

# ANNUAL GOVERNANCE STATEMENT 2017/18

## Introduction

The 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 to 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 (known as the Operational Assurance Statement), and this is incorporated within this Statement. Section 21 of the Fire and Rescue Services Act 2004 requires the Secretary of State to prepare a Fire and Rescue National Framework which sets priorities and objectives for fire and rescue authorities (FRAs) in England in connection with the discharge of their functions. Fire and Rescue Authorities (FRAs) have a statutory duty to have regard to the framework. The Operational Assurance Statement is the assessment of the position of the Authority against the current framework.

The framework was last updated in 2012 and the Home Secretary has decided that changes are now needed which warrant a full revision to the framework in order to embed the fire reform programme. The programme includes the creation of a new inspectorate for FRAs and establishment of the National Fire Chiefs Council. The Framework also reflects the provisions in the Policing and Crime Act 2017 on emergency services collaboration and changes to FRA governance. As a result, from 27 December 2017 to 14 February 2018, the Home Office held a public consultation on the Fire and Rescue National Framework (England). As of April 2018, the feedback is still being analysed and, until the new framework is agreed and published, the current framework remains valid. It is for this reason that the Operational Assurance Statement within this document has been written according to the 19 requirements of the current (2012 version) Fire and Rescue National Framework.

The Operational Assurance Statement sets out the results of that assessment for 2017/18 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 the previous year's assurance statement 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 2018 and have remained in operation up to the date of approval of the 2017/18 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 Fire and Rescue Authority has overall responsibility for ensuring effective governance arrangements are in place but has previously delegated responsibility for overseeing these arrangements to its General Purposes Committee. However, since the publication of last year's Annual Governance Statement, the Authority's committee structure has changed and so with effect from June 2017 all business is now directed through meetings of the Authority, now held five times a year. 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 the Authority. The Director of Finance and Corporate Services is responsible for ensuring that effective financial controls are in place, the provision of an effective internal audit function, and for reviewing the overall effectiveness of the Governance Framework.

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.

### **What this Statement Tells You**

This Statement is in two parts and provides, firstly, a summarised account, based on a self-assessment, of how our management arrangements meet the principles of good governance set out in our Code of Corporate Governance; and secondly, 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. Hard 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. We will also accept requests made via social media.

## The Assurance Process – How We Provide and Use Assurance Information

IDENTIFY	ASSESS	REVIEW	ACT
<b>What do we want assurance on?</b>	<b>How is that assurance provided?</b>	<b>How is that assurance reviewed and validated?</b>	<b>What do we do with the information received?</b>
<ul style="list-style-type: none"> <li>• That we comply with our Code of Governance.</li> <li>• That we deliver the services, and objectives set out in our Customer &amp; Corporate Plan.</li> <li>• That we take account of the views of stakeholders.</li> <li>• That we use and account for public money properly.</li> <li>• That the risks we face are effectively managed.</li> <li>• That we comply with legislation, regulation and statutory guidance.</li> <li>• That we get the best out of our Members and staff.</li> <li>• That we collaborate effectively where it improves services.</li> <li>• That we demonstrate the highest values and standards of ethical behaviour.</li> </ul>	<ul style="list-style-type: none"> <li>• The External Auditor’s Reports.</li> <li>• The Internal Auditor’s Reports.</li> <li>• Feedback received from our customers and partners.</li> <li>• Senior managers’ self-assessment of key controls, including compliance with the CIPFA statement on “The Role of the Chief Financial Officer in Local Government”.</li> <li>• Operational Assurance Processes.</li> <li>• Performance and risk monitoring and reporting.</li> <li>• Staff appraisal and performance management.</li> <li>• Comparison with our peers.</li> <li>• Awards and accreditations received.</li> </ul>	<ul style="list-style-type: none"> <li>• Regular performance reports have been presented to Members via the Authority</li> <li>• Regular reports reviewed and monitored by Corporate Management Board and Corporate Development Steering Group.</li> <li>• Regular monitoring of key performance information.</li> <li>• Publishing of key performance information and data for public access and scrutiny.</li> <li>• Regular Reports and Information to Government Departments.</li> <li>• External and Internal Audit validation.</li> <li>• Public scrutiny and challenge of key performance and financial information published on our website.</li> </ul>	<ul style="list-style-type: none"> <li>• Communicate our results to the public.</li> <li>• Consider the findings, learn from the information received, and respond accordingly.</li> <li>• Update our plans to deliver improvements.</li> <li>• Revisit our key controls and make improvements where required.</li> <li>• Provide additional training and support where needed.</li> <li>• Monitor the achievement of the changes we make and the direction of travel.</li> <li>• Develop a specific action plan to deliver any governance improvements required.</li> <li>• Learn from experiences and continually look to improve.</li> </ul>

## 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 a three tier RAG (red, amber, green) rating. The criteria that inform this rating are drawn from the definitions in the assurance levels used by Internal Audit. These are shown on pages 43 and 44 of this Statement.

The 2017/18 review was undertaken between March and April 2018 based on the information available and has been informed by the following:

- The views of the External Auditor, in the Findings Report and the Annual Letter, presented to the July 2017 and October 2017 Authority Meetings
- The views of the Head of Internal Audit contained in the Auditor's 2016/17 Annual Report, and information provided throughout the 2017/18 financial year on audits undertaken in that year
- The results of the self-assessments undertaken by senior officers responsible for functional areas of the Service and validated by the Corporate Management Board, 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 2017/18
- The Risk Management Process and an internal review of the Corporate Risk Register alongside views of Members on the latest Risk Register presented to the April 2018 Authority meeting
- 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 (Operational Assurance Statement) the level of assurance for the 2017/18 financial year has been assessed as **Green** 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 pages 6 to 11 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. NB: \*denotes a new document

## Overall Governance Framework

### 1. Financial Management Framework

Owner: Asst Dir, Finance

Financial Management Order  
 Financial Planning Order  
 \*Risk Finance and Insurance Order  
 Exchequer Services Order  
 Procurement Order  
 Risk Management Order  
 Anti-Fraud and Corruption Order  
 \*Anti-Money Laundering Policy  
 \*Anti-Bribery Service Order  
 Disposal of Assets Procedures  
 Premises Sharing Order and Guidance

### 2. Service Delivery Framework

Owner: Director, Operations

Incident Command and Management Order  
 Safeguarding Service Order  
 Automatic Fire Alarm Policy  
 Transport Order  
 Health and Safety Policy Statement of Intent  
 Emergency Planning and Contingencies Policy  
 Co-responders and IECRS Policy  
 Enhanced Availability Service Order

### 3. Democratic Framework

Owner: Clerk to the Authority

Authority Standing Orders  
 Members' Code of Conduct  
 Scheme of Delegation to Officers  
 Convention on Member/Officer Relations

### 4. Information Management Framework

Owner: Asst Dir, Policy & Performance

Information Technology Policy  
 Data Quality Policy  
 Data Quality Guidance  
 Freedom of Information Policy  
 Publication and Retention Scheme  
 Privacy Notices

### 5. Performance Management framework

Owner: Asst Dir, Policy & Performance

Feedback and Allegations Order  
 Transparency Service Order  
 Policy Handling Order  
 Community Right to Challenge Policy

### 6. Human Resources Framework

Owner: Asst Dir, Human Resources

Code of Conduct for Employees  
 \*Pay Policy  
 Schemes of Conditions of Service  
 \*Appraisals (Performance Mgt Framework)  
 Whistle-Blowing Policy  
 Pensions Policy  
 Pension Board Terms of Reference

## Results of our Self-Assessment for 2017/18

### 1. Financial Management Framework

Our Assessment for the 2017/18 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. KFRS was named in the Public Sector Audit Appointments Report in December 2017, as one of the 10% of authorities who published their 2016/17 accounts by 31 July 2017, having received an unqualified opinion on the accounts. A strong anti-fraud culture ensured that no issues were reported during year. The Medium Term Financial Plan is robust with reasonable assumptions made in the absence of firm information.

