Due to the current heightened security level at all our premises, Members are reminded to wear their identity badges whilst attending meetings. Any visitors <u>must</u> produce photographic identification at Reception.

FIRE & RESCUE AUTHORITY SUMMONS

SOUTH WALES FIRE & RESCUE AUTHORITY

You are required to attend a meeting of the Finance, Audit and Performance Management Committee to be held on:

Monday, 13 March 2023 at 1000 hours

In person at South Wales Fire & Rescue Service Headquarters, Forest View Business Park, Llantrisant, CF72 8LX

or

Remotely via Microsoft Teams - https://bit.ly/FAPM-Committee-13-03-23

<u>Please ensure you join the meeting 15 minutes prior to meeting time</u>

<u>Any issues please contact</u>
01443 232000 and ask for Member Services

A G E N D A

1.   Apologies for Absence

2.   Declarations of Interest

        Members of the Fire & Rescue Authority are reminded of their personal responsibility to declare both orally and in writing any personal and/or prejudicial interest in respect of matters contained in this agenda in accordance with the provisions of the Local Government Act 2000, the Fire & Rescue Authority's Standing Orders and the Members Code of Conduct.

3.   Chairperson's Announcements

REPORTS FOR DECISION

REPORTS FOR INFORMATION

PART II

Government Act 1972.

18.i.   ICT Cyber Security Response – **Presentation on day**   223

Signature of Monitoring Officer:

MEMBERSHIP

Councillors:

J	Morgan	Blaenau Gwent
M	Hughes	Bridgend
C	Wright	Caerphilly
B	Proctor	Cardiff
D	Isaac	Merthyr Tydfil
M	Powell	Monmouthshire
M	Al Nuaimi	Newport
D	Parkin	Rhondda Cynon Taf
S	Evans	Torfaen
I	Buckley	Vale of Glamorgan

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SOUTH WALES FIRE & RESCUE AUTHORITY

**MINUTES OF THE FINANCE, AUDIT & PERFORMANCE MANAGEMENT MEETING
HELD ON MONDAY 5 DECEMBER 2022 AT
IN MEETING ROOM 8 OR REMOTELY VIA STARLEAF**

17. PRESENT:

Councillor	Left	
S Evans (Chair)		Torfaen
I Buckley		Vale of Glamorgan
M Hughes		Bridgend
D Isaac		Merthyr Tydfil
M Powell		Monmouthshire

APOLOGIES:

J Morgan (Deputy Chair)		Blaenau Gwent
M Al Nuaimi		Newport
D Parkin		Rhondda Cynon Taff
B Proctor		Cardiff
C Wright		Caerphilly
Mrs L Mullan		T/Head of Finance
Mrs S Watkins		Deputy Monitoring Officer

ABSENT:

OFFICERS PRESENT:- ACO G Thomas – Monitoring Officer & Director of Corporate Services, Mr C Barton – Treasurer, Temp AM C Hadfield – Temp Head of Risk Reduction, Ms J Sambell – Temp Senior Accountant, Mr S Gourlay – TIAA Internal Auditor, Mr C Rigby – Audit Wales Officer, Mr W Thomas – Head of Service Performance & Communication

18. DECLARATIONS OF INTEREST

All Members declared a personal non-prejudicial interest in each agenda item which affected their Authority.

The Chair declared a personal interest in items which related to planning applications for New Inn Fire Station.

19.   CHAIR'S ANNOUNCEMENTS

The Chair wished to record his thanks and appreciation to the Fire Cadets who recently attended a local Remembrance Day Parade, and was pleased to report they were all exemplary and well presented.

20.   MINUTES OF PREVIOUS MEETING

The minutes of the previous Finance, Audit & Performance Management meeting held on 10 October 2022, were received and accepted as a true record of proceedings.

21.   REPORTS FOR DECISION

21.1   REVENUE MONITORING REPORT 2022/2023

The Senior Accountant informed Members that the Revenue Monitoring report provided details of the Annual Revenue Budget, forecasts and associated information for the year ending 31 March, 2023.

The Treasurer advised Members that the expected overspend would be considered in the Budget.

RESOLVED THAT

Following discussion on the fluctuation in fuel prices, and the decrease in the underspend of the Apprenticeship Scheme, Members agreed to note the report and its contents.

21.2   CAPITAL MONITORING REPORT 2022/2023

The Senior Accountant informed Members that the Capital Monitoring report provided details of the Capital Budget, transactions to date, and the forecast year end position for the year ending 31 March, 2023.

RESOLVED THAT

21.2.1   Following a question and answer session on balancing fixed term contracts and the payment of goods, Members agreed to note the budget and progress of capital schemes and approved the alterations in Appendix 1 and associated movements in funding.

21.2.2   Officers agreed to amend the typing errors identified in Items 1.5, 2.1.4 and 2.2.2, contained within the report.

21.2.3   With reference to the purchase of DIM vehicles, Officers agreed to confirm the number of vehicles ordered.

21.3   REVENUE & CAPITAL BUDGET SETTING UPDATE REPORT

The Treasurer presented a report which updated Members on preparations for the setting of the 2023/2024 budget, and to seek approval for the draft budget for consultation.

The report included the latest projections based on the Authority's plans and strategies as informed by the general financial and operational environment in which services were provided.

The report was built on the Medium Term Financial Strategy (MTFS) report that was considered by the Fire & Rescue Authority in September 2022, and by the FAPM Committee on 10 October, 2022. The report still indicated that the Authority's cost base would significantly increase both this year and next in response to the prevailing inflationary pressures in the economy.

The report now included the likely impact of population projections flowing from the data underpinning the Local Government Settlement which formed the basis of the distribution of the Fire Contributions budget.

The report updated the latest projections based on known changes around pay inflation, changes made by central Government, and those resulting from further work undertaken by officers of the Service as requested by Members.

RESOLVED THAT

Following a question and answer session on the challenges in maintaining the On-Call establishment, Members agreed to note the continued risks and uncertainties within the proposed draft Revenue Budget, and to recommend it to the Fire & Rescue Authority as the basis of consultation.

22.   REPORTS FOR INFORMATION

22.1 TREASURY MANAGEMENT MID-TERM REVIEW REPORT 2022/2023

The Treasurer informed Members that the Treasury Management Mid-Term Review report provided an update on the Authority's treasury activities for the period 1 April-30 September, 2022.

With reference to whether there were any restrictions on the amount of borrowing, the Treasurer advised Members that the Service sets their own restrictions with a long term borrowing strategy which includes a range of maturity dates set at various stages.

RESOLVED THAT

Members agreed to note the report and treasury activity for the period 1 April-30 September, 2022.

22.2 AUDIT ACTIONS REPORT HEALTH CHECK 2022-2023 QUARTER 2

The Head of Service Performance & Communication provided Members with a brief overview of the Audit Actions Report Health Check 2022/2023 Quarter 2.

RESOLVED THAT

22.2.1   Members agreed to note the presented report and its contents.

22.2.2   With reference to the importance of inserting completion dates and decisions against each of the highlighted risks, Officers assured Members that all

recommendations were followed up on an annual basis by the Internal Auditor.

22.3 INTERNAL AUDIT PROGRESS REPORT & AUDIT ACTION UPDATE

The TIAA Internal Auditor presented a report which updated Members upon progress being made against the Internal Audit Plan 2022/2023.

RESOLVED THAT

Members agreed to note the Internal Audit recommendations and work completed to date on the Internal Audit Annual Plan 2022/2023.

23. FORWARD WORK PROGRAMME

The Monitoring Officer provided Members with the Forward Work Programme for 2022/2023.

RESOLVED THAT

Members agreed the content of the Forward Work Programme for 2022/2023.

24. TO CONSIDER ANY ITEMS OF BUSINESS THAT THE CHAIR DEEMS URGENT (PART 1 OR 2)

There were no further items of business to consider that the Chair deemed urgent.

25. REPORT FOR DECISION

25.1 RESOLUTION TO EXCLUDE THE PRESS AND PUBLIC BY VIRTUE OF SECTION 100A AND PARAGRAPHS 14 & 15 OF PART 4 OF SCHEDULE 12A OF THE LOCAL GOVERNMENT ACT 1972 (AS AMENDED)

A resolution to exclude the press and public by virtue of Section 100A and Paragraphs 14 and 15 of Part 4 of Schedule 12A of the Local Government Act 1972 (as amended) was passed.

25.2 AUDIT WALES – CYBER RESILIENCE IN THE PUBLIC SECTOR

The ACO Corporate Services informed Members that the confidential Audit Wales report provided learning from organisations that had been victims of cyber incidents. It was hoped that by sharing key messages the profile of cyber risks would be raised, and public bodies could learn from one another.

RESOLVED THAT

Following lengthy discussion on the importance of staff receiving mandatory awareness training on issues relating to fraud, Members agreed to note the findings of the Audit Wales report attached at Appendix 1, and an update on cyber risk management within the Service be presented to the next FAPM Committee meeting.

THIS REPORT IS NOT EXEMPT AND IN THE PUBLIC DOMAIN

SOUTH WALES FIRE & RESCUE AUTHORITY   AGENDA ITEM NO 5
13 MARCH 2023

FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

REPORT OF TREASURER

TREASURY MANAGEMENT STRATEGY 2023/24

THIS REPORT IS FOR DECISION

REPORT APPROVED BY THE TREASURER

REPORT PRESENTED BY TEMP HEAD OF FINANCE, PROCUREMENT & PROPERTY

SUMMARY
To recommend for approval the Authority's Annual Treasury Management Strategy.

RECOMMENDATION
That the Finance, Audit & Performance Management Committee note the following and recommend for Fire Authority approval:

- Regulatory changes and reporting impacts
- The Treasury Management Strategy Statement (TMSS);
- Capital Prudential Indicators and Minimum Revenue Provision (MRP) Policy
- Borrowing Policy and Treasury Indicators / limits
- Annual Investment Strategy (AIS)
- The Treasurer to update strategies / policies as necessary

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1. **BACKGROUND**

1.1 The Fire & Rescue Authority is required to approve in advance of each financial year its governance arrangements for treasury management activities. Detailed explanations of what these are, are contained in Appendix 1.

1.2 All Local Authority bodies are required by statute to approve the TMSS and associated policies annually.

2.   ISSUE

2.1   The purpose of this report is for Members to consider the treasury management activities required to ensure short term liquidity and longer-term capital spending plans in a prudent and sustainable manner and that cash resources are managed effectively.

2.2   In 2021 CIPFA revised both the Treasury Management Code and Prudential Code with changes impacting TMSS reporting and the risk management framework.

2.3   This Authority has regard to these Codes when it prepares the TMSS and related reports which are taken to Full Authority for final approval.

2.4   In summary, the revised Treasury Management Code requires all investments and investment income to be attributed to one of the following three purposes: -

1. Treasury management (applicable to this Authority)
2. Service delivery
3. Commercial return

In addition, the revised Codes require the Authority to implement the following:

a. Adopt a new liability benchmark treasury indicator to support the financing risk management of the capital financing requirement; this is to be shown in chart form, with material differences between the liability benchmark and actual loans to be explained.

b. Long-term treasury investments are to be classed as commercial investments unless justified by a cash flow business case.

c. Pooled funds are to be included in the indicator for principal sums maturing in years beyond the initial budget year.

d. Amendment to the knowledge and skills register for officers and members involved in the treasury management function - to be proportionate to the size and complexity of the treasury management conducted by the Authority.

e. Reporting to members is to be done quarterly. Specifically, the Treasurer is required to establish procedures to monitor and report performance against all forward-looking prudential indicators at least quarterly. The CFO is expected to establish a measurement and reporting process that highlights significant actual or forecast deviations from the approved indicators. However, monitoring of prudential indicators, including forecast debt and

investments, is not required to be taken to Full Authority and can be reported as part of the authority's integrated revenue, capital, and balance sheet monitoring.

f. Environmental, social and governance (ESG) issues to be addressed within an Authority's treasury management policies and practices (TMP1).

3   FINANCIAL IMPLICATIONS

3.1   The approval of the Treasury Management Strategy provides the control framework within which officers can operate to ensure that as far as possible the costs of borrowing are minimised, investment opportunities are maximised, and adequate liquidity is maintained so that payments can be made when they fall due. Such activities are undertaken whilst ensuring risk is kept to a minimum.

3.2   **Community and Environment**

Equality, Diversity and Inclusion	No
Welsh Language	No
Well-Being Of Future Generations (Wales) Act	No
Socio Economic Duty	No
Sustainability / Environment / Carbon Reduction	No
Safeguarding	No
Consultation and Communications	No
Consultation with Representative Bodies	No
Impact Assessment	No

3.3   **Regulatory, Strategy and Policy**

Legal	Yes
Financial	Yes
Procurement	No
Corporate Risk	No
Information Management	No
Data Protection / Privacy	No
Health, Safety and Wellbeing	No
Governance & Audit	Yes
Service Policy	No
National Policy	No

3.4 **Resources, Assets and Delivery**

Human Resources and People Development	No
Assets and Resources (Property/Fleet/ICT/Equipment)	No
Service Delivery	No
Procurement	No
Budget Revenue/Capital	Yes

5.   RECOMMENDATION

5.1   That the Finance Audit & Performance Management Committee note the following and recommend for Fire Authority approval:

- o Regulatory changes and reporting impacts
- o The Treasury Management Strategy Statement (TMSS)
- o Capital Prudential Indicators and Minimum Revenue Provision (MRP) Policy
- o Borrowing Policy and Treasury Indicators / limits
- o Annual Investment Strategy (AIS)
- o The Treasurer to update strategies / policies as necessary.

Contact Officer:	Lisa Mullan T/Head of Finance, Property & Procurement
Background Papers	- Local Government Act 2003 - CIPFA Treasury Management Code - CIPFA Prudential Code - WG MRP & Investment Guidance - Capital Budget Working Papers

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Background

The Authority is required to operate a balanced budget, which broadly means that cash raised during the year will meet cash expenditure. Part of the treasury management operation is to ensure that this cash flow is adequately planned, with cash being available when it is needed. Surplus monies are invested in low-risk counterparties or instruments commensurate with the Authority's low risk appetite, providing adequate liquidity initially before considering investment return.

The second main function of the treasury management service is the funding of the Authority's capital plans. These capital plans provide a guide to the borrowing need of the Authority, essentially the longer-term cash flow planning, to ensure that it can meet its capital spending obligations. This management of longer-term cash may involve arranging long or short-term loans or using longer-term cash flow surpluses. On occasion, when it is prudent and economic, any debt previously drawn may be restructured to meet risk or cost objectives.

The contribution the treasury management function makes to the Authority is critical, as the balance of debt and investment operations ensure liquidity or the ability to meet spending commitments as they fall due, either on day-to-day revenue or larger capital projects. The treasury operations will see a balance of the interest costs of debt and the investment income arising from cash deposits affecting the available budget. Since cash balances generally result from reserves and balances, it is paramount to ensure adequate security of the sums invested, as a loss of principal will in effect result in a loss to the General Fund Balance.

CIPFA defines treasury management as:

> *"The management of the local authority's borrowing, investments and cash flows, including its banking, money market and capital market transactions; the effective control of the risks associated with those activities; and the pursuit of optimum performance consistent with those risks."*

Whilst any commercial initiatives or loans to third parties will impact on the treasury function, these activities are generally classed as non-treasury activities, (arising usually from capital expenditure), and are separate from the day-to-day treasury management activities.

1.1 Reporting Requirements

1.2.1 Capital Strategy

The CIPFA 2021 Prudential and Treasury Management Codes require all local authorities to prepare a Capital Strategy report which will provide the following:

- a high-level long-term overview of how capital expenditure, capital financing and treasury management activity contribute to the provision of services
- an overview of how the associated risk is managed
- the implications for future financial sustainability

The aim of the strategy is to ensure that all the Authority's elected members fully understand the overall long-term policy objectives and resulting Capital Strategy requirements, governance procedures and risk appetite.

1.2.2   Treasury Management Reporting

The Authority is currently required to receive and approve, as a minimum, three main treasury reports each year, which incorporate a variety of policies, estimates and actuals.

a. **Prudential and treasury indicators and treasury strategy** (this report) - The first, and most important report is forward looking and covers: -
   - the capital plans, (including prudential indicators)
   - a minimum revenue provision (MRP) policy, (how residual capital expenditure is charged to revenue over time)
   - the Treasury Management Strategy, (how the investments and borrowings are to be organised), including treasury indicators; and
   - an Annual Investment Strategy, (the parameters on how investments are to be managed)

b. **A mid-year treasury management report** – This is primarily a progress report and will update members on the capital position, amending prudential indicators as necessary, and whether any policies require revision.

c. **An annual treasury report** – This is a backward-looking review document and provides details of a selection of actual prudential and treasury indicators and actual treasury operations compared to the estimates within the strategy.

Scrutiny
The above reports are required to be adequately scrutinised before being recommended to the Full Authority. This role is undertaken by the Finance, Audit & Performance Management (FAPM) Committee.

Quarterly reports – In addition to the three major reports detailed above, from 2023/24 quarterly reporting (end of June/end of December) is also required. However, these additional reports do not have to be reported to Full Authority but do require adequate scrutinised. This role is undertaken by the FAPM Committee.

1.2 Treasury Management Strategy for 2023/24

The strategy for 2023/24 covers two main areas:

Capital issues
- the capital expenditure plans and the associated prudential indicators
- the minimum revenue provision (MRP) policy

Treasury management issues
- the current treasury position
- treasury indicators which limit the treasury risk and activities of the Authority
- prospects for interest rates
- the borrowing strategy
- policy on borrowing in advance of need
- debt rescheduling

- the investment strategy
- creditworthiness policy; and
- the policy on use of external service providers

These elements cover the requirements of the Local Government Act 2003, Welsh Government Investment Guidance and MRP Guidance, the CIPFA Prudential Code and the CIPFA Treasury Management Code.

1.3 Training

The CIPFA Treasury Management Code requires the responsible officer to ensure that members with responsibility for treasury management receive adequate training in treasury management. This especially applies to members responsible for scrutiny.

Furthermore, pages 47 and 48 of the Code state that they expect "all organisations to have a formal and comprehensive knowledge and skills or training policy for the effective acquisition and retention of treasury management knowledge and skills for those responsible for management, delivery, governance, and decision making.

The scale and nature of this will depend on the size and complexity of the organisation's treasury management needs. Organisations should consider how to assess whether treasury management staff and Authority members have the required knowledge and skills to undertake their roles and whether they have been able to maintain those skills and keep them up to date.

As a minimum, authorities should carry out the following to monitor and review knowledge and skills:

- Record attendance at training and ensure action is taken where poor attendance is identified.

- Prepare tailored learning plans for treasury management officers and Authority members.

- Require treasury management officers and Authority members to undertake self-assessment against the required competencies (as set out in the schedule that may be adopted by the organisation).

- Have regular communication with officers and Authority members, encouraging them to highlight training needs on an ongoing basis.

In further support of the revised training requirements, CIPFA's Better Governance Forum and Treasury Management Network have produced a 'self-assessment by members responsible for the scrutiny of treasury management', which is available from the CIPFA website to download.

