate Crime procedures for reporting, recording and monitoring.**				
	3.2 To carry out a review of the Hate Crime SI and reporting process for all types of Hate Crime incidents from fire, ASB, arson and general safeguarding issues.	SI 0799 Hate Crime Incident Reporting is currently being reviewed and once completed will enter the 21 day consultation period prior to any amendments being published.	Amber		
	3.3 To provide regular reports on types of Hate Crime being reported, on which protected groups and where they take place	When the Arson Team attend a target hardening visit that is due to hate crime, the "Hate Crime" box on the Safe and Well Form is ticked enabling Strategy and Performance to run a report on Goldmine.			
	3.4 Share this information with partners to better support future campaigns and target resources	Advocates and Arson Advocates have been in great demand this year in key demand wards in order to engage with communities and tackle deliberate fire setting, hate crime and serious and organised crime. They have been working actively across the city, working closely with partners such as Safer and Stronger Communities Team, Merseyside Police, City Safe and Social Registered Landlords to target key areas across Liverpool. Joint Agency Campaigns have been carried out each month to target these key areas such as: Anfield, County, Garston Park Area/Skate Park, Speke, Wavertree, Picton, Dovecot, Toxteth, Dingle, Stonedale Retail Park, Fazakerley and Everton.	Amber		
Community Risk Management (CRM) Road Safety	**To ensure that the Road Safety team continues to consider Equality Impacts when delivering RTC training and interventions**				
	3.5 Continue to deliver tailored RTC interventions specifically to support those protected groups at most risk e.g. Young and older age groups	MF&RS work alongside the National Curriculum for the different Key stages across schools in Merseyside. We ensure that interventions are relevant and target the younger age groups, MF&RS also has dedicated interventions and attend Senior Road User Events which are aimed at the older road user and are utilising innovative technology to improve the driving of this thematic group. These two groups are targeted around risk of road accidents.	Amber		

Community Risk Management (CRM)	**To work jointly with local partners to maintain and improve the general safety of people living with dementia, their families and carers**				
	3.6 Review the partnership meetings relating to dementia /Age/Disability attended by CRM staff 3.7 To offer a re-visit service for the most vulnerable, to include those living with dementia 3.8 To introduce the vulnerable adult missing persons profile (the Herbert protocol –safe and found) Seek to develop new, and maintain existing, partnerships with Dementia Action Alliance members to ensure we maintain current with legislation, policies, new innovations and access referrals for Safe and Well visits.	A Member of our CRM team is now attending the Dementia Strategic Boards for Wirral and Knowsley. It is hoped that MF&RS will be able to attend the Dementia Strategic Boards for all 5 Local Authorities. The NFCC are currently looking at ways in which assistive technology can be utilised to help support those with dementia and their families.			
Community Risk Management (CRM)	**To support the work to develop more dementia friendly communities and Dementia Friends, in line with the Prime Minister's Challenge on Dementia**				
	3.9 To encourage more staff to sign up to become Dementia Friends across all departments 3.10 To support dementia friendly communities and Dementia Friends, through our volunteers, Prince's Trust and staff groups – • Deliver a Memory café (e.g. using the Heritage Centre and Volunteers- bringing the old and the young together). • Promotion of Safe and Well visits for MFRA family members	As part of our commitment to the strategic dementia pledge signed by the Service in September 2017, forty members of our Prevention staff, including members of FSD, have attended the Liverpool Museum for House of Memories training, which is specifically designed to support people with dementia. This training will be put into practice day to day for staff who are delivering home safety initiatives and Safe and Well visits to vulnerable communities across Merseyside and will support our ongoing staff development and the Diversity Community Insight Champions who will be working with our CRM staff and the Diversity and Consultation Manager to support vulnerable members of the community and their families affected by dementia.	Amber		

Equality Objective 4 **To ensure that staff are better equipped to deliver their roles whilst showing due regard to the need to: "eliminate unlawful discrimination, harassment, victimisation and other conduct prohibited by the Equality Act, advance equality of opportunity and foster good relations between people who share a protected characteristic and those who don't."**					
Function	**Actions**	**Progress**	**Year 1**	**Year 2**	**Year 3**
Strategy and Performance:	**To enhance and develop Equality & Diversity further for the organisation, staff, partners and services we provide.**				
	4.1 Work with the training and development staff to implement the on-line Equality & Diversity training package	Following consultation with Diversity Action Group members and members of the staff representative bodies, a number of changes have been identified, for the package contents and format. Once these changes have been made, the package will be moved to the test environment for further testing, while licences are arranged for staff who do not currently use Learn-pro. Launch date for the package still be to be confirmed	Amber		
	4.2 Investigate the concept of unconscious bias in conjunction with the inclusive leadership work being undertaken by people and organisational development	This is to be delivered as a year 2 and 3 activity, following the delivery of the People Strategy and when the E & D training plan is complete. The concept of Unconscious Bias training and methods of delivery are being investigated with Operational Response through the use of workshops and focus groups for use across the organisation. Collaboration with Merseyside Police is underway to share Unconscious Bias training, ideas and methods of delivery over the next year.	Amber		

	4.3 Deliver effective diverse community engagement with limited resources to ensure that MF&RS knows and understands its communities and can respond with appropriate services	We have recently completed a piece of consultancy work and training with Mr Kaushar Tai our Culture and Faith Consultant who has been delivering Muslim and Islam Culture awareness training for MF&RS Staff. In total 6 training sessions have been held since September with 103 members of staff from MF&RS including Advocates, Youth Engagement team, CRM and POD, SMG and Authority Members attending. These sessions have also been attended by 10 of our colleagues from the police as part of our collaboration and sharing of our corporate services. The recent sessions held in March were delivered in our local Mosques. This was well received by all attending and helped them to put the learning into context within the Islamic faith. Mr Tai brings a lot of experience in community engagement and community cohesion work and his excellent inter-personal skills coupled with his commitment to work in this field has assisted us in making contact with key members of the Muslim communities and Mosques from across Merseyside. At a recent meeting held at the Al-Rahma Mosque in Liverpool, representatives from MF&RS including our Diversity and Consultation Manager, DCFO Garrigan, representatives from Prevention and Protection and our recruitment team met with 12 Muslim community leaders and Imams to discuss how we can work more closely together, around all aspects of our organisation, including Business Fire Safety and recruitment. Through these new contacts we are able to circulate fire safety information, career opportunities and key community messages across the whole Muslim community of Merseyside, and we will be continuing to develop this work relationship with	Amber		

		further engagement and projects over the coming year.			
Community Risk Management (CRM). Community Fire Prevention	**To ensure that CRM Prevention teams have the skills, knowledge and resources to engage and support members of the community to reduce risk of fire or serious injury.**				
	4.4 To ensure that prevention Advocate teams are supported around their skills and knowledge on Equality, Diversity & Inclusion to engage with Diverse communities by: • The development of an Advocate Questionnaire to support appraisals, to identify if our Advocates have knowledge/experience relating to a Protected Group. This can then help develop a personal resource list for use when targeting and engaging with specific protected groups. • Develop a media package including information on our external facing website about the interventions the Prevention Team provide and how many campaigns we run each year.	The piece of work is currently being developed further, with the introduction of the Diversity Insight Champions which forms part of the Knowing our Communities work stream. The Champions will assist MF&RS in gaining valuable insights into the risks and behaviours of protected groups in relation to fire & rescue. The Champions will be able to assist both CRM colleagues and the Diversity and Consultation Manager with engaging with diverse communities and help to raise key messages to keep people safe in their home and businesses.	Amber		
	To ensure that CRM Protection teams have the skills, knowledge and resources to engage and support the business communities of Merseyside.				

