

ANNUAL GOVERNANCE STATEMENT 2016/17

Introduction

The Kent and Medway Fire and Rescue Authority is responsible for ensuring that it delivers its services in accordance with the prevailing legislation, regulations and Government guidance and that proper standards of stewardship, conduct, and professional competence are followed by those working for and with the Authority. This ensures that the services provided to the people of Kent and Medway are delivered efficiently, effectively and fairly, and that public money is used wisely, is properly accounted for and achieves optimum value for money. The Authority is committed to continuously improving its services to meet the needs of the public; reviewing and developing what it does; and consulting with the public about how it does it on a regular basis.

In discharging these responsibilities, the Authority is required to ensure that appropriate arrangements are put in place for the control and management of its business affairs, service performance and finances, and for the management of the risks it faces, to ensure it meets its published objectives. The Authority is required to comply with the requirements of Section 6 of the Accounts and Audit Regulations 2015 by undertaking an annual review of its systems of internal control. Additionally, Government guidance requires the Authority to undertake a separate self-assessment of operational performance, and this is therefore incorporated within this Statement. This Statement sets out the results of that assessment for 2016/17 and should enable the reader to form a view of how the Authority meets its duty to deliver services to the people of Kent and Medway effectively and fairly.

What is Governance?

The Governance Framework is the name given to the main management systems, processes, values and culture which control how the Authority identifies, develops, delivers and reviews the services it provides, works collaboratively, and engages with and leads the community it serves. It ensures that the Authority meets its published objectives and ensures that its Members and employees abide by the requirements set out in our Code, whilst also assessing whether those objectives have delivered the services at an appropriate cost. It consists of the systems, controls and procedures that ensure that certain desirable activities happen and that undesirable events are avoided, and provides a reasonable level of assurance, based on an assessment of the likelihood and the potential impact of risk on the achievement of the Authority's stated objectives, balanced with the resources available to deliver those objectives.

The Authority published an updated [Code of Governance](#) in November 2016 which sets out the seven principles of good governance to which it aspires. The Code also shows what we do to ensure good governance and where you can see evidence of this in action. Copies of previous Codes and Assurance Statements are available on the governance page of our website at (<http://www.kent.fire-uk.org/about-us/fire-authority/governance/corporate-governance/>) including details of who to contact for further information.

The processes being reviewed for this Statement have operated throughout the whole of the financial year ending 31 March 2017 and have remained in operation up to the date of approval of the 2016/17 Statement of Accounts, subject to those changes and additions made during the year as referred to below. An assessment of the effectiveness of the key elements of the framework which are in place to meet the Authority's responsibilities under the Code are set out in the following pages, together with details of any new or revised policies and procedures introduced during the year.

Who is Responsible for Ensuring Good Governance?

The Authority has overall responsibility for ensuring that effective governance arrangements are in place but has previously delegated responsibility for overseeing these arrangements to its General Purposes Committee. However, with effect from June 2017, the General Purposes Committee has been abolished, and in future it will be the full Authority that will have direct responsibility for such matters. The Chief Executive has management responsibility for ensuring that effective controls and processes are implemented across the Authority in compliance with the Code, that these are regularly reviewed and updated and that regular reports are submitted to Members. The Director, Finance and Corporate Services, is responsible for ensuring that effective financial controls are in place; for the maintenance of an effective internal audit function; and for reviewing the overall effectiveness of the Governance Framework. The overview and co-ordination of this process is undertaken by the Corporate Governance and Risk Manager.

The responsibility for ensuring that appropriate systems of internal control are introduced and complied with, remain effective and are regularly reviewed, is delegated to a number of senior managers across the Authority at Director or Assistant Director level. They are charged with delivery of those functions incorporated within each of the six functional elements comprising the overall governance framework. Where the Authority has developed arrangements to work in collaboration with other fire and rescue authorities or other public bodies, such as the Police, every effort is made to ensure that the principles of good governance that are in place within the Authority also operate within the management processes of those collaborative arrangements. During 2016/17 responsibility for the Information Management Framework has passed from the Head of IS to the Assistant Director, Policy and Performance, reflecting changes in management responsibility introduced during the year.

What this Statement Tells You

This Statement is in two parts and provides a summarised account, based on a self-assessment, of how our management arrangements meet the principles of good governance set out in our Code; how we deliver the requirements of the current National Framework for Fire and Rescue Services; and how we obtain assurance that these are both effective and appropriate. It is written to provide a clear, simple assessment of how the governance framework has operated over the past financial year and identifies any improvements made and any weaknesses or gaps in the arrangements that require addressing. Its main aim is to provide the reader with confidence that the Authority is effectively managed, and delivers the services required in accordance with current legislation and our stated aims, objectives and values. The following pages provide links to our website to enable the reader to access either the latest key governance documents or evidence that we monitor compliance in line with the requirements of our Code. Paper copies of this report and any supporting information are available to anyone without access to the internet by request to Kent Fire and Rescue Service Headquarters, The Godlands, Tovil, Maidstone ME15 6XB, or by telephone on 01622 692121.

The Assurance Process – How We Provide and Use Assurance Information

IDENTIFY	ASSESS	REVIEW	ACT
What do we want assurance on?	How is that assurance provided?	How is that assurance reviewed and validated?	What do we do with the information received?
<ul style="list-style-type: none"> • That we comply with our Code of Governance. • That we deliver the services, targets and objectives set out in our Corporate Plan. • That we take account of the views of stakeholders. • That we use and account for public money properly. • That the risks we face are effectively managed. • That we comply with legislation, regulation and statutory guidance. • That we get the best out of our Members and staff. • That we collaborate effectively where it improves services. • That we demonstrate the highest values and standards of ethical behaviour. 	<ul style="list-style-type: none"> • The External Auditors' Reports. • The Internal Auditor's Reports. • Feedback Received from Service Users and Partners. • Senior Managers' Self-Assessment of Key Controls, including compliance with the CIPFA statement on "The Role of the Chief Financial Officer in Local Government". • Operational Service Quality Assurance Processes. • Performance and Risk Monitoring and Reporting. • Staff Appraisal and Performance Management. • Comparison with our Peers. • Awards and accreditations received. 	<ul style="list-style-type: none"> • Regular Performance Reports have been presented to Members via: <ul style="list-style-type: none"> ➢ The Authority ➢ General Purposes Committee ➢ Planning and Performance Committee. • Senior Management Team Reports and Monitoring. • Regular Monitoring of Key Performance Information. • Publishing of Key Performance Information and Data for Public access and scrutiny. • Regular Reports and Information to Government Departments. • External and Internal Audit Validation. • Public scrutiny and challenge of key performance and financial information published on our website. 	<ul style="list-style-type: none"> • Communicate our results to the public. • Consider the findings, learn from the information received, and respond accordingly. • Update our plans to deliver improvements. • Revisit our key controls and make improvements where required. • Provide additional training and support where needed. • Monitor the achievement of the changes we make and the direction of travel. • Develop a specific action plan to deliver any governance improvements required. • Learn from experiences and look to improve going forward.

How Did We Do?

The Authority is required by Regulation 6 of the Accounts and Audit Regulations 2015 to undertake an annual review of the systems of internal control and to prepare an Annual Governance Statement (AGS) setting out the results of that review. Under Regulation 10, the AGS must be published alongside the Annual Statement of Accounts. The overall level of assurance is assessed against an agreed set of criteria and results in one of four levels of award that match those issued by the Head of Internal Audit: Full; Substantial; Limited; and None. The criteria for each of these assessment levels are shown on the last two pages of this Statement.