To date it is assumed members undertake training with their home authority although further training will be arranged as required.

A formal record of the training received by officers central to the Treasury function will be maintained by 31 December 2023. Similarly, a formal record of the treasury management/capital finance training received by members will also be maintained by the same date.

1.4 Treasury Management Consultants

The Authority uses Link Group, Link Treasury Services Limited as its external treasury management advisors.

The Authority recognises that responsibility for treasury management decisions always remains with the organisation and will ensure that undue reliance is not placed upon the services of our external service providers. All decisions will be undertaken with regards to all available information, including, but not solely, our treasury advisers.

It also recognises that there is value in employing external providers of treasury management services to acquire access to specialist skills and resources. The Authority will ensure that the terms of their appointment and the methods by which their value will be assessed are properly agreed and documented and subjected to regular review.

2. THE CAPITAL PRUDENTIAL INDICATORS 2023/24 – 2025/26

The Authority's capital expenditure plans are the key driver of treasury management activity. The output of the capital expenditure plans is reflected in the prudential indicators, which are designed to assist members' overview and confirm capital expenditure plans.

2.1 Capital Expenditure and Financing

This prudential indicator is a summary of the Authority's capital expenditure plans, both those agreed previously, and those forming part of this budget cycle. Members are asked to approve the capital expenditure forecasts: -

Capital, Prudential and Treasury Indicators	2021/22 Outturn	2022/23 Mid Year Review	2023/24 Estimate	2024/25 Estimate	2025/26 Estimate
Opening CFR	41,630	41,630	46,478	56,538	63,876
Capital Spending	**2,444**	**10,347**	**14,861**	**12,250**	**14,827**
CERA	-200	-200	-200	-200	-200
Capital Receipts	-189	-39			
Capital Grant	-392	-1,444			
Revenue Reserves	0				
Borrowing requirement for the year	**1,662**	**8,665**	**14,661**	**12,050**	**14,627**
Repayment of Debt					
MRP	-2,701	-3,398	-4,163	-4,622	-5,452
MRP on PFI	-365	-419	-437	-91	-320
Closing CFR	**40,227**	**46,478**	**56,538**	**63,876**	**72,731**
Movement in closing CFR	-1,403	6,251	10,060	7,338	8,855
Gross Borrowing at 1 April	29,062	28,146	26,737	35,355	43,960
New Borrowing	0	0	10,000	10,000	10,000
Loan Repayments	-916	-1,409	-1,383	-1,395	-1,406
Gross Borrowing at 31 March	28,146	26,737	35,355	43,960	52,554
Investments/Deposits at 31 March	-3,198	-7,158	-2,058	-1,000	-1,000
Investments/Deposits at 1 April	-7,158	-2,058	-1,000	-1,000	-1,000
Net borrowing at 1 April	25,864	20,989	24,680	34,355	42,960
Net borrowing at 31 March	20,989	24,680	34,355	42,960	51,554
Other long term liabilities i.e. PFI	4,097	3,679	3,242	3,151	2,831
Gross Debt	32,244	30,416	38,596	47,111	55,385
Under/Over borrowed (Gross Debt vs CFR)	**7,984**	**16,062**	**17,942**	**16,765**	**17,346**

The table summarises how capital plans are being financed with any shortfall of resources resulting in a borrowing need, i.e. increase in capital finance requirement (CFR).

2.2 The Authority's Borrowing Need (Capital Financing Requirement (CFR))

The second prudential indicator is the Authority's CFR. The CFR is simply the total historic outstanding capital expenditure which has not yet been paid for from either revenue or capital resources. It is essentially a measure of the Authority's indebtedness and so its underlying borrowing need. Any capital expenditure above, which has not immediately been paid for through a revenue or capital resource, will increase the CFR.

The CFR does not increase indefinitely, as the minimum revenue provision (MRP) is a statutory annual revenue charge which broadly reduces the indebtedness in line with each asset's life, and so charges the economic consumption of capital assets as they are used.

The CFR includes any other long-term liabilities e.g., PFI schemes. Whilst these increase the CFR, and therefore the Authority's borrowing requirement, these types of schemes include a borrowing facility by the PFI provider and so the Authority is not required to separately borrow for these schemes.

The Authority is asked to approve the CFR projections below:

2.3 Liability Benchmark

A third and new prudential indicator for 2023/24 is the Liability Benchmark (LB). The Authority is required to estimate and measure the LB for the forthcoming financial year and the following two financial years, as a minimum.

There are four components to the LB: -

1. **Existing loan debt outstanding**: the Authority's existing loans that are still outstanding in future years.

2. **Loans CFR**: this is calculated in accordance with the loans CFR definition in the Prudential Code and projected into the future based on approved prudential borrowing and planned MRP.

3. **Net loans requirement**: this will show the Authority's gross loan debt less treasury management investments at the last financial year-end, projected into the future and based on its approved prudential borrowing, planned MRP and any other major cash flows forecast.

4. **Liability benchmark** (or gross loans requirement): this equals net loans requirement plus short-term liquidity allowance.

Liability Benchmark
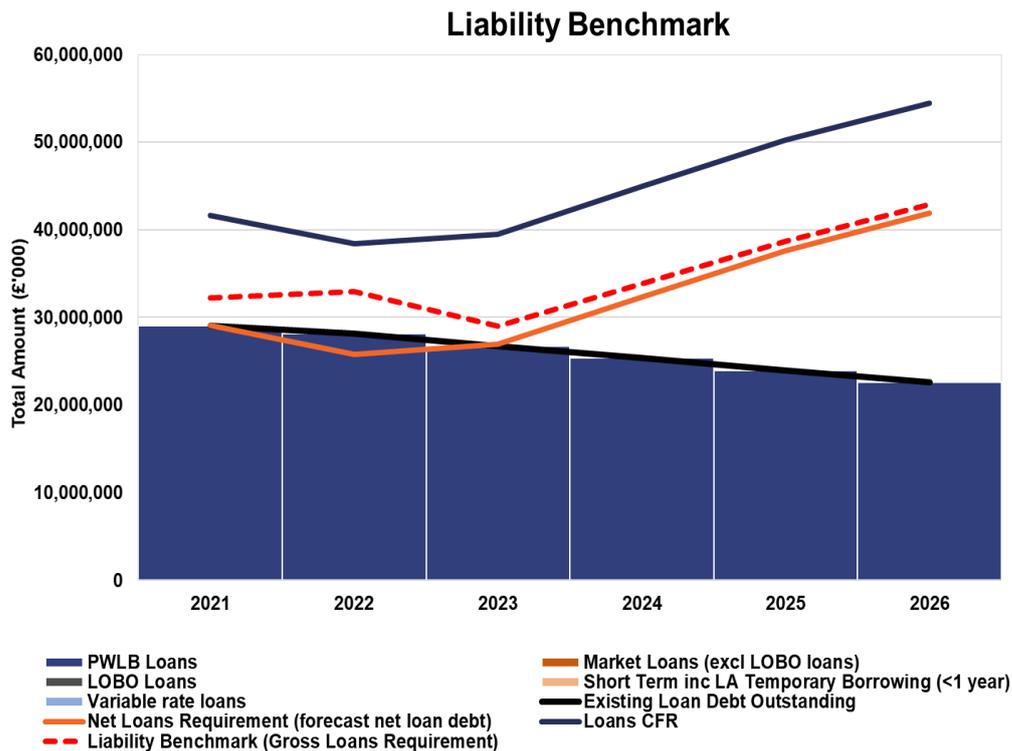
The Liability Benchmark (Gross Loans Requirement) is a forecast of the level of gross loan debt the Authority will require in accordance with its budget plans.

Any years where actual loans are less than the benchmark indicate a future borrowing requirement. Any years where actual loans outstanding exceed the benchmark represent an overborrowed position, which will result in excess cash requiring investment (unless any currently unknown future borrowing plans increase the benchmark loan debt requirement).

2.4 Core Funds and Expected Investment Balances

The application of resources (capital receipts, reserves etc.) to either finance capital expenditure or other budget decisions to support the revenue budget will have an ongoing impact on investments unless resources are supplemented each year from new sources (asset sales etc.). Detailed below are estimates of the year-end balances for each resource and anticipated day-to-day cash flow balances.

Year End Resources	2021/22 Actual	2022/23 Estimate	2023/24 Estimate	2024/25 Estimate	2025/26 Estimate
Useable Reserves	17,174	16,653	15,524	15,129	14,773
Capital receipts	0	0	0	0	0
Provisions	38	38	38	0	0
Total core funds	17,212	16,691	15,562	15,129	14,773
Working capital*	7,312	3,058	1,900	1,900	1,900
Under/over borrowing**	7,984	16,062	17,942	16,765	17,346
Expected investments	0	0	0	0	0

*Working capital balances shown are estimated year-end; these may be higher mid-year

2.5 Minimum Revenue Provision (MRP) Policy Statement

Under Regulation 22 an Authority that has financed capital expenditure by borrowing is required to make a provision each year through a revenue charge (MRP). The Authority is required to calculate a prudent provision of MRP which ensures that the outstanding debt liability is repaid over a period that is reasonably commensurate with that over which the capital expenditure provides benefits. The MRP Guidance (2018) gives four ready-made options for calculating MRP, but the Authority can use any other reasonable basis that it can justify as prudent.

The MRP policy statement requires full Authority approval in advance of each financial year.

The Authority is recommended to approve the following MRP Statement:

For expenditure incurred before 1 April 2008 which forms part of supported capital expenditure, the MRP policy will be:

- **4% reducing balance (regulatory method) -** MRP will follow the historical practice outlined in former regulations as 4% of the opening GF CFR balance less adjustment A (option 1);

From 1 April 2008 for all unsupported borrowing the MRP policy will be;

- **Asset life method (straight line)** – MRP will be based on the estimated life of the assets (option 3);

Capital expenditure will be subject to MRP charge in the year the asset becomes operational.

The Authority will apply the asset life method for any expenditure capitalised under a Capitalisation Direction.

MRP in respect of assets acquired under Finance Leases or PFI will be charged at an amount equal to the principal element of the annual repayment.

MRP Overpayments - Under the MRP guidance, any charges made more than the statutory MRP can be made, are known as voluntary revenue provision (VRP). VRP can be reclaimed in later years if deemed necessary or prudent. For these amounts to be reclaimed for use in the budget, this policy must disclose the cumulative overpayment made each year. There have been no VRP to date or planned for 2023/24.

3. BORROWING

The capital expenditure plans set out in Section 2 provide details of the service activity of the Authority. The treasury management function ensures that the Authority's cash is organised in accordance with the relevant professional codes, so that sufficient cash is available to meet this service activity and the Authority's Capital Strategy. This will involve both the organisation of the cash flow and, where capital plans require, the organisation of appropriate borrowing facilities. The strategy covers the relevant treasury / prudential indicators, the current and projected debt positions, and the Annual Investment Strategy.

3.1 Current Portfolio Position

The overall treasury management portfolio as at 26 February 2023 is shown below for both borrowing and investments.

Borrowing/External Debt	21/22	22/23	23/24	24/25	25/26
PWLB					
Opening Principal	29,040,744.88	28,138,845.46	26,736,946.05	35,354,126.64	43,959,387.23
New Borrowing	0.00	0.00	10,000,000.00	10,000,000.00	10,000,000.00
EIP Principal Repaid	-401,899.42	-401,899.41	-382,819.41	-363,739.41	-363,739.41
Maturity Principal Repaid	-500,000.00	-1,000,000.00	-1,000,000.00	-1,031,000.00	-1,042,000.00
Closing Principal	28,138,845.46	26,736,946.05	35,354,126.64	43,959,387.23	52,553,647.82
Non PWLB/Salix					
Opening Principal	20,750.01	6,916.67	0.00	0.00	0.00
New Borrowing	0.00	0.00	0.00	0.00	0.00
EIP Principal Repaid	0.00	0.00	0.00	0.00	0.00
Maturity Principal Repaid	-13,833.34	-6,916.67	0.00	0.00	0.00
Closing Principal	6,916.67	0.00	0.00	0.00	0.00
Total					
Opening Principal	29,061,494.89	28,145,762.13	26,736,946.05	35,354,126.64	43,959,387.23
New Borrowing	0.00	0.00	10,000,000.00	10,000,000.00	10,000,000.00
EIP Principal Repaid	-401,899.42	-401,899.41	-382,819.41	-363,739.41	-363,739.41
Maturity Principal Repaid	-513,833.34	-1,006,916.67	-1,000,000.00	-1,031,000.00	-1,042,000.00
Closing Principal	28,145,762.13	26,736,946.05	35,354,126.64	43,959,387.23	52,553,647.82
Total principal paid	-915,732.76	-1,408,816.08	-1,382,819.41	-1,394,739.41	-1,405,739.41

The Authority's loan portfolio primarily comprises loans payable at their maturity date. 16 out of 22 are of this type. The remaining loans are repayable on an equal instalment of principle basis (EIP) and total £2.1million at 31 March 2023.

Current Deposit Balances

LLOYDS CURRENT ACCOUNT	3,267,238.32
BARCLAYS CURRENT ACCOUNT	2,338,313.03
	5,605,551.35

Current Bank of England (BoE) rate is 4%

Lloyds is BoE rate -0:10

Barclays BoE rate -0:30

The above also includes the Authority's forward projections for borrowing in summary.

The table 2.1 provides an overview of the above and the position of actual external debt, against the CFR, highlighting any over or under borrowing and Members can see current and future projections result in a consistent, under borrowed position.

Within the range of prudential indicators there are several key indicators to ensure that the Authority operates its activities within well-defined limits. One of these is that the Authority needs to ensure that its gross debt does not, except in the short-term, exceed the total of the CFR in the preceding year plus the estimates of any additional CFR for 2023/24 and the following two financial years. This allows some flexibility for limited early borrowing for future years but ensures that borrowing is not undertaken for revenue or speculative purposes.

The Treasurer reports that the Authority complied with this prudential indicator in the current year and does not envisage difficulties for the future. This view takes account of current commitments, existing plans, and the proposals in this budget report.

3.2 Treasury Indicators: Limits to Borrowing Activity

The Operational Boundary

This is the limit beyond which external debt is not normally expected to exceed. In most cases, this would be a similar figure to the CFR, but may be lower or higher depending on the levels of actual debt and the ability to fund under-borrowing by other cash resources.

Operational Boundary £000	2022/23 Estimate	2023/24 Estimate	2024/25 Estimate	2025/26 Estimate
Debt	46,000	57,000	64,000	73,000
Other long-term liabilities	5,000	3,500	3,500	3,000
Total	51,000	60,500	67,500	76,000

The Authorised Limit for external debt

This is a key prudential indicator and represents a control on the maximum level of borrowing. This represents a legal limit beyond which external debt is prohibited, and this limit needs to be set or revised by the Full Authority. It reflects the level of external debt which, while not desired, could be afforded in the short-term, but is not sustainable in the longer-term.

- This is the statutory limit determined under section 3 (1) of the Local Government Act 2003. The Government retains an option to control either the total of all local authority plans, or those of a specific authority, although this power has not yet been exercised.

- The Authority is asked to approve the following Authorised Limit:

Authorised Limit £000	2022/23 Estimate	2023/24 Estimate	2024/25 Estimate	2025/26 Estimate
Debt	48,000	58,000	65,000	74,000
Other long-term liabilities	5,000	3,500	3,500	3,00
Total	53,000	61,500	68,500	77,000

Members can track both operational boundary and authorised limits for debt against the CFR in table 2.1.

3.3 Affordability Prudential Indicators

The previous sections cover the overall capital and control of borrowing prudential indicators, and within this framework prudential indicators are required to assess the affordability of the capital investment plans.   These provide an indication of the impact of the capital investment plans on the Authority's overall finances.   The Authority is asked to approve the following indicators: -

Ratio of Financing Costs to Net Revenue Stream

This indicator identifies the trend in the cost of capital, (borrowing and other long-term obligation costs net of investment income), against the net revenue stream.

	2021/22 Actual	2022/23 Estimate	2023/24 Estimate	2024/25 Estimate	2025/26 Estimate
Total	5.91%	6.68%	5.78%	6.93%	8.53%

The estimates of financing costs include current commitments and the proposals in this budget report.

3.4 Prospects for Interest Rates

The Authority has appointed Link Group as its treasury advisor and part of their service is to assist the Authority to formulate a view on interest rates. Link provided the following forecasts on 07 February 2023. These are forecasts for Bank Rate, average earnings and PWLB certainty rates, gilt yields plus 80 bps.

Link Group Interest Rate View	07.02.23												
	Mar-23	Jun-23	Sep-23	Dec-23	Mar-24	Jun-24	Sep-24	Dec-24	Mar-25	Jun-25	Sep-25	Dec-25	Mar-26
BANK RATE	4.25	4.50	4.50	4.25	4.00	3.75	3.25	3.00	2.75	2.75	2.50	2.50	2.50
3 month ave earnings	4.30	4.50	4.50	4.30	4.00	3.80	3.30	3.00	2.80	2.80	2.50	2.50	2.50
6 month ave earnings	4.40	4.50	4.40	4.20	3.90	3.70	3.20	2.90	2.80	2.80	2.60	2.60	2.60
12 month ave earnings	4.50	4.50	4.40	4.20	3.80	3.60	3.10	2.70	2.70	2.70	2.70	2.70	2.70
5 yr PWLB	4.00	4.00	3.90	3.80	3.70	3.60	3.50	3.40	3.30	3.20	3.10	3.10	3.10
10 yr PWLB	4.20	4.20	4.10	4.00	3.90	3.80	3.60	3.50	3.50	3.40	3.30	3.30	3.20
25 yr PWLB	4.60	4.60	4.40	4.30	4.20	4.10	3.90	3.80	3.70	3.60	3.50	3.40	3.40
50 yr PWLB	4.30	4.30	4.20	4.10	3.90	3.80	3.60	3.60	3.40	3.30	3.20	3.20	3.10

Additional notes by Link on this forecast table: -

- The central forecast for interest rates reflects a view that the Monetary Policy Committee (MPC) would be keen to further demonstrate its anti-inflation credentials by delivering a succession of rate increases. This has happened but the Government's continued policy of emphasising fiscal rectitude will probably mean bank rate will not need to increase to further than 4.5%.

- It is anticipated the Bank of England (the Bank) will be keen to loosen monetary policy when the worst of the inflationary pressures are behind us but that timing will be one of fine judgment: cut too soon, and inflationary pressures may well build up further; cut too late and any downturn or recession may be prolonged. One judgment is that there will be scope for an early Christmas present for households with a December rate cut priced in, ahead of further reductions in 2024 and 2025.

- The CPI measure of inflation looks to have peaked at 11.1% in Q4 2022, currently 10.5%. Despite the cost-of-living squeeze that is still taking shape, the Bank will want to see evidence that wages are not spiralling upwards in what is evidently a very tight labour market.

- Regarding the plan to sell £10bn of gilts back into the market each quarter i.e., quantitative tightening, this has started and will focus on the short, medium, and longer end of the curve in equal measure.