Community Risk Management (CRM). Community Fire Protection	4.5 Review the Equality, Diversity & inclusion training for all protection staff including any new starters to support their continuing personal development, skills and knowledge especially around the Protected Groups.	Community Fire Protection Equality, Diversity and Inclusions – staff development and training: • Recent training in Islam and Muslim Culture awareness has been given to all Protection Staff	Amber		
Operational Preparedness:	**To ensure that operation preparedness plans, services information and operational guidance and training is taking Equality & Diversity impacts into account, to make them fully inclusive for all staff.**				
	4.6 Continue to carry out EIA's where required in relation to SOPS and national operational guidance to ensure it is free of potential to discriminate any protected groups indirectly	The National Operational Guidance SOP process has incorporated an EIA process when required. A total of seven SOPs have been completed, with one to cover the complete suite of transport related SOPs.	Green		
	4.7 To ensure Operational Equipment department takes into account the needs of different protected groups when delivering EIA's for the continual improvement and refresh of vehicles, equipment and uniforms.	EIA has been embedded in the Research & Development process for equipment and vehicles. Focus groups are in place to offer feedback and ideas from a cross representation of MF&RS staff. Programme for vehicles/PPE/Equipment is now in place – delivered against risk and emerging Research & Development Operational crew day wear has been widely consulted on and is to be implemented. The Gold firefighter PPE issue will have a positive impact as it will be rolled out as individual issue to ensure better fit for all staff. The Service will move away from pooled kit issue. All operational uniform will be issued 2018/19. There will be a support staff uniform Service-wide review (covering the need for and type of uniform with consideration given to any equality group feedback). This will continue into 2018/19.	Green		

	4.8 Provide alternative support for those Protected Groups that need it in relation to operational training and development and competence development, by reviewing the incident command support and provide alternative and additional support for protected and underrepresented groups where required following feedback.	The department are currently engaging with underrepresented groups to establish different approaches to Incident Command Training and Development. e.g. avoiding key religious festivals, providing gender specific courses and providing information and advice which will support different learning styles.	Green		
	4.9 To review the Training and Development Academy facilities and Croxteth Fire Station site in line with the core training delivery model to ensure Equality & Diversity are considered from an access point of view and inclusion in relation to specific firefighter facilities.	The TDA site development is still in progress and will aim to • Support people with disabilities and members of the public with good access at the site. • Improve facilities for the core training delivery model. • Improve fitness facilities and locker rooms to assist employees meet the new fitness requirement scheme • Continue to provide Quiet Room (Mother & Baby and prayer facilities)	Amber		
	4.10 Create a mobile logistics/welfare system available for deployment to assist with firefighter welfare and ensure Equality & Diversity issues are considered by adapting vehicles and when procuring equipment.	A new welfare unit is being designed and in the process of completion. An interim vehicle will be deployed prior to the full welfare function being established.	Green		
People and Organisational Development .	**To continue to develop a range of comprehensive strategies and training to support our staff and the organisation**				
	4.11 To develop a comprehensive workforce strategy which includes Equality, Diversity and Inclusion, and consider the needs of all Protected groups	The draft Strategy has been written and includes Equality, Diversity and Inclusion, and has had input from staff from across the organisation.	Amber		
	4.12 To deliver a mental health first aid course to all staff	Over 160 firefighters have completed the Light Mental Health First Aid programme, and training is ongoing. The Light Mental Health First Aid training package has changed, two key members of staff have now	Amber		

		completed the new trainer course to enable the continued delivery of the package to our staff. Further staff will need to be identified to complete the train the trainer course to assist with the ongoing delivery of the programme.			
	4.13 To introduce a range of fitness initiatives to promote and support health and wellbeing	The MF&RS fitness advisor has produced videos which can be found on the Portal to assist our staff with health and wellbeing.	Amber		
	4.14 Introduction and validation of new fitness standards across all areas which have considered the protected groups needs	The Service Instruction has been completed for the new fitness tests which are scheduled to start in July. A new testing protocol has been drafted and is currently with manager for input and approval. The testing protocol considers what staff will do in reality. The tests will be structured with the simulator test first, then the Fire Ground Fitness. The new tests are not aerobic but are based on functional performance. There has been an adjustment made on the calculation for the Chester and walk tests which provides a more accurate reading for anyone over 45. The current calculations were under estimating by 1-2 points for those aged over 45.	Amber		
Legal, Procurement and Democratic Services .	**To ensure that Legal, Procurement and Democratic Services have the skills and knowledge to support colleagues, Members and the community equitably**				
	4.15 Ensuring staff and Members are equipped to carry out their role by: • Ensuring that ALL groups get equitable treatment (e.g. challenged fairly) • Offering advice to officers (e.g. RRO) • Staff/Members receive training to ensure they are equipped to carry out their role and show due regard to	This is ongoing throughout the department. Officers are kept abreast of changes in legislation through various media and training.	Amber		

	the needs of our diverse community groups as required by the Equality Act 2010/Public Sector Equality Duty. • Attendance at DAG/SEG • Provision of legal advice with consideration to the Equality Act (e.g. projects and plans)				
Equality Objective 5 **To continue to aspire to achieving excellence, or equivalent in a Fire and Rescue Service Equality Framework**					
Function	**Actions**	**Progress**	**Year 1**	**Year 2**	**Year 3**
Strategy and Performance		Strategy and performance are investigating the use of different frameworks and this will result in further objectives and actions being developed for the plan in 2018/19/20			

Equality Objectives 2017- 2020

Annual Update

Below are details of the progress made during the first year of our Equality Objectives for 2017-2020. It was agreed that progress for these 5 new objectives would be reported on an annual basis and that full details of that progress would be provided as part of MFRA's Equality Analysis of Workforce and Employment Data as of 31st March 2018 report, which will be published in line with the Public Sector Equality Duty and will include our Gender Pay Gap information for 2017/18.