The internal auditor has undertaken nine separate reviews during the year. Five of these have been completed so far; Vehicle Maintenance and Disposal and Enhanced Availability received a rating of substantial. Strategic Planning and Delivery and Exercise Planning and Learning received an Adequate rating and the Safeguarding audit received a substantial rating overall but a limited rating for out of hours. Furthermore, action plans are being put in place to address all of the auditors' recommendations.

There has been a wide ranging review of Service Orders in the framework. A strong and well publicised financial management control framework exists with documentation within its review dates and which 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 2018/19	Sources of Assurance
<p>During the year, routine updates were made to the following documents:</p> <ul style="list-style-type: none"> <li>• Financial Management Order</li> <li>• Financial Planning Order</li> <li>• Exchequer Services Order</li> <li>• Anti-fraud and Corruption Order</li> <li>• Anti-Money Laundering Policy</li> <li>• Anti-Bribery Service Order</li> </ul>	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> <li>• Procurement Regulations (review underway)</li> <li>• Disposal of Assets Procedures (under review)</li> <li>• Premises Sharing Order (under review)</li> <li>• Risk Management Order</li> </ul>	<p style="text-align: center;">External Audit Findings Report 2016/17</p> <p style="text-align: center;">Internal Audit Annual Report 2016/17 and in year reports on 2017/1 audits</p> <p style="text-align: center;">Annual Accounts 2017/18</p> <p style="text-align: center;">Budget Outturn Report 2017/18</p> <p style="text-align: center;"><a href="#">Budget and Medium Term Financial plan 2018/19 to 2021/22</a></p>

## 2. Service Delivery Framework

### Our Assessment for the 2017/18 financial year:

This year we have sought to further improve and refine our arrangements that were introduced to protect children and vulnerable adults, reflecting the increase in activities we undertake in improving community safety and wellbeing. Safeguarding training has been provided to all staff using an online e-learning package. Staff within the Authority's Technical Fire Safety and Community Safety Teams also attended a specialist three-day 'Protecting Vulnerable People' course organised by Kent Police. Specific training has also been provided to the Corporate Management Board and duty officers for out-of-hours advice. We believe these measures will continue to improve both our processes and improve the services we provide and safeguard any vulnerable individuals we come into contact with. The effectiveness of our approach in this area was reflected in the 'Substantial' rating given by internal audit of our safeguarding processes. Fortunately, KFRS was unaffected by the WannaCry ransomware attack of May 2017, but, in light of this, our Business Continuity procedures have also been reviewed and updated. Furthermore, a large-scale, unannounced exercise was held at Service headquarters in November 2017 which simulated a complete loss of Service IT systems. This allowed us to test our procedures and response to such an event, ensure a cohesive response whilst all the while being able to maintain our front line emergency response and Service critical back office functions.

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. There has been a consistently higher level of fire activity over the past three years, which can be attributed to outdoor fires as a result of prolonged dry weather. As a result, performance against the fire indicators was higher than target. The exception to this however was accidental dwelling fires, which are at the lowest levels we have ever seen. Our response time to life-threatening incidents has not changed significantly compared to previous years, although they remain slightly below the levels we would like to achieve. Road traffic collisions and the number of people who die or suffer life-changing injuries as a result, is a priority area for us and our partners. 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 robust arrangements in place to monitor the health and sickness levels of staff. Reportable injuries remain low this year and well below the target. We have put in place new arrangements for monitoring and reviewing the quality of our operational response through a new Operational Assurance (OA) programme, supported by a dedicated OA Team. We aim to identify any issues as well as best practice and implement any training, procedural and command improvements as necessary. This includes arrangements to ensure staff and customers are treated fairly and equally and in 2017 we were re-accredited as 'Excellent' against the Fire Services Equality Framework.

Changes Made During the Year	Changes planned for 2018/19	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <ul style="list-style-type: none"> <li>• Safeguarding Service Order</li> <li>• Incident Command and Management Order</li> <li>• Automatic Fire Alarm Policy</li> <li>• Co-responders and IECRs Policy</li> <li>• Enhanced Availability Service Order</li> </ul>	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> <li>• Emergency Planning and Contingencies Policy</li> <li>• Automatic Fire Alarm Policy</li> <li>• Annual Review of Health and Safety Policy Statement of Intent (HSF 1)</li> <li>• Driving at Work Service Order (under review)</li> </ul>	<p><a href="#">Customer and Corporate Plan, KMFRA, April 2018, Item Number B1</a></p> <p>Performance Management updates to each KMFRA meeting</p> <p>Internal Audit Report 2016/17</p> <p><a href="#">Our Customer Promise</a></p>

### 3. Democratic Framework

Our Assessment for the 2017/18 financial year:

The existing democratic framework has continued to function well and provides a strong framework for Members and Officers working together. The key documents are reviewed annually to incorporate any changes or updates as necessary.

Two key changes took place over the past year in relation to the Democratic Framework. The first of these was the move towards a single Authority Structure with it the removal of the General Purposes Committee and the Planning and Performance Committee. This reduced the number of formal Member meetings from ten per year to five (excluding ad hoc meetings).

The second was the revised governance arrangements arising from the Policing and Crime Act 2017, which subject to secondary legislation, would give an FRA the power to appoint its local Police and Crime Commissioner (PCC) to sit as a voting Member on its Authority with full voting rights. Following a request from the PCC in Kent, in June 2017 the Authority agreed in principle to appoint the PCC as its 26<sup>th</sup> Member as soon as the Government amended the Authority's Combination Scheme Order (the Statutory Instrument which first established the Authority in 1997) to allow it to do so. In the meantime, the PCC was invited to attend and participate in all meetings of the Authority on an informal non-voting basis.

The Independent Member's report on Member behaviour reported a nil return as no complaints had been received. A Members' handbook is issued to all appointed 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; copies of reports and minutes recording decisions are published on our web site.