- In the coming months, forecasts will be guided not only by economic data releases and clarifications from the MPC over its monetary policies and the Government over its fiscal policies, but the on-going conflict between Russia and Ukraine. More recently, the heightened tensions between China/Taiwan/US also have the potential to have a wider and negative economic impact.

- On the positive side, consumers are still estimated to be sitting on significant excess savings left over from the pandemic so that will cushion some of the impact of the above challenges. However, most of those are held by more affluent people whereas lower income families already spend nearly all their income on essentials such as food, energy, and rent/mortgage payments.

PWLB RATES

- The yield curve movements have become less volatile of late, and PWLB 5 to 50 years certainty rates are, generally, in the range of 3.75 - 4.75%.

- We view the markets as having built in, nearly all the effects on gilt yields of the likely increases in bank rate and the elevated inflation outlook.

The balance of risks to the UK economy: -
- The overall balance of risks to economic growth in the UK is to the downside.

Downside risks to current forecasts for UK gilt yields and PWLB rates include: -

- **Labour and supply shortages** prove more enduring and disruptive and depress economic activity (accepting that in the near-term this is also an upside risk to inflation and, thus, rising gilt yields).

- **The Bank of England** acts too quickly, or too far, over the coming year to raise bank rate and causes UK economic growth, and increases in inflation, to be weaker than we currently anticipate.

- **UK / EU trade arrangements** – if there was a major impact on trade flows and financial services due to complications or lack of co-operation in sorting out significant remaining issues.

- **Geopolitical risks,** for example in Ukraine/Russia, China/Taiwan/US, Iran, North Korea, and Middle Eastern countries, which could lead to increasing safe-haven flows.

Upside risks to current forecasts for UK gilt yields and PWLB rates: -
- The **Bank of England is too slow** in its pace and strength of increases in Bank Rate and, therefore, allows inflationary pressures to remain elevated for a longer period within the UK economy, which then necessitates bank rate staying higher for longer than we currently project or even necessitates a further series of increases in later in the year or in 2024.

- **The pound weakens** because of a lack of confidence in the UK Government's fiscal policies, resulting in investors pricing in a risk premium for holding UK sovereign debt.

- Longer-term **US treasury yields** rise strongly if inflation remains more stubborn than the market currently anticipates, pulling gilt yields up higher consequently.

- Projected **gilt issuance, inclusive of natural maturities and QT,** could be too much for the markets to comfortably digest without higher yields compensating.

Borrowing advice: Our long-term (beyond 10 years) forecast for bank rate stands at 2.5%. As all PWLB certainty rates are currently above this level, borrowing strategies will need to be reviewed in that context. Better value can generally be obtained at the shorter end of the curve and short-dated fixed LA to LA monies should be considered. Temporary borrowing rates are likely, however, to remain near bank rate and may also prove attractive whilst the market waits for inflation, and therein gilt yields, to drop back later in 2023.

Our suggested budgeted earnings rates for investments up to about three months' duration in each financial year are rounded to the nearest 10bps as follows: -

Average earnings in each year	
2022/23 (remainder)	4.30%
2023/24	4.30%
2024/25	3.20%
2025/26	2.60%
2026/27	2.50%
Years 6 to 10	2.80%
Years 10+	2.80%

As there are so many variables at this time, caution must be exercised in respect of all interest rate forecasts.

Our interest rate forecast for bank rate is in steps of 25 bps, whereas PWLB forecasts have been rounded to the nearest 10 bps and are central forecasts within bands of + / - 25 bps. Naturally, we continue to monitor events and will update our forecasts as and when appropriate.

3.5 Borrowing Strategy

The Authority is currently maintaining an under-borrowed position. This means that the CFR has not been fully funded with loan debt as cash supporting the Authority's reserves, balances and cash flow has been used as a temporary measure. This strategy is prudent as medium and longer dated borrowing rates are expected to fall from their current levels once prevailing inflation concerns are addressed by tighter near-term monetary policy. That is, bank rate increases over the first half of 2023.

Against this background and the risks within the economic forecast, caution will be adopted with the 2023/24 treasury operations. The Treasurer will monitor interest rates in financial markets and adopt a pragmatic approach to changing circumstances:

- *if it was felt that there was a significant risk of a sharp FALL in borrowing rates,* then borrowing will be postponed.

- *if it was felt that there was a significant risk of a much sharper RISE in borrowing rates than that currently forecast,* fixed rate funding will be drawn whilst interest rates are lower than they are projected to be in the next few years.

Any decisions will be reported to the FAPM committee at the next available opportunity.

3.6 Policy on Borrowing in Advance of Need

The Authority will not borrow more than or in advance of its needs purely to profit from the investment of the extra sums borrowed. Any decision to borrow in advance will be within forward approved CFR estimates and will be considered carefully to ensure that value for money can be demonstrated and that the Authority can ensure the security of such funds.

3.7 Rescheduling

Rescheduling of current borrowing in our debt portfolio is unlikely to occur as there is still a large difference between premature redemption rates and new borrowing rates.

If rescheduling is to be undertaken, it will be reported to the FAPM committee at the earliest meeting following its action.

3.8 New Financial Institutions as a Source of Borrowing and / or Types of Borrowing

Currently the PWLB Certainty Rate is set at gilts + 80 basis points. However, consideration may still need to be given to sourcing funding from the following for the following reasons:

- Local authorities (primarily shorter dated maturities out to 3 years or so – generally still cheaper than the Certainty Rate).

Our advisors will keep us informed as to the relative merits of alternative funding sources.

3.9 Approved Sources of Long and Short-term Borrowing

On Balance Sheet	Fixed
PWLB	●
Local Authorities	●
Banks	●
Local Authority Bills	●
Overdraft	●
Internal (capital receipts & revenue balances)	●
Finance Leases	●

Variable borrowing will not be undertaken as the Authority seeks budget certainty.

4 ANNUAL INVESTMENT STRATEGY

4.1 Investment Policy – Management of Risk

The Welsh Government and CIPFA have extended the meaning of 'investments' to include both financial and non-financial investments. This report deals solely with treasury (financial) investments, (as managed by the treasury management team). Non-financial investments, essentially the purchase of income yielding assets and service investments is not undertaken or intended to be undertaken by this Authority.

The Authority's investment policy has regard to the following: -

- The Welsh Government's Guidance on Local Government Investments ("the Guidance")
- CIPFA Treasury Management in Public Services Code of Practice and Cross Sectoral Guidance Notes 2021 ("the Code")
- CIPFA Treasury Management Guidance Notes 2021

The Authority's investment priorities will be security first, portfolio liquidity second and then yield (return). The Authority will aim to achieve the optimum return (yield) on its investments commensurate with proper levels of security and liquidity and with regard to the Authority's risk appetite.

The above guidance from Welsh Government and CIPFA places a high priority on the management of risk. This Authority has adopted a prudent approach to managing risk and defines its risk appetite by the following means: -

1. Minimum acceptable **credit criteria** are applied to generate a list of highly creditworthy counterparties. This also enables diversification and thus avoidance of concentration risk. The key ratings used to monitor counterparties are the short-term and long-term ratings.

2. **Other information:** ratings will not be the sole determinant of the quality of an institution; it is important to continually assess and monitor the financial sector on both a micro and macro basis and in relation to the economic and political environments in which institutions operate. The assessment will also take account of information that reflects the opinion of the markets. To achieve this consideration the Authority will engage with its advisors to maintain a monitor on market pricing such as **"credit default swaps"** and overlay that information on top of the credit ratings.

3. **Other information sources** used will include the financial press, share price and other such information pertaining to the financial sector to establish the most robust scrutiny process on the suitability of potential investment counterparties.

4. This Authority has defined the list of **types of investment instruments** that the treasury management team are authorised to use. This Authority will use 'specified' investments only.

   Specified investments are those with a high level of credit quality and subject to a maturity limit of one year or have less than a year left to run to maturity, if originally, they were classified as being non-specified investments solely due to the maturity period exceeding one year.

Non-specified investments are those with less high credit quality, may be for periods more than one year, and/or are more complex instruments which require greater consideration by members and officers before being authorised for use.

5. **Lending limits** i.e., amounts and maturity for each counterparty will be set at £10 million and for <365 days.

6. **Transaction limits** are set for each type of investment in 4.2.

7. Investments will only be placed with counterparties from countries with a specified minimum **sovereign rating**, (see paragraph 4.3).

8. This Authority has engaged **external consultants**, (see paragraph 1.4), to provide expert advice on how to optimise an appropriate balance of security, liquidity, and yield, given the risk appetite of this Authority in the context of the expected level of cash balances and need for liquidity throughout the year.

9. All investments will be denominated in **sterling**.

10. As a result of the change in accounting standards for 2022/23 under IFRS 9, this Authority will consider the implications of investment instruments which could result in an adverse movement in the value of the amount invested and resultant charges at the end of the year to the General Fund. (The Welsh Government has passed a statutory override to allow Welsh local authorities time to adjust their portfolio of all pooled investments by delaying implementation of IFRS 9 for five years until 31.3.23. At the current juncture it has not been determined whether a further extension to the over-ride will be agreed by Government.

However, this Authority will also pursue **value for money** in treasury management and will monitor the yield from investment income against appropriate benchmarks for investment performance, (see paragraph 4.5). Regular monitoring of investment performance will be carried out during the year.

Changes in risk management policy from last year.
The above criteria are unchanged from last year with the exception of counter parties from the UK only, whilst our investments will be in sterling, our potential counterparties can be chosen from the country approved list in the appendices.

4.2 Creditworthiness Policy

This Authority applies the creditworthiness service provided by the Link Group. This service employs a sophisticated modelling approach utilising credit ratings from the three main credit rating agencies - Fitch, Moody's and Standard & Poor's. The credit ratings of counterparties are supplemented with the following overlays: -

1. "watches" and "outlooks" from credit rating agencies;
2. CDS spreads that may give early warning of changes in credit ratings;
3. sovereign ratings to select counterparties from only the most creditworthy countries.

This modelling approach combines credit ratings, and any assigned Watches and Outlooks, in a weighted scoring system which is then combined with an overlay of CDS

spreads. The end-product of this is a series of colour coded bands which indicate the relative creditworthiness of counterparties. These colour codes are used by the Authority to determine the suggested duration for investments. The Authority will, therefore, use counterparties within the following durational bands.

- Yellow   5 years *
- Dark pink   5 years for Ultra-Short Dated Bond Funds with a credit score of 1.25
- Light pink   5 years for Ultra-Short Dated Bond Funds with a credit score of 1.5
- Purple   2 years
- Blue   1 year (only applies to nationalised or semi nationalised UK Banks)
- Orange   1 year
- Red   6 months
- Green   100 days

The Link creditworthiness service uses a wider array of information other than just primary ratings. Furthermore, by using a risk weighted scoring system, it does not give undue preponderance to just one agency's ratings.

Typically, the minimum credit ratings criteria the Authority uses will be a short-term rating (Fitch or equivalents) of F1 and a long-term rating of A-. There may be occasions when the counterparty ratings from one rating agency are marginally lower than these ratings but may still be used. In these instances, consideration will be given to the whole range of ratings available, or other topical market information, to support their use.

All credit ratings will be monitored before an investment is made and during. The Authority is alerted to changes to ratings of all three agencies through its use of the Link creditworthiness service.

- if a downgrade results in the counterparty / investment scheme no longer meeting the Authority's minimum criteria, its further use as a new investment will be withdrawn immediately.
- in addition to the use of credit ratings the Authority will be advised of information in movements in Credit Default Swap spreads against the iTraxx European Senior Financials benchmark and other market data on a daily basis via its Passport website, provided exclusively to it by Link. Extreme market movements may result in downgrade of an institution or removal from the Authority's lending list.

Sole reliance will not be placed on the use of this external service. In addition, this Authority will also use market data and market information, as well as information on any external support for banks to help support its decision-making process.

Y	Pi1	Pi2	P	B	O	R	G	N/C
1	1.25	1.5	2	3	4	5	6	7
Up to 5yrs	Up to 5yrs	Up to 5yrs	Up to 2yrs	Up to 1yr	Up to 1yr	Up to 6mths	Up to 100days	No Colour

Creditworthiness.
Significant levels of downgrades to Short and Long-Term credit ratings have not materialised since the crisis in March 2020. In the main, where they did change, any alterations were limited to Outlooks. However, more recently the UK sovereign debt rating has been placed on Negative Outlook by the three major rating agencies in the wake of the Truss/Kwarteng unfunded tax-cuts policy. Although the Sunak/Hunt government has calmed markets, the outcome of the rating agency reviews is unknown at present, but it is possible the UK sovereign debt rating will be downgraded.

Accordingly, when setting minimum sovereign debt ratings, this Authority will not set a minimum rating for the UK.

CDS prices
Although bank CDS prices, (these are market indicators of credit risk), spiked upwards during the days of the Truss/Kwarteng government, they have returned to more average levels since then. However, sentiment can easily shift, so it will remain important to undertake continual monitoring of all aspects of risk and return in the current circumstances. Link monitor CDS prices as part of their creditworthiness service to local authorities and the Authority has access to this information via its Link-provided Passport portal.

Limits
Due care will be taken to consider the exposure of the Authority's total investment portfolio to non-specified investments, countries, groups and sectors.

    a. **Non-specified treasury management investment limit.** The Authority has determined that it will not undertake these investments

    b. **Country limit.** The Authority has determined that it will only use approved counterparties from the UK and from countries with a **minimum sovereign credit rating of *AA-.*** The list of countries that qualify using this credit criteria as at the date of this report are shown in the appendices below. This list will be added to, or deducted from, by officers should ratings change in accordance with this policy.

4.3 Investment Strategy

In-house funds

Investments will be made with reference to the core balance and cash flow requirements and the outlook for short-term interest rates (i.e., rates for investments up to 12 months). Greater returns are usually obtainable by investing for longer periods. The current shape of the yield curve suggests that is the case at present, but there is the prospect of bank rate peaking in the first half of 2023 and possibly reducing as early as the latter part of 2023 so an agile investment strategy would be appropriate to optimise returns.

Accordingly, while most cash balances are required to manage the ups and downs of cash flow*,* where cash sums can be identified that could be invested for longer periods, the value to be obtained from longer-term investments will be carefully assessed.

Investment returns expectations.
The current forecast shown in paragraph 3.3, includes a forecast for bank rate to reach 4.5% in Q2 2023.

The suggested budgeted investment earnings rates for returns on investments placed for periods up to about three months during each financial year are as follows: -

Average earnings in each year	
2022/23 (remainder)	4.30%
2023/24	4.30%
2024/25	3.20%
2025/26	2.60%
2026/27	2.50%
Years 6 to 10	2.80%
Years 10+	2.80%

The above will be used as a benchmark for actual returns to be assessed against.

For its cash flow generated balances, the Authority will seek to utilise mainly its business accounts.

4.4 Investment Performance / Risk Benchmarking

This Authority will use an investment benchmark to assess the investment performance of its investment portfolio, as above.

4.5 End of Year Investment Report

At the end of the financial year, the Authority will report on its investment activity as part of its Annual Treasury Report.

4.6 External Fund Managers

The Authority does not use or plan to use external fund managers.

5 APPENDICES

1. Economic background

2. Approved countries for investments

3. Treasury management scheme of delegation

4. The treasury management role of the section 112 officer

5.1 ECONOMIC BACKGROUND

Against a backdrop of stubborn inflationary pressures, the easing of Covid restrictions in most developed economies, the Russian invasion of Ukraine, and a range of different UK Government policies, it is no surprise that UK interest rates have been volatile right across the curve, from Bank Rate through to 50-year gilt yields, for all of 2022.

Market commentators' misplaced optimism around inflation has been the root cause of the rout in the bond markets with, for example, UK, EZ and US 10-year yields all rising by over 200bps in 2022. The table below provides a snapshot of the conundrum facing central banks: inflation is elevated but labour markets are extra-ordinarily tight, making it an issue of fine judgment as to how far monetary policy needs to tighten.

	UK	Eurozone	US
Bank Rate	4.0%	2.5%	4.5%-4.75%
GDP	-0.3%q/q Q3 (1.9%y/y)	+0.1%q/q Q4 (1.9%y/y)	2.9% Q4 Annualised
Inflation	10.5%y/y (Dec)	8.5%y/y (Jan)	6.5%y/y (Dec)
Unemployment Rate	3.7% (Nov)	6.6% (Dec)	3.4% (Jan)

Q2 of 2022 saw UK GDP revised upwards to +0.2% q/q, but this was quickly reversed in the third quarter, albeit some of the fall in GDP can be placed at the foot of the extra Bank Holiday in the wake of the Queen's passing. Nevertheless, CPI inflation picked up to what should be a peak reading of 11.1% in October, although with further increases in the gas and electricity price caps pencilled in for April 2023, and the cap potentially rising from an average of £2,500 to £3,000 per household, there is still a possibility that inflation will face some further upward pressures before dropping back slowly through 2023 to finish the year in the range of 4% - 5%.

The UK unemployment rate fell to a 48-year low of 3.6%, and this despite a net migration increase of c500k. The fact is that with many economic participants registered as long-term sick, the UK labour force actually shrunk by c500k in the year to June. Without an increase in the labour force participation rate, it is hard to see how the UK economy will be able to grow its way to prosperity, and with average wage increases running at over 6% the MPC will be concerned that wage inflation will prove just as sticky as major supply-side shocks to food and energy that have endured since Russia's invasion of Ukraine on 22 February 2022.

Throughout Q3 Bank Rate increased, finishing the quarter at 2.25% (an increase of 1%). Since then, rates rose to 3.5% in December and 4% in February and the market currently expects Bank Rate to hit 4.5% by June 2023.

Following a Conservative Party leadership contest, Liz Truss became Prime Minister for a tumultuous seven weeks that ran through September and October. Put simply, the markets did not like the unfunded tax-cutting and heavy spending policies put forward by her Chancellor, Kwasi Kwarteng, and their reign lasted barely seven weeks before being replaced by Prime Minister Rishi Sunak and Chancellor Jeremy Hunt. Their Autumn Statement of the 17th November gave rise to a net £55bn fiscal tightening, although much of the "heavy lifting" has been left for the next Parliament to deliver. However, the markets liked what they heard, and UK gilt yields have completely reversed the increases seen under the previous tenants of No10/11 Downing Street.

Globally, though, all the major economies are expected to struggle in the near term. The fall below 50 in the composite Purchasing Manager Indices for the UK, US, EZ and China all point

to at least one, if not more, quarters of GDP contraction in 2023. In November, the MPC projected eight quarters of negative growth for the UK lasting throughout 2023 and 2024, but with Bank Rate set to peak at lower levels than previously priced in by the markets and the fiscal tightening deferred to some extent, it is not clear that things will be as bad as first anticipated by the Bank. Indeed, their February Monetary Policy Report suggests five quarters of negative growth, albeit a shallow recession with GDP expected to shrink 0.5% in 2023 and 0.25% in 2024.