Equality Objective 1 **Create a strong cohesive organisation that is positive to rising to the future challenges we face.**	
Action	• Increasing the diversity of our workforce and volunteers to increase the number of people from underrepresented groups • Delivering Positive Action programmes across all occupations where under representation exists, and learning from and sharing results • Working with local diverse communities to build better relationships with people and organisations that can promote MFRA as employer of choice to those groups underrepresented in our workforce • Continuing to monitor the workforce and encourage more disclosure of diversity information by staff; including Disability, Sexual Orientation and Religion and Belief • Reviewing progression and promotion across all levels of the organisation.
How we will measure our success	Increased diversity of our workforce and volunteers, at all levels, in order to reflect the local community we serve. Increased applications for vacancies, at all levels, by people from the protected groups currently under represented.
How this impacts on Equality and Diversity: protected characteristics – Age, Gender, Ethnicity, Religion/Belief/LGBT and Disability: We'd like our workforce to better represent the makeup of our communities and will work to encourage applications from under-represented groups when we carry out any internal or external recruitment	

Data/ Narrative

Staff Structure by Gender 2017/18

Role	Position	Male	Female	Total
Uniformed	Brigade Manager	2		2
	Area Manager	6		6
	Group Manager	12		12
	Station Manager	26	1	27
	Watch Manager	127	3	130
	Crew Manager	17		17
	Firefighter	392	46	438
	Uniformed Sub Total	**582**	**50**	**632**
Control	Watch Manager		10	10
	Crew Manager	1	3	4
	Firefighter	2	16	18
	Control Sub Total	**3**	**29**	**32**
Support	Grades 12+	21	14	35
	Grades 6-11	113	98	211
	Grades 1-5	28	54	82
	Apprentices	4	3	7
	Support Sub Total	**166**	**169**	**335**
Total		**751**	**248**	**999**

The table provides a breakdown of the of the 999 total workforce population:

- There are 632 operational/uniformed posts, representing 63.2% of the total workforce.
- 335 staff are in support posts, representing 33.5% of the total workforce.

New Starters by Gender 2017/18

Role	Position	Male	Female	Total
Uniformed	Brigade Manager			0
	Area Manager			0
	Group Manager			0
	Station Manager			0
	Watch Manager			0
	Crew Manager			0
	Firefighter	26	6	32
	Uniformed Sub Total	**26**	**6**	**32**
Control	Watch Manager			0
	Crew Manager			0
	Firefighter	1	6	7
	Control Sub Total	**1**	**6**	**7**
Support	Grades 12+	1		1
	Grades 6-11	11	4	15
	Grades 1-5	9	7	16
	Apprentices	4	2	6
	Support Sub Total	**25**	**13**	**38**
Total		**52**	**25**	**77**

The table identifies that the majority of Operational new starters were male with 26 out of 32. There were 7 new starters within Fire Control, 6 were female, and 38 Support staff starters, of which 25 were male.

- 32 are Control staff, representing 3.2% of the total workforce.

When reviewing the gender equality data by position the following observations are made:

- Overall females make up 24.8% (248) of the total staffing at MFRA, a slight increase on the 23.9% seen during 2016/17.
- Operational staff have a gender split of 92.1% (582) males to 7.9% females (50), which is marginally higher than the UK FRS female FF average of 5%.
- Control staff have a gender split of 9.4% (3) male to 88.9% (29) female, which is a slight increase in male staffing when compared to the previous year, this is due to 2 female members of Fire Control leaving the Authority. Due to the traditional nature of Fire Control work, this is generally in line with sector averages, as Control is normally a female dominated occupation.
- Support staff have an approximate 50% split between male (166) and female (169) staff. There are more females in the lower paid roles – including in grade 1-5 posts (65.8%, 54 out of 82). Within medium pay bands (grades 6-11) there is a difference in the male to female balance, with 46.4% (98 from 211) being female.

Staff Structure by Ethnicity 2017/18

Role	Position	White British or Irish	Any Other White	BAME	PNTS[1]	No Data	Total
Uniformed	Brigade Manager	2		0			2
	Area Manager	6		0			6
	Group Manager	11		0		1	12
	Station Manager	25		2			27
	Watch Manager	124		4	1	1	130
	Crew Manager	14	1	1	1		17
	Firefighter	407	5	23	3		438
	Uniformed Sub Total	**589**	**6**	**30**	**5**	**2**	**632**
Control	Watch Manager	10		0			10
	Crew Manager	4		0			4
	Firefighter	18		0			18
	Control Sub Total	**32**	**0**	**0**	**0**	**0**	**32**
Support	Grades 12+	35		0			35
	Grades 6-11	200	2	6	1	2	211
	Grades 1-5	75		3		4	82
	Apprentices	7		0			7
	Support Sub Total	**317**	**2**	**9**	**1**	**6**	**335**
Total		**938**	**8**	**39**	**6**	**8**	**999**

The figures show that 93.9% (938) of staff at MFRA are of White British or Irish origin, with 4.7% (47) being BAME - which is marginally lower than the Merseyside BAME population Figure at 5.5%.

100% of Control Staff are White British or Irish.

There were 6 staff members who preferred not to state their ethnicity and a further 8 who did not provide any data.

New Starters by Ethnicity 2017/18

Role	Position	White British or Irish	Any Other White	BAME	PNTS	No Data	Total
Uniformed	Brigade Manager			0			0
	Area Manager			0			0
	Group Manager			0			0
	Station Manager			0			0
	Watch Manager			0			0
	Crew Manager			0			0
	Firefighter	26		5	1		32
	Uniformed Sub Total	**26**	**0**	**5**	**1**	**0**	**32**
Control	Watch Manager			0			0
	Crew Manager			0			0
	Firefighter	7		0			7
	Control Sub Total	**7**	**0**	**0**	**0**	**0**	**7**
Support	Grades 12+	1		0			1
	Grades 6-11	14		0		1	15
	Grades 1-5	16		0			16
	Apprentices	6		0			6
	Support Sub Total	**37**	**0**	**0**	**0**	**1**	**38**
Total		**70**	**0**	**5**	**1**	**1**	**77**

Concerning new starters the vast majority (70 or 90.9%) were White British or Irish. There were 5 BAME starters, 1 new starter preferred not to state their ethnicity and 1 failed to provide data.

Gender pay gap calculations for MFRA as at 31/03/2017

Gender pay gap figures are based on a total of 986 staff in scope for this gender pay exercise, 759 (77%) were male and 227 (23%) were female.