Changes Made During the Year	Changes planned for 2018/19	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <ul style="list-style-type: none"> <li>• Committee Terms of Reference to delete P&amp;P and A&amp;G meetings</li> <li>• Scheme of Delegation to Officers</li> </ul>	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> <li>• Authority Standing Orders</li> <li>• Convention on Member/Officer Relations</li> </ul>	<p style="text-align: center;"><a href="#">Authority Constitutional Documents</a></p> <p style="text-align: center;"><a href="#">Review of Members' Allowances Scheme (Item Number: B4)</a></p> <p style="text-align: center;"><a href="#">Request by Kent Police PCC to be appointed as a Member of the Authority (Item Number: B1)</a></p> <p style="text-align: center;"><a href="#">Review of Governance Arrangements (Item Number B2)</a></p>

## 4. Information Management Framework

### Our Assessment for the 2017/18 financial year:

Information security remains a key issue for the Authority and an increase in collaborative working with other public authorities, as well as an increase in cyber-attacks such as ransomware and denial of access on public agencies in the UK has heightened the potential risks. All staff have undertaken compulsory data protection and security training and additional controls have been introduced to limit the risk of unwanted exposure. We continue to remind staff of the dangers and the consequences of breaches of data protection policies. We operate high levels of protection and security and regularly review and test these.

We have also been reviewing how we generate, process and destroy data in the light of the new EU-wide General Data Protection Regulation (GDPR) which will come into effect on 25 May 2018. GDPR is Europe's new framework for data protection laws and has been designed to give more rights and a greater level of protection to individuals, and to harmonise data protection laws across Europe. To ensure compliance with GDPR, the Service is amending all of the relevant policy framework documentation. It will also commission a gap analysis to assess what additional work needs to be completed to ensure full compliance with GDPR. Where this cannot be put in place by 25 May, a clear statement will be made to the public on when the Service will be fully compliant. The obligations imposed by GDPR for enhanced data management will require a continued resource commitment from the Service. Everyone will receive training about GDPR, the principles of data protection and freedom of information regulations. GDPR training will also form part of the induction package for people joining the Service. 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 an increase in Freedom of Information Act requests despite an increase in the information available on our website. On average we respond to such requests within six days which is well within the statutory timeframe and we had no late responses. 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 you how we look after any personal data we use in the course of delivering services.

Changes Made During the Year	Changes planned for 2018/19	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <p>Information Technology Regulations and Guidance (new Service Order written and ready to be implemented once a new password policy is deployed)</p>	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> <li>• Data Protection Policy</li> <li>• Data Quality Policy</li> <li>• Data Quality Guidance</li> <li>• Replacement of Data Protection Policy with Data Protection Act 2018 and associated processes</li> </ul>	<p>External IT Security report*</p> <p style="text-align: center;"><a href="#">Retention and Publication Scheme</a></p> <p style="text-align: center;"><a href="#">Freedom of Information Policy</a></p> <p style="text-align: center;"><a href="#">Privacy Notice</a></p> <p><small>*This report is excluded from release under S24 of the Freedom of Information Act</small></p>

## 5. Performance Management Framework

### Our Assessment for the 2017/18 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 web site and regularly publish updates of progress against these targets.

In October 2017 we published our Safety and Wellbeing Plan for 2018. This plan outlined the work of Kent Fire and Rescue Service and the aims for the coming year. Following consultation, the priorities proposed in the Safety and Wellbeing Plan were further refined and fed into the development of the Customer and Corporate Plan 2018-2022. This was then approved by KMFRA in April 2018. The document has been named the Customer and Corporate Plan in line with the Authority's focus on the customer. The plan itself is structured in a customer-facing way around safety at home, safety on the roads, community resilience, business safety and operations and underpinning the plan is a set of eight strategies.

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 you to contact us about our services and performance and measures to ensure these are responded to promptly. In 2017/18 we responded to 308 freedom of information requests (a slight increase on the 293 we dealt with in 2016/17). Our average response time for freedom of information requests was six days and all responses were completed within the required 20 day timeframe.

We also regularly review and report on complaints and other feedback received, although the number complaints are few (we only received 6 founded complaints in 2017/18) we take each one seriously and will always investigate them. Pleasingly we receive a large amount of positive feedback, in fact the number of compliments received increased from 95 for 2016/17 to 118 in 2017/18.

Changes Made During the Year	Changes planned for 2018/19	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <ul style="list-style-type: none"> <li>• Community Right to Challenge Service Order</li> <li>• Transparency Service Order</li> <li>• Policy Handling Service Order</li> </ul>	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> <li>• Feedback and Allegations Service Order</li> <li>• Community Right to Challenge Service Order</li> <li>• The format of policy documentation as a whole</li> </ul>	<p style="text-align: center;"><a href="#">Customer and Corporate Plan. KMFRA, April 2018, Item Number B1</a></p> <p style="text-align: center;"><a href="#">Safety and Wellbeing Plan 2018</a></p> <p style="text-align: center;"><a href="#">Financial Reports</a></p> <p style="text-align: center;"><a href="#">Procurement Reports</a></p> <p style="text-align: center;">Performance Management updates to each KMFRA meeting</p>

## 6. Human Resources Framework

### Our Assessment for the 2017/18 financial year:

It is the Authority's aim to provide an environment where staff feel comfortable with their own identity, are treated with dignity and respect, and that recognises the value that difference can bring to the organisation. A priority is to support staff with their physical and mental health and wellbeing. We are committed to the belief that a healthy working environment aids the health and wellbeing of all staff. We have spent significant time in developing comprehensive psychological support packages for all staff. This includes an external service that provides a variety of different support options that can be bespoke to an individual's needs. We have focused on raising the awareness of mental health. To support this we have introduced eLearning packages and promoted individuals stories through case. The Authority also has an active programme of staff engagement, which includes: regular visits to fire stations by senior managers, HR focus groups, and regular internal communications. We also have a network of Staff Forum Representatives who are able to canvass staff views and make them known to management, enabling open exchanges of views.

The sickness rate is now lower than before, having declined from 2.93% in 2016/17 to the current figure of 2.62% for 2017/18. Reportable accidents remain in single figures and fell from 11 in 2016/17 to five for 2017/18. 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 are encouraged to maintain their professional competence and seek development opportunities. To support this we have updated the appraisal process and introduced a new training programme. HR policies and procedures are well documented, and a number have been reviewed and updated over the past year. While our establishment continues to be predominately white male, in late 2017 we also recruited a new cohort of wholetime firefighters, with a second recruit course scheduled for late 2018. Our newest firefighters are also supported by 15 service support and control room apprentices. Combined with further recruitment of on-call firefighters, we are starting to make significant changes to our profile.