The 2016/17 review was undertaken between March and May 2017 based on the information available and has been informed by the following:-

- The views of the External Auditor submitted to the July Authority Meeting in the Audit Findings Report for 2016/17;
- The views of the Head of Internal Audit contained in the Auditor's 2016/17 Annual Report, based on the audits completed over the last three years;
- The results of the self-assessments undertaken by senior officers responsible for functional areas of the Service and validated by the Corporate Governance and Risk Manager, including the level of awareness of the role and interrelationship between control systems;
- External awards and recognition;
- A review of our performance against our stated objectives and targets for 2016/17;
- The Risk Management Process and an internal review of the Corporate Risk Register;
- The effectiveness of any changes and improvements made to the governance framework during the last financial year.

On the basis of our internal review of the operation of the Governance Framework and our assessment against the provisions of the National Framework, the level of assurance for the 2016/17 financial year has been assessed as **SUBSTANTIAL** for both elements. This indicates that, in general, strong systems are in place but that there are some processes where one or more of the following were identified:-

- Some control documentation is overdue for review and update;
- Improvements identified have yet to be fully implemented;
- Some minor breaches of controls have been identified;
- Further training and/or knowledge of control processes is required.

Our analysis of the assurance available against each of the six separate governance frameworks is set out in the following pages of this Statement. This identifies the main changes to the framework last year, those planned for the coming year and the information used to provide assurance of the effectiveness of the controls in place. Delivery of the agreed improvements will be monitored by senior management.

The Governance Framework

The overarching governance framework is made up of six functional frameworks that collectively ensure that the key principles of governance are delivered and that the requirements set out in the Code are met. The Authority has identified the top level key control systems which make up each of the functional frameworks, which are in turn supported by a range of procedures and guidance underpinning each element. The effectiveness and compliance within each of these has been assessed by the appropriate senior manager referred to in the table below. * denotes new document

Overall Governance Framework

Financial Management Framework

Owner: Asst Dir, Finance

Financial Management Order
 Financial Planning Order
 Exchequer Services Order
 Risk Management Order
 Risk Finance and Insurance Order
 Procurement Order
 Anti-Fraud and Corruption Order
 Anti-Money Laundering Policy
 Audit Order

Service Delivery Framework

Owner: Director, Operations

Incident Command and Management Order
 Safeguarding Children and Vulnerable Adults Order
 Automatic Fire Alarm Policy
 Transport Order
 Partnership Policy
 Health and Safety Framework
 Emergency Planning and Contingencies Policy
 Learning and Development Strategy
 Quality Assurance Policy

Democratic Framework

Owner: Clerk to the Authority

Authority Standing Orders
 Members' Code of Conduct
 Scheme of Delegation to Officers
 Member/Officer Protocol
 Committee Terms of Reference

Information Management Framework

Owner: Asst Dir, Policy and Performance

Information Systems Policy
 Data Quality Policy
 Freedom of Information Policy
 Publication and Document Retention Scheme
 Data Protection Policy

Performance Management framework

Owner: Asst Dir, Policy & Performance

Performance Management Order
 Partnership Order
 Complaints, Comments, and Compliments Order
 Transparency Policy
 Performance Management Framework – relating to corporate performance
 Policy Handling Order
 Community Right to Challenge Policy
 Premises Sharing Order*

Human Resources Framework

Owner: Asst Dir, Human Resources

Code of Conduct for Employees
 Equality of Opportunity in Employment Policy
 Equal Pay and Benefits Policy
 Schemes of Conditions of Service
 Staff Performance Man't Framework
 Pay Policy
 Whistleblowing Policy
 Pensions Policy
 Pension Board Terms of Reference
 Redundancy Policy

Results of our Self-Assessment for 2016/17

Financial Management Framework

Our Assessment for the 2016/17 financial year:

The Financial Management framework continues to operate well with the External Auditor commenting on the high quality of the final accounts and the supporting information. We were also the first fire and rescue authority to publish its signed accounts in 2015/16, on which the Auditor issued an unqualified opinion, noting the good value for money arrangements in place. A strong anti-fraud culture ensured that no issues were reported during the year. The Medium Term Financial Plan is robust with reasonable assumptions made in the absence of firm information.

The Internal Auditor undertook seven separate reviews during the year, with five receiving a “substantial” rating and one providing interim advice only. The Corporate Risk Management review rated the process as “risk defined”; as a result of which procedures are being reviewed to broaden the focus and make reporting and monitoring processes more widely accessible and easier to use. Further staff training is being delivered as part of the process. Action plans are in place to address all of the auditor’s recommendations. The Head of Audit has issued a “Substantial” overall opinion of the controls in place based on the reviews undertaken recently.

A strong and well publicised financial management control framework exists with documentation within its review dates, is kept up to date and made available to all staff. Financial support and training for managers is provided by finance staff as required. Financial management is considered to be strong, with active management and regular monitoring of expenditure. The Authority has a prudent level of general reserves in place as well as specific earmarked reserves for key infrastructure projects.

Changes Made During the Year	Changes planned for 2017/18	Sources of Assurance
<p>During the year, routine updates were made to the following documents:</p> <ul style="list-style-type: none"> • Risk Management Order – (Sept 16) • Risk Financing and Insurance Order (Mar 17) • Anti-Fraud and Corruption Order (Aug 16) 	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> • Financial Management Order • Financial Planning Order • Exchequer Services Order • Audit Guide • Anti-Fraud and Corruption Order • Anti-Money Laundering Policy • Revision to Risk Management Processes 	<p>External Audit Findings Report 2016/17 (item B5)</p> <p>Internal Audit Annual Report 2016/17 (Item B2)</p> <p>Annual Accounts 2016/17 (Item B6)</p> <p>Budget Outturn Report 2016/17 (Item B1)</p> <p>Budget and Medium Term Financial Plan 2017/18 to 2020/21</p>

Service Delivery Framework

Our Assessment for the 2016/17 financial year:

This year we have introduced improved arrangements to protect children and vulnerable adults, reflecting the increase in activities in improving community safety and wellbeing. This included mandatory training for all staff and specialist training and assessments for staff working directly with vulnerable groups. We believe these measures will greatly improve our processes, improve the services we provide and safeguard any vulnerable individuals we come into contact with.

Our Business Continuity procedures have also been reviewed and updated, with a series of exercises planned for the coming year to test these further. These tie in with other public sector first responders' procedures and ensure a cohesive response to any incidents that arise.

There are strong arrangements in place for planning, monitoring and reporting operational plans and targets, which we make available on a local as well as a County-wide basis. Although fire-related incidents are slightly up this year, we believe these are due to changing weather patterns and societal issues. Deaths and injuries related to road traffic collisions have improved however, and we continue to place an increased focus on reducing this indicator. We now attend an increasing number of medical emergencies and other Safe and Well related visits, supporting partner organisations, as well as preventative visits to vulnerable people.

We have put in place arrangements for monitoring and reviewing the quality of our operational response and will review and reevaluate this in the coming year. We aim to identify any issues as well as best practice, from our own monitoring as well as customer feedback, and implement any training, procedural and command improvements necessary. This includes arrangements to ensure staff and customers are treated fairly and equally. We have recently been assessed as "excellent" against the Fire Services Equality Framework for the second time.

We have robust arrangements in place to monitor the health and sickness levels of staff. Reportable injuries remain low this year despite a small increase in the total but they remain well below the target. Sickness absence levels showed a small increase, but also remain within target.