The £ has remained resilient of late, recovering from a record low of $1.035, on the Monday following the Truss government's "fiscal event", to $1.22. Notwithstanding the £'s better run of late, 2023 is likely to see a housing correction of some magnitude as fixed-rate mortgages have moved above 5% and affordability has been squeezed despite proposed Stamp Duty cuts remaining in place.

In the table below, the rise in gilt yields, and therein PWLB rates, through the first nine months of 2022/23 is clear to see.

PWLB Rates 1.4.22 - 30.12.22
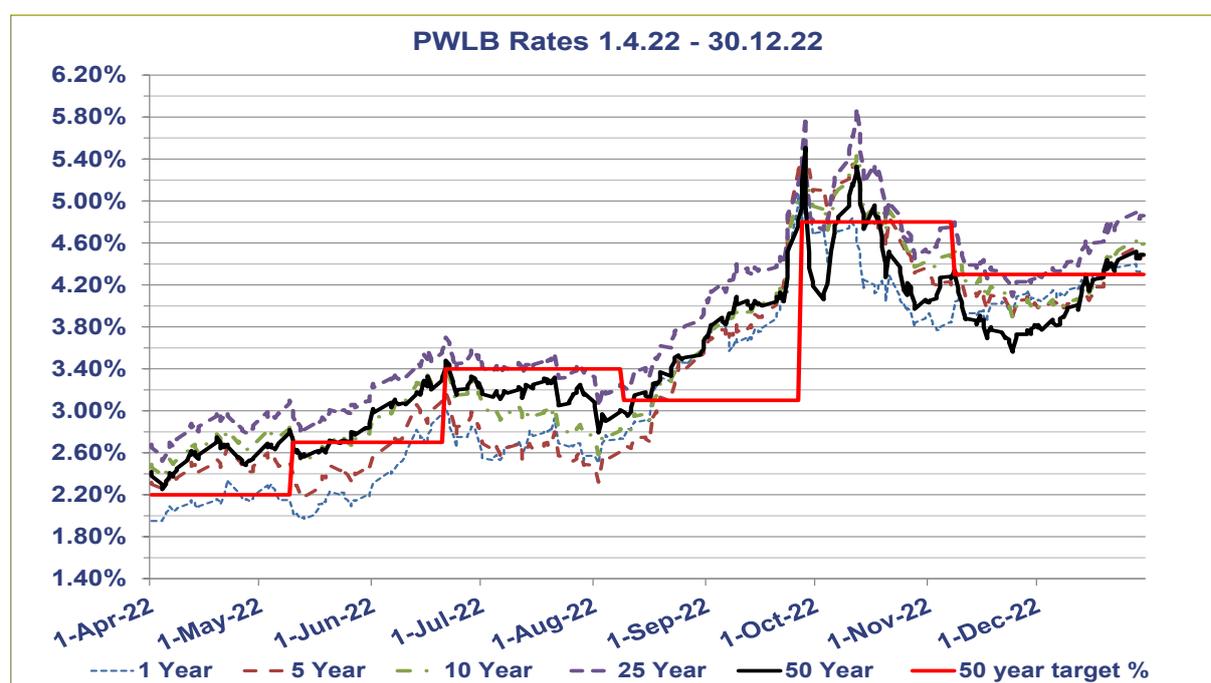
However, the peak in rates on 28th September as illustrated in the table covering April to December 2022 below, has been followed by the whole curve shifting lower. PWLB rates at the front end of the curve are generally over 1.25% lower now whilst the 50 years is also over 1% lower.

HIGH/LOW/AVERAGE PWLB RATES FOR 01.04.22 − 30.12.22

	1 Year	5 Year	10 Year	25 Year	50 Year
Low	1.95%	2.18%	2.36%	2.52%	2.25%
Date	01/04/2022	13/05/2022	04/04/2022	04/04/2022	04/04/2022
High	5.11%	5.44%	5.45%	5.88%	5.51%
Date	28/09/2022	28/09/2022	12/10/2022	12/10/2022	28/09/2022
Average	3.26%	3.41%	3.57%	3.85%	3.51%
Spread	3.16%	3.26%	3.09%	3.36%	3.26%

The S&P 500 and FTSE 100 have climbed in the early weeks of 2023, albeit the former finished 19% down in 2022 whilst the latter finished up 1%.

CENTRAL BANK CONCERNS – **DECEMBER 2022 & FEBRUARY 2023**

In December, the Fed decided to push up US rates by 0.5% to a range of 4.25% to 4.5%, whilst the MPC followed by raising Bank Rate from 3% to 3.5%, in line with market expectations. EZ rates have also increased to 2% with further tightening in the pipeline.

Having said that, the sentiment expressed in the press conferences in the US and the UK were very different. In the US, Fed Chair, Jerome Powell, stated that rates will be elevated and stay higher for longer than markets had expected. Governor Bailey, here in the UK, said the opposite and explained that the two economies are positioned very differently so you should not, therefore, expect the same policy or messaging.

At the start of February, US rates have further increased by 0.25% to a range of 4.5% - 4.75%, whilst UK Bank Rate increased 0.5% to 4%.

Regarding UK market expectations, although they now expect Bank Rate to peak within a lower range of 4.25% - 4.5%, caution is advised as the Bank of England Quarterly Monetary Policy Reports have carried a dovish message over the course of the last year, only for the Bank to have to play catch-up as the inflationary data and labour market have proven stronger than expected.

In addition, the Bank's central message that GDP will fall for five quarters starting with Q1 2023 may prove to be a little pessimistic. Will the excess savings accumulated by households through the Covid lockdowns provide a spending buffer for the economy – at least to a degree? Ultimately, however, it will not only be inflation data but also employment data that will mostly impact the decision-making process, although any softening in the interest rate outlook in the US may also have an effect (just as, conversely, greater tightening may also).

5.2 APPROVED COUNTRIES FOR INVESTMENTS

This list is based on those countries which have sovereign ratings of AA- or higher, (we show the lowest rating from Fitch, Moody's and S&P) and also, (except - at the time of writing - for Hong Kong and Luxembourg), have banks operating in sterling markets which have credit ratings of green or above in the Link creditworthiness service.

Based on lowest available rating

AAA

- Australia
- Denmark
- Germany
- Netherlands
- Norway
- Singapore
- Sweden
- Switzerland

AA+

- Canada
- Finland
- U.S.A.

AA

- Abu Dhabi (UAE)
- France

AA-

- Belgium
- Qatar
- **U.K.**

5.3 TREASURY MANAGEMENT SCHEME OF DELEGATION

(i) Fire Authority

- receiving and reviewing reports on treasury management policies, practices and activities;
- approval of annual strategy.

(ii) FAPM committees

- approval of/amendments to the organisation's adopted clauses, treasury management policy statement and treasury management practices;
- budget consideration and approval;
- approval of the division of responsibilities;
- receiving and reviewing regular monitoring reports and acting on recommendations;
- approving the selection of external service providers and agreeing terms of appointment.

(iii) Treasurer with responsibility for scrutiny

- reviewing the treasury management policy and procedures and making recommendations to the responsible body.

5.4 THE TREASURY MANAGEMENT ROLE OF THE SECTION 112 OFFICER

The S112 (responsible) officer

- recommending clauses, treasury management policy/practices for approval, reviewing the same regularly, and monitoring compliance;

- submitting regular treasury management policy reports;

- submitting budgets and budget variations;

- receiving and reviewing management information reports;

- reviewing the performance of the treasury management function;

- ensuring the adequacy of treasury management resources and skills, and the effective division of responsibilities within the treasury management function;

- ensuring the adequacy of internal audit, and liaising with external audit;

- recommending the appointment of external service providers.

- preparation of a Capital Strategy to include capital expenditure, capital financing, non-financial investments and treasury management, with a long-term timeframe *(to be determined in accordance with local priorities.)*

- ensuring that the Capital Strategy is prudent, sustainable, affordable and prudent in the long term and provides value for money

- ensuring that due diligence has been carried out on all treasury investments and is in accordance with the risk appetite of the authority

- ensure that the Authority has appropriate legal powers to undertake expenditure on non-financial assets and their financing

- ensuring the proportionality of all investments so that the Authority does not undertake a level of investing which exposes the Authority to an excessive level of risk compared to its financial resources

- ensuring that an adequate governance process is in place for the approval, monitoring and ongoing risk management of all non-financial investments and long-term liabilities

- provision to members of a schedule of all non-treasury investments including material investments in subsidiaries, joint ventures, loans and financial guarantees

- ensuring that members are adequately informed and understand the risk exposures taken on by the Authority

- ensuring that the Authority has adequate expertise, either in house or externally provided, to carry out the above

- creation of Treasury Management Practices which specifically deal with how non treasury investments will be carried out and managed, to include the following: -

    o *Risk management (TMP1 and schedules), including investment and risk management criteria for any material non-treasury investment portfolios;*

    o *Performance measurement and management (TMP2 and schedules), including methodology and criteria for assessing the performance and success of non-treasury investments;*

    o *Decision making, governance and organisation (TMP5 and schedules), including a statement of the governance requirements for decision making in relation to non-treasury investments; and arrangements to ensure that appropriate professional due diligence is carried out to support decision making;*

- o *Reporting and management information (TMP6 and schedules), including where and how often monitoring reports are taken;*

- o *Training and qualifications (TMP10 and schedules), including how the relevant knowledge and skills in relation to non-treasury investments will be arranged.*

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SOUTH WALES FIRE & RESCUE AUTHORITY   AGENDA ITEM NO 6
13 MARCH 2023

FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

REPORT OF THE ASSISTANT CHIEF OFFICER CORPORATE SERVICES

INTERNAL AUDIT PROGRAMME

THIS REPORT IS FOR DECISION

REPORT APPROVED BY ASSISTANT CHIEF OFFICER CORPORATE SERVICES
REPORT PRESENTED BY TEMP HEAD OF FINANCE & INTERNAL AUDITOR

SUMMARY
This report details the proposed Internal Audit Annual Plan 2023/2024 for Members approval.

RECOMMENDATION
That Members approve the Internal Audit Annual Plan for 2023/2024.

---

1. **BACKGROUND**

1.1 As a requirement of the internal audit work of the Fire & Rescue Authority, it is necessary for Members of the Finance, Audit & Performance Management Committee to agree to an Internal Audit Annual Plan for the financial year.

1.2 Following a tender process run during March 2022, TIAA have been awarded a contract for internal audit services for an initial period of three years commencing on 1 April 2022 with an option to extend for a further 2 years beyond this should the Service choose.

2. **ISSUE**

2.1 The attached Appendix 1 is the proposed annual Internal Audit Plan for 2023/2024 for Members consideration. The rationale for the plan is contained within the appended report.

2.2 To monitor progress against the internal audit annual plan, regular reports will be presented to this committee outlining the audits

undertaken, the status of reports and the recommendations being made by the internal auditors.

3. IMPLICATIONS

3.1 Community and Environment

Equality, Diversity, and Inclusion	No
Welsh Language	No
Wellbeing of Future Generations (Wales) Act 2015	No
Socio Economic Duty	No
Sustainability/Environment/Carbon Reduction	No
Safeguarding	No
Consultation and Communications	No
Consultation with Representative Bodies	No
Impact Assessment	No

3.1.1 There are no additional financial issues arising because of this report.

3.2 Regulatory, Strategy and Policy

Legal	No	Data Protection / Privacy	No
Financial	No	Health, Safety and Wellbeing	No
Procurement	No	Governance & Audit	Yes
Corporate Risk	Yes	Service Policy	No
Information Management	No	National Policy	No

3.3 Resources, Assets and Delivery

Human Resource and People Development	No
Assets and Resources (Property/Fleet/ICT/Equipment)	No
Service Delivery	Yes
Procurement	No
Budget Revenue/Capital	No

4. EVALUATION & CONCLUSIONS

4.1 The work proposed to be undertaken by Internal Audit as part of the proposed Annual Plan 2023/2024 is allocated as a budget line within the revenue budget for 2023/2024.

4.2 The issues raised within this report have no adverse impact on the protected characteristics and will be considered during the audit process.

5.   RECOMMENDATION

5.1   That Members approve the Internal Audit Annual Plan for 2023/2024.

Contact Officer:	Lisa Mullan Temporary Head of Finance, Procurement & Property
Background Papers	Appendix 1 – Internal Audit Annual Plan 2023/2024

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South Wales Fire and Rescue Service

Indicative Audit Strategy 2023/26 and Annual Plan 2023/24

2023/24

FEBRUARY 2023

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OVERVIEW

Introduction

The Audit Plan for 2023/24 has been informed by a risk assessment carried out across our fire service clients and by an updated audit risk assessment to ensure that planned coverage for the year is focussed on the key audit risks, and that the coverage will enable a robust annual Head of Internal Audit Opinion to be provided.

Key Emerging Themes

This year will continue to be another challenging year for the fire service in terms of the macroeconomic and financial environment, spiralling costs and the labour market. We have identified a number of key areas which will individually and collectively affect the sector in various ways; these require consideration when planning internal audit coverage.

Macroeconomic and financial environment: The UK economy has experienced a sequence of significant events including Brexit, the pandemic and the conflict in Ukraine. Further challenges lie ahead as the government seeks to cut spending and raises taxes to plug the gap in the UK's finances. Rapid and increasingly prolonged inflation, rising interest rates, shortages in the labour market and continuing supply chain disruption are leading to increased costs and a challenging financial situation for many.

Increasing wage demands: One of the consequences of the economic situation is demands for significant pay increases to help combat the effect of inflation and a perceived lack of pay progression for over a decade. This has seen strike action taking place or planned by rail workers, postal workers, lecturers, bus drivers and nurses. This will put pressure on organisational budgets and present challenges in recruitment.

Cyber security: This continues to be one of the highest ranked risks for organisations and shows no sign of going away. The widespread move to remote working and increased online service delivery has made organisations more vulnerable to phishing, malware, and ransomware attacks, particularly where there has been a lack of investment in infrastructure.

Climate change: Global warming can lead to physical, operational, financial and reputational risks arising. 'Loss and damage' - the phrase used to describe the destruction being wrought by the climate crisis - will remain high on the agenda. Aside from the obvious environmental impact, climate change can stress local economies, threaten business models and pose widespread disruption to organisations.

Adequacy of the planned audit coverage

The reviews identified in the audit plan for 2023/24 support the Head of Internal Audit's annual opinion on the overall adequacy and effectiveness of South Wales Fire and Rescue Service's framework of governance, risk management and control as required by TIAA's charter. The reviews have been identified from your assurance framework, risk registers and key emerging themes.

INTERNAL AUDIT PLAN

Audit Strategy Methodology

We adopt a proprietary risk-based approach to determining your audit needs each year which includes reviewing your risk register and risk management framework, the regulatory framework, external audit recommendations and previous internal audit work for the organisation, together with key corporate documentation such as your business and corporate plan, standing orders, and financial regulations. For 2023/24, we have conducted an analysis of the key risks facing the sector and client base more broadly to inform our annual planning. The Audit Strategy is based predominantly on our understanding of the inherent risks facing South Wales Fire and Rescue Service and those within the sector and has been developed with senior management and the Finance and Performance Management Committee.

Our approach is based on the International Standards for the Professional Practice of Internal Auditing which have been developed by the Institute of Internal Auditors (IIA) and incorporate the Public Sector Internal Audit Standards (PSIAS). In 2022, TIAA commissioned an External Quality Assessment (EQA) of its internal audit service. The independent EQA assessor was able to conclude that TIAA 'generally conforms to the requirements of the Public Sector Internal Audit Standards and the mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF).' 'Generally conforms' is the highest rating that can be achieved using the IIA's EQA assessment model.

Risk Prioritisation

Each year an updated risk assessment is carried out to ensure the Audit Strategy remains fully aligned with the key risks facing South Wales Fire and Rescue Service. We take in to account any emerging or heightened risks that are facing the sector, to ensure that the work of internal audit remains appropriately focused. Links to specific strategic risks are also contained in the Internal Audit Strategy.

Internal Audit Strategy and Plan

Following the risk prioritisation review, the Audit Strategy has been produced (Appendix A) and the Annual Plan (Appendix B) sets out the reviews that will be carried out, the planned times and the high-level scopes for each of these reviews.

The Annual Plan will be subject to ongoing review and could change as the risks change for the organisation and will be formally reviewed with senior management and the Finance and Performance Management Committee mid-way through the financial year or should a significant issue arise.

The overall agreed time for the delivery of each assignment within the Annual Plan includes: research; preparation and issue of terms of reference; site work; production and review of working papers; and reporting.

The Annual Plan has been prepared on the assumption that the expected controls will be in place.

The total number of days required to deliver the Audit Plan is as agreed in the contract between TIAA and South Wales Fire and Rescue Service. This number of days is fixed and it is TIAA's responsibility to deliver the Audit Plan for this number of days. Where South Wales Fire and Rescue Service agrees additional work the required number of days and the aggregate day rate will be agreed in advance with South Wales Fire and Rescue Service and will be clearly set out in the terms of reference for the additional review(s).

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Release of Report

The table below sets out the history of this plan.

Date plan issued:	15th February 2023

APPENDIX A: ROLLING STRATEGIC PLAN

Review Area	Type	2023/24	2024/25	2025/26
Governance				
Collaboration – Co-location	Assurance			✓
Sustainability	Assurance	✓		
Governance	Assurance		✓	
Strategic Planning	Assurance		✓	
Risk				
Risk Management – Mitigating Controls	Assurance	✓	✓	✓
ICT				
General Data Protection Regulation (GDPR)	Assurance			✓
ICT Network Security	Assurance			✓
O365 Implementation	Assurance	✓		
ICT Data Assurance	Assurance	✓		
ICT Strategy	Assurance		✓	
ICT Cyber Security	Assurance		✓	
Emergency Services Network	Assurance	✓		
Finance				
Key Financial Controls	Assurance		✓	✓
Assets – Mobile Phones	Assurance	✓		
Sustainable Procurement	Assurance			✓
Payroll	Assurance			✓

Review Area	Type	2023/24	2024/25	2025/26
Contract Management	Assurance			✓
Anti-Fraud	Compliance		✓	
Budgetary Control	Assurance	✓		
Pensions	Assurance	✓ (TBC)		
Procurement Strategy	Assurance		✓	
Workforce				
Competency and Skills	Assurance			✓
Human Resources Management – Wellbeing	Assurance			✓
Workforce Planning	Assurance			✓
Health and Safety Management	Assurance	✓		
Performance Review	Assurance	✓ (TBC)		
Secondary Employment	Assurance		✓	
Communications	Assurance		✓	
Estates and Fleet				
Station Visits	Compliance	✓	✓	✓
Estates Strategy – Property Compliance	Assurance	✓		
Fleet Strategy	Assurance		✓	
Fleet Management - Delivery	Assurance		✓	
Electric Vehicle Charging	Assurance	✓		
Follow Up				
Follow Up	Follow Up	✓	✓	✓

Review Area	Type	2023/24	2024/25	2025/26
Management and Planning				
Annual Planning	Management	✓	✓	✓
Annual Report	Management	✓	✓	✓
Audit Management	Management	✓	✓	✓
Total Days		**70**	**70**	**70**

APPENDIX B: ANNUAL PLAN – 2023/24

Quarter	Review	Type	Days	High-level Scope
1	Electric Vehicle Charging	Assurance	4	The review considers the arrangements in place for the use and monitoring of electric vehicles charging points within the Service to include the following: • The existence of policies and procedures in relation to the use of charging points; • Roles and responsibilities for oversight and management of charging points; • Charging point location management and maintenance of inventory; • Charging point authorisation and access control; • Charging point usage rules and etiquette (e.g. who, when and for how long and health and safety related advise); • Arrangements for maintenance, servicing, and validation of charging points; • Access to and management of data and reporting in relation to charging points (charging point use, energy usage/consumption and associated costs); • Guidance and support provided to users.
1	Assets - Mobile Phones	Assurance	6	The review will consider the administration of South Wales Fire and Rescue Service's mobile phones including recording, allocation, monitoring of use and disposal.
2	ICT Data Assurance	Assurance	4	The review considers the arrangements for the approval process for permitting electronic data to be passed to third parties, the data security arrangements and the transit arrangements designed to minimise unauthorised access to the data whilst it is in transit and the monitoring arrangements. The scope of the review does not include consideration of the IT network and application security arrangements or the need to transfer the specific data to specific third parties.
2	Station Visits	Compliance	4	The review will consider the arrangements for complying with the organisation's financial procedures at two whole-time stations and one retained duty system station. The sample will include stations that are co-located with other emergency services.
2	Estates Strategy – Property Compliance	Assurance	6	The review will consider the arrangements in place for ensuring South Wales Fire and Rescue Service's property compliance. The review will include electrical, gas, legionella (water hygiene), asbestos, fire safety, LOLER (The Lifting Operations and Lifting Equipment Regulations) and any other duty of care property compliance the service is required to implement.