Following a peer review by a panel of service experts, we are proud to have retained our "excellent" status as an Equal Opportunities employer in 2017 under the Fire and Rescue Service Equality Framework, 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 2018/19	Sources of Assurance
<p>The following framework documents were updated during the year:</p> <ul style="list-style-type: none"> <li>• Code of Conduct for Employees</li> <li>• Pay Procedure</li> <li>• Performance Management Framework</li> <li>• Appraisals</li> <li>• Pensions Policy</li> </ul>	<p>During the coming year we plan to review the following documents:</p> <ul style="list-style-type: none"> <li>• Equality of Opportunity in Employment Policy</li> <li>• Evaluation of New Appraisal Process</li> <li>• Whistle Blowing Policy</li> <li>• Evaluation model for learning and development</li> </ul>	<p>"Excellent" status under the Fire and Rescue Service Equality Framework</p> <p style="text-align: center;">Feedback through staff forum representatives</p> <p style="text-align: center;"><a href="#">Customer and Corporate Plan. KMFRA, April 2018, Item Number B1</a></p>

## Operational Assurance Statement 2017/18

How we meet these requirements?	Where can you find governance in action?	Where do we get assurance from?
<p><b>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.</b></p>		
<p>We publish a <a href="#">Safety and Wellbeing Plan</a><sup>1</sup> (the current plan is 2018), 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 <a href="#">Customer and Corporate Plan 2018-22. KMFRA, April 2018, Item Number B1.</a></p> <p>We have a mature risk assessment process which draws in data from a variety of internal</p>	<p><a href="#">Safety and Wellbeing Plan 2018</a></p> <p><a href="#">Safety and Wellbeing Plan – Outcomes of the Consultation and Next Steps. KMFRA, February 2018 (Item No: B1)</a></p> <p><a href="#">Safety and Wellbeing Plan – Detailed Outcomes of Consultation. KMFRA, February 2018 (Appendix to Item B1)</a></p> <p><a href="#">Supporting Information to the Safety and Wellbeing Plan 2018</a></p> <p><a href="#">Customer and Corporate Plan 2018-22. KMFRA, April 2018, Item Number B1</a></p> <p><a href="#">Report seeking approval for the Customer and Corporate Plan. KMFRA April 2018 (Item B1)</a></p> <p><a href="#">Performance Update and Performance Outturn. KMFRA, April 2018, Item C1.</a></p>	<p>Publication of Customer and Corporate Plan</p> <p>Summary of internal audit report 2017/18. To be presented at Authority meeting, June 2018.</p>

<sup>1</sup> 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>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>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) was established in 2017 to ensure that information arising from any local or national incidents relevant to the work of KFRS (e.g. Coroners' reports, accident investigations undertaken by other FRs) can be centrally held, assessed 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><a href="#">Kent Community Risk Register</a></p> <p><a href="#">Kent Resilience Forum</a></p> <p><a href="#">"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.</a></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 subject to Freedom of Information Act limitations.</p> <p><a href="#">Operational Capability Review Project. Planning and Performance Committee, April 2015, Item C3.</a></p> <p><a href="#">Workforce Strategy</a></p>	<p><a href="#">Risk Update. KMFR, April 2018, Item C1 and Appendix 2.</a></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?
<b>Operational Assurance Requirements: Fire and rescue authorities must work with communities to identify and protect them from risk and to prevent incidents from occurring.</b>		
<p>We focus prevention work at those at highest risk.</p> <p>Following the tragic fire at Grenfell Tower in June 2017, we developed a co-ordinated activity to offer reassurance to local residents and ensure that high-rise residential buildings in Kent and Medway are as safe as possible.</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</p>	<p><a href="#">Community Safety Strategy. KMFR April 2018, Appendix 3 to Item No: B1</a></p> <p><a href="#">Operational Response Strategy 2018-2022. KMFR April 2018, Appendix 4 to Item No: B1</a></p> <p><a href="#">Community Safety Strategy. KMFR April 2018, Appendix 3 to Item No: B1</a></p> <p><a href="#">‘High-rise safety’ update on website</a></p> <p><a href="#">Home Safety section of website</a></p> <p><a href="#">Safety and Wellbeing Plan 2018</a></p> <p>Kent Resilience Team annual report for</p>	<p><a href="#">LPI 105 – Accidental fires in dwellings per 10,000 dwellings</a></p> <p><a href="#">LPI 134 – Number of fatalities and casualties as a result of accidental fires</a></p> <p><a href="#">LPI 136 – People killed or seriously injured in road traffic collisions</a></p> <p><a href="#">LPI 143 – Response times to life-threatening emergency incidents</a></p> <p><a href="#">LPI 100 – Total fire calls attended per 10,000 population</a></p> <p><a href="#">LPI 101 – Deliberate fire calls attended per 10,000 population</a></p> <p><a href="#">LPI 128 – Accidental fire calls attended per 10,000 population</a></p> <p>KMFR approval to make the KRT a permanent</p>

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, response and recovery from emergencies.

We are a key partner in the Kent Resilience Forum Resilient Community Sub-Group.

The Authority was central in the development of over 130 flood wardens in Kent and Medway.

We collect and analyse data about the incidents we attend, and work in partnership with local authorities to understand local needs.

The Authority is committed to community safety and helping people to live well and independently in their own homes. Over the last few years we have undertaken around 10,000 'home safety visits' (HSVs) per annum.

2016/17 will be published in May 2018. A copy will be made available on request.

[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 \(Item B1\).](#)

[Planning and Performance Committee, April 2017, KRT Exercise Programme for 2017/18, Item B1.](#)

Planning and Performance Committee, July 2015, KRT Update, Item C5

Planning and Performance Committee, November 2014, Update on the then newly formed KRT, Item B1.

[Operational Performance Update. KMFRA February 2018, Item C1.](#)

[Operational Performance Update. KMFRA December 2017, Item C1.](#)

team from 1 April 2017.

Although many other factors have also been involved, there is a good body of research available which shows that this work has helped to reduce the number of fires and the number of deaths and injuries resulting from accidental fires in the home.

In 2016 the Authority agreed to develop HSVs into 'Safe & Well visits'. Naturally, a Safe & Well visit will continue to focus on fire safety but now also aims to help address health issues such as the risk of falling, reducing excess winter deaths, helping people to quit smoking, mental health and living with dementia.

To achieve these aims we have increased the size of our home safety team, providing the team with appropriate training and developing firefighters to undertake Safe & Well visits. We estimate that these additional resources will allow us to undertake around 30,000 Safe & Well visits per annum.

In January 2018, KFRS launched the 'Show You Care' campaign. This is a new initiative which aims to help make the lives of people in our community who may live in isolation to feel valued, safer and less isolated.

We research behavior in fires in the home to tailor our community safety activities and improve the advice we give to people about staying safe.

We recognise the emotional impact of being involved in, or witnessing, an incident and, through our website, offer support for this.

In early 2018, KFRS launched the 'Safer Living' initiative which assists people with fire safety within specialised housing.

['Home Safety' section of website](#)

['Show You Care' section of website](#)

[The Authority's published findings of its human behavior research](#)

['Support after an incident' section of the website](#)

['Safer Living' section of KFRS website](#)

We are being called to fewer fires, partly as a result of this community safety work.

The fire and rescue service has a strong brand and reputation which gives us access into people's homes that other agencies often struggle to reach. Over the last couple of years the fire and rescue service has been approached nationally by Public Health England and the NHS under an initiative called 'Fire as a Health Asset'.