Measure 1: Mean gender pay gap

[1] PNTS = Prefer not to say

This measure is the difference between the mean (average) hourly rates of pay for male and female fulltime pay relevant employees

Staff group	Male hourly pay £	Female hourly pay £	Pay gap £	Pay gap %
All staff	£15.13	£13.42	-£1.71	-12.1%
Operational Staff (inc Fire Control)	£15.29	£14.02	-£1.27	-9.7%
Support staff	£14.52	£13.16	-£1.36	-9.3%

Across the organisation, the mean gender pay gap is -12.1% or £1.71 per hour. For just operational personnel the gap is narrower at -9.7% and for Support Staff the gap is narrower again at -9.3%. It is possible that this may be due to the length of service for men and incremental pay rises. Women may take longer to reach the top of their grade if they take time out for: maternity, adoption or career breaks.
The UK average Gender Pay Gap using the Office for National Statistics data shows an average pay gap for all employees to be 18.1%

Measure 2. Median gender pay gap

This is the difference between the median hourly rate of pay of male and female full-pay relevant employees

Staff group	Male hourly pay £	Female hourly pay £	Pay gap £	Pay gap %
All staff	£13.84	£13.52	-£0.32	-2.3%
Operational Staff (inc Fire Control)	£13.84	£13.84	£0.00	0.0%
Support staff	£13.53	£12.28	-£1.25	-9.2%

The difference between male and female staff is much narrower, when using this measure with a -2.3% difference at a MFRA level, a 0% difference for operational staff and -9.2% difference for support staff.

Measure 3. Mean and median Bonus gap

This is the difference between the mean and median bonus paid to male relevant employees and that paid to female relevant employees and bonus proportion is not applicable to MFRA as no bonus payments are made

Measure 4. Quartile pay bands

The proportions of male and female full- pay relevant employees in the Lower (1), Lower Middle (2), Upper Middle (3) and Upper (4) quartile pay bands

Quartile pay Bands	From hourly rate £'s	To hourly rate £'s	# of males	%	# of females	%
1. Lower[2]	£4.00	£13.53	129	52.23%	118	47.77%
2. Lower Middle	£13.53	£13.84	218	88.62%	28	11.38%
3. Upper Middle	£13.84	£15.71	203	82.19%	44	17.81%
4. Upper [3]	£15.71	£67.87	209	84.96%	37	15.04%

The table above identifies that in general the pay gap between quartiles 1 to 3 is not significant, though when quartile 4 (maximum value) is involved there are large differences between the genders. This is due to the low numbers of female staff in higher operational grades, an issue that MFRA is addressing through its Equality and Diversity Action plan for 2017-20 and Equality Objective 1.

[2] Apprentice Rate (the lowest hourly rate for a contractual 35 hour a week member of staff is grade 2
[3] Based on a 48 hour week

Equality Objective 2 **Ensure that people from diverse communities receive equitable services that meet their needs.**	
Action	• Carry out activities to help us know and understand our diverse communities including: ○ Gathering and data and intelligence to help us know and understand our diverse communities better ○ Engaging with diverse communities to understand their needs in relation to the services we provide ○ Using knowledge and data, to target services to the diverse communities at most risk ○ Improving Equality Monitoring of the services we deliver to our communities (e.g. HFSC Monitoring) and take account of satisfaction levels with our services provided through ongoing community engagement and consultation • Carrying out Equality Impact Assessments on services and policies that affect the diverse communities we serve
How we will measure our success	We will have meaningful data that helps staff develop effective activities, campaigns and events that result in better engagement with diverse communities across Merseyside (including diverse businesses)
How this impacts on Equality and Diversity: protected characteristics – Age, Gender, Ethnicity, Religion/Belief/LGBT and Disability: This work will strengthen our services to meet the needs of a wide range of diverse communities. By understanding people's needs and carrying out engagement we can ensure that those groups are fully supported by the Fire and Rescue Service to help reduce risk.	

Data/ Narrative

HFSC Data 2017/18

ETHNICITY	April	May	June	July	August	Sept	Oct	Nov	Dec	Jan	Feb	March	Total	Proportion
Asian - Bangladeshi		1	1	2	4			1	1		1		11	0.0%
Asian - Chinese	5	7	3	3	3	4	5	10	5	6	6	1	58	0.1%
Asian - Indian	13	5	8	5	4	6	5	5	3	5	6	4	69	0.2%
Asian - Other	4	30	14	11	9	3	14	3	2	9	12	1	112	0.3%
Asian - Pakistani		2	2		1	1		1	1		1	1	10	0.0%
Black - African	4	18	2	3	7	7	6	3	4	2	7	4	67	0.2%
Black - Caribbean		4	3	1	3	1	1	3		2	4	6	28	0.1%
Black - Other		3	1	7	8	1		2	6	1	3	2	34	0.1%
Mixed - Other	3	3		1	6		2	1	3	3	1		23	0.1%
Mixed - White & Asian	1	2	2	1				1	2	2			11	0.0%
Mixed - White & Black African		1	1	2	2	2			2		2		12	0.0%
Mixed - White & Black Caribbean	2	3	4	1	1	3		2	1	1	2	3	23	0.1%
Other Ethnic Group		4	5		3	2		1	4	2	5	1	27	0.1%
Unknown	682	657	709	512	624	653	725	523	603	495	698	704	7585	19.4%
White - British	2,702	2,704	2,720	2668	2507	2424	2597	2564	2061	2512	2551	2678	30688	78.5%
White - Irish	3	9	10	7	1	8	4	3	2	9	8	2	66	0.2%
White - Other	24	23	29	22	16	17	40	19	25	25	20	19	279	0.7%
Total	3,443	3,476	3,514	3246	3199	3132	3399	3142	2725	3074	3327	3426	39103	

The data above identifies that at the time the data was extracted from the Goldmine system, on 19.4% of occasions the occupier of the dwelling having a Home Fire Safety Check did not state their Ethnicity. As such the vast majority of people to have responded with their ethnicity were White British.

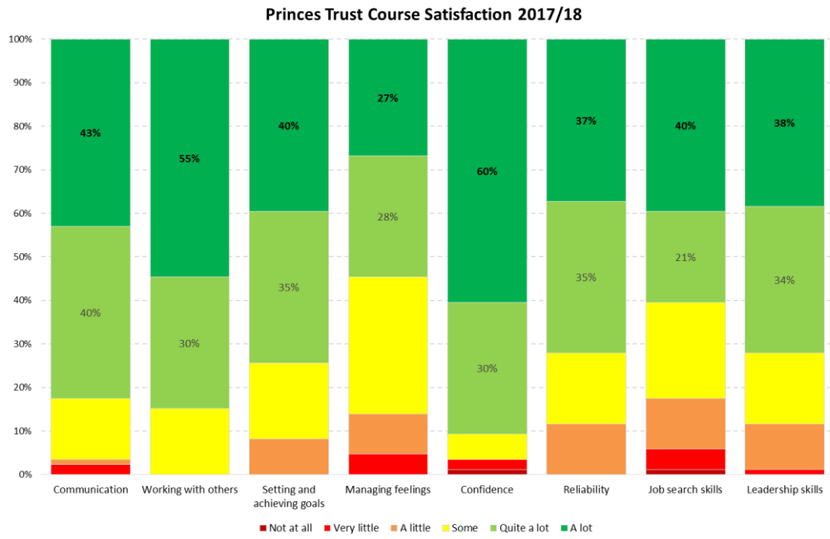
RELIGION	April	May	June	July	August	Sept	Oct	Nov	Dec	Jan	Feb	March	Total	Proportion
Atheist / None	118	170	94	93	167	116	157	149	100	145	233	149	1,691	4.3%
Buddhist	4		4	4	1		5		2		3		23	0.1%
Christian	1,270	1,267	1,315	1349	1107	991	1227	1126	761	1064	972	935	13,384	34.2%
Declined	7	3	7	1	4	6	3	9			9	6	55	0.1%
Hindu	2		3	2	1	1	6	1			1	1	18	0.0%
Jewish	5			3	2	1	3		2	1		2	19	0.0%
Muslim		25	8	6	6	1	2	4		4	12	3	71	0.2%