Quarter	Review	Type	Days	High-level Scope
3	Risk Management – Mitigating Controls	Assurance	4	The review will assess the quality and accuracy of the information provided to the Authority for providing assurance. Four risks will be selected from South Wales Fire and Rescue Service's strategic risks and business plan risks and the effectiveness of the identified assurance will be reviewed. The scope of the review does not include consideration of all potential mitigating arrangements or their effectiveness in minimising the opportunities for the identified risks to occur.
3	O365 Implementation	Assurance	4	The review will consider the project management arrangements in place for implementation of Microsoft Office 365 within South Wales Fire and Rescue Service.
3	Emergency Services Network	Assurance	6	The review will consider the arrangements to identify and mitigate against the risks associated with the delayed Emergency Services Network programme.
3	Budgetary Control	Assurance	5	The review considers the budget preparation process, the monitoring arrangements, and reporting. The scope of the includes consideration of the assumptions used in preparing the budgets; depreciation policies; apportionment of central costs; or financial information included in tenders prepared by the organisation.
3	Pensions OR Performance Review	Assurance	5	The review will consider the arrangements for the management and control of the administration of pensions. **or** The review will consider the arrangements for monitoring staff performance including, setting and delivery of objectives and identification of training needs. Arrangements for management of poor performance or to identify the need for and to provide additional support will also be considered.
4	Sustainability	Assurance	6	The review will consider the implementation, monitoring and reporting on the South Wales Fire and Rescue Service's Carbon Reduction Strategy.
4	Health and Safety Management	Assurance	4	The review considers the adequacy of the governance arrangements for managing and reporting the health and safety requirements of the organisation.
4	Follow Up	Follow Up	2	Follow-up of implementation actions from audit reports, ensuring South Wales Fire and Rescue Service in implementing recommendations, and providing reports to the Finance and Performance Management Committee.
1	Annual Planning	Management	2	Assessing the South Wales Fire and Rescue Service's annual audit needs.
4	Annual Report	Management	1	Reporting on the overall conclusions and opinion based on the year's audits and other information and providing input to the Annual Governance Statement.

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Quarter	Review	Type	Days	High-level Scope
1 – 4	Audit Management	Management	7	This time includes meeting client management, overseeing the audit plan, reporting, and supporting the Finance and Performance Management Committee, liaising with External Audit and Client briefings (including fraud alerts, fraud digests and committee briefings).
		Total days	**70**	

APPENDIX C: INTERNAL AUDIT CHARTER

The Need for a Charter

The Audit Charter formally defines internal audit's purpose, authority and responsibility. It establishes internal audit's position within South Wales Fire and Rescue Service and defines the scope of internal audit activities. The establishment of the Audit Charter is a requirement of the Public Sector Internal Audit Standards (PSIAS) and approval of the charter is the responsibility of the Finance and Performance Management Committee.

Definition of Internal Auditing

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

The Role of Internal Audit

The main objective of the internal audit activity carried out by TIAA is to provide, in an economical, efficient and timely manner, an objective evaluation of, and opinion on, the overall adequacy and effectiveness of the framework of governance, risk management and control. TIAA is responsible for providing assurance to South Wales Fire and Rescue Service's senior management and governing body (being the body with overall responsibility for the organisation) on the adequacy and effectiveness of the risk management, control and governance processes.

Standards and Approach

TIAA's work will be performed with due professional care, in accordance with the requirements of the PSIAS and the IIA standards which are articulated in the International Professional Practices Framework (IPPF).

Scope

All South Wales Fire and Rescue Service's activities fall within the remit of TIAA. TIAA may consider the adequacy of controls necessary to secure propriety, economy, efficiency and effectiveness in all areas. It will seek to confirm that South Wales Fire and Rescue Service's management has taken the necessary steps to achieve these objectives and manage the associated risks. It is not within the remit of TIAA to question the appropriateness of policy decisions; however, TIAA is required to examine the arrangements by which such decisions are made, monitored and reviewed.

As well as providing the required level of assurance, TIAA's may engage in consultancy activity that contributes to the overall assurance that can be delivered to the Finance and Performance Management Committee.

TIAA may also conduct any special reviews requested by the Fire Authority, the Finance and Performance Management Committee or the nominated officer (being the post responsible for the day-to-day liaison with TIAA), provided such reviews do not compromise the audit service's objectivity or independence, or the achievement of the approved audit plan.

Access

TIAA has unrestricted access to all documents, records, assets, personnel and premises of South Wales Fire and Rescue Service and is authorised to obtain such information and explanations as they consider necessary to form their opinion. The collection of data for this purpose will be carried out in a manner prescribed by TIAA's professional standards, Information Security and Information Governance policies.

Independence

TIAA has no executive role, nor does it have any responsibility for the development, implementation or operation of systems; however, it may provide independent and objective advice on risk management, control, governance processes and related matters, subject to resource constraints. For day-to-day administrative purposes only, TIAA reports to a nominated officer within South Wales Fire and Rescue Service and the reporting arrangements must take account of the nature of audit work undertaken. TIAA has a right of direct access to the chair of the board, the chair of the Finance and Performance Management Committee and the responsible accounting officer (being the post charged with financial responsibility).

To preserve the objectivity and impartiality of TIAA's professional judgement, responsibility for implementing audit recommendations rests with South Wales Fire and Rescue Service's management.

Conflict of Interest

Consultancy activities are only undertaken with distinct regard for potential conflict of interest. In this role we will act in an advisory capacity and the nature and scope of the work will be agreed in advance and strictly adhered to.

We are not aware of any conflicts of interest and should any arise, we will manage them in line with TIAA's audit charter and internal policies, the PSIAS/IIA standards and South Wales Fire and Rescue Service's requirements.

Irregularities, Including Fraud and Corruption

TIAA will without delay report to the appropriate regulator, serious weaknesses, significant fraud, major accounting and other breakdowns subject to the requirements of the Proceeds of Crime Act 2002.

TIAA will be informed when evidence of potential irregularity, including fraud, corruption or any impropriety, is discovered so that TIAA can consider the adequacy of the relevant controls, evaluate the implication of the fraud on the risk management, control and governance processes and consider making recommendations as appropriate. The role of TIAA is not to investigate the irregularity unless commissioned to do so.

Limitations and Responsibility

Substantive testing will only be carried out where a review assesses the internal controls to be providing 'limited' or 'no' assurance with the prior approval of South Wales Fire and Rescue Service and additional time will be required to carry out such testing. South Wales Fire and Rescue Service is responsible for taking appropriate action to establish whether any loss or impropriety has arisen as a result of the control weaknesses.

Internal controls can only provide reasonable and not absolute assurance against misstatement or loss. The limitations on assurance include the possibility of one or more of the following situations, control activities being circumvented by the collusion of two or more persons, human error, or the overriding of controls by management. Additionally, no assurance can be provided that the internal controls will continue to operate effectively in future periods or that the controls will be adequate to mitigate all significant risks that may arise in future.

The responsibility for a sound system of internal controls rests with management and work performed by internal audit should not be relied upon to identify all strengths and weaknesses that may exist. Neither should internal audit work be relied upon to identify all circumstances of fraud or irregularity, should there be any, although the audit procedures have been designed so that any material irregularity has a reasonable probability of discovery. Even sound systems of internal control may not be proof against collusive fraud.

Reliance will be placed on management to provide internal audit with full access to staff and to accounting records and transactions and to ensure the authenticity of these documents.

The matters raised in the audit reports will be only those that come to the attention of the auditor during the course of the internal audit reviews and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. The audit reports are prepared solely for management's use and are not prepared for any other purpose.

Liaison with the External Auditor

We will liaise with South Wales Fire and Rescue Service's External Auditor. Any matters in the areas included in the Annual Plan that are identified by the external auditor in their audit management letters will be included in the scope of the appropriate review.

Quality Assurance

TIAA recognises the importance of Internal Audit being controlled at each stage to ensure that we deliver a consistent and efficient Internal Audit service that is fully compliant with professional standards and also the conditions of contract. We operate a comprehensive internal operational quality review process to ensure that all Internal Audit work is carried out in accordance with these standards. These quarterly reviews are part of our quality management system which has ISO 9001:2015 accreditation.

Finance and Performance Management Committee Responsibility

It is the responsibility of South Wales Fire and Rescue Service to determine that the number of audit days to be provided and the planned audit coverage are sufficient to meet the Committee's requirements and the areas selected for review are appropriate to provide assurance against the key risks within the organisation.

By approving this document, the Finance and Performance Management Committee is also approving the Internal Audit Charter.

Reporting

Assignment Reports: A separate report will be prepared for each review carried out. Each report will be prepared in accordance with the arrangements contained in the Terms of Reference agreed with TIAA and which accord with the requirements of TIAA's audit charter and PSIAS/IIA standards.

Progress Reports: Progress reports will be prepared for each Finance and Performance Management Committee meeting. Each report will detail progress achieved to date against the agreed annual plan.

Follow-Up Reports: We will provide an independent assessment as to the extent that recommendations have been implemented.

Annual Report: An Annual Report will be prepared for each year in accordance with the requirements set out in TIAA's audit charter and PSIAS/IIA standards. The Annual Report will include a summary opinion of the effectiveness of South Wales Fire and Rescue Service's governance, risk management and operational control processes based on the work completed during the year.

Other Briefings: During the year Client Briefing Notes, Benchmarking and lessons learned digests will be provided. These are designed to keep the organisation abreast of in-year developments which may impact on the governance, risk and control assurance framework.

Assurance Assessment Gradings

We use four levels of assurance assessments as set out below.

Substantial Assurance	There is a robust system of internal controls operating effectively to ensure that risks are managed and process objectives achieved.
Reasonable Assurance	The system of internal controls is generally adequate and operating effectively but some improvements are required to ensure that risks are managed and process objectives achieved.
Limited Assurance	The system of internal controls is generally inadequate or not operating effectively and significant improvements are required to ensure that risks are managed and process objectives achieved.
No Assurance	There is a fundamental breakdown or absence of core internal controls requiring immediate action.

Data Protection

TIAA has policies, procedures and processes in place to comply with all associated regulation and legislation on information security, which is underpinned by mandatory annual awareness training for all staff. To carry out our role effectively, we need to obtain information that is reliable, relevant and sufficient to support our findings and recommendations. The collection of data, particularly sensitive personal data, is minimised and is not shared with unauthorised persons unless there is a valid and legal requirement to do so. We have clear policies on the retention of data and its appropriate, controlled disposal. TIAA has a fully robust Information Security Management System that meets all the requirements of ISO27001:2013.

Disclaimer

The matters raised in this planning report, along with those raised in our audit and annual reports, are only those that came to the attention of the auditor during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. This report has been prepared solely for management's use and must not be recited or referred to in whole or in part to third parties without our prior written consent. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.

Performance Standards

The following Performance Targets will be used to measure the performance of internal audit in delivering the Annual Plan:

Performance Measure	Target
Completion of planned audits.	100%
Audits completed in time allocation.	100%
Draft report issued within 10 working days of exit meeting.	100%
Compliance with TIAA's audit charter and PSIAS/IIA Standards.	100%

THIS REPORT IS NOT EXEMPT AND IN THE PUBLIC DOMAIN

SOUTH WALES FIRE & RESCUE AUTHORITY   AGENDA ITEM NO 7
                                               13 MARCH 2023

FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

REPORT OF THE ACO CORPORATE SERVICES & THE INTERNAL AUDITORS

INTERNAL AUDITORS ANNUAL REPORT YEAR ENDING 31 MARCH 2023

THIS REPORT IS FOR DECISION

REPORT PRESENTED BY TEMP HEAD OF FINANCE, PROCUREMENT & PROPERTY

SUMMARY
This report summarises the Internal Audit work that has been undertaken this year.

RECOMMENDATION
That Members note the work and overall opinion of the Internal Auditors for the financial year 2022/2023.

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1. **BACKGROUND**

1.1   As Members will be aware TIAA Limited are appointed as the Authority's Internal Auditors to undertake work outlined in the annual Internal Audit Action Plan which was approved by this Committee on 11 April 2022.

2. **ISSUE**

2.1   During the year Members have received regular reports updating them on progress being made against the Plan and this report summarises for Members the outcomes of all the audits undertaken.

2.2   Throughout the Financial Year 2022/23, 12 planned audits (70 days) were undertaken within scheduled timescales.

2.3   Based on the evidence provided the Internal Auditor can draw a reasonable conclusion as to the adequacy and effectiveness of the South Wales Fire & Rescue Service's risk management, control and governance processes.

2.4 The Internal Auditor's opinion for the year will support the Annual Governance Statement, which will be considered by the Finance Scrutiny Committee prior to inclusion in the Annual Statement of Accounts.

3. IMPLICATIONS

3.1 Community and Environment

Equality, Diversity and Inclusion	No
Welsh Language	No
Wellbeing of Future Generations (Wales) Act 2015	No
Socio Economic Duty	No
Sustainability/Environment/Carbon Reduction	No
Safeguarding	No
Consultation and Communications	No
Consultation with Representative Bodies	No
Impact Assessment	No

3.1.1 The issues raised within this report have no adverse impact on the protected characteristics and would have been considered during the audit process.

3.2 Regulatory, Strategy and Policy

Legal	No	Data Protection / Privacy	No
Financial	No	Health, Safety and Wellbeing	No
Procurement	No	Governance & Audit	Yes
Corporate Risk	No	Service Policy	No
Information Management	No	National Policy	No

3.3 Resources, Assets and Delivery

Human Resource and People Development	No
Assets and Resources (Property/Fleet/ICT/Equipment)	No
Service Delivery	No
Procurement	No
Budget Revenue/Capital	No

4. EVALUATION & CONCLUSIONS

4.1 The issues raised within this report have no adverse impact on the protected characteristics and would have been considered during the audit process.

5.   RECOMMENDATION

5.1   That Members note the work and overall opinion of the Internal Auditors for the financial year 2022/2023.

Contact Officer:	ACO Geraint Thomas
Background Papers	Appendix 1 – Internal Auditors Annual Report 31 March 2023

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South Wales Fire and Rescue Service

Indicative Internal Audit Annual Report

2022/23

February 2023

Internal Audit Annual Report

Introduction

This is the 2022/23 Annual Report by TIAA on the internal control environment at South Wales Fire and Rescue Service. The annual internal audit report summarises the outcomes of the reviews we have carried out on the organisation's framework of governance, risk management and control. This report is designed to assist the South Wales Fire and Rescue Service in making its annual governance statement.

Our approach is based on the International Standards for the Professional Practice of Internal Auditing which have been developed by the Institute of Internal Auditors (IIA) and incorporate the Public Sector Internal Audit Standards (PSIAS). In 2022, TIAA commissioned an External Quality Assessment (EQA) of its internal audit service. The independent EQA assessor was able to conclude that TIAA 'generally conforms to the requirements of the Public Sector Internal Audit Standards and the mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF)'. 'Generally conforms' is the highest rating that can be achieved using the IIA's EQA assessment model.

Ongoing quality assurance work was carried out throughout the year and we continue to comply with ISO 9001:2015 standards. Our work also complies with the IIA-UK Professional Standards.

> **HEAD OF INTERNAL AUDIT'S ANNUAL OPINION**
>
> **TIAA is satisfied that, for the areas reviewed during the year, South Wales Fire and Rescue Service has reasonable and effective risk management, control and governance processes in place. This is an indicative opinion and will be updated once all audit reports have been issued as final.**
>
> **This opinion is based solely on the matters that came to the attention of TIAA during the course of the internal audit reviews carried out during the year and is not an opinion on all elements of the risk management, control and governance processes or the ongoing financial viability or your ability to meet financial obligations which must be obtained by South Wales Fire and Rescue Service from its various sources of assurance.**

Internal Audit Planned Coverage and Output

The 2022/23 Annual Audit Plan approved by the Finance and Performance Management Committee was for 70 days of internal audit coverage in the year.

During the year there were no changes to the Audit Plan.

The planned work that has been carried out against the plan and the status of work not completed is set out at Annex A.

No extra work was carried out which was in addition to that set out in the Annual Audit Plan.

Assurance

TIAA carried out 12 reviews, which were designed to ascertain the extent to which the internal controls in the system are adequate to ensure that activities and procedures are operating to achieve South Wales Fire and Rescue Service's objectives. For each assurance review an assessment of the combined effectiveness of the controls in mitigating the key control risks was provided. Details of these are provided in Annex A and a summary is set out below.

Assurance Assessments	Number of Reviews	Previous Year
Substantial Assurance	4	5
Reasonable Assurance	4	4
Limited Assurance	-	-
No Assurance	-	-

The assurance assessment for four reviews is to be confirmed – see Annex A.

The areas on which the assurance assessments have been provided can only provide reasonable and not absolute assurance against misstatement or loss and their effectiveness is reduced if the internal audit recommendations made during the year have not been fully implemented.

We made the following total number of recommendations on our audit work carried out in 2022/23. The numbers in brackets relate to 2021/22 recommendations.

Urgent	Important	Routine
0 (0)	7 (6)	13 (10)

Audit Summary

Control weaknesses: There were no areas reviewed by internal audit where it was assessed that the effectiveness of some of the internal control arrangements provided 'limited' or 'no assurance'.

Recommendations Made: We have analysed our findings/recommendations by risk area and these are summarised below.