Environmental risk assessments are carried out by crews at incidents. Environmental considerations are built into tactical plans for high risk sites. In addition, environmental plans will be considered at any incident where it is deemed necessary. These consider both the risk from and the risk to the environment.

We keep up to date with new methods of building construction and the issues these could raise for us.

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.

We have introduced an updated Safeguarding Children and Vulnerable Adults Order.

All staff have undergone specific training in data security and in safeguarding vulnerable people.

We have developed operational procedures to deal with incidents that occur in places that could be sensitive environmentally.

We introduced a new environmental risk assessment and environmental tactical risk guidance.

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.

Details of environmental risks are recorded in Tactical Information Records (TIRs) which are held within the Premises Risk Management (PRM) system and available to operational crews.

[Community Safety Strategy. KMFRA April 2018, Appendix 3 to Item No: B1](#)

[Business Safety section of website](#)

Safeguarding Service Order

[Safeguarding Update. KMFRA, December 2017. Item No: C1](#)

We carefully monitor several key measures of environmental efficiency.

[Caring for the Environment Update. KMFRA, October 2017, Item No: C1](#)

[LPI 103 – Fires in non-domestic properties](#)

[LPI 145 – Unwanted calls to automatic fire alarms attended](#)

[LPI 703 – CO<sub>2</sub> emissions caused by our use of energy, fuel and water](#)

<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>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>In 2018, we developed an Engagement Strategy to keep our customers – both internal and external – informed about our work, plans and safety messages.</p>	<p><a href="#">The Workplace Wellbeing Charter website</a></p> <p><a href="#">The Blue Light Time to Change pledge</a></p> <p><a href="#">The Institute of Customer Service website</a></p> <p><a href="#">Engagement Strategy. KMFRA April 2018, Appendix 3 to Item No: B1</a></p>	
How we meet these requirements?	Where can you find governance in action?	Where do we get assurance from?
<p><b>Operational Assurance Requirements: Each fire and rescue authority's Integrated Risk Management Plan must:</b></p> <ul style="list-style-type: none"> <li><b>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;</b></li> <li><b>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.</b></li> </ul>		
<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 £18m of savings over the last five years, of which £1.2m were achieved in 2017/18. 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</p>	<p><a href="#">Medium term financial plan 2018/19 to 2021/22</a></p> <p><a href="#">Efficiency Plan. KMFRA April 2018, Appendix 1 to Item No: B1</a></p>	

quality and effective service can continue to be delivered.

Feedback is collected from service users and trends are identified where possible. The feedback shows that levels of complaints are extremely low.

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.

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.

Signed a memorandum of understanding with the Environment Agency. 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.

We have developed and published a new Community Safety strategy which covers our support for fire safety for businesses.

Post-ADF follow up visits carried out by Groups.

[Update on the future direction and approach of the Joint Kent Community Safety Team, Planning and Performance Committee, November 2016 \(Item B2\).](#)

[Detailed reporting of performance to KMFRA](#)

[LPI 103 – Fires in non-domestic properties](#)

[Community Safety Strategy. KMFRA April 2018, Appendix 3 to Item No: B1](#)

A total of 118 compliments were received in 2017/18, this compares to 95 in the previous year. There were 10 complaints, of which 6 were founded. The total for the previous year was 27, of which 16 were founded.

In 2017/18, we received and answered 308 Freedom of Information requests. This compares to 293 in 2016/17.

This scheme was highlighted as one of the themes for the 2017 Equality Framework.

The 2016 Internal Audit of the Authority’s Operational Risk Management awarded a score of “Substantial” for the general management of risk and information.

[Summary of internal audit annual report 2015/16. General Purposes Committee, July 2016, Item B2.](#)

[LPI 103 – Fires in non-domestic properties](#)

We seek to minimise regulatory burden by undertaking audits in partnership with other agencies.

We take enforcement action against businesses when we need to.

When circumstances require the Authority prosecutes those who fail to meet the requirements of the Regulatory Reform (Fire Safety) Order 2005.

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.

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.

In October 2015, we extended our collaboration scheme with SECamb to provide an emergency medical response (EMR) 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.

[Business Safety section of website](#)

Legal cases reported to Members through the relevant committees:

[Planning and Performance Committee, November 2014, Item C7.](#)

[Authority Meeting, November 2013, Item C2.](#)

Kent Resilience Team annual report for 2016/17 will be published in May 2018. A copy will be made available on request.

SECamb provide a regular performance update to KFRS on response to medical emergencies.

Performance is monitored internally on a monthly basis at Operations Branch Meeting.

Update on Emergency Medical Response (EMR) provided to each Authority meeting.

[Update to Members on EMR. KMFRA, April 2018, Item No: C1](#)

[Update to Members on EMR. KMFRA,](#)

KCC Internal Audit of EMR – summary reported to KMFRA June 2018.

A number of successful resuscitations have been achieved by KFRS staff.

EMR is continuing to be rolled across the on-call stations with the project expected to be completed by March 2019.

In order to improve the benefit to patients and streamline the support between agencies and at co-responder calls the Authority has upgraded the existing defibrillators that are carried on response vehicles and fire engines so that they are compatible with those used by SECamb.

In early 2018, KFRS completed fitting public access defibrillators outside of every fire station across Kent. This makes them available for use by the public and gives members of the public a better chance of helping to save someone who is in sudden cardiac arrest.

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

[February 2018, Item No: C1](#)

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

[Section on KFRS website about defibrillators at fire stations](#)

[JESIP website](#)

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

As of May 2018, we currently have 30 stations "live" and plan to bring two stations per month online. Moreover, 20 officers are responding to EMR incidents.

<p>command and control solution, which has delivered significant benefits.</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>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.</p>	<p><a href="#">ESMC update. KMFRA, February 2018, Item No: C1</a></p>	
How we meet these requirements?	Where can you find governance in action?	Where do we get assurance from?
<p><b>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).</b></p>		
<p>The Authority is an active partner in the collaborative partnership, which has developed common standard operating procedures for operational incidents. Section 13 and 16 Agreements have been signed with all neighboring fire and rescue authorities.</p> <p>The Authority has a contract with Eurotunnel to provide the first line of response to any rescue 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</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><a href="#">Operational Exercises – Framework and 2017/18 Programme. Planning and Performance Committee, April 2017, Item No:</a></p>	<p><a href="#">Performance management of response times</a></p> <p>Bi-national exercises are undertaken with the Authority’s counterparts in France. The most recent of these was held in January 2018.</p>