Changes Made During the Year	Changes planned for 2017/18	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <ul style="list-style-type: none"> • Safeguarding Children and Vulnerable Adults Order (Nov 16) • Emergency Planning and Contingencies Policy (Jul 16) 	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> • Incident Command and Management Order • Automatic Fire Alarm Policy • Quality Assurance Policy 	<p>Performance Management Report 2016/17 (Item B1)</p> <p>Customer Feedback Report 2016/17</p> <p>Corporate Health Report 2016/17</p> <p>Our Customer Promise</p> <p>Local Area Performance reports</p>

Democratic Framework		
<p><u>Our Assessment for the 2016/17 financial year:</u></p> <p>The existing democratic framework has continued to function well and provides a strong framework for Members and officers working together. A number of key documents are due for review in the coming year and we will look to reflect revised governance arrangements arising from the Policing and Crime Act 2017 should they be required.</p> <p>The Independent Person's report on Member behaviour reported a nil return as no complaints had been received. A Members' Handbook is issued to all Members setting out the full framework and Code of Conduct for Members, as well as how to access support and information from officers. The Clerk to the Authority attends all Member meetings so is on hand to advise on protocol and procedures. All Authority meetings are open to the public and publicised in advance; and copies of reports and minutes recording decisions are published on our website.</p> <p>In the coming year we plan to review the existing committee structure and look at a more appropriate meeting structure for the business, the Authority now has to deal with.</p>		
Changes Made During the Year	Changes planned for 2017/18	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <ul style="list-style-type: none"> • Members' Code of Conduct (Dec 16) 	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> • Authority Standing Orders • Scheme of Delegation to Officers • Committee Terms of Reference 	<p><u>Annual Report on Member Standards, Allowances and Activity 2015/16 (see item B5).</u></p> <p><u>Authority Constitutional Documents</u></p>

Information Management Framework

Our Assessment for the 2016/17 financial year:

Information security remains a key issue for the Authority and an increase in collaborative working with other public authorities has heightened the potential risks. All staff have undertaken compulsory data protection and security training during the year and additional controls have been introduced to limit the risk of unwanted exposure. There has however been a small increase in unauthorised data sharing and misuse of Authority IT equipment which have been dealt with under our discipline and performance management procedures. We continue to remind staff of the dangers and the consequences of breaches of data protection policies. Cyber attacks such as Ransom Ware and Denial of Access are also high risk.

We operate high levels of protection and security and regularly review and test these. Most of the policy documentation relating to data security remains current and is readily available to staff by way of guidance. However, the General Data Protection regulation, due to come into effect in 2018 is likely to require amendments to systems and controls, so these are scheduled for review in the coming year. In the meantime we undertake regular external security testing and prohibit the use of personal devices and storage media on Authority systems in order to reduce risks.

We have seen a large increase in Freedom of Information Act requests despite an increase in the information available on our website, but we have responded to all requests within the statutory time frames. We have put in place confidentiality and data sharing agreements with key partners to ensure as far as possible that similar standards of security operate across these arrangements where data sharing exists. Privacy impact assessments are also undertaken on all projects and key policies to ensure that data privacy issues are identified and effectively managed. We have also published a Privacy Statement advising how we look after any personal data we use in the course of delivering services.

Changes Made During the Year	Changes planned for 2017/18	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <p>None</p>	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> • Information Systems Order • Data Protection Policy • Data Quality Policy 	<p style="text-align: center;">External Security report*</p> <p style="text-align: center;">Publication and Retention Scheme</p> <p style="text-align: center;">Freedom of Information Policy</p> <p style="text-align: center;">Our Privacy Notice</p> <p style="font-size: small; text-align: right;">*This report is not available to the public due to the confidential nature of its contents</p>

Performance Management Framework

Our Assessment for the 2016/17 financial year:

The Performance Management Framework is well established and includes opportunities for public and staff consultation, and feedback on our proposals, plans and performance, which we take into account in agreeing our final plans. We publish our Plans and Performance targets on our website and regularly publish updates of progress against these targets. Fire related performance is slightly worse than the target for the year but road traffic collision performance exceeded our targets.

We regularly publish all data required by government, together with additional information where we receive regular requests for it or we believe it aids assessment of our performance, on our web site. We have put in place arrangements to enable the public to contact us about our services and performance, and measures to ensure these are responded to promptly. In 2016/17 we responded to 293 Freedom of Information requests, all but one response was within the required timescales (the response that exceeded the 20-day timeframe was provided two days late). We regularly review and report on complaints and other feedback received, although complaints are few and outnumbered by the positive feedback we receive.

Changes Made During the Year	Changes planned for 2017/18	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <ul style="list-style-type: none"> • Feedback and Allegations Policy 	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> • Performance Management Policy • Partnership Order • Transparency Order • Policy Handling Order • Community Right to Challenge Order 	<p style="text-align: center;"> Safety and Wellbeing Plan Consultation Information Financial Reports Procurement Reports Service User Feedback report 2016/17 Performance Management Report 2016/17 Item B1) </p>

Human Resources Framework

Our Assessment for the 2016/17 financial year:

The Authority places a great emphasis on the quality and effectiveness of its staff and has put in place extensive arrangements to ensure they are physically and mentally fit for work, well trained for their roles and provided with equal and fair opportunities at work. Sickness absence levels remain low, albeit slightly up on last year, and reportable accidents remain in single figures. We have a strong health and safety culture with extensive risk assessments for our activities and trained safety advisors available to support personnel.

We also take the conduct of staff very seriously and have a Code of Conduct in place setting out the standards of ethical and professional behaviour we expect. All staff have performance and development assessments annually and are encouraged to maintain their professional competence and seek development opportunities. HR policies and procedures are well documented, although a number are now overdue for review, and this is scheduled for completion in the new financial year.

We are proud to have retained our “excellent” status as an Equal Opportunities employer in 2017 under the Fire and Rescue Service Equality Framework, following a peer review by a panel of service experts. Our new Customer and Equality Plan supplements our Corporate Plan and sets out how we will ensure that customers and staff receive fair and equal treatment and access to services. We encourage feedback on our services and monitor and report on these annually, ensuring that lessons learned are fed into our training, behaviour and procedures.

Changes Made During the Year	Changes planned for 2017/18	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <ul style="list-style-type: none"> • Equality of Opportunities in Employment Policy (Dec 16) • Staff Performance Management and Appraisal Scheme (Apr 16) • Whistleblowing Policy 	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> • Code of Conduct for Employees • Equality of Opportunities in Employment Policy • A range of supporting employment policies are also due to be updated in 2017/18 	<p>Service User Feedback report 2016/17</p> <p>Equality standards award</p> <p>Workplace wellbeing excellence award</p> <p>Corporate Health Report 2016/17</p> <p>Customer and Equality Plan 2017/18</p>

Operational Assurance Statement 2016/17

How we meet these requirements?	Where can you find governance in action?	Where do we get assurance from?
<p>Operational Assurance Requirements: Each fire and rescue authority must produce an Integrated Risk Management Plan (Safety and Wellbeing Plan) that identifies and assesses all foreseeable fire and rescue-related risks that could affect its community, including those of a cross-border, multi-authority and/or national nature. The Plan must have regard to the Community Risk Registers produced by Local Resilience Forums and any other local risk analyses as appropriate.</p>		
<p>We publish a Safety and Wellbeing Plan¹ (the current plan is for 2016-18), as well as the technical appendices and strategies supporting the plan.</p> <p>We report the outcomes of consultation on the Safety and Wellbeing Plan.</p> <p>All projects proposed in the Safety and Wellbeing Plan and subsequently approved by Members are reflected in the Corporate Plan.</p> <p>We have a mature risk assessment process which draws in data from a variety of internal databases and external sources.</p> <p>We conduct detailed analysis and carry out thorough assessments of risk.</p> <p>We are a key player in the Kent Resilience Forum.</p>	<p>Safety and Wellbeing Plan 2016-18</p> <p>Safety and Wellbeing Plan - Consultation report – November 2015</p> <p>Safety and Wellbeing Plan - Outcomes of the consultation – February 2016 (Item B1)</p> <p>Technical Appendices to the Safety and Wellbeing Plan</p> <p>Corporate Plan 2016/17</p> <p>Report seeking approval for the Corporate Customer and Equality Plan. Authority, February 2017 (Item B4)</p> <p>Service Delivery Performance Update. Planning and Performance Committee, April 2017, Item B1.</p> <p>Kent Community Risk Register</p> <p>Kent Resilience Forum</p>	<p>The last Fire Peer Challenge (undertaken by the Chief Fire Officers Association [CFOA] and the Local Government Association) highlighted both the coherence of the five strategies set out by the Authority and the extensive developmental work that had been undertaken on these.</p> <p>Annual publication of Corporate Plan</p> <p>Summary of internal audit report 2016/17. To be presented at Authority meeting, July 2017.</p> <p>Service Delivery Performance Update. Planning and Performance Committee, April 2017, Item B1.</p>

¹ From November 2013, the Integrated Risk Management Plan was referred to as the Safety Plan. A significant proportion of the Plan now focuses on the Authority's role in maintaining public health, either through emergency response, or through safety interventions delivered in the home. For this reason, the name of the plan was renamed in November 2015 to Safety and Wellbeing Plan. It is only a vehicle for consultation, and the majority of the requirements of IRMPs are actually delivered by the Corporate Plan in this Authority.