Risk Area	Urgent	Important	Routine
Directed			
Governance Framework	-	-	10
Risk Mitigation	-	2	1
Compliance	-	5	2
Delivery			
Performance Monitoring	-	-	-
Sustainability	-	-	-
Resilience	-	-	-

Operational Effectiveness Opportunities: One of the roles of internal audit is to add value and during the financial year we provided advice on opportunities to enhance the operational effectiveness of the areas reviewed and the number of these opportunities is summarised below.

Operational
5 (5)

Independence and Objectivity of Internal Audit

There were no limitations or restrictions placed on the internal audit service which impaired either the independence or objectivity of the service provided.

Performance and Quality Assurance

The following Performance Targets were used to measure the performance of internal audit in delivering the Annual Plan.

Performance Measure	Target	Attained
Completion of Planned Audits	100%	100%
Audits Completed in Time Allocation	100%	100%
Final report issued within 10 working days of receipt of responses	95%	100%
Compliance with Public Sector Internal Audit Standards	100%	100%

Release of Report

The table below sets out the history of this Annual Report.

Date Indicative Draft Report issued:	21st February 2023

Annexes

Actual against planned Internal Audit Work 2022/23

System	Type	Planned Days	Actual Days	Assurance Assessment	Comments
Collaboration – Co-location	Assurance	6	6	TBC	Draft report pending
Rosters	Assurance	6	6	Reasonable	Presented to February 2023 meeting
Human Resources Management – Wellbeing	Assurance	6	6	Substantial	Presented to November 2022 meeting
Station Visits	Compliance	4	4	Reasonable	Draft Report Issued: 06/01/2023
Payroll	Assurance	4	4	TBC	Draft report pending
Contract Management	Assurance	6	6	TBC	Draft report pending
General Data Protection Regulation (GDPR)	Assurance	4	4	Substantial	Presented to November 2022 meeting
ICT Network Security	Assurance	4	4	Reasonable	Presented to February 2023 meeting
Key Financial Controls	Assurance	4	4	Reasonable	Presented to February 2023 meeting
Risk Management – Mitigating Controls	Assurance	4	4	Substantial	Draft Report Issued: 23/01/2023
Human Resources Management – Training	Assurance	6	6	Substantial	Presented to February 2023 meeting
Sustainable Procurement	Assurance	4	4	TBC	Fieldwork start date: 20/02/2023

System	Type	Planned Days	Actual Days	Assurance Assessment	Comments
Follow Up	Follow Up	2	2	N/A	Draft report pending
Annual Planning	-	2	2		
Annual Report	-	1	1		
Audit Management	-	7	7		
	Total Days	**70**	**70**		

THIS REPORT IS NOT EXEMPT AND IN THE PUBLIC DOMAIN

SOUTH WALES FIRE & RESCUE AUTHORITY   AGENDA ITEM NO 8
                                                                        13 MARCH 2023

FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

REPORT OF ASSISTANT CHIEF OFFICER CORPORATE SERVICES

REVENUE MONITORING REPORT 2022/23

THIS REPORT IS FOR DECISION

REPORT APPROVED BY ASSISTANT CHIEF OFFICER CORPORATE SERVICES
REPORT PRESENTED BY TEMP HEAD OF FINANCE, PROCUREMENT & PROPERTY

SUMMARY
The Revenue Monitoring Report provides details of the annual revenue budget and associated information for the year ending 31 March 2023.

RECOMMENDATIONS
That the Finance, Audit and Performance Management Committee note and agree the report content.

---

1. BACKGROUND

1.1   This report provides an update of the major changes affecting the revenue budget since the Finance, Audit and Performance Management (FAPM) Committee on 5 December 2022.

1.2   Appendix 1 details the original budget, a revised budget to reflect authorised virements, transactions to date i.e., actuals, the forecast position on 31 March and variance analysis, i.e., the over or under spend. The revenue monitoring report has been presented inclusive of grant transactions for a full financial picture.

1.3   Appendix 2 charts the budget variances reported at each FAPM Committee reconciling to the most recent position.

1.4   The reserve statement at Appendix 3 presents the forecast, year-end position and the impact on useable reserves for scrutiny and financial planning purposes.

1.5   Appendices 4 and 5 detail grant funded initiatives and the impact on revenue budgets.

2. ISSUE / PROPOSAL

2.1   A decrease in the previously forecast overspend of £947k, has resulted in a revised forecast over spend of £286k. The change comprises a £1.4 million reduction in non-employee budget heads, i.e., additional income, offset by an additional £493k overspend in employee budgets. Included in this position is an overspend of £49k in grant funded initiatives, which has been serviced by the revenue budget, and is detailed in appendices 4 and 5.

2.2   The following narrative highlights the most significant changes.

2.2.1 **EMPLOYEE COSTS - £493K increase in overspend**

Employee costs are forecast to be a further £508k more than budgeted and this is largely driven by variances in pay awards that have been agreed for Green Book staff (non-operational) along with those currently in dispute for Grey Book staff.

The agreed pay award for Green Book staff took place in November 2022.

Firefighters and Control staff voted to reject a 5% pay offer which was included in previous forecasts. Forecasts have now been increased to 7% to reflect the most recent pay offer albeit any changes to the actual pay award will impact this further.

2.2.2 **PREMISE COSTS - £53k increase in overspend**

Cleaning costs have increased by £35k as a result 2 things, wage inflation payable to the contractor and additional cleaning service on some sites.

Estate fees payable to South Wales Police in respect of Joint Control are also forecast to increase by £14k due to rising energy costs.

2.2.3 **TRAINING COSTS - £163k increase in underspend**

Several courses managed by the learning and development (L&D) team have not taken place as planned due to the focus on the introduction of 'Learning Pathways' which is a new leadership training programme.

This is in addition to a small element of L&D and Business Fire Safety (BFS) training that has slipped into the new year as a result of course timing and a reduction in the reactive, seminars and conferences budget.

2.2.4 **SUPPLIES AND SERVICES - £68k increase in overspend**

There are several areas of under and overspending in this budget heading contributing to the above position. Since previous reporting there has been a £118k increase in grant funded spending, partly because of reprioritising spend categories within grants but also due to over overspending on grant allocations, i.e., the purchase of Home Fire Safety Stock (HFS).

The above is offset by a net £50k of under spends in furniture, promotional activities and the delayed introduction of systems, i.e., visitor management in BSU, in addition other, smaller areas.

2.2.5 **CONTRACTED SERVICES - £33k increase in overspend**

Consultancy costs have increased in the areas of, Occupational Health counselling £17k, employment law guidance £33k and pension software costs £11k. This increase has been offset by an anticipated decrease in the legal budget for small claims and debt collection services.

2.2.6 **CAPITAL COSTS - £67k increase in underspend**

This is due to a reduction in capital financing costs, specifically the minimum revenue provision (MRP) and is a result of a decrease in forecast capital expenditure for the year, see capital monitoring report.

2.2.7 **INCOME - £1.4 million additional**

In consequence of business rate appeals, undertaken in 2017, £1.2million of rate rebates are in the process of being receipted.

Additional grant funding of £162k has also been confirmed since previous reporting, changes are as follows:

- Fire Crime – decrease in income - £36.9k
- HFS Stock – increase in income - £5.3k
- Youth - increase in income - £10k
- MTA – increase in income - £110.9k
- USAR – decrease in income - £25.8k
- NRW secondment – increase in income - £41.5k
- Merseyside FRS secondment – increase in income- £33.7k
- AFAN Project – increase in income - £1.5k
- NFCC secondment – increase in income - £21.4k

Bank interest rates have also increased and so has our interest income on deposits. In consequence, additional income is anticipated of £22k.

3. IMPLICATIONS

An overall projected overspend on the revenue budget equating to £286k and the need to fund this from reserves in line with the agreed budget strategy.

3.1 Community and Environment

Equality, Diversity and Inclusion	No
Welsh Language	No
Well-Being Of Future Generations (Wales) Act	No
Socio Economic Duty	No
Sustainability / Environment / Carbon Reduction	No
Safeguarding	No
Consultation and Communications	No
Consultation with Representative Bodies	No
Impact Assessment	No

3.2 Regulatory, Strategy and Policy

Legal	No
Financial	Yes
Procurement	No
Corporate Risk	No
Information Management	No
Data Protection / Privacy	No
Health, Safety and Wellbeing	No
Governance & Audit	No
Service Policy	No
National Policy	No

3.3 Resources, Assets and Delivery

Human Resources and People Development	No
Assets and Resources (Property/Fleet/ICT/Equipment)	No
Service Delivery	No
Procurement	No
Budget Revenue/Capital	Yes

4 EVALUATION & CONCLUSIONS

4.1 The overall net revenue expenditure for year is forecast at £81.8 million, including the costs of running grant funded initiatives. Local Authority funding for the year and grants, equate to £79.3 and £2.2 million respectively, resulting in a £286k overspend. There are number of

variables that can affect these figures up until the close of the financial year and after which the final position is reported to members in the outturn report.

5 RECOMMENDATIONS

5.1 That the Finance, Audit and Performance Management Committee note and agree the report content.

Contact Officer:	Lisa Mullan Temp Head of Finance, Property & Procurement	
Background Papers	**Date**	**Source / Contact**
Capital Monitoring Report	2022/23	Temp Head of Finance, Property & Procurement

Appendices	
Appendix 1	Revenue Monitoring 2022/23 (13.03.2023)
Appendix 2	Revenue Variances to Date 2022/23 (13.03.2023)
Appendix 3	Reserve Statement 2022/23 (13.03.2023)
Appendix 4	Grant Monitoring Report 2022/23 (13.03.2023)
Appendix 5	Grant Monitoring Report 2022/23 – Table (13.03.2023)

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REVENUE MONITORING 2022/23
Appendix 1
Revenue Monitoring 2022/23 (13.03.2023)

SOUTH WALES FIRE & RESCUE SERVICE BUDGET MONITORING 2022/23	Original Budget 2022/23 £	Revised Budget (vired budget) 2022/23 £	Original Revenue Grant Funding 2022/23 £	Total Revenue Budget 2022/23 £	Actual Spend at 01.02.23 £	Revenue Forecast at 31.03.22 £	Over/Under Spend Against Revised Budget £	Over/ Under Spend %
Employee Costs								
Salaries, NI & superann.	62,247,239	62,247,239	937,612	63,184,850	52,115,061	65,450,315	-2,265,465	-2.9%
Pensions (ill health)	849,601	849,601	0	849,601	535,424	904,708	-55,107	-0.1%
Travel and Subsistence	385,000	385,000	0	385,000	309,927	411,752	-26,752	0.0%
Total Employee Costs	**63,481,840**	**63,481,840**	**937,612**	**64,419,452**	**52,960,412**	**66,766,776**	**-2,347,324**	**-3.0%**
Premises Related Expenses	5,654,123	5,671,808	20,016	5,691,824	4,175,456	5,728,863	-37,039	0.0%
Training Expenses	1,771,002	1,760,972	99,917	1,860,889	386,721	1,622,684	238,205	0.3%
Supplies & Services	5,336,442	5,333,380	1,015,635	6,349,016	5,139,302	6,618,140	-269,124	-0.3%
Transport Related Expenses	1,477,793	1,477,793	98,568	1,576,361	1,294,778	1,548,727	27,634	0.0%
Third Party Payments (Contracted Services)	941,296	936,704	65,794	1,002,498	806,436	1,203,033	-200,535	-0.3%
Capital costs / leasing	4,874,253	4,874,253	0	4,874,253	724,936	4,671,514	202,738	0.3%
Contingency	0	0	0	0	0	0	0	0.0%
Total Expenditure	**83,536,749**	**83,536,749**	**2,237,542**	**85,774,291**	**65,488,041**	**88,159,736**	**-2,385,445**	**-3.0%**
Income								
Employee Related	-3,108,266	-3,108,266		-3,108,266	-2,397,641	-3,175,209	66,943	0.1%
Lease Car Contributions	-100,500	-100,500		-100,500	-84,306	-98,408	-2,092	0.0%
Co-Location Re-imbursement	0	0	0	0	0	0	0	0.0%
Other Income	-1,023,926	-1,023,926	0	-1,023,926	-1,173,280	-3,084,828	2,060,902	2.6%
Total Income	**-4,232,692**	**-4,232,692**	**0**	**-4,232,692**	**-3,655,227**	**-6,358,444**	**2,125,752**	**2.7%**
NET BUDGET / FORECAST 2022/23	**79,304,057**	**79,304,057**	**2,237,542**	**81,541,599**	**61,832,814**	**81,801,292**	**-259,692**	**-0.3%**
Local Authority Contributions	-79,304,057	-79,304,057	0	-79,304,057	0	-79,304,057	0	0.0%
External Funding (WG)	0	0	-2,237,542	-2,237,542	-1,305,291	-2,211,485	-26,057	0.0%

OVERALL REVENUE OVER / UNDERSPEND **-285,750**

Key	
🟥	Overspend
⬛	Underspend

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REVENUE MONITORING 2022/23
Appendix 2
Revenue Variances to Date 2022/23 (13.03.2023)

SOUTH WALES FIRE & RESCUE SERVICE

REVENUE BUDGET MONITORING 2022/23

	Original Budget 2022/23 £	Revised Budget (vired budget) 2022/23 £	Original Revenue Grant Funding 2022/23 £	FAPM Forecast 10.10.22 £	FAPM Forecast 05.12.22 £	FAPM Forecast 13.03.23 £	* Variance at FAPM 10.10.22 to Revised Budget	** Variance at FAPM 05.12.22 to FAPM 10.10.22	*** Variance at FAPM 13.03.23 to FAPM 05.12.22	Cumulative Variances against Revised Budget	Summary on variances previously reported*
Employee Costs											* Pay awards increased on average to 5% against 1.5% budgeted
Salaries, NI & superann.	62,247,239	62,247,239	937,612	64,071,394	64,942,684	65,450,315	-886,543	-871,290	-507,631	-2,265,465	Variances in strength in establishment against budgeted
	62,247,239	62,247,239	937,612	64,071,394	64,942,684	65,450,315	-886,543	-871,290	-507,631	-2,265,465	** Pay award confirmed for green book staff at £1,925
Pensions (ill health)	849,601	849,601	0	900,502	904,879	904,708	-50,901	-4,377	171	-55,107	Pay awards mirrored in pension forecasts
Travel and Subsistence	385,000	385,000	0	432,324	425,717	411,752	-47,324	6,607	13,964	-26,752	
Total Employee Costs	63,481,840	63,481,840	937,612	65,404,220	66,273,280	66,766,776	-984,768	-869,060	-493,496	-2,347,324	
Premises Related Expenses	5,654,123	5,671,808	20,016	5,689,115	5,676,065	5,728,863	-14,976	13,050	-52,798	-54,724	* Increasing Firelink costs offset by overbudgeted NNDR charges / ** Reduction in telecommunication costs than forecast
Training Expenses	1,771,002	1,760,972	99,917	1,883,687	1,785,475	1,622,684	-19,807	98,212	162,791	241,196	* H&S IOSH courses to be met from carry forward reserves / ** Reallocation of budget to Supplies & Services / Contracted Services
Supplies & Services	5,336,442	5,333,380	1,015,635	6,478,363	6,550,594	6,618,140	-119,246	-72,230	-67,546	-259,023	* Operational equipment initially submitted as part of capital submission External Funding overspends / ** Reduction in spend than budgeted offset by increase in IT and Support & Maintenance charges. In addition to managed care uniform costs for Auxiliary Reserves.
Transport Related Expenses	1,477,793	1,477,793	98,568	1,586,196	1,559,973	1,548,727	-9,836	26,224	11,246	27,634	* Reduction in External Funding charges offset by an increase in revenue fuel costs forecast.
Third Party Payments (contracted services)	941,296	936,704	65,794	1,095,470	1,170,485	1,203,033	-88,380	-75,016	-32,547	-195,943	* Increase in Securitas contract for providing resilience as part of IA planning / ** Increase in External Funding charge in addition to annual pension SLA
Capital costs / leasing	4,874,253	4,874,253	0	4,749,934	4,738,250	4,671,514	124,319	11,684	66,735	202,738	* Reduction in MRP forecast in line with capital reporting
Contingency	0	0	0	0	0	0	0	0	0	0	
Income (including Grant Income)	-4,232,692	-4,232,692	-2,237,542	-6,647,701	-7,217,709	-8,569,929	177,467	570,008	1,352,220	2,099,695	* Increase in bank interest rates along with updated collaboration calculations with MWWFRS / ** Additional grant funding, further increase to due to Bank Interest rates in addition to legal re-imbursements
CONTRIBUTION BUDGET 2022/2023	79,304,057	79,304,057	0	80,239,284	80,536,412	79,589,807	-935,227	-297,128	946,605	-285,750	

Key
Red — Overspend
Black — Underspend

Comments for the latest FAPM will be included in detail in the report attached

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REVENUE MONITORING 2022/23
Appendix 3
Reserve Statement 2022/23 (13.03.2023)

Reserve	Purpose and Control	Balance at year start	Transfers in and (out)	Balance at year end	Variations arising between budgeted and actual levels of reserves
General	To cover general financial risks including council funding, grants, inflation and interest.	-3,000,000	0	-3,000,000	
Managed under spends	To meet costs associated with rolling programmes of expenditure incomplete at year end. Controlled via routine budget monitoring procedures.	-114,906	71,260	-43,646	Spending against carry forward requests within revenue
Change Management	Costs of change arising from 'Shaping our 'Future' programme, investment in change projects to improve service and / or reduce spend.	-10,255,147	-71,260 185,750	-10,140,658	Carry forward reserves transferred from Managed Under Spends Revenue underspend and transfer of annual joint control lease costs
PFI Equalisation	To meet future costs of the Training Centre PFI project	-3,503,807	235,109	-3,268,698	Current figures which may change slightly with indexation
Capital Receipts	To meet costs of the capital programme. Reserve applied as receipts are generated	0	0	0	All capital receipts received in year will be used to fund capital expenditure
Joint Control Lease Reserve	To meet the lease costs over an eight year period (from 2017/18)	-300,000	100,000	-200,000	Annual Joint Control lease costs
	TOTAL	**-17,173,860**	**520,859**	**-16,653,001**	

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REVENUE MONITORING 2022/23
Appendix 4
Grant Monitoring Report 2022/23 (13.03.2023)

1. BACKGROUND

1.1 This report presents an update of the major changes affecting the grant budget since the last FAPM report in December 2022. It comprises of any variances in overspends along with any increases in funding since previously reported to members.

2. ISSUES

2.1 Since previously reported any changes to individual projects are summarised below:

    2.1.1 **HFS STOCK - £42.8k decrease in overspend**
    Forecasted spends of HFS stock exceeds the amount of grant funding available from Welsh Government, therefore projections have reduced in Q4 to take account of this. SW revenue will partially fund the overspends alongside a marginal underspend from NWFRS. Community Safety are working hard to ensure station stock levels can accommodate the demand of home fire safety visits and referrals until year end.

    2.1.2 **YOUTH - £2.7k decrease in overspend**
    Due to the recent green book pay award, salaries have increased the forecasted spends by £7.3k. A funding transfer of £10k from Fire Crime has reduced the overall overspends by £2.7k.