Other	34	39	36	25	6	11	19	25	16	13	23	27	274	0.7%
Sikh			1		3					1			5	0.0%
Unknown	2,003	1,972	2,046	1763	1902	2005	1977	1828	1844	1846	2074	2303	23,563	60.3%
Total	3,443	3,476	3,514	3246	3199	3132	3399	3142	2725	3074	3327	3426	39,103	

The data above identifies that at the time the data was extracted from the Goldmine system, on 60.3% of occasions the occupier of the dwelling having a Home Fire Safety Check did not state their religion.

HFSC Satisfaction surveys are now underway, 500 addresses have been provided to FSD and we have currently received 72 responses. It has been agreed by Performance Management Group that the initial analysis will be carried out once 100 surveys have been completed. This will be used as our baseline sample.

Course Satisfaction levels for all completed 12 week Princes Trust Programmes between 1st April 2018 and 31st March 2018



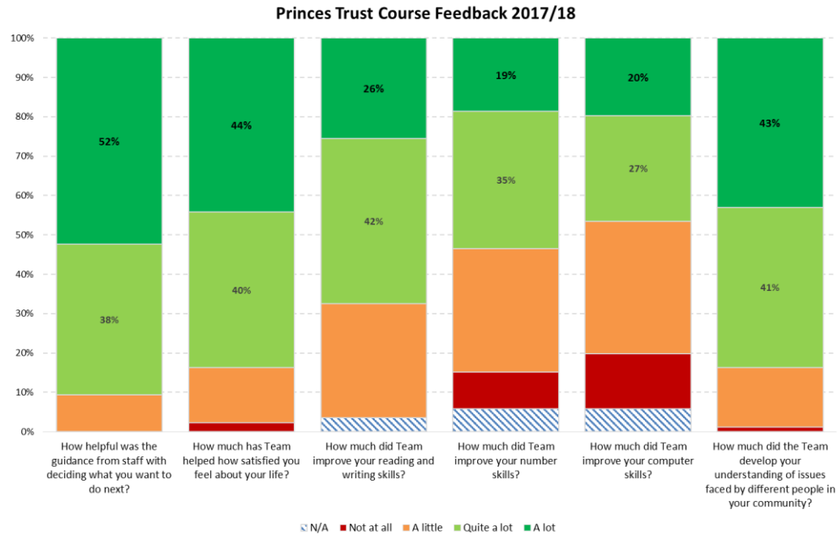
In total, 116 people attended the course, as such 86 course evaluation forms were submitted, equating to 74.1%. The course evaluation questionnaire asked attendees whether they felt that the Princes Trust programme had improved their: communication skills, confidence, leadership skills amongst others.

Concerning skill areas, the vast majority of attendees responded positively to improvements in their skills – particularly in the areas of Confidence, Working with others and Communication.

The skill areas of Managing Feelings and Job Search Skills are areas that whilst the majority of responses were positive, feedback could possibly be improved in these areas.

Overall concerning whether attendees would recommend the course and team to others, there was a 100% positive response.

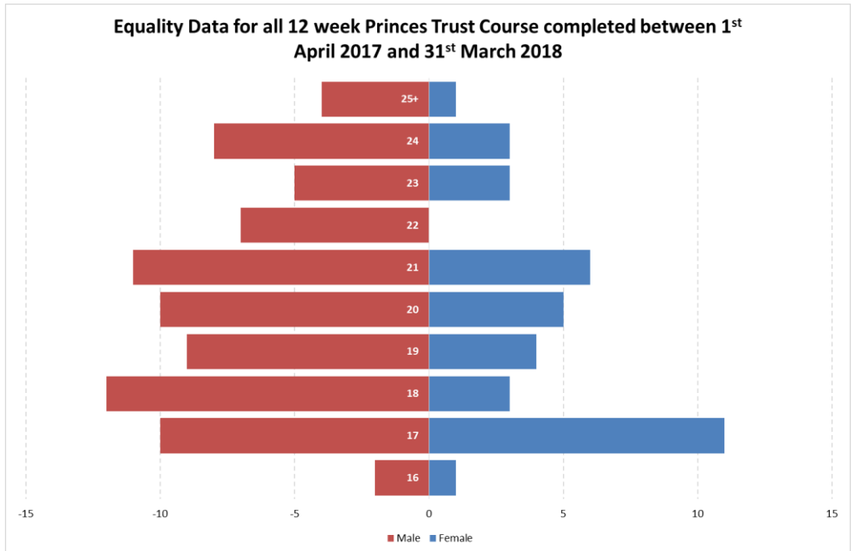
	Yes		No	
Would you recommend Team to others?	86	100%		0%



Concerning further feedback from Princes Trust course attendees, generally the feedback was positive, with the majority of attendees stating they had improved their skills in some way.

The area which had the highest proportion of responses where skills were not improved was Computer Skills with 14% (12), however this isn't too surprising as there is a likelihood that given the target audience for Princes Trust campaigns some attendees will be skilled with using a computer prior to the start of the course.

Equality Data for all 12 week Princes Trust Course completed between 1st April 2017 and 31st March 2018



During 2017/18, a total of 116 people took part in Princes Trust courses. Overall the 17 year old age group was the most common for attendees. There were approximately 2/3rds more males attending the courses than females. The majority of attendees were White British, equal to 88 or 76% of all responses.

42 attendees reported that they had some kind of disability. 73 attendees reported their sexuality as heterosexual, with 10 stating that they were LGBT.