<p>We have an Operational Premises Risk Management System that captures operational risks around the county. This provides a central repository for all premises risk data.</p> <p>We work with other fire and rescue authorities and other emergency services to share learning and pool resources.</p> <p>We will take an offensive firefighting approach to incidents unless information is available that a more defensive position is required.</p> <p>A "Serious Incident Assessment Group" (SIAG) has been established to ensure that information arising from any local or national incidents relevant to the work of the Authority (e.g. Coroners' reports, accident investigations undertaken by other fire and rescue authorities) can be centrally held, accessed and actioned in a timely manner.</p> <p>The introduction of new operational firefighting tactics and equipment (e.g. Cobra cold-cutting system, Fogspike, modern thermal imaging cameras and new vehicles) have improved the services offered to the public and improved the safety of firefighters.</p>	<p>"Fire Fighting – A Risky Business". National research between the Authority, four fire and rescue authorities (FRAs) and the Fire Protection Association into the management of operational risk.</p> <p>Development of the SIAG database and tracker to track documentation and actions arising from relevant learning points. Outcomes from the operational quality assurance process are shared via operational articles and case studies – available on request.</p> <p>Operational Capability Review Project. Planning and Performance Committee, April 2015, Item C3.</p> <p>Workforce Strategy 2013-17</p>	<p>Meeting forum to oversee implementation of relevant points from SIAG database.</p>
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How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities must work with communities to identify and protect them from risk and to prevent incidents from occurring.		
<p>We focus prevention work on those at highest risk.</p> <p>We employ people specifically to work with vulnerable people.</p> <p>We publish a forward-looking plan of how we want to reduce risk across Kent and Medway.</p> <p>We work with partners to reduce risk.</p> <p>The Authority hosts and manages the Kent Resilience Team (KRT). The KRT is a multi-agency initiative to transform the delivery of emergency planning services in order to achieve better outcomes for the people of Kent. It does so by improving the effectiveness of the planning and response to, and recovery from, emergencies.</p>	<p>Focus on your Safety strategy</p> <p>Responding to Emergencies strategy</p> <p>Home Safety section of website</p> <p>Safety and Wellbeing Plan 2016/18</p> <p>Kent Resilience Team annual report 2015/16. This will be published in the coming months, but a copy is available on request.</p> <p>Report to Planning and Performance committee providing an update on the KRT and requesting approval to make it permanent from April 2017. This request was subsequently approved (Item B1).</p> <p>Planning and Performance Committee, May 2016, KRT Work Plan Priorities 2016/17, Item B1.</p> <p>Planning and Performance Committee, July 2015, KRT Update, Item C5</p> <p>Planning and Performance Committee, Nov 2014, Update on the then newly-formed KRT, Item B1.</p>	<p>LPI 105 – Accidental fires in dwellings per 10,000 dwellings</p> <p>LPI 134 – Number of fatalities and casualties as a result of accidental fires</p> <p>LPI 136 – People killed or seriously injured in road traffic collisions</p> <p>LPI 143 – Response times to life-threatening emergency incidents</p> <p>LPI 100 – Total fire calls attended per 10,000 population</p> <p>LPI 101 – Deliberate fire calls attended per 10,000 population</p> <p>LPI 128 – Accidental fire calls attended per 10,000 population</p>

<p>We keep up to date with new methods of building construction and the issues these could raise for us.</p> <p>The work of the Fire Safety Business Engagement and Local Service Delivery Teams includes a focus on preventing fires starting in all properties covered by the Regulatory Reform (Fire Safety) Order 2005.</p> <p>We have introduced an updated Safeguarding Children and Vulnerable Adults Order.</p> <p>All staff have undergone specific training in data security and in safeguarding vulnerable people.</p> <p>We have developed operational procedures to deal with incidents that occur in places that could be sensitive environmentally.</p> <p>We have introduced a new environmental risk assessment and environmental tactical risk guidance.</p> <p>We have signed the Prime Minister's Dementia pledge. In addition, the Authority is also the Thematic Lead for the Prime Minister's Dementia Challenge.</p> <p>We have signed up to the Government's Workplace Wellbeing Charter and are also engaging with Public Health UK to promote their initiatives amongst our staff.</p> <p>We have signed the 'Blue Light Time to Change' pledge with Mind, a mental health charity, to show our commitment to challenging mental health stigma and promote positive wellbeing within the organisation.</p> <p>We have also signed up to Big White Wall, which provides a range of safe and anonymous support for those suffering from anxiety and depression.</p> <p>The Authority joined the Institute of Customer Service as part of our work to continually improve what we can do to help our customers.</p>	<p>Business Safety section of website</p> <p>Focus on Business strategy</p> <p>Safeguarding Service Order</p> <p>Caring for the Environment strategy</p> <p>The Workplace Wellbeing Charter website</p> <p>The Blue Light Time to Change pledge</p> <p>The Big White Wall website</p> <p>The Institute of Customer Service website</p>	<p>LPI 103 – Fires in non-domestic properties</p> <p>LPI 145 – Unwanted calls to automatic fire alarms attended</p> <p>LPI 703 – CO₂ emissions caused by our use of energy, fuel and water</p>
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How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
<p>Operational Assurance Requirements: Each fire and rescue authority's Integrated Risk Management Plan (Safety and Wellbeing Plan) must:</p> <ul style="list-style-type: none"> • demonstrate how prevention, protection and response activities will best be used to mitigate the impact of risk on communities, through authorities working either individually or collectively, in a cost-effective way; • set out its management strategy and risk-based programme for enforcing the provisions of the Regulatory Reform (Fire Safety) Order 2005 in accordance with the principles of better regulation set out in the Statutory Code of Compliance for Regulators, and the Enforcement Concordat. 		
<p>Please refer to the information in the previous section, as well as the following:</p> <p>The Authority has been successful in achieving some £17m of savings over the last five years, of which £3.8m was achieved in 2016/17. The Authority is planning to continue to make further savings in future years, which will need to be both sustainable and deliverable so that a high quality and effective service can continue to be delivered.</p> <p>Feedback is collected from service users and trends are identified where possible. The feedback shows that levels of complaints are extremely low.</p> <p>Every accidental dwelling fire (ADF) the Service attends triggers a follow up visit, arranged by the cluster manager and carried out by a Station Manager.</p> <p>The Joint Kent Community Safety Team – comprising the Authority, Kent Police and Kent County Council – is located at the Authority's Training Centre. This approach enables a streamlined and consistent response to delivering community safety services across Kent and Medway.</p>	<p>Medium term financial plan</p> <p>Post-ADF follow up visits carried out by Groups.</p> <p>Update on the future direction and approach of the Joint Kent Community Safety Team, Planning and Performance Committee, November 2016 (Item B2).</p>	<p>A total of 95 compliments were received in 2016/17, compared to 112 in the previous year. There were 27 complaints, of which 16 were founded. The total for the previous year was 21.</p> <p>In 2016/17, 293 Freedom of Information requests were received and answered. This compares to 307 in 2015/16.</p> <p>This scheme was highlighted as one of the themes for the 2017 Equality Framework.</p> <p>The 2016 Internal Audit of the Authority's Operational Risk Management awarded a score of "Substantial" for the general management of risk and information.</p> <p>Summary of internal audit annual report 2015/16. General Purposes Committee, July 2016, Item B2.</p> <p>Summary of internal audit report 2016/17. To be presented at Authority meeting, July 2017.</p>