    2.1.3 **ANTI-SOCIAL BEHAVIOUR - £2.3k increase in overspend**
    A handover of staff in the Anti-Social Behaviour post and the recent increase in salaries due to a green book pay award has incurred an increase in overspends of £2.3k.

    2.1.4 **NATIONAL RESILIENCE – £39.4k decrease in overspend**
    The reallocation of the salary budget to accommodate reposting the CBRN Capability Advisor from SWFRS to NWFRS has decreased the overspends by £36.9k.

    A vacancy in the post of MTA Capability Advisor and subsequent training courses not being run, has reduced Training Expenses by £23.9k.

    A restructure of the capital budget (classed as Revenue spends by SWFRS) has increased the forecasted costs by £22.3k.

    Additional funding transferred from MTA underspends reduced overspends by £0.9k, therefore NR has seen an overall decrease in forecasted overspends of £39.4k.

2.1.5 **MTA - £15.5k decrease in underspend**
A prolonged vacancy of the MTA Capability Advisor has resulted in an increase of salary underspends of £8.6k.

Previously forecasted underspends of £6.9k will be utilised on an All Wales basis to absorb overspends across NR as a whole.

2.1.6 **USAR - £29.3k decrease in underspend**
An increase in forecasted salary related costs, offset against additional income received for unbudgeted spends has reduced the overall USAR forecasted underspends by £1.3k

Previously forecasted underspends of £28k will be utilised on an All Wales basis to absorb overspends across NR as a whole

2.1.7 **AFAN PROJECT - £1.5k decrease in overspend**
With the conclusion of the project and the final payment for AFAN received, the overall forecasted overspends have reduced by £1.5k.

2.1.8 **£161.6k - Increase in income**
Since last reported, there has been an increase in forecasted income for the whole year in the following areas, the majority being employee cost related:
- Fire Crime – decrease in income - £36.9k
- HFS Stock – increase in income - £5.3k
- Youth - increase in income - £10k
- MTA – increase in income - £110.9k
- USAR – decrease in income - £25.8k
- NRW secondment – income - £41.5k
- Merseyside FRS secondment – increase in income- £33.7k
- AFAN Project – increase in income - £1.5k
- NFCC secondment – income - £21.4k

The above grant funding is monitored on a quarterly basis with any changes reported to members throughout the year.

3. FINANCIAL IMPLICATIONS

Overall there is a projected overspend on grants equating to £50k which will be charged to revenue.

REVENUE MONITORING 2022/23
Appendix 5
Grant Monitoring Report 2022/23 – Table (13.03.2023)

SOUTH WALES FIRE & RESCUE SERVICE REVENUE GRANT REPORTING 2022/23

	FIRE CRIME	HFS STOCK	YOUTH	MOMENTUM	ANTI SOCIAL BEHAVIOUR	NATIONAL RESILIENCE	MTA	USAR	FBU	JESG	NRW
Employee Costs											
Salaries, NI & superann.	39,000.99	0.00	112,718.30	0.00	39,497.42	325,634.82	61,942.31	260,294.39	44,482.10	0.00	41,370.00
Travel & Subs	0.00	0.00	0.00	0.00	0.00	10,119.01	2,218.21	870.08	0.00	113.17	0.00
Premises Related Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Training Expenses	0.00	0.00	0.00	0.00	0.00	69,778.91	0.00	0.00	0.00	0.00	0.00
Supplies & Services	0.00	378,719.09	0.00	10,000.00	0.00	620,449.41	175,799.64	8,537.98	0.00	0.00	130.00
Transport Related Expenses	9,777.89	0.00	8,636.70	0.00	0.00	7,125.44	3,191.27	10,582.65	0.00	0.00	0.00
Third Party Payments (Contracted Services)	22,094.17	0.00	0.00	60,572.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Expenditure	70,873.05	378,719.09	121,355.00	70,572.54	39,497.42	1,033,107.59	243,151.43	280,285.10	44,482.10	113.17	41,500.00
Other/Additional Income	0.00	-6,319.09	-10,000.00	0.00	0.00	-43,837.59	-135,000.00	-1,209.66	-29,638.66	0.00	0.00
Grant Income	-70,873.05	-329,900.00	-111,355.00	-70,000.00	-35,785.00	-989,270.00	-108,151.43	-279,075.44	-14,843.44	-113.17	-41,500.00
(Under)/Overspend to be transferred to Revenue	-0.00	43,500.00	0.00	572.54	3,712.42	-0.00	0.00	-0.00	0.00	0.00	0.00

SOUTH WALES FIRE & RESCUE SERVICE REVENUE GRANT REPORTING 2022/2

	MERSEYSIDE FRS	CIRCULAR ECONOMY	WAST VOLS	FF APPRENT	CYBER TRAINING	AFAN PROJECT	NFCC	ANEURIN BEVAN UHB	CARDIFF & VALE UHB	WALES & WEST UTILITIES	Total
Employee Costs											
Salaries, NI & superann.	74,515.63	0.00	183.47	301,806.13	0.00	1,698.46	21,447.94	366.21	1,447.90	0.00	1,326,405.97
Travel & Subs	123.91	0.00	0.00	0.00	0.00	2,335.21	0.00	0.00	0.00	0.00	15,779.59
Premises Related Expenses	0.00	20,015.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,015.78
Training Expenses	0.00	0.00	0.00	0.00	600.00	0.00	0.00	0.00	0.00	0.00	70,378.91
Supplies & Services	394.24	0.00	0.00	0.00	0.00	442.64	0.00	0.00	0.00	5,000.00	1,199,473.00
Transport Related Expenses	2,404.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41,718.93
Third Party Payments (Contracted Services)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82,666.71
Total Expenditure	77,438.66	20,015.78	183.47	301,806.13	600.00	4,476.31	21,447.94	366.21	1,447.90	5,000.00	2,756,438.89
Other/Additional Income	-46,367.44	0.00	0.00	-222,809.57	0.00	-1,452.72	0.00	18.00	0.00	0.00	-495,616.73
Grant Income	-31,071.22	-20,015.78	-183.47	-78,996.56	-600.00	-1,471.03	-21,447.94	-384.21	-1,447.90	-5,000.00	-2,211,484.64
(Under)/Overspend to be transferred to Revenue	0.00	0.00	0.00	0.00	0.00	1,552.56	0.00	0.00	-0.00	0.00	49,337.52

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SOUTH WALES FIRE & RESCUE AUTHORITY   AGENDA ITEM NO 9
                                                                      13 MARCH 2023

FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

REPORT OF TEMP ASSISTANT CHIEF OFFICER CORPORATE SERVICES

CAPITAL MONITORING REPORT 2022/23

THIS REPORT IS FOR DECISION

REPORT APPROVED BY ASSISTANT CHIEF OFFICER CORPORATE SERVICES
REPORT PRESENTED BY TEMP HEAD OF FINANCE, PROCUREMENT & PROPERTY

SUMMARY
The Capital Monitoring Report provides details of the capital budget, transactions to date and the forecast year end position for the year ending 31 March 2023.

RECOMMENDATIONS
That Members note the budget and progress of capital schemes, approve alterations identified in appendix 1 and associated movements in funding.

---

1. **BACKGROUND**

1.1   This report provides an update of the major changes affecting the capital budget since the Finance, Audit and Performance Management (FAPM) Committee on 5 December 2022.

1.2   Appendix 1 illustrates budget information and funding analysis for all approved capital investment plans for the current financial year. Longer time horizons are expected for capital investment schemes, this often results in budgets being phased over more than one financial year and this is referred to as slippage.

1.3   In summary, Appendix 1 presents the total budget (2021/22 slippage + 2022/23 budget) of £12.0 million, set against this is the forecast outturn position, budget overspend and slippage as 9.5 million, £2.4 million and £4.9 million respectively.

1.4   Appendix 2 details grant funded initiatives and the impact these have on the capital budget and associated funding streams.

1.5   Below is a detailed narrative to support the above position and a funding analysis provides information on how we intend to finance the investment.

2.   BUDGET HEADINGS

2.1   **Property - £167k decrease**

2.1.1 The overall budget for the year is £4.5million, forecast expenditure and budget slippage are £2.8m million and £3.4m respectively. A net overspends of £1.7m is driven by several schemes highlighted in red in appendix 1. £1.3m out of the £1.7m overspend will be fully funded by Welsh Government (WG) grants.

More detail on individual schemes is provided below;

2.1.2 **Penarth <£25k**
This major refurbishment has been delayed and preparatory work will commence in the summer of 2023.

2.1.3 **On-call Station Project <£300k**
Construction work commenced at Pontycymer station in January which is to be our blueprint station. Work on the remaining 8 stations will commence in 2023/24. A £15k grant has since been secured against this project to fund 50% of design costs of sustainable options, i.e., solar panels, air source heats pumps etc, at 4 stations. Further bids will be made as this project progresses for further design work in addition to supply and installation.

2.1.4 **Planned & Preventative <£30k**
The £30k decrease in forecast is related to the fuel pump which is to be installed at Cardiff Gate. Upon further inspection, more groundwork is required than initially anticipated i.e., installing the electricity supply and footings, and as such, this project will be progressed in 2023/24.

2.1.5 **Equality & Diversity >£108k**
This project has been accelerated from 2023/24's programme following site surveys to grade the current provision at 20 WDS sites.   This has resulted in a priority rating matrix which will determine the focus of work unless the site is already a planned, capital refurbishment project. Work at Roath station has already commenced and will be complete by the end of the financial year.

2.2   **Vehicle Replacement Programme (VRP) - £907k decrease**

2.2.1 The overall budget equates to £5.4m, forecast expenditure and budget slippage are £4.3m and £1.4m respectively.   A net overspend of £287k is largely due to the £193k increase in cost of Rescue Tenders and the purchase of two Detection, Identification

and Monitoring (DIM) light vehicles at £102k, the latter of which will be wholly funded by WG.

More detail on individual schemes is provided below;

2.2.2 Truck (Slide deck/Crane)
The truck has been delivered to the supplier completing the build conversion, however the lead time means the finished vehicle will not be delivered until 2023/24. Therefore, the full budget has slipped into the next financial year.

2.2.3 Water Ladders
The remaining 7 Water Ladders are due to be inspected in February and delivered in April. As delivery will take place in the next financial year the remaining budget has been slipped into 2023/24.

2.2.4 Van/Ops Estate Cars
The forecast has increased since the last report due to the 7 electric vans becoming available for delivery prior to March 31st. Delivery was taken of 2 diesel vans in January. An order has been placed for one further van at a cost of £25k although delivery won't take place until the next financial year and so £25k has been slipped forward.

2.3 Operational Equipment - £331k increase

2.3.1 The overall budget equates to £1.4m, forecast expenditure is £1.7m with an overspend of £303k. This is due to several overspends partially offset by £132k of WG funding for DIM equipment.

More detail on individual schemes is provided below;

2.3.2 RTC Cutting/Rescue Tender Equipment >£376k
This project is now reporting an overspend due to vehicle chargers not being included in the initial quote, in addition to supply chain issues resulting in increased costs. All equipment is due to be delivered in March 2023.

2.4 ICT Equipment - £101k decrease

2.4.1 The overall budget equates to £748k, forecast expenditure and budget slippage is £667k and £157k respectively. A net overspend of £76k is largely due to the Command Video Wall which is an

unbudgeted item but requires replacing to continue incident command training.

More detail on individual schemes is provided below;

2.4.2 Core Switch Replacement
The remaining £122k has been slipped into the next financial year due to ongoing supply chain issues.

2.4.3 Servers & Storage Replacement
Much of this project is complete however the remaining £28k has slipped into 2023/24 which is again due to the supply chain issues prevailing market conditions.

2.4.4 Command Video Wall
This is a new area of spend since previous reporting. The video command wall facility at Cardiff Gate is used for the delivery of critical incident command training, has failed and needs to be replaced as a matter of urgency. Installation should be completed before March 31st, 2023.

3   IMPLICATIONS

3.1   Appendix 1 illustrates current capital spending plans for the year and how this differs from the original budget.

A forecast spend of £9.5m and slippage of £4.9m result in a net £2.4m overspend. £1.5m of this overspend will be grant funded, £28k will be offset by budget underspends and the remaining £807k will be funded as part of the capital financing set out in appendix 1. This is analysed below

CAPITAL SCHEME	Over spend	Under spend	Additional Funding	Report Variances
PONTYCLUN	-90			-90
PLANNED & PREVENTATIVE MAINT	-8			-8
WHITCHURCH USAR (grant funded)	-1,102		1,102	0
SOLAR PANELS (grant funded)	-18		18	0
EV CHARGERS (grant funded)	-169		169	0
ON-CALL STATION PROJECT (partially grant funded)		15		15
BOILER WORKS	-212			-212
EQUALITY & DIVERSITY	-108			-108
RESCUE TENDERS	-193			-193
VANS/OPS ESTATE CARS		7		7
LADDERS		1		1
DIM ELECTRIC LIGHT VEHICLE (grant funded)	-102		102	0
RTC CUTTING/RESCUE TENDER EQUIPMENT	-135			-135
WET WEATHER GEAR	-14			-14
BA COMPRESSOR	-22			-22
DIM EQUIPMENT (grant funded)	-132		132	0
GPS REPEATERS ON ALL STATIONS		5		5
THIN CLIENT REPLACEMENT	-3			-3
VOICE GATEWAYS REPLACEMENT	-7			-7
HQ INNER FIREWALLS REPLACEMENT	-21			-21
COMMAND VIDEO WALL	-50			-50
TOTAL	-2,386	28	1,523	-835

3.2 Community and Environment

Equality, Diversity and Inclusion	No
Welsh Language	No
Well-Being Of Future Generations (Wales) Act	No
Socio Economic Duty	No
Sustainability / Environment / Carbon Reduction	No
Safeguarding	No
Consultation and Communications	No
Consultation with Representative Bodies	No
Impact Assessment	No

3.3 Regulatory, Strategy and Policy

Legal	No
Financial	Yes
Procurement	No
Corporate Risk	No
Information Management	No
Data Protection / Privacy	No
Health, Safety and Wellbeing	No
Governance & Audit	No
Service Policy	No
National Policy	No

3.4 **Resources, Assets and Delivery**

Human Resources and People Development	No
Assets and Resources (Property/Fleet/ICT/Equipment)	No
Service Delivery	No
Procurement	No
Budget Revenue/Capital	Yes

4. EVALUATION & CONCLUSION

4.1 The total capital investment for the year is forecast at £9.5m and will be funded through borrowing, grants, a revenue contribution, and capital receipts.

5. RECOMMENDATIONS

5.1 That Members note the budget and progress of capital schemes, approve alterations identified in appendix 1 and associated movements in funding.

Contact Officer:	Lisa Mullan Temporary Head of Finance, Property & Procurement	
Background Papers	**Date**	**Source / Contact**
Revenue Monitoring Report	2022/23	Head of Finance, Property & Procurement

Appendices	
Appendix 1	Capital Monitoring 2022/23 (13.03.2023)
Appendix 2	Grant Monitoring Report 2022/23 - Capital (13.03.2023)

CAPITAL PROGRAMME 2022/23	Project Total £000	SLIPPAGE B/F 2021/22 £000	2022/23 BUDGET £000	ACTUAL AS AT 27.01.23 £000	COMMITTED AS AT 27.01.23 £000	OUTTURN POSITION 31.03.23 £000	BUDGET UNDER/ OVER SPEND £000	SLIPPAGE C/F 2023/24 £000
PROPERTY								
STATION REFURBISHMENTS								
MONMOUTH (co-location scheme)	600	350	0	0	0	60	0	290
NEW INN	3,800	1,960	0	51	53	100	0	1,860
PONTYCLUN	1,100	10	0	0	0	100	-90	0
PENARTH	3,250	0	25	0	0	0	0	25
WHITCHURCH / USAR (Grant)	1,040	0	0	780	216	1,102	-1,102	0
ON-CALL STATION PROJECT (partial Grant)	1,850	0	1,500	148	160	300	15	1,185
PLANNED & PREVENTATIVE MAINT	0	187	450	273	386	645	-8	0
SOLAR PV HQ (Grant)	300	0	0	8	0	18	-18	0
EV CHARGERS (Grant)	169	0	0	1	156	169	-169	0
BOILER WORKS	200	0	0	0	212	212	-212	0
EQUALITY & DIVERSITY	0	0	0	19	79	108	-108	0
	12,309	2,507	1,975	1,280	1,262	2,814	-1,692	3,360
VEHICLES								
TRUCK (SLIDE DECK / CRANE)	150	150	0	0	197	0	0	150
WATER LADDERS	3,719	1,934	1,785	2,801	1,079	2,801	0	918
RESCUE TENDERS	705	705	0	898	0	898	-193	0
VAN/OPS ESTATE CAR	454	299	155	0	422	422	7	25
LIGHT UTILITY 4WD	240	0	240	0	0	0	0	240
NON OP 4WD	26	0	26	0	0	0	0	26
LADDERS	108	0	108	107	0	107	1	0
DIM ELECTRIC LIGHT VEHICLE (Grant)	75	0	0	102	0	102	-102	0
	5,477	3,088	2,314	3,908	1,698	4,330	-287	1,359
EQUIPMENT								
RTC CUTTING/RESCUE TENDER EQUIPMENT	300	494	795	773	651	1,424	-135	0
WET WEATHER GEAR	100	100	0	0	114	114	-14	0
BA COMPRESSOR	22	0	0	22	0	22	-22	0
DIM BIOLOGICAL & EXPLOSIVE DETECTION EQUIPMENT (Grant)	185	0	0	24	0	132	-132	0
	607	594	795	773	765	1,693	-303	0
ICT								
WIRELESS LAN CONTROLLERS	80	26	0	0	0	26	0	0
GPS REPEATERS ON ALL STATIONS	45	5	0	0	0	0	5	0
THIN CLIENT REPLACEMENT	250	47	0	50	0	50	-3	0
END USER COMPUTER REPLACEMENT	450	0	150	129	20	150	0	0
VOICE GATEWAYS REPLACEMENT	20	20	0	21	6	27	-7	0
HQ INNER FIREWALLS REPLACEMENT	30	30	0	51	0	51	-21	0
CORE SWITCH REPLACEMENT	130	130	0	8	0	8	0	122
SERVERS AND STORAGE REPLACEMENT	150	0	150	122	0	122	0	28
SERVER SOFTWARE UPGRADE	150	0	150	143	0	143	0	7
WIRELESS ACCESS POINTS	40	0	40	9	24	40	0	0
COMMAND VIDEO WALL	50	0	0	0	50	50	-50	0
	1,395	258	490	534	100	667	-76	157
TOTAL	19,788	6,447	5,574	6,495	3,825	9,504	-2,358	4,876

FUNDING ANALYSIS	
BORROWING	7,739
CO-LOCATION CONTRIBUTIONS	0
REVENUE CONTRIBUTION	200
REVENUE RESERVES	0
CAPITAL GRANT	1,538
CAPITAL RECEIPTS	27
	9,504

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CAPITAL MONITORING 2022/23
Appendix 2
Grant Monitoring Report 2022/23 – Capital (13.03.2023)

	NATIONAL RESILIENCE
Vehicles	
DIM Light Electric Vehicle	102,371
Equipment	
DIM Biological & Explosive Detection Equipment	132,002
Property	
USAR property development	1,102,000
EV Chargers	169,000
Solar PV HQ	18,000
Low Carbon Heat Development	14,750
Initial Income	-1,413,750
Additional Income	-124,373
(Under)/Overspend	0

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SOUTH WALES FIRE & RESCUE AUTHORITY   AGENDA ITEM NO 10
                                                  13 MARCH 2023

FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

REPORT OF THE HEAD OF CORPORATE SUPPORT

ANNUAL REPORT OF THE WORK OF THE FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

THIS REPORT IS FOR DECISION

REPORT APPROVED BY DIRECTOR OF CORPORATE SERVICES

REPORT PRESENTED BY SARAH WATKINS, HEAD OF CORPORATE SUPPORT

SUMMARY
This report is the draft annual report on the work of the Finance, Audit & Performance Management Committee for the municipal year 2022/2023.