<p>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><a href="#">C2</a></p> <p><a href="#">Update on Channel Tunnel Bi-National Exercise. Planning and Performance Committee, May 2016, Item No: C7.</a></p>	<p>Outcomes of operational quality assurance process and operational de-briefs 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?
<p><b>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.</b></p>		
<p>Business continuity plans are in place for all reasonably foreseeable risks to the Authority. All high-risk waste sites across the county have been identified on a risk and intelligence-based matrix, and joint visits have been carried out at those sites to work with the business owners to the risk of incidents occurring in the first place.</p> <p>The risk assessment methodology for the Premises Risk Management (PRM) system has been developed in line with the risk assessment</p>	<p>Emergency Planning and Contingencies Policy – this is available on request.</p> <p><a href="#">Customer and Corporate Plan 2018-22. KMFRA, April 2018, Item Number B1</a></p> <p><a href="#">Operational Exercises – Framework and 2017/18 programme. Planning and Performance Committee, April 2017, Item No:</a></p>	<p><a href="#">Performance management of response times</a></p> <p>In partnership with the Environment Agency we have been working in collaboration with other agencies who have an interest in or regulatory function relating to waste such as Public Health England, Health and Safety Executive and local councils to address this issue.</p> <p>As a result of this programme of work, 20 high-risk sites were identified and, through ongoing engagement with the businesses, sometimes employing regulatory powers where necessary, all of these sites are now classed as medium risk.</p>

methodology for the Kent Community Risk Registers (KCRR). As such, the levels of risk across both systems can be directly compared, allowing joint priorities to be determined. The KCRR and PRM are used by the Operational Planning Team to produce a list of exercises that will need to be completed each year.

On 1 November 2017, Exercise Mirum, a large-scale, unannounced exercise was held at Service Headquarters. This aimed to validate KFRS capability, plans and response arrangements to ensure the Service can effectively continue delivery of mission critical activities during a business continuity disruption, it involved a no notice exercise that closed Service Headquarters due to a fire and disruption to our Information systems.

Following Exercise Mirum, on 27 November, Exercise Carcerum was held. This aimed to validate KFRS capability, plans and response arrangements to ensure the Service can effectively respond to a major incident involving prison establishments in Kent and Medway, it involved Strategic and Tactical command arrangements for multiple incidents at multiple locations and the services procedures for a significant safety event.

The Authority regularly tests the business continuity plans. In addition joint plans are regularly tested with partner agencies.

[C2](#)

[Operational Update. KMFRA, December 2017, Item No: C1.](#)

New Business Continuity Framework. Introduced in August 2017. This is available on request, subject to relevant exclusions under the Freedom of Information Act.

Exercise Mirum was successfully undertaken, demonstrating the effectiveness of the Service's business continuity arrangements. Then key areas of learning from this exercise have been documented and, where necessary, the plan has been amended.

The exercise was debriefed and the recommendations are being implemented.

Internal exercise debrief process – this is available on request.

Moreover, the Authority participants in a national annual exercise on Business Continuity Awareness

<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>Critical Incident Framework – this is available on request.</p> <p>Exercises are undertaken to test Service Continuity Plans.</p>	<p>Week. The most recent was undertaken on 15/05/2017.</p> <p>Outcomes of exercises undertaken to test Service Continuity Plans.</p>
<p><b>How we meet these requirements?</b></p>	<p><b>Where can you find governance in action?</b></p>	<p><b>Where do we get assurance from?</b></p>
<p><b>Operational Assurance Requirements: Fire and rescue authorities must collaborate with other fire and rescue authorities to deliver interoperability.</b></p>		
<p>Section 13 and 16 Agreements have been signed with all neighboring fire and rescue authorities.</p> <p>We undertake familiarization and training with neighbouring fire and rescue authorities.</p> <p>We are an active partner in the collaborative partnership developing common standard operating procedures for operational incidents.</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>The Authority has 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>

In April 2018, a large-scale multi-agency JESIP exercise was undertaken at the Bluewater shopping Centre.

We publish a Contracts Register on the Website.

A leading member of the South East FRS Regional Business Continuity Group.

We are founding members of the Fire and Rescue Indemnity Company (FRIC) providing insurance cover for nine fire and rescue authorities.

We are members of the National Operational Guidance implementation Forum.

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.

We are the lead Authority for the Collaborative Personal Protective Equipment (PPE) Framework which is delivering efficiencies and savings through collaboration with other Fire and Rescue Services. There are now 13 Fire and Rescue Authorities accessing this framework.

We are the national lead on the development of

An update on this will be provided at a future meeting of the Authority.

[Contracts Register](#)

[FRIC website](#)

[National Operational Guidance Programme](#)

[NFCC website](#)

Joint learning through the South East FRS Regional Business Continuity Group informs the development of our Emergency Planning and Contingencies Policy and Frameworks.

<p>a new contract for workwear for uniformed staff</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 services.</p>	<p><a href="#">National Operational Guidance Programme</a></p> <p>The Authority has a dedicated area on the intranet containing advice for colleagues about how to reduce exposure to operational contaminants.</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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<p><b>How we meet these requirements?</b></p>	<p><b>Where can you find governance in action?</b></p>	<p><b>Where do we get assurance from?</b></p>
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**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, response and recovery from emergencies.</p>	<p>Kent Resilience Team annual report for 2016/17 will be published in May 2018. A copy will be made available on request.</p> <p><a href="#">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).</a></p> <p><a href="#">Planning and Performance Committee, May 2016, KRT Work Plan Priorities 2016/17, Item B1.</a></p> <p><a href="#">Planning and Performance Committee, July</a></p>	<p><a href="#">The work of the Kent Resilience Forum was highlighted nationally as a “Notable Practice Case Study”.</a></p> <p>KMFRA approval to make the KRT a permanent team from 1 April 2017.</p>
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<p>Section 13 and 16 Agreements have been signed with all neighboring 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>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><a href="#">2015, KRT Update, Item C5</a></p> <p><a href="#">Planning and Performance Committee, November 2014, Update on the then newly formed KRT, Item B1.</a></p> <p>Reports to Members on Section 13 and 16 agreements</p> <p><a href="#">Planning and Performance Committee, July 2016 (Item B1).</a></p> <p><a href="#">JESIP website</a></p> <p>SECamb provide a regular performance update to KFRS on response to medical emergencies.</p> <p><a href="#">Performance is reported to the relevant committee when appropriate.</a></p>	<p><a href="#">Performance management of response times</a></p> <p>In March 2016, Kent Fire and Rescue Service 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. KFRS, along with Kent Police, won the Fire &amp; Rescue Project of the Year category for its work to develop a shared 999 mobilising system.</p>
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<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>Update on Emergency Medical Response (EMR) provided to each Authority meeting.</p> <p><a href="#">Update to Members on EMR. KMFRA, April 2018, Item No: C1</a></p> <p><a href="#">Update to Members on EMR. KMFRA, February 2018, Item No: C1</a></p> <p><a href="#">Report to Authority on update to defibrillators February 2017 (Item B1, 4[b]).</a></p>	<p>Performance is monitored internally on a monthly basis at Operations Branch Meeting.</p>
How we meet these requirements?	Where can you find governance in action?	Where do we get assurance from?
<p><b>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.</b></p>		
<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>Bi-national exercises are undertaken with the Authority's counterparts in France. The most recent of these was held in January 2018.</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><a href="#">Planning and Performance, April 2015 (Item B3)</a></p> <p>The political leads will continue to meet</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><a href="#">Update on multi-national exercise undertaken in October 2016 by the MIRG EU. Planning and Performance Committee, November 2016, Item C6.</a></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>annually to review the agreement and report developments.</p>	
<p><b>How we meet these requirements?</b></p>	<p><b>Where can you find governance in action?</b></p>	<p><b>Where do we get assurance from?</b></p>
<p><b>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.</b></p>		
<p>The Authority are an active and leading members of the Kent Resilience Forum.</p> <p>The National and Kent Community Risk Registers (KCRR) contain hazards and threats identified by government departments and local agencies. The KCRR is a statutory requirement of the CCA and based on the national risk register.</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 has continued 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 both the JESIP</p>	<p><a href="#">Kent Resilience Forum</a></p> <p><a href="#">Kent Community Risk Register</a></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 detailed in the public domain.</p> <p><a href="#">HMIC published a tri-service review of Joint Emergency Services Interoperability Principles</a></p>	<p>All of those premises identified at the county and local level are included in the Authority's Premises Risk Management (PRM) system and have been assessed to determine the potential level of risk they pose to the Authority and the community it serves.</p>