Ethnicity	Total
White British	88
Other	11
AB	4
Black British	2
CB	2
PNTS	1
Unknown	8
Total	116

Sexuality by Gender				
Gender	Female	Male	Unknown	Total
Heterosexual	19	54		73
Bisexual	3	2		5
Lesbian	4			4
Gay		1		1
other	1			1
Unknown	10	21	1	32
Total	37	78	1	116

Religion	Total
No Religion	38
Roman Catholic	16
Muslim	13
Other Christian	7
Protestant	3
Buddhist	1
PNTS	1
Unknown	37
Total	116

Disability by gender				
	Female	Male	Unknown	Total
No	22	36		58
Yes	11	31		42
PNTS		1		1
Unknown	4	10	1	15
Total	37	78	1	116

Equality Data for our MFRS Fire Cadets

Age Breakdown	Total
13	13
14	24
15	17
16	5
17	3

Ethnicity	Total
White British	51
White & Black African	1
Black African	1
Other African	2
Other Mixed Background	2
Unknown	5

Disability	Total
Yes	12
No	48
Unknown	2

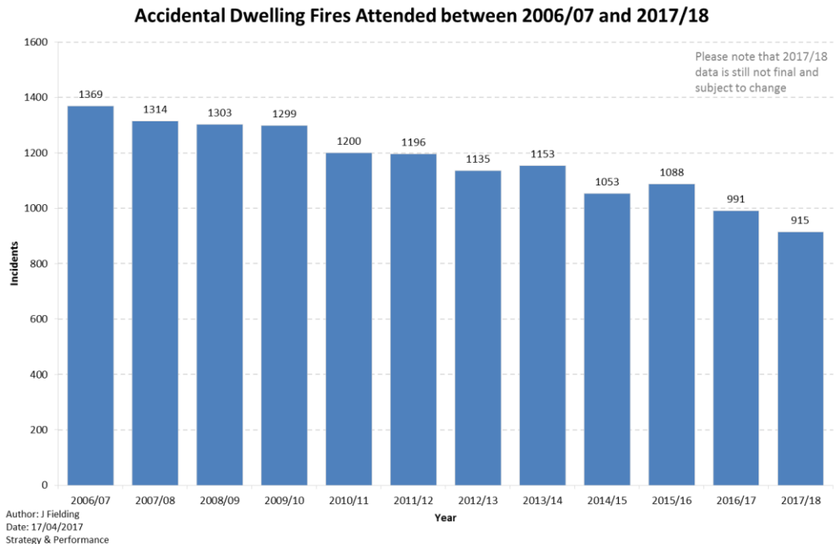
There was a total of 62 Cadets during 2017/18. The majority of which were White British accounting for 51 or 82.3%. The simple majority of cadets belong to the 14 year age group with 24.

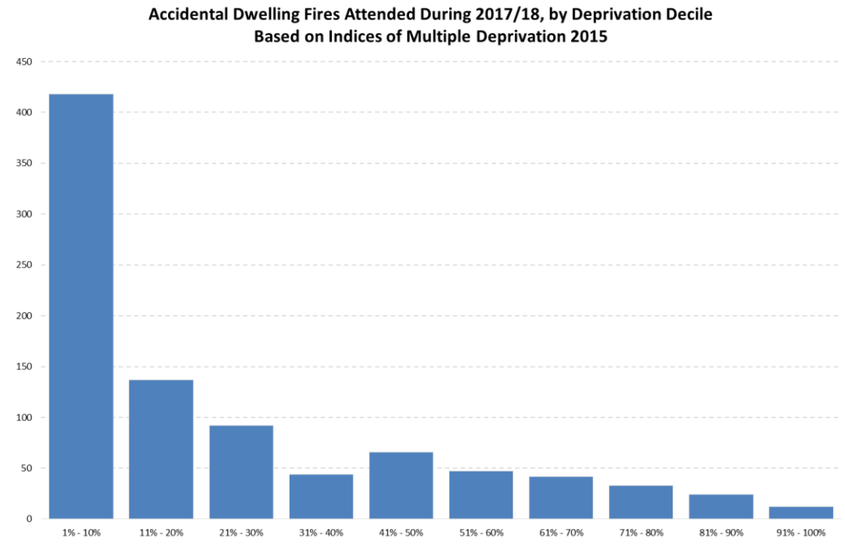
Currently we do not collect equality data for either of these as often they are anonymous and is not something we are in a position to provide at this time

After the incident satisfaction ratings will be available for the PSED report in mid to late June and equality data will be analysed to assess any impacts for underrepresented groups.

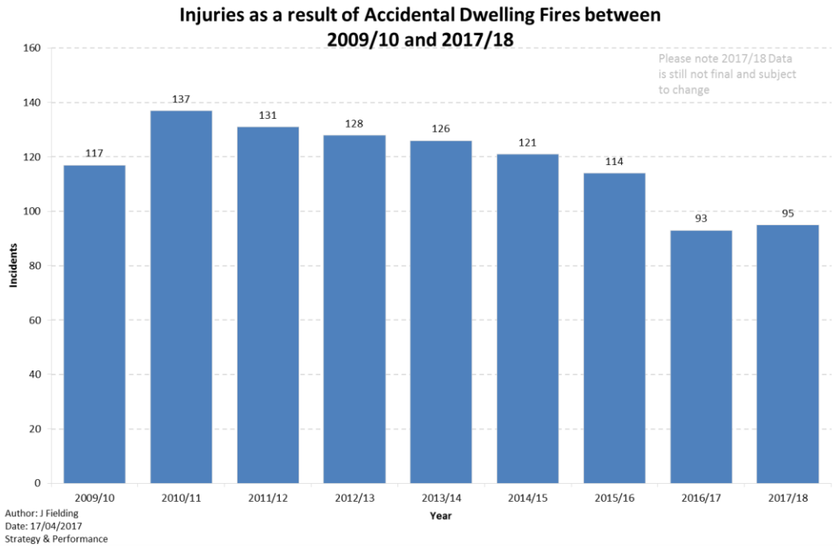
Equality Objective 3 Reducing fires and other incidents amongst the vulnerable protected groups	
Action	• Continuing to prioritise Home Fire Safety Checks to high risk people and places • Continuing to engage with young people in vulnerable areas • Increasing the Equality Monitoring and reporting of Home Fire Safety Checks, hate crime and safeguarding • Analysing our performance each year using the Performance Indicators (PI's) that relate to fire deaths, injuries and accidental dwelling fires. We will introduce measures as necessary to contribute to the reduction in these incidents
How we will measure our success	• We will contribute to a reduction in fires, deaths and injuries and other relevant incidents.
How this impacts on Equality and Diversity: protected characteristics – Age, Gender, Ethnicity, Religion/Belief/LGBT and Disability: By better understanding the impacts for diverse community groups in terms of Fires and other incidents we can measure whether there are any disproportionate outcomes for the protected groups of : Age, Gender, Ethnicity, Religion, LGBT and Disability	