<p>Fire Safety teams are working in partnership with the Environment Agency to assess fire risks at waste storage and recycling sites. Where required fire management plans are developed to improve storage at the site and reduce the chances of a fire starting.</p> <p>We publish our approach to fire safety for businesses.</p> <p>We seek to minimise regulatory burden by undertaking audits in partnership with other agencies.</p> <p>We take enforcement action against businesses when we need to.</p> <p>When circumstances require the Authority prosecutes those who fail to meet the requirements of the Regulatory Reform (Fire Safety) Order 2005.</p> <p>We host and manage the Kent Resilience Team (KRT) – a multi-agency team that provides cost-effective, joined-up emergency planning service across Kent and Medway, especially during major emergencies.</p> <p>We have worked in partnership with South East Coast Ambulance Service (SECAmb) to provide life-saving co-responding services from five on-call fire stations since November 2004.</p> <p>In October 2015, we extended our collaboration scheme with SECAmb to provide a response to life threatening calls where the Authority is able to respond more quickly than SECAmb. Firefighters or a fire engine are sent to the most critical (Red 1) calls received by SECAmb, when requested by them to attend.</p>	<p>Detailed reporting of performance to Planning and Performance Committee</p> <p>LPI 103 – Fires in non-domestic properties</p> <p>Focus on Business strategy</p> <p>Legal cases reported to Members through the relevant committees:</p> <p>Planning and Performance Committee, November 2014, Item C7.</p> <p>Authority Meeting, November 2013, Item C2.</p> <p>Kent Resilience Team annual report 2015/16. This will be published in the coming months, but a copy is available on request.</p> <p>SECAmb provide a regular performance update to KFRS on response to medical emergencies.</p> <p>Performance is monitored internally on a monthly basis at Operations Branch Meeting.</p> <p>Update to Members on responding to medical emergencies. Authority, February 2016, Item B1.</p>	<p>LPI 103 – Fires in non-domestic properties</p>
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In order to improve the benefit to patients and streamline the support between agencies and at co-responder calls the Authority is upgrading the existing defibrillators that are carried on response vehicles and fire engines so that they will be compatible with those used by SECAmb

At incidents, the Authority works very closely with Kent Police, SECAmb and local authorities, fully adopting the principles established by the Joint Emergency Services Interoperability Programme (JESIP).

All members of the Authority's corporate management board have undergone Multi-Agency Gold Incident Command (MAGIC) training.

All Incident Commanders at Level 2 and above have undergone MAGIC training at a level relevant to their role.

Working in partnership with Kent Police, we implemented the UK's first inter-agency command and control solution, which has delivered significant benefits.

We are working with Kent Police on a large collaboration programme focused on operational demand reduction and improved service delivery. This also includes joint training, and the sharing of vehicles and premises.

The Authority is an active partner in the Emergency Services Mobile Communications Programme (ESMCP) – the Home Office led programme to replace the current communications system in use by the emergency services.

[Report on update to defibrillators. Authority, February 2017, Item B1, 4\(b\).](#)

[JESIP website](#)

[Multi-Agency Gold Incident Command \(MAGIC\) training. College of Policing website.](#)

[ESMC update. Planning and Performance Committee, April 2017, Item C4.](#)

How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities must make provision to respond to incidents such as fires, road traffic accidents and emergencies within their area, and in other areas in line with their mutual aid agreements, and reflect this in their Integrated Risk Management Plans (Safety and Wellbeing Plan).		
<p>The Authority is an active partner in the collaborative partnership, which has developed common standard operating procedures for operational incidents.</p> <p>Section 13 and 16 Agreements have been signed with all neighbouring fire and rescue authorities.</p> <p>The Authority has a contract with Eurotunnel to provide the first line of response to any emergency inside the Channel Tunnel.</p> <p>The Authority works with its French counterparts to provide the second line of response and exercises take place on an annual basis. The first line of response teams work regularly together and undertake joint training together.</p> <p>The Authority is represented on the Channel Tunnel Safety Authority and advises on fire and rescue related matters. The Authority also chairs the Rescue and Public Safety Working Group (RPSWG).</p>	<p>National Standard Operating Procedures – available on request subject to relevant exclusions under the Freedom of Information Act.</p> <p>Review of emergency response provision.</p> <p>Channel Tunnel Safety Authority inspection reports – available on request.</p> <p>Update on Channel Tunnel Bi-National Exercise. Planning and Performance Committee, May 2016, Item C7.</p>	<p>Performance management of response times</p> <p>Bi-national exercises are undertaken with the Authority's counterparts in France.</p> <p>Outcomes of operational quality assurance process and operational debriefs following an incident are shared via operational articles and case studies –available on request subject to relevant exclusions under the Freedom of Information Act</p>

How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities must have effective business continuity arrangements in place in accordance with their duties under the Civil Contingencies Act 2004 and to meet the full range of service delivery risks. Business continuity plans should not be developed on the basis of Armed Forces' assistance being available.		
<p>Business continuity plans are in place for all reasonably foreseeable risks to the Authority.</p> <p>The Authority regularly tests the business continuity plans. In addition joint plans are regularly tested with partner agencies.</p> <p>The Authority is an active and leading member in the South East FRS Regional Business Continuity Group.</p> <p>Section 13 and 16 Agreements have been signed with all neighbouring fire and rescue authorities.</p> <p>We conduct risk assessments of locations of higher risk in Kent and Medway, such as places that store large amounts of chemicals.</p>	<p>Emergency Planning and Contingencies Policy – this is available on request.</p> <p>Service Continuity Framework – available on request, subject to relevant exclusions under the Freedom of Information Act. NB: This will be superseded on 01/08/2017 by the Business Continuity Framework.</p> <p>The new Business Continuity Framework will replace the Service Continuity Framework. This is being implemented in a phased approach, with the new process starting on 01/08/2017. This is available on request, subject to relevant exclusions under the Freedom of Information Act.</p> <p>Critical Incident Framework – this is available on request.</p> <p>Exercises are undertaken to test Service Continuity Plans. These will be updated when superseded by the Business Continuity Framework.</p>	<p>Performance management of response times</p> <p>Internal exercise debrief process – this is available on request.</p> <p>Peer reviews are to be undertaken following the implementation of the new Business Continuity Framework.</p> <p>Under the new framework there will be a minimum of three exercises per year: two to test plans, and one to test corporate response.</p> <p>Moreover, the Authority participates in a national annual exercise on Business Continuity Awareness Week. The most recent was undertaken on 15/05/2017.</p> <p>Outcomes of exercises undertaken to test Service Continuity Plans.</p>