review.	<a href="#">(JESIP), April 2016,</a>	
	<a href="#">JESIP website</a>	
<b>How we meet these requirements?</b>	<b>Where can you find governance in action?</b>	<b>Where do we get assurance from?</b>
<b>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.</b>		
As above	As above	As above
<b>How we meet these requirements?</b>	<b>Where can you find governance in action?</b>	<b>Where do we get assurance from?</b>
<b>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.</b>		
As above	As above	As above
<b>How we meet these requirements?</b>	<b>Where can you find governance in action?</b>	<b>Where do we get assurance from?</b>
<b>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.</b>		
The Authority are an active and leading member in the Kent Resilience Forum Resilient Community Sub Group.  They have been central to the development of over 130 flood wardens in Kent and Medway.  We work closely with Parish and Town Councils to improve communication on key issues, such as identifying vulnerable people in rural areas.	<a href="#">Kent Resilience Forum</a>  Kent Resilience Team annual report for 2016/17 will be published in May 2018. A copy will be made available on request.	The Chief Executive attends annual meeting of Kent Association of Local Councils to receive feedback and discuss future plans.

We work with the Kent Association of Parish Councils to provide support and develop training events for their members.

We compile and analyse feedback from the public and investigate complaints.

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.

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.

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 an opportunity for this to continue to grow as several organisations have expressed an interest in establishing partnerships.

In late 2017, the Authority incorporated the guidance within the Enterprise Act 2016. This Act allows for a greater range and variety of partnerships, the opportunities for which the Authority will consider on a case-by-case basis.

The Authority works closely with its local authority partners in the 'Better Business for All' initiative in Kent and Medway. The initiative brings businesses and regulators together in

[Primary Authority Scheme section of website](#)  
[Report on the Primary Authority Partnership. Planning and Performance Committee, May 2016, Item C2.](#)

[Better Business for All section of the website](#)

Regular liaison meetings with Kent Association of Parish Councils.

A total of 118 compliments were received in 2017/18, this compares to 95 in the previous year. There were 10 complaints, of which 6 were founded. The total for the previous year was 27, of which 16 were founded.

In addition to road safety events, a variety of safety events are held at the Road Safety Experience, which cover a range of areas including better fire safety communication with minority groups regarding both business and fire safety in the home.

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.

The Authority regularly holds events with partners under the "Better Business for All" initiative.

<p>order to reduce the regulatory burden for businesses and make access to information easier.</p>		
How we meet these requirements?	Where can you find governance in action?	Where do we get assurance from?
<p><b>Operational Assurance Requirements: Each fire and rescue authority’s Integrated Risk Management Plan (Safety and Wellbeing Plan) must:</b></p> <ul style="list-style-type: none"> <li>• be easily accessible and publicly available;</li> <li>• reflect effective consultation throughout its development and at all review stages with the community, its workforce and representative bodies, and partners;</li> <li>• 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;</li> <li>• reflect up to date risk analyses and the evaluation of service delivery outcomes.</li> </ul>		
<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 2018/19.</p> <p>We have a mature risk assessment process which draws in data from a variety of internal</p>	<p><a href="#">Safety and Wellbeing Plan 2018</a></p> <p><a href="#">Technical Appendices to the Safety and Wellbeing Plan 2018</a></p> <p><a href="#">Safety and Wellbeing Plan – Outcomes of the Consultation and Next Steps. KMFRA, February 2018 (Item No: B1)</a></p>	<p><a href="#">Safety and Wellbeing Plan – Detailed Outcomes of Consultation. KMFRA, February 2018 (Appendix to Item B1)</a></p> <p>Oversight and approval from the Members of the Authority.</p>

databases and external sources.		
Service delivery outcomes are monitored on a routine basis.	<a href="#">Customer and Corporate Plan 2018-22. KMFRA, April 2018, Item Number B1</a>	
<b>How we meet these requirements?</b>	<b>Where can you find governance in action?</b>	<b>Where do we get assurance from?</b>
<b>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.</b>		
Please refer to the annual Governance Assurance Statement.		
Publication of all agenda KMFRA meeting agendas, reports and minutes on our website.	<a href="#">KMFRA meeting agendas, reports and minutes section of the website</a>	Oversight and scrutiny provided by the KMFRA Members.
Approval of request from Kent Police and Crime Commissioner (PCC) to be appointed as a member of the Authority.	<a href="#">KMFRA, June 2017, Item No: B1</a>	Additional level of oversight and scrutiny provided by having the PCC sit on the Authority.
Update and review of the Corporate Risk Register.	<a href="#">Corporate Risk Register. KMFRA, April 2018, Appendix 2 to Item Number: C1</a>	Scrutiny provided by the PCC and Members
<b>How we meet these requirements?</b>	<b>Where can you find governance in action?</b>	<b>Where do we get assurance from?</b>
<b>Operational Assurance Requirements: Fire and rescue authorities must have arrangements in place to ensure that their decisions are open to scrutiny.</b>		
Please refer to the annual Governance Assurance Statement.		
Publication of all agenda KMFRA meeting agendas, reports and minutes on our website.	<a href="#">KMFRA meeting agendas, reports and minutes section of the website</a>	Oversight and scrutiny provided by the KMFRA Members.
Approval of request from Kent Police and Crime Commissioner (PCC) to be appointed as a member of the Authority.	<a href="#">KMFRA, June 2017, Item No: B1</a>	Additional level of oversight and scrutiny provided by having the PCC sit on the Authority.