Data/ Narrative

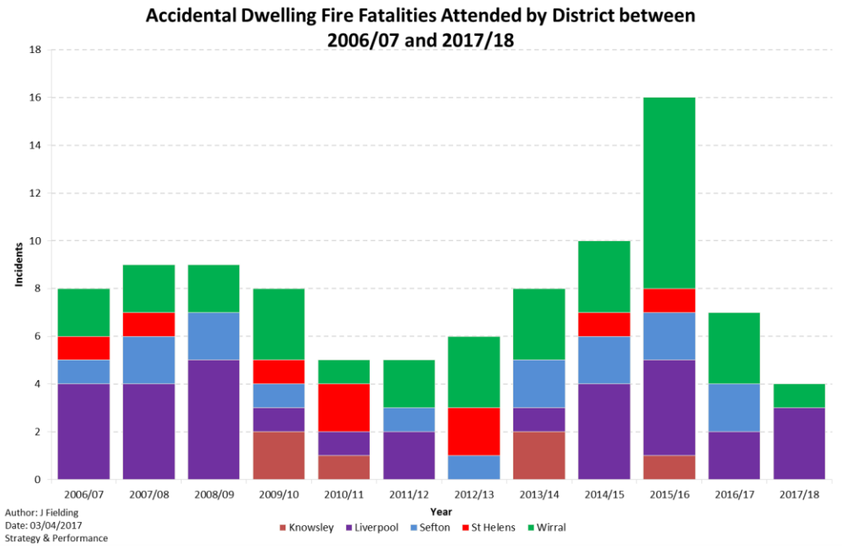




As of 17th April 2018, there were a total of 915 Accidental Dwelling Fires attended across Merseyside for the period 2017/18. Whilst it is possible that the total number of Accidental Dwelling Fires could increase marginally due to late IRS (Incident Recording System) submissions and Quality Assurance, it is highly likely that 2017/18 will have the lowest count of incidents on record. Also shown is a chart identifying where accidental dwelling fires occurred in relation to the indices of multiple deprivation 2015, the chart identifies that the majority of such incidents take place in the most deprived areas of Merseyside, with 46% (418) taking place in the 1-10% deprivation decile.



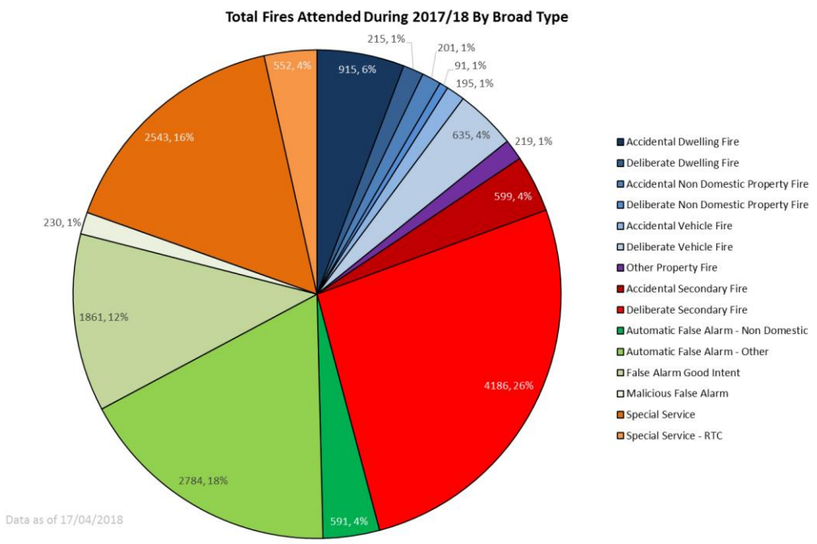
As of 17th April 2018, there was a total of 95 reported injuries as a result of accidental dwelling fires. Between 2015/16 and 2016/17 there was a notable improvement in performance where injuries fell from 114 to 93 – a reduction of 21. Pleasingly the total number of injuries for 2017/18 is in line with that of 2016/17.



2017-18 saw the Authority achieve a record performance of 4 accidental dwelling fire fatalities. This is the lowest figure ever achieved in the history of the Service, it is one less than our previous record of 5 fatalities (achieved both in years 2010-11 and 2011-12) and one quarter of the figure of 16 fatalities from only 2 years ago (our worst performance within the last 10 years). Only 2 out of the 5 Local Authority Districts had accidental dwelling fire fatalities, with Sefton, Knowsley and St Helens having no fatalities.

Despite every fatality being a tragedy for the family and community affected, this performance demonstrates the effectiveness of the Authority's Home Safety Strategy, brought in following 2015-16, which has enabled the Service to increase the efficiency and effectiveness of our Prevention activities through an enhanced focus on vulnerability (particularly the over 65s). This has been achieved by extending our data sharing arrangements to enable intelligent targeting of those most vulnerable to fire and expanding our home safety services through the highly successful Safe and Well pilot.

It is also a clear indication of the hard work and dedication of our staff, and particularly those at the front end, the Fire Crews and the Prevention Advocates, who deliver the Home Fire Safety Checks and the Safe and Well visits on a daily basis.



In total during 2017/18 there were a total of 15817 incidents attended, which is a very minor increase on 2016/17 when 15802 incidents took place.

Overall fires accounted for 45.9% of incidents, false alarms accounted for 34.6% and special services accounted for 19.6% of incidents.

Primary Fires – fires generally affecting buildings and vehicles, accounted for 16% of total incidents, with secondary fires (often related to anti-social behaviour) accounting for 30.3% of incidents.

Automatic False Alarms account for 21.3% of total incidents with the sub group Automatic False Alarm – Other – which includes AFA's in Dwellings, accounted for 17.6% of total incidents alone.

Equality Objective 4 To ensure that staff are better equipped to deliver their roles whilst showing due regard to the need to: “eliminate unlawful discrimination, harassment, victimisation and other conduct prohibited by the Equality Act, advance equality of opportunity and foster good relations between people who share a protected characteristic and those who don’t.”	
Action	• Development of equality and diversity training including: e-learning, equality and diversity related workshops, inductions for new staff • Embedding Equality and Diversity in our volunteering programmes and youth engagement. • Helping Authority Members understand their role in scrutinising the organisation’s delivery of equality and diversity outcomes • Carrying out Equality Impact Assessments • Creating a diverse supplier base for goods and services in our procurement procedures • Supporting staff groups and forums to help us understand our diverse groups of staff and their contribution to the organisation • Using staff survey results understand levels of engagement in relation to the protected groups
How we will measure our success	• Staff will feel better equipped to manage their functions and delivery of services to all communities in a confident way. This could be measured through the Staff Survey engagement and the outcomes delivered to different groups and community feedback from after the incident reports. Monitoring the number of training sessions completed around Equality and Diversity • Improvement in levels of engagement amongst staff from the protected groups
How this impacts on Equality and Diversity: protected characteristics – Age, Gender, Ethnicity, Religion/Belief/LGBT and Disability: This helps the organisation to meet its Public Sector Equality Duty to have due regards to understand and meet the needs of different protected groups and foster good relations between groups	