How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities must collaborate with other fire and rescue authorities to deliver interoperability.		
<p>Section 13 and 16 Agreements have been signed with all neighbouring fire and rescue authorities.</p> <p>We undertake familiarisation and training with neighbouring fire and rescue authorities.</p> <p>Kent is an active partner in the collaborative partnership developing common standard operating procedures for operational incidents.</p> <p>We publish a Contracts Register on the Website.</p> <p>A leading member of the South East FRS Regional Business Continuity Group.</p> <p>We are founding members of the Fire and Rescue Indemnity Company (FRIC) providing insurance cover for nine fire and rescue authorities.</p> <p>We are members of the National Operational Guidance implementation Forum.</p> <p>Our Chief Executive is one of the Committee Chairs of the National Fire Chiefs Council (NFCC). The Chief Executive also runs the National Collaborative Procurement Board.</p>	<p>We update Members through the Planning and Performance Committee on large scale or complex incidents e.g. the annual bi-national exercise at the Channel Tunnel.</p> <p>Contracts Register</p> <p>FRIC website</p> <p>National Operational Guidance Implementation Forum</p> <p>CFOA website</p>	<p>We have made savings through effective collaboration with other fire and rescue authorities on procurement. This has covered such areas as workwear, breathing apparatus (BA), face masks, firefighting clothing and insurance.</p> <p>Joint learning through the South East FRS Regional Business Continuity Group informs the development of our Emergency Planning and Contingencies Policy and Frameworks.</p>

<p>We are the lead Authority for the Collaborative Personal Protective Equipment (PPE) Framework which aims to deliver efficiencies and savings through collaboration with other fire and rescue authorities. There are now 13 fire and rescue authorities accessing this framework.</p> <p>We collaborate with other fire and rescue authorities in the region to develop standard operating procedures following the release of National Operational Guidance.</p> <p>This guidance has been released through the South East Operational Response and Risk Group, which is chaired by the Authority.</p> <p>Our leading work on the KFRS “Think Contaminants!” project – set up to reduce staff exposure to known, unknown and potential contaminants in the workplace – means we are a lead source of information for other fire and rescue authorities.</p>	<p>The Collaborative PPE Award Recommendation Report Part 1 is available upon request</p> <p>National Operational Guidance website</p>	<p>To date the Authority has supplied over 30 fire and rescue authorities with information about the KFRS contaminants project.</p>
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How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities must collaborate with other fire and rescue authorities, other emergency services, wider Category 1 and 2 responders and Local Resilience Forums to ensure interoperability.		
<p>The Authority hosts and manages the Kent Resilience Team (KRT). The KRT is a multi-agency initiative to transform the delivery of emergency planning services in order to achieve better outcomes for the people of Kent. It does so by improving the effectiveness of the planning and response to, and recovery from, emergencies.</p> <p>Section 13 and 16 Agreements have been signed with all neighbouring fire and rescue authorities.</p> <p>Kent is an active partner in the collaborative partnership developing common standard operating procedures for operational incidents.</p> <p>Control staff are located at Kent Police HQ. This is an arrangement which facilitates information exchange between the two services.</p>	<p>Kent Resilience Team annual report 2015/16. This will be published in the coming months, but a copy is available on request.</p> <p>Report to Planning and Performance Committee providing an update on the KRT and requesting approval to make it permanent from April 2017. This request was subsequently approved (Item B1).</p> <p>Planning and Performance Committee, May 2016, KRT Work Plan Priorities 2016/17, Item B1.</p> <p>Planning and Performance Committee, July 2015, KRT Update, Item C5</p> <p>Planning and Performance Committee, November 2014, Update on the then newly formed KRT, Item B1.</p> <p>Reports to Members on Section 13 and 16 agreements</p> <p>Planning and Performance Committee, July 2016 (Item B1).</p>	<p>The work of the Kent Resilience Forum was highlighted by the Chief Fire Officer's Association (CFOA) as a "Notable Practice Case Study".</p> <p>Performance management of response times</p> <p>In March 2016, the Authority won an award in the public sector's prestigious annual efficiency awards. The Improvement and Efficiency Social Enterprise (iESE) award highlights best practice and improvement from councils, police and fire services. The Authority, along with Kent Police, won the Fire and Rescue Project of the Year category for its work to develop a shared 999 mobilising system.</p>

<p>The Authority was part of the Joint Emergency Services Interoperability Programme (JESIP) with Kent Police and Ambulance. The programme set out a standard approach to multi-agency working.</p> <p>We have worked in partnership with South East Coast Ambulance Service (SECAmb) to provide life-saving co-responding services from five on-call fire stations since November 2004.</p> <p>In October 2015, we extended our collaboration scheme with SECAmb to provide a response to life threatening calls where the Authority is able to respond more quickly than SECAmb. Firefighters or a fire engine are sent to the most critical (Red 1) calls received by SECAmb, when requested by them to attend.</p> <p>We are working with Kent Police on a large collaboration programme focused on operational demand reduction and improved service delivery. Also including joint training, and the sharing of vehicles and premises.</p>	<p>JESIP website</p> <p>SECAmb provide a regular performance update to KFRS on response to medical emergencies.</p> <p>Performance is reported to the relevant committee when appropriate.</p> <p>Performance is monitored internally on a monthly basis at Operations Branch Meeting.</p> <p>Authority meeting, February 2016. Update to Members on responding to medical emergencies (Item B1)</p> <p>Report to Authority on update to defibrillators February 2017 (Item B1, 4[b]).</p> <p>Reporting of performance to the Authority, December 2016, Item B4.</p> <p>December 2015, Item C3.</p>	
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How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities must engage with the Fire and Rescue Strategic Resilience Board in order to support discussions and decision-making in relation to national resilience.		
<p>Kent leads on the National Fire Chief's Council (NFCC) Fire and Rescue Marine Response Group (FRMR) and the NFCC Operations Co-ordination Group.</p> <p>The Authority is to sign a memorandum of understanding with the French fire and rescue service to train and exercise for marine response.</p>	<p>In October 2016, as part of the MIRG EU, the Authority participated in a large scale multinational marine exercise off the Belgian coast.</p> <p>Planning and Performance, April 2015 (Item B3)</p> <p>The political leads will continue to meet annually to review the agreement and report developments.</p>	<p>As part of the MIRG EU, the Authority has entered into an agreement with counterparts in France, Holland and Belgium for an agreed response and procedures to incidents in the English Channel.</p> <p>Update on multi-national exercise undertaken in October 2016 by the MIRG EU. Planning and Performance Committee, November 2016, Item C6.</p>
How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities' risk assessments must include an analysis of any gaps between their existing capability and that needed to ensure national resilience.		
<p>The Authority is an active and leading member of the Kent Resilience Forum.</p> <p>In 2016, following the transfer of responsibilities for the fire and rescue service to the Home Office from the Department for Communities and Local Government, the Home Office has taken the opportunity to undertake a thorough review of national resilience capability. The outcome of this review means that the Authority will continue to receive funding for 2017/18 with some changes to the way in which mass decontamination is delivered.</p> <p>The Authority has reviewed and taken into consideration the findings of the JESIP review.</p>	<p>Kent Resilience Forum</p> <p>Kent Community Risk Register</p> <p>Issues regarding this are reported to Members via the Planning and Performance Committee but it should be recognised due to the sensitive nature of this area, limited information is available in the public domain.</p> <p>HMIC published a tri-service review of Joint Emergency Services Interoperability Principles (JESIP), April 2016,</p> <p>JESIP website</p>	