How we meet these requirements?	Where can you find governance in action?	Where do we get assurance from?
<b>Operational Assurance Requirements: Fire and rescue authorities must make their communities aware of how they can access data and information on their performance.</b>		
<p>In 2018, we published a brand new Corporate Plan. This has been re-named the Customer and Corporate Plan in order to reflect the importance we place on doing the best job for the public we serve. This presents a new aim, vision statement and objectives.</p> <p>A focus on customer is embedded in the Service, something which started with the publication in 2017 of our “Customer Promise”. This sets out what the public are entitled to expect from us and what we expect from our staff.</p> <p>In addition to the Safety and Wellbeing Plan itself, we publish the consultation outcomes and the supporting information.</p> <p>Accounts and financial information</p>	<p><a href="#">Customer and Corporate Plan 2018-22. KMFRA, April 2018, Item Number B1</a></p> <p><a href="#">Link to the Customer Promise</a></p> <p><a href="#">Safety and Wellbeing Plan – Outcomes of the Consultation and Next Steps. KMFRA, February 2018 (Item No: B1)</a></p> <p><a href="#">Safety and Wellbeing Plan – Detailed Outcomes of Consultation. KMFRA, February 2018 (Appendix to Item B1)</a></p> <p><a href="#">Supporting Information to the Safety and Wellbeing Plan 2018</a></p> <p><a href="#">Budget and Medium Term Financial plan 2018/19 to 2021/22. KMFRA, February 2018, Item No: B2</a></p> <p><a href="#">Financial Update. KMFRA, April 2018, Item No: B2</a></p>	<p>KMFRA Member approval of the Customer and Corporate Plan 2018-22. KMFRA, April 2018.</p> <p>Public engagement in the proposals that we set out in the Safety and Wellbeing plan.</p> <p>Approval by KMFRA Members for inclusion in the Corporate and Customer Plan of the draft priorities.</p>

<p>In late 2017, our Transparency Policy was refreshed and updated.</p> <p>We have a publication scheme, which is available for the public.</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 (policy available on request)</p> <p><a href="#">The Authority's "Publication Scheme 2014 to 2019"</a></p> <p><a href="#">"Frequently asked questions" section is available on the Authority's website.</a></p> <p><a href="#">Freedom of Information on website</a></p> <p><a href="#">All KMFRA meeting agendas, reports and minutes are published on the website.</a></p> <p>Community Right to Challenge Policy (policy available on request)</p> <p><a href="#">Publication of performance information on the Authority's website</a></p>	<p>Transparency reports of all transactions over £250 are regularly published on the <a href="#">website</a>.</p> <p>The Authority publishes on its website all required elements of the Government's transparency agenda.</p> <p>In 2017/18 we responded to 308 freedom of information requests (a slight increase on the 293 we dealt with in 2016/17). Our average response time for freedom of information requests was six days and all responses were completed within the required 20 day timeframe.</p> <p>A total of 118 compliments were received in 2017/18, this compares to 95 in the previous year. There were 10 complaints, of which 6 were founded. The total for the previous year was 27, of which 16 were founded.</p> <p><a href="#">KMFRA Member approval of the previous year's Annual governance Statement 2016/17. KMFRA, July 2017, Item No: B4</a></p>
<p><b>How we meet these requirements?</b></p>	<p><b>Where can you find governance in action?</b></p>	<p><b>Where do we get assurance from?</b></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 and the requirements included in this Framework. To provide assurance, fire and rescue authorities must publish an annual Statement of Assurance.**

<p>Governance and decision-making information made publically available and published on our website.</p>	<p>The oversight provided by the Fire Authority Members that oversee the Authority and scrutinise decision making.</p>	<p>Publication of the Governance Assurance Statement.</p> <p><a href="#">Internal audit – midyear progress report. KMFR A December 2017, Appendix 2 to Item No: C1</a></p> <p><a href="#">Summary of internal audit report 2016/17. KMFR A, July 2017, Item No: B2.</a></p> <p><a href="#">Fire and Rescue Services Equality Framework, 2017. Authority re-accredited as “Excellent”. KMFR A, December 2017, Item No: C1</a></p>
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<p><b>How we meet these requirements?</b></p>	<p><b>Where can you find governance in action?</b></p>	<p><b>Where do we get assurance from?</b></p>
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**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:**

- 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>In addition the Authority provides Flooding Tactical Advisors as well as having enhanced logistical support (ELS) and high volume pump (HVP) capabilities.</p>	<p>Issues regarding this are reported to Members, but it should be recognised due to the sensitive nature of this area, limited information is detailed in the public domain.</p>	<p><a href="#">HMIC published a tri-service review of Joint Emergency Services Interoperability Principles (JESIP), April 2016,</a></p> <p>Our ‘Exercise Planning and Learning’ is one of the audit areas that Kent County Council Internal Audit will be assessing and reporting on in the fourth quarter of 2018.</p>
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<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 has continued 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>		
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How we meet these requirements?	Where can you find governance in action?	Where do we get assurance from?
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<p><b>Each Fire and Rescue Authority must:</b></p> <ul style="list-style-type: none"> <li>• <b>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;</b></li> <li>• <b>ensure that no individual will automatically face dismissal if they fall below the standards required and cannot be deployed operationally;</b></li> <li>• <b>ensure that all operational personnel will be provided with support to maintain their levels of fitness for the duration of their career;</b></li> <li>• <b>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;</b></li> <li>• <b>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;</b></li> <li>• <b>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;</b></li> <li>• <b>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.</b></li> </ul>		
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<p>The Authority’s Wellbeing Procedure sets out the fitness standards required and the process by which this is monitored and tested for</p>	<p>Health and Wellbeing Procedure – available on request.</p> <p>There is a “Wellbeing Zone” on the Authority’s</p>	<p>All operational staff are subject to testing annually and support given to anyone falling below the required fitness level.</p>
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<p>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>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. Our OH service provider offers a multi-disciplinary team of healthcare professionals who are able to undertake via phone, video or in clinics.</p>	<p>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><a href="#">Detailed reporting of corporate health performance. General Purposes Committee, April 2017, Item C2.</a></p>	<p>Monitoring of occupational health activity.</p> <p>A number of individuals have already been redeployed under this policy.</p>
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From May 2018, we have introduced the Employee Assistance Programme (EAP). The EAP helpline is available 24 hours a day, throughout the year and offers access to trained counsellors will offer help and support in a professional, friendly and non-judgmental manner.

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 are also engaging with Public Health UK to promote their initiatives amongst our staff.

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.

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. This initiative was re-launched in 2017 and a fresh round of recruitment was undertaken. Consequently, we now have approximately 25 volunteers.

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.

A staff wellbeing conference was held in 2017 which covered a range of key issues around mental health. Based on the positive feedback from this, another conference will be held in 2018.

## **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.

Stuart Tranter

Vice Chairman, Kent and Medway Fire and Rescue Authority

Date: 28 June 2018

Ann Millington

Chief Executive, Kent and Rescue Service

## Summary of Assurance Levels

ASSURANCE LEVEL	DEFINITION of EFFECTIVENESS LEVELS	DEFINITION of COMPLIANCE LEVELS
<b>Green</b>	<p>Control has been audited within the last two years and 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 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 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>
<b>Amber</b>	<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>

<p><b>Red</b></p>	<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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