Data/ Narrative

Disciplinary cases during 2017/18

	Gender			Ethnic Origin					
Disciplinary Category	Male	Female	**TOTAL**	Other Black Background	Other Mixed Background	Other White Background	White British / Irish	None Stated	**TOTAL**
Alcohol - Drink Driving	1	0	**1**	0	0	0	1	0	**1**
Bullying & Harassment	3	0	**3**	0	0	0	3	0	**3**
Breach of Fire Ground Safety Procedures	2	0	**2**	0	0	1	1	0	**2**
Criminal Court Case / Criminal Action	1	0	**1**	0	0	0	1	0	**1**
Driving - Miscellaneous	1	0	**1**	0	0	0	1	0	**1**
Driving - RTC while reversing	1	0	**1**	0	0	0	1	0	**1**
Drugs - test	1	0	**1**	0	0	0	1	0	**1**
Miscellaneous	12	2	**14**	0	0	0	14	0	**14**
Other - Duty/Work Related	2	0	**2**	0	0	0	2	0	**2**
Other - outside of duty/work	4	0	**4**	0	0	0	4	0	**4**
Refusal to follow instructions	3	0	**3**	0	0	0	3	0	**3**
Total	31	2	**33**	0	0	1	32	0	**33**

During 2017/18, there was a total of 33 disciplinary proceedings. Of these, 31 involved male members of staff and 2 female. Concerning ethnicity 32 were White British / Irish and 1 being from another White Background.

	Gender			Ethnic Origin					
Disciplinary Category	Male	Female	**TOTAL**	Other Black Background	Other Mixed Background	Other White Background	White British / Irish	None Stated	**TOTAL**
Final Written Warning (12m)	1	0	**1**	0	0	0	1	0	**1**
Final Written Warning (18m)	2	0	**2**	0	0	0	2	0	**2**
Informally Resolved	8	1	**9**	0	0	0	9	0	**9**

Management Investigation - No Case to Answer	1	0	**1**	0	0	0	1	0	**1**
Management Investigation - No Further Action	2	0	**2**	0	0	0	2	0	**2**
Ongoing	6	0	**6**	0	0	0	6	0	**6**
Personal Development Plan	5	1	**6**	0	0	1	5	0	**6**
Resigned	3	0	**3**	0	0	0	3	0	**3**
Withdrawn	3	0	**3**	0	0	0	3	0	**3**
Total	31	2	**33**	0	0	1	32	0	**33**

Concerning outcomes, 3 staff members were issued Final Written Warnings, 9 were Informally Resolved, 3 required Management Investigations – with either no case to answer or no further action required. There were 6 Personal Development plans issued, 3 withdrawals and 3 resignations. There are at the time of writing this report 6 ongoing disciplinary investigations. Of the female members of staff, the disciplinary matters were resolved either informally or by the use of the Personal Development Plan.

Grievance cases during 2017/18

	Gender			Ethnic Origin				
Grievance Reason	Male	Female	**TOTAL**	Black / Black British	Other Mixed Background	Other White Background	White British / Irish	TOTAL
Bullying & Harassment	2	1	**3**	0	0	0	3	3
Inter-personal issues	1	0	**1**	0	1	0	0	1
Miscellaneous	6	1	**7**	0	0	0	7	7
PH Leave	2	0	**2**	0	0	0	2	2
Posting	6	0	**6**	1	0	0	5	6
Total	17	2	**19**	1	1	0	17	19

During 2017/18, there was a total of 19 grievances. Of these, 17 involved male members of staff and 2 female. Concerning ethnicity 17 were White British / Irish, 1 being Black / Black British and 1 from Other Mixed Background.

	Gender			Ethnic Origin				
Grievance Outcome	Male	Female	**TOTAL**	Black / Black British	Other Mixed Background	Other White Background	White British / Irish	TOTAL
Denied	7	0	**7**	0	0	0	7	7
Informally Resolved	5	0	**5**	0	1	0	4	5
Ongoing	3	0	**3**	1	0	0	2	3
Upheld	1	2	**3**	0	0	0	3	3
Withdrawn	1	0	**1**	0	0	0	1	1
Total	17	2	**19**	1	1	0	17	19

Concerning Outcomes, 7 of the 19 were denied, 5 were informally resolved, 3 were upheld and 1 was withdrawn. There are 3 grievances that are still ongoing. Of the female grievances, both were upheld. Concerning BAME personnel, 1 grievance was Informally Resolved and 1 is still Ongoing.

EMPLOYMENT TRIBUNALS 1ST APRIL 2017 TO 31ST MARCH 2018

NO OF CLAIMANTS	NATURE OF CLAIM	OUTCOME	NOTES
2 (JOINED CLAIM)	EQUAL PAY	WITHDRAWN DAY BEFORE ET HEARING	COSTS CLAIM FROM MFRA SETTLED AT £1500
NATIONAL (ALL FRA'S)	SEX DISCRIMINATION	ONGOING	PENSION ISSUES, PARTLY AGREED BUT SUBJECT TO APPEAL BY FRA'S

The third Merseyside Fire & Rescue Authority Staff Survey will be taking place in June and July 2018, in line with our promise to conduct these surveys every two year. Staff Engagement levels, and benchmarking against our previous Staff Surveys carried out in 2014 and 2016 will be published in the autumn

Equality Objective 5 To continue to aspire to achieving excellence, or equivalent in a Fire and Rescue Service Equality Framework	
Action	• Prepare an Equality and Diversity self-assessment • Undertake a Peer Assessment if available
How we will measure our success	By maintaining excellence in a Fire and Rescue related Equality and Diversity Framework if available
How this impacts on Equality and Diversity: protected characteristics – Age, Gender, Ethnicity, Religion/Belief/LGBT and Disability: Taking part in an assessment helps us to integrate our commitments to promote equality and diversity across all functions of the organisation. This assists with meeting the Equality Act 2010 – Public Sector Equality Duty to ensure that we are having due regards to the needs of staff and public we serve around the 9 [4]protected groups.	

The Diversity and Consultation Manager is reviewing the current arrangement for the FRS Equality Framework and other Equality, Diversity and Inclusion frameworks such as the ENEI benchmarking aware for SEG to consider the best self-assessment arrangements to benchmark to ensure the Authority continuously improves its approach, practises and policies around Equality, Diversity and Inclusion.

[4] The 9 protected groups are: age, disability, gender reassignment, race, religion or belief, gender, sexual orientation, marriage and civil partnership, and pregnancy and maternity. MFRS also include a tenth characteristic of Social Economic Deprivation