How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: As part of their analysis, fire and rescue authorities must highlight to the Department for Communities and Local Government (DCLG), or the Fire and Rescue Strategic Resilience Board, any capability gaps that they believe cannot be met even when taking into account mutual aid arrangements, pooling and reconfiguration of resources and collective action.		
As above.	As above.	As above.
How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities must work collectively, through the Fire and Rescue Strategic Resilience Board, to agree with the DCLG whether and/or how to address any capability gaps identified through the gap analysis.		
As above.	As above.	As above.
How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: In order to meet the requirements of this Framework, fire and rescue authorities must work in partnership with their communities and a wide range of partners locally and nationally.		
<p>The Authority is an active and leading member in the Kent Resilience Forum Resilient Community Sub Group.</p> <p>The Authority has been central to the development of over 134 flood wardens in Kent and Medway.</p> <p>We work closely with Parish and Town Councils to improve communication on key issues, such as identifying vulnerable people in rural areas.</p> <p>We work with the Kent Association of Parish Councils to provide support and develop training events for their members.</p> <p>We have been working with local Parish and Town Councils across Kent, giving them the first option to buy our former fire stations, at a price that is right for the taxpayer.</p>	<p>Kent Resilience Team annual report 2015/16. This will be published in the coming months, but a copy is available on request.</p>	<p>Chief Executive attends annual meeting of Kent Association of Local Councils to receive feedback and discuss future plans. Regular liaison meetings with Kent Association of Parish Councils.</p> <p>A total of 95 compliments were received in 2016/17, compared to 112 in the previous year. There were 27 complaints, of which 16 were founded. The total for the previous year was 21.</p>

<p>We are working on a number of projects at a regional and national level. These projects include resilience and interoperability, as well as improving efficiency through joint procurement for example.</p> <p>The Authority has established Primary Authority Partnerships with three Kent and Medway based businesses. This allows the businesses to have a consistent approach to fire safety regulation for all their properties in the UK. There is now an opportunity for this to grow in the coming year as several organisations have expressed an interest in establishing partnerships</p> <p>The Authority is now preparing to incorporate the guidance within the Enterprise Act 2016 which will be introduced in October 2017. This Act will allow for a greater range and variety of partnerships, the opportunities for which the Authority will consider on a case-by-case basis.</p> <p>The Authority works closely with its local authority partners to develop the 'Better Business for All' initiative in Kent and Medway. The initiative brings businesses and regulators together in order to reduce the regulatory burden for businesses.</p>	<p>Report on the Primary Authority Partnership. Planning and Performance Committee, May 2016, Item C2.</p> <p>Report on the Primary Authority Partnership. Planning and Performance Committee, November 2014, Item C7.</p>	<p>An event was held at the Road Safety Experience centre in February 2017, which aimed to establish better fire safety communication with minority groups regarding fire safety both in businesses and the home.</p> <p>The Authority has worked closely with a number of its local authority partners to develop the 'Better Business for All' initiative in Kent and Medway. The initiative brings businesses and regulators together in order to reduce the regulatory burden for businesses.</p> <p>The Authority regularly holds events with partners under the "Better Business for All" initiative.</p>
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How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
<p>Operational Assurance Requirements: Each fire and rescue authority’s Integrated Risk Management Plan (Safety and Wellbeing Plan) must:</p> <ul style="list-style-type: none"> • be easily accessible and publicly available; • reflect effective consultation throughout its development and at all review stages with the community, its workforce and representative bodies, and partners; • cover at least a three-year time-span and be reviewed and revised as often as it is necessary to ensure that the authority concerned is able to deliver the requirements set out in this Framework; • reflect up to date risk analyses and the evaluation of service delivery outcomes. 		
<p>We publish a Safety and Wellbeing Plan including a glossary and technical appendices supporting the plan.</p> <p>This is published on the website and is promoted on social media. Accessibility and readability are monitored.</p> <p>We consult widely with representative bodies, workforce, the community and partners.</p> <p>The Safety and Wellbeing Plan is approved by Members before it is published for consultation. The results of the consultation are reported to the Authority, and not implemented until Members have approved recommendations.</p> <p>Each Safety and Wellbeing Plan looks forwards as far as can be reasonably foreseen. The current plan focuses on the period 2016-18.</p> <p>We have a mature risk assessment process which draws in data from a variety of internal databases and external sources.</p> <p>Service delivery outcomes are monitored on a routine basis.</p>	<p>Safety and Wellbeing Plan 2016-18</p> <p>Technical Appendices to the Safety and Wellbeing Plan</p> <p>Safety and Wellbeing Plan - Consultation report – November 2015</p> <p>Safety and Wellbeing Plan – Outcomes of the consultation. Authority meeting, February 2016, Item B1.</p> <p>Corporate Plan 2017/18</p>	<p>Results of the Safety and Wellbeing Plan consultation. Authority meeting, February 2016, Item B1.</p> <p>Responses to the Safety and Wellbeing Plan 2016-18 consultation up by 88% compared to the previous Plan Oversight and approval from the Members of the Authority.</p>

How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: The fire and rescue authority must hold their Chief Fire Officer/Chief Executive to account for the delivery of the fire and rescue service.		
Please refer to the annual Governance Assurance Statement.		
How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities must have arrangements in place to ensure that their decisions are open to scrutiny.		
Please refer to the Annual Governance Assurance Statement.		
How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
Operational Assurance Requirements: Fire and rescue authorities must make their communities aware of how they can access data and information on their performance.		
<p>We have published a Transparency Policy.</p> <p>We have published a Freedom of Information Policy and guidance on the website.</p> <p>We report our customers' feedback to Members.</p> <p>We have a "Community Right to Challenge" policy.</p>	<p>Transparency Policy</p> <p>Freedom of Information Policy</p> <p>Policy available on request</p>	<p>Transparency reports of all transactions over £250 made available monthly on the website.</p> <p>The Authority publishes on its website all required elements of the Government's transparency agenda.</p> <p>In 2016/17, 293 Freedom of Information requests were received and answered. This compares to 307 in 2015/16. For this period, 99.7% of Freedom of Information requests were responded to within 20 days.</p> <p>A total of 95 compliments were received in 2016/17, compared to 112 in the previous year. There were 27 complaints, of which 16 were founded. The total for the previous year was 21.</p>

<p>In 2017 we introduced our “Customer Promise”, setting out what the public are entitled to expect from us and what we expect from our staff.</p>	<p>Publication of performance information on the Authority’s website</p> <p>The Authority’s “Publication Scheme 2014 to 2019”</p> <p>Link to the Customer Promise</p> <p>Report approving the Corporate Customer Plan. Authority meeting, February 2017, Item B4).</p>	<p>“Frequently asked questions” section is available on the Authority’s website.</p> <p>Authority approval of the previous year’s Annual Governance Statement 2015/16.</p>
How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
<p>Operational Assurance Requirements: Fire and rescue authorities must provide assurance on financial, governance and operational matters and show how they have had due regard to the expectations set out in their Integrated Risk Management Plan (Safety and Wellbeing Plan) and the requirements included in this Framework. To provide assurance, fire and rescue authorities must publish an annual Statement of Assurance.</p>		
	<p>The oversight and scrutiny of decision-making provided by the Authority’s Members.</p>	<p>Publication of the Governance Assurance Statement.</p> <p>Summary of internal audit report 2016/17. To be presented at Authority meeting, July 2017.</p> <p>Summary of internal audit annual report 2015-16. General Purposes Committee, July 2016, Item B2.</p> <p>Fire and Rescue Services Equality Framework, 2017. Authority re-accredited as “Excellent”.</p> <p>CFOA and LGA Fire Peer Challenge Report, 2014.</p>

How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
<p>Operational Assurance Requirements: In addition... fire and rescue authorities must work collectively, and with the Fire and Rescue Strategic Resilience Board, to provide assurance to Government, that:</p> <ul style="list-style-type: none"> • risks are assessed, plans are in place and any gaps between existing capability and that needed to ensure national resilience are identified; • existing specialist national resilience capabilities are fit-for-purpose and resilient; • any new capabilities that fire and rescue authorities are commissioned to deliver by Government are procured, maintained and managed in the most cost-effective manner that delivers value for money whilst ensuring capabilities are fit-for-purpose and resilient. 		
<p>The Authority works with partners in the South East and nationally on a number of projects to support national resilience.</p> <p>Recent examples include the marauding terrorist firearms attack (MTFA) response capability that is maintained with partner agencies. Furthermore, in recognition of the current terrorist threat, the Authority's MTFA capability is available regionally and nationally, as required.</p> <p>In addition the Authority provides Flooding Tactical Advisors as well as having enhanced logistical support (ELS) and high volume pump (HVP) capabilities.</p> <p>In 2016, following the transfer of responsibilities for the fire and rescue service to the Home Office from the Department for Communities and Local Government, the Home Office has taken the opportunity to undertake a thorough review of national resilience capability. The outcome of this review means that the Authority will continue to receive funding for 2017/18 with some changes to the way in which mass decontamination is delivered.</p> <p>The Authority has reviewed and taken into consideration the findings of the JESIP review.</p>	<p>Issues regarding this are reported to Members via the Planning and Performance Committee but it should be recognised that, due to the sensitive nature of this area, limited information is available in the public domain.</p>	<p>HMIC published a tri-service review of Joint Emergency Services Interoperability Principles (JESIP), April 2016,</p>

How we meet these requirements	Where can you find governance in action	Where do we get assurance from?
<p>Each Fire and Rescue Authority must:</p> <ul style="list-style-type: none"> • have a process of fitness assessment and development to ensure that operational personnel are enabled to maintain the standards of personal fitness required in order to perform their role safely; • ensure that no individual will automatically face dismissal if they fall below the standards required and cannot be deployed operationally; • ensure that all operational personnel will be provided with support to maintain their levels of fitness for the duration of their career; • consider, where operational personnel have fallen below the fitness standards required, whether an individual is able to continue on full operational duties or should be stood down, taking into account the advice provided by the Authority’s occupational health provider. In making this decision, the safety and well-being of the individual will be the key issue; • commit to providing a minimum of six months of development and support to enable individuals who have fallen below the required fitness standards to regain the necessary levels of fitness; • refer an individual to occupational health where underlying medical reasons are identified that restrict/prevent someone from achieving the necessary fitness and provide the necessary support to that individual to facilitate their return to operational duties; and • fully explore opportunities to enable the individual to remain in employment, including through reasonable adjustment and redeployment in role, where it appears the medical condition does not allow a return to operational duties. 		
<p>The Authority’s Wellbeing Procedure sets out the fitness standards required and the process by which this is monitored and tested for operational personnel.</p> <p>The Capability Procedure provides for a process of adjustment and redeployment where an individual cannot maintain the required fitness level.</p> <p>Where personnel are unable to regain their fitness, alternative employment is found for them. In cases where individuals cannot be redeployed there is discretion within the existing procedures for consideration of early retirement on an individual case by case basis.</p>	<p>Health and Wellbeing Procedure – available on request.</p> <p>There is a “Wellbeing Zone” on the Authority’s intranet site. This contains numerous resources to help staff manage their mental and physical wellbeing, and maintain fitness.</p> <p>Capability Procedure – available on request.</p>	<p>All operational staff are subject to testing annually and support given to anyone falling below the required fitness level.</p> <p>Monitoring of occupational health activity.</p> <p>A number of individuals have already been redeployed under this policy.</p>

<p>All watches on whole-time stations have trained Physical Training Instructors on the establishment, coordinated by a full time fitness advisor.</p> <p>The working day is structured to allow one hour per day fitness training for all operational personnel. Gyms are provided on all whole-time stations. Part time stations are provided with gyms or fitness aids.</p> <p>Any personnel with underlying medical issues are referred to occupational health for assessment and support.</p> <p>In addition to physical health, the Authority has a strong focus on actively supporting the mental well-being of staff. The Authority has signed up to the Government's Workplace Wellbeing Charter and is also engaging with Public Health UK to promote their initiatives amongst our staff.</p> <p>Furthermore, the Authority has signed the 'Blue Light Time to Change' pledge with Mind, a mental health charity, to demonstrate its commitment to challenging mental health stigma and promote positive wellbeing within the organisation.</p> <p>Finally, the Authority is also a member of Big White Wall, which provides a range of safe and anonymous support for those suffering from anxiety and depression. Through the Authority's membership, staff can access the services offered by Big White Wall free of charge.</p>	<p>Detailed reporting of corporate health performance. General Purposes Committee, April 2017, Item C2.</p> <p>Wellbeing Champions are staff volunteers who provide a confidential service to support the physical and mental wellbeing of staff. The Wellbeing Champions offer confidential support by discussing options and signposting to available resources.</p>	<p>Positive feedback from staff on the active steps taken by the Authority to remove stigma around mental health and to provide an environment supportive of the mental wellbeing of staff.</p>
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Joint Statement by the Chairman of the Authority and Chief Executive

We acknowledge our responsibility for ensuring the proper governance of the Authority's affairs and will ensure that sufficient resources are dedicated to ensuring that key controls and processes are implemented, maintained and monitored for effectiveness. We confirm that this Statement represents an honest and full assessment of the levels of assurance we have obtained following the assessment process as described above.

Nick Chard

Chairman, Kent and Medway Fire and Rescue Authority

Date: 18 July 2017

Ann Millington

Chief Executive

Summary of Assurance Levels Available

ASSURANCE LEVEL	DEFINITION of EFFECTIVENESS LEVELS	DEFINITION of COMPLIANCE LEVELS
High	<p>Control has been audited in the last year and all recommendations have been implemented.</p> <p>Control has been reviewed, updated and approved (or introduced from new) in the last year.</p> <p>The control has been fully documented and circulated to all involved in the process and is available on the intranet in its current format.</p> <p>Control processes are appropriate for the risks involved with full segregation of duties.</p>	<p>There have been no significant breaches of the control or problems arising from its operation in the last two years.</p> <p>Control processes are undertaken and validated electronically or automatically as part of an IT-based system (e.g. Agresso) or there is a thorough manual validation process in place.</p> <p>Those operating the system are well-trained and experienced and regularly challenge inconsistencies and errors in the system.</p>
Substantial	<p>Control has been audited within the last two years but not all recommendations have been implemented.</p> <p>Control has not been reviewed, updated and approved (or introduced from new) in the last two years but is within its stated review period.</p> <p>The control is fully documented and has been circulated to all involved in the process, but is not available on the intranet.</p> <p>Control processes are appropriate for the risks involved with partial segregation of duties.</p>	<p>There have been no significant breaches of the control or problems arising from its operation in the last year.</p> <p>Control processes are partially undertaken and validated electronically or automatically as part of an IT-based system (e.g. Agresso), backed up by a manual validation on all transactions.</p> <p>Those operating the system are trained and occasionally challenge inconsistencies and errors in the system.</p>

ASSURANCE LEVEL	DEFINITION of EFFECTIVENESS LEVELS	DEFINITION of COMPLIANCE LEVELS
Limited	<p>Control was last audited more than two years ago and all recommendations have been implemented.</p> <p>Control is up to a year overdue for review but will be completed within the next year.</p> <p>The control is documented and available on the intranet but has not been issued to those involved in the process.</p> <p>Control processes are long-winded and disproportionate for the risks involved and undertaken by individuals.</p>	<p>There have been a few significant breaches of the control or problems arising from its operation in the last two years.</p> <p>Control processes are undertaken and validated manually but with partial manual validation.</p> <p>Staff operating the system have limited training and experience and rarely challenge inconsistencies and errors in the system.</p>
None	<p>Control was last audited more than three years ago but not all recommendations have been implemented, or has not been audited within the last three years.</p> <p>Control is more than a year overdue for review.</p> <p>The control is not documented or has not been circulated or made available to all involved in the process.</p> <p>Control processes are inappropriate for the risks involved and undertaken by non-specialist or remote personnel.</p>	<p>There have been a number of breaches of the control or issues arising from its operation in the last two years.</p> <p>Control processes are undertaken manually but there is no validation process.</p> <p>Those operating the system have had no training and are inexperienced and never challenge inconsistencies and errors in the system.</p>

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