RECOMMENDATIONS
That Members consider the report and make any necessary amendments to its content prior to reporting to the Fire & Rescue Authority as a summary of the workload carried out by Finance, Audit & Performance Management Committee during the municipal year.

---

1.   **BACKGROUND**

1.1   This report sets out the annual report of the Finance, Audit and Performance Management Committee (FAPM) during the municipal year.

2.   **ISSUE**

2.1   As Members will be aware, FAPM was established to demonstrate the Authority's commitment to the efficient and effective deployment of public resources and the attainment of related performance targets.

2.2   FAPM is responsible for:

- the planning and management of the Authority's financial resources, including authorising expenditure, virement of funds and donations of equipment or other property within the remit of the Authority's Financial Regulations.

- overseeing the financial reporting process and provides a detailed examination of financial performance, including the extent that this affects the Authority's exposure to risk and weakens the control environment.

- demonstrate the Authority's commitment to the efficient and effective deployment of public resources and the attainment of related performance targets.

2.3   FAPM provides assurance that available funding and assets are utilised as efficiently and effectively as possible to protect the level of service offered to the public within the core priorities defined by the Fire & Rescue Authority by reviewing, challenging and monitoring:

- the make-up of the Authority's revenue and capital budget with a view to cost reduction or value enhancement.
- the management of the Authority's assets
- how the Authority manages its performance and how this is presented in a meaningful way to the public and its stakeholders.

2.4   Appendix 1 to this report contains the Annual Report of the work of FAPM for the municipal year.

3.   IMPLICATIONS

3.1   Community and Environment

Equality, Diversity and Inclusion	No
Welsh Language	No
Well-Being Of Future Generations (Wales) Act	No
Socio Economic Duty	No
Sustainability / Environment / Carbon Reduction	No
Safeguarding	No
Consultation and Communications	No
Consultation with Representative Bodies	No
Impact Assessment	No

3.1.1 Although not specifically addressed in this report, many of the papers that FAPM receives during the municipal year provide cognisance to many of the aspects within this Community and Environment section, particularly Well-Being of Future Generations Act, the Socio Economic Duty and Sustainability.

3.2 **Regulatory, Strategy and Policy**

Legal	No
Financial	Yes
Procurement	No
Corporate Risk	Yes
Information Management	No
Data Protection / Privacy	No
Health, Safety and Wellbeing	No
Governance & Audit	Yes
Service Policy	No
National Policy	No

3.2.1 The FAPM Committee by virtue of its terms of reference and the papers it receives provides scrutiny of and assurance to the Authority in terms Financial, Corporate Risk and Governance and Audit.

3.3 **Resources, Assets and Delivery**

Human Resources and People Development	No
Assets and Resources (Property/Fleet/ICT/Equipment)	No
Service Delivery	Yes
Procurement	No
Budget Revenue/Capital	Yes

3.3.1 By virtue of reviewing and scrutinising progress against Priority Actions and the Statutory PI's, the FAPM Committee discharges responsibilities and provides assurance to the Authority of the appropriate progress and performance against Service Delivery.

3.3.2 Additionally, FAPM provides robust and vigorous scrutiny and challenge to the Statement of Accounts, Medium Term Financial Plan, Revenue and Capital monitoring and Treasury Management Outturn.

4. **RECOMMENDATIONS**

4.1 That Members consider the report and make any necessary amendments to its content prior to reporting to the Fire & Rescue Authority as a summary of the workload carried out by Finance, Audit & Performance Management Committee during the municipal year.

Contact Officer:	Sarah Watkins
	Head of Corporate Support

Background Papers:	Date	Source/Contact
None		

Appendices:	
Appendix 1	Annual Report of the Work of the FAPM Committee

DRAFT ANNUAL REPORT OF THE WORK OF THE FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

1.   PURPOSE OF THE COMMITTEE.

1.1   As Members will be aware, the Finance, Audit & Performance Management Committee was established to demonstrate the Authority's commitment to the efficient and effective deployment of public resources and the attainment of related performance targets.

1.2   The Committee is responsible for the planning and management of the Authority's financial resources including authorising expenditure, virement of funds and donations of equipment or other property. It oversees the financial reporting process and provides a detailed examination of financial performance including the extent that this affects the Authority's exposure to risk and weakens the control environment. The Committee also provides assurance of the adequacy of the risk management framework and associated control environment. Within the scope of the Committee, it also assists the Fire & Rescue Authority in policy and strategy development issues relating to Finance, Audit & Performance Management and Good Governance issues.

1.3   To discharge its functions the Committee plans its work through a forward work programme. The work of the Committee broadly falls under three distinct categories, namely: financial; policy, audit or development; and scrutiny. For the purposes of this report it is intended that an overview of the work undertaken by the Committee in the 2022/2023 municipal year is detailed under each of the sub headings.

2.   FINANCIAL

2.1   The Committee is specifically tasked with reviewing and challenging where necessary the Authority's financial statements, interim reports, preliminary projections and related formal statements before clearance by the auditors. Particular attention is paid to:

2.1.1 The critical accounting policies and practices and any changes in them.
2.1.2 The extent to which the financial statements are affected by any unusual transactions in the year and how they are disclosed.
2.1.3 The clarity of reports.
2.1.4 Significant adjustments resulting from audits.
2.1.5 Compliance with accounting standards.
2.1.6 Compliance with other legal requirements.

2.2 The Committee also monitors the management action in response to issues raised in relation to financial reporting and carries out spending reviews of budgets to enable reviews of current spending policy.

2.3 In discharging these functions the Committee has undertaken a large amount of work this year on a variety of financial issues. This work has included the following:

2.4 **Revenue and Capital Monitoring** – The Committee has considered in detail regular monitoring reports in respect of the current financial year's revenue and capital budgets which provide an update of expenditure against the budget for the year. Detailed scrutiny has taken place in respect of variations against budget, and further reports or information have been requested where appropriate to address Members' queries. Detailed questioning has been undertaken in respect of various costings, including approving virements. Members also noted the budget and progress of capital schemes and approved alterations noting the associated funding streams.

2.6 **Revenue and Capital Outturn** – Members considered the revenue and capital outturn reports for the previous financial year which advise on total revenue and capital expenditure against the respective budgets following the year end. Members scrutinised year end variations and used this information to help understand the budget pressures and to influence budget setting for subsequent years. Members received reports on the outturn position and deployment of usable reserves.

2.7 **Reserves Strategy** – Members were updated on the reserves position of the Authority and, in accordance with best practice, considered and scrutinised their stance on reserves and reaffirmed the previous strategy with regard to reserves.

2.8 **Revenue and Capital Budget Setting** – The Committee and its Finance, Asset & Performance Management Scrutiny Group have taken a detailed role in assisting in the formulation of the appropriate revenue and capital budgets required to meet the Service's requirements for the next financial year. The work has once again been greatly assisted by a full review of the Authority's Medium Term Financial Plan, which has been updated accordingly. The culmination of this work resulted in the Authority resolving to consult on a budget increase of 12.7% as recommended by the Committee for the coming year, a budget subsequently approved by the Authority.

2.9 **Statement of Accounts 2021/2022** – In July 2022, the Committee were presented the draft Statement of Accounts for 2021/2022 and the

Treasurer was given authority to make any necessary amendments that may be required as a consequence of the audit process. The final Statement of Accounts was reported to the Fire & Rescue Authority in September 2022. The Annual Audit Summary for 2021/2022 was also directly reported to the Fire & Rescue Authority at its February 2023 meeting.

2.10 **Treasury Management** – In October 2022, the Committee considered the Treasury Management annual report which advises on performance against the Treasury Management Policy and Strategy following the financial year end. The report provided Members with an opportunity to scrutinise performance and also to assess any implications for the current strategy and budget setting proposals for the following financial year. Members noted the annual treasury management review for 2021/2022 and approved the actual prudential and treasury indicators set therein.

2.11 In December 2022, the Committee considered the Treasury Management mid-term report which outlined performance against the Treasury Strategy from April to September of the current financial year. Detailed scrutiny and questioning took place resulting in recommendations to the Fire & Rescue Authority to approve the revised Strategy.

2.12 **Medium Term Financial Strategy** – Members received updates on the Medium Term Financial Strategy and were informed of the best, medium and worst case scenarios that had been used in the financial modelling that had been undertaken and were afforded the opportunity to scrutinise the process and scrutinise the implications for the Service of various scenarios.

3. POLICY, AUDIT OR DEVELOPMENT

3.1 The Committee has specific responsibilities in relation to internal control and risk management; internal audit; external audit and inspection; performance management; and the Local Government Measure. In relation to internal control and risk management, the Committee is responsible for reviewing the Authority's procedures for detecting fraud and corruption and whistleblowing, and ensuring that arrangements are in place by which staff may, in confidence, raise concerns about possible improprieties in matters of financial reporting, finance control and any other matters. The Committee also reviews officers and the internal auditor's reports on the effectiveness of the systems for internal financial control, financial reporting and risk management, and monitors the integrity of the Authority's internal financial controls. The Committee is also required to review and approve the Authority's assurance statements, including the Annual Governance Statement, and be

satisfied that they properly reflect the risk environment and any actions required to improve it. In addition, Members assess the scope and effectiveness of the systems established to identify, assess, manage and monitor financial risk, and review and approve the Authority's Corporate Risk Register.

3.2 **Internal Audit** – In relation to internal audit, the Committee is required to review and approve the internal audit programme for the Authority and ensure that the internal audit function is adequately resourced. In this respect it receives reports on the results of the internal auditor's work on a periodic basis and receives the annual report of the internal auditor. The Committee reviews and monitors action taken by departments as a result of the internal auditor's findings and recommendations, and monitors and assesses the role and effectiveness of the internal audit function in the overall context of the Authority's risk management system. Where necessary, direct action is to be taken as a consequence of an internal audit report if required.

3.3 The Committee agreed an annual internal audit programme for 2022/2023 at their meeting in July 2022, covering the areas identified below. Since the programme was agreed, the Committee has considered in detail the progress and findings of the relevant audits:

- Collaboration – Co-location
- Rosters
- Human Resources Management – Wellbeing
- Station Visits
- Payroll
- Contract Management
- General Data Protection Regulation (GDPR)
- ICT Network Security
- Key Financial Controls
- Risk Management – Mitigating Controls
- Human Resources Management – Training
- Sustainable Procurement

3.4 Members have noted the internal audit recommendations and work completed to date on the Internal Audit Annual Plan.

3.5 **External Audit** – In relation to external audit and inspection, the Committee is responsible for overseeing the Authority's relations with the external auditor. It approves the terms of engagement to the external auditor in respect of auditing inspection services received by the Authority.

3.6 The Committee also reviews with the external auditor the findings of their work including any major issues that arise during the course of an audit, key accounting and audits judgements, level of errors identified during the audit, and obtain explanations from managers or auditors as to why

certain errors might remain unadjusted. In addition, the Committee reviews and monitors the actions taken by departments as a result of the external auditor's findings and recommendations and, where necessary, direct action should be taken as a consequence of an external audit report.

3.7 In October 2022 the Committee received the Audit Wales Final Audit Letter advising on the conclusion of the financial audit.

3.8 Members also assess at the end of the audit cycle the effectiveness of the audit process by reviewing whether the auditor has met the agreed audit plan and understanding the reasons for any change (including changes in perceived audit risks and the work undertaken by the external auditors to address those risks); consideration of the robustness and perceptiveness of the auditors in handling of the key accounting and audit judgements; responding to questions from the Committee, and their commentary, where appropriate, on the systems of internal control.

3.9 Previously the Fire & Rescue Authority required that the Committee meets with both internal and external auditors without management present to discuss the audit work of the Authority. Following discussions with the Committee, internal and external auditors' agreement was made that meeting annually was sufficient.

3.10 **Performance Management** – The Committee receives all external reports on the performance of the Authority and considers and recommends to the Fire & Rescue Authority action plans relating to these reports and monitors progress against the approved action plans. In relation to the Wales Programme for Improvement, the Committee reviews, approves and challenges, where necessary, the performance and improvement plan; the operational and non-operational assurance self-assessment when appropriate; the joint risk assessment; and any other periodic reports on performance management of relevant areas of the Service. In addition, the Committee considers comparative studies, including benchmarking and best practice.

3.11 As a consequence, the Committee has to date considered reports on progress of audit, scheme and circular action updates and also provides detailed scrutiny of the Service's Strategic Risk Register. In addition, considerable time has been taken up considering progress against the Statutory Performance Indicators the Service reports against to Welsh Government; and its health check of performance against the Priority Actions identified by the Service as being required to be implemented to achieve the eight Strategic Themes approved by the Authority in its ten-year Strategic Plan.

4.   ADDITIONAL AREAS OF WORK UNDERTAKEN

4.1   In addition to the work above, the Finance, Audit & Performance Management Committee undertook several other pieces of detailed work during in the final meeting of the municipal year.

4.2   **Treasury Management Strategy Report** - To secure Members' approval to the adoption of the Treasury Management Strategy for the following financial year.

4.3   **Draft Annual Report of the Work of the FAPM Committee** - To consider the draft report on the annual work of the Committee before its submission to the Fire Authority and to ensure the Authority has efficient use of resources and robust procedures in place to ensure and manage this.

4.4   **Internal Audit Programme -** To outline the planned internal audit coverage for the financial year and to seek comment and approval.

4.5   **Revenue Monitor -** To provide an update on revenue expenditure against the revenue budget for the year.

4.6   **Capital Monitor -** To provide an update on capital expenditure against the capital budget for the year.

4.7   **Health Check of Priority Actions and Q3 progress against the Statutory PI's -** To scrutinise progress of the Service's Priority Actions and statutory PI's as at the end of Q3.

4.8   **Internal Audit Annual Report -** To provide an opinion on the adequacy and effectiveness of risk management, control and governance processes based on the internal audit work undertaken during the financial year. This will support the statement of internal control.

4.9   **Corporate - Departmental Risk Register** - To seek Members' views upon the Corporate Departmental Risk Register.

4.10   **Register of Gifts and Hospitality -** To advise Members of gifts and hospitality accepted and declined by Members and Officers during the year.

BUSINESS PLAN ACTIONS REPORT

Health Check

2022-2023 Quarter 3 (1st October – 31st December 2022)

Gwasanaeth Tân ac Achub
De Cymru

South Wales
Fire and Rescue Service

Produced in

BMIS

**Business Management
Information System**

Summary

This paper will give assurance to the Members of the Fire & Rescue Authority and senior management within South Wales Fire & Rescue Service on progress towards achievement of the Strategic Themes and performance of the Strategic Performance Indicators for the period 01 October – 31 December 2022.

Background

1.1   The Welsh Government requires South Wales Fire & Rescue Service to develop Strategic Plans to identify the direction for the Service and address areas for improvement. The Service does this by developing a Strategic Plan, implementing actions, and measuring indicators to enable the Service to achieve these organisational goals.

1.2   All departments link actions within their annual department plans to the appropriate Strategic Objectives. This enables us to measure how well we are performing against these objectives by how many of the linked actions are on target and review how the associated indicators are performing.

1.3   Quarterly updates are recorded by action owners onto the Business Management Information System (BMIS), and staff within the Planning, Performance and Risk Team monitor the information and extract reports accordingly.

1.4   To further support the performance management framework, National Strategic Indicators were introduced for reporting year 2015/16. Together these provide data and information to inform and support decision-making processes within the Service to target activity and drive improvement. The Statistics and Risk Team monitors the information and extract reports accordingly.

1.5   This report will provide Members and Officers with a health check on performance against the Strategic Themes and Strategic Indicators for the period 01 October – 31 December 2022.

Issue

2.1   For Members' information going forward, considering the Well-Being of Future Generations (Wales) Act 2015, the Service has adopted eight Strategic Themes, as detailed below, to structure our 2020-2030 Strategic Plan:

ST01 – Keeping you safe

ST02 – Responding to your emergency

ST03 – Using technology well

ST04 – Working with our partners

ST05 – Engaging and communicating

ST06 – Valuing our people

ST07 – Protecting our environment

ST08 – Continuing to work effectively

2.2   Each of these Strategic Themes has one or more Objectives that the Service has monitored progress against during 01 October – 31 December 2022.

2.3   Appendix 1 attached is a summary of the Performance Monitoring Report, which reviews the period 01 April – 31 December 2022 performance against agreed targets for the seven National Strategic Performance Indicators. It also includes a summary comment for each indicator.

2.4   Appendix 1 identifies that four indicators have not met their targets and performed worse than last year, and three indicators are achieving their targets.

2.5   The four indicators that have not meet their target and have performed worse than last year are:

1.   Total Fires Attended
2.   False Alarms
3.   Other Special Services Calls Attended
4.   % Of Dwelling Fires Confined to Room of Origin

2.6   The three indicators that have achieved their targets are:

5.   Total Road Traffic Collisions Attended
6.   Total Deaths and Injuries in Fires
7.   Accidental Deaths and Injuries in Fires

2.7   Appendix 1 attached provides some key information about the Service and its performance during the period 01 April 2022 – 31 December 2022.

Equality Risk Assessment

1. This report, the accompanying appendices, and the targets themselves have no Equality Risk Assessment impact.   The Service Performance and Communications Department and the respective Directorates are working with the performance data to establish any trends and implications that would include equality implications. These will be addressed at that time.

2. It is the responsibility of the action owners to ensure that Integrated Assessments are carried out for their actions in the planning framework.

Recommendations

4.1   That Members review the performance details and statistical data for the period 01 October – 31 December 2022 contained within this report.

Strategic Theme Task Overview

Theme ID	Theme	RED	AMBER	GREEN
ST01	Keeping you safe	1	4	8
ST02	Responding to your emergency	1	5	4
ST03	Using technology well	2	11	27
ST04	Working with our partners	1	5	7
ST05	Engaging and communicating	0	3	3
ST06	Valuing our people	3	19	24
ST07	Protecting our environment	0	0	11
ST08	Continuing to work effectively	2	11	14
		10	58	98

Strategic Theme Task Commentary

ST01 – Keeping you safe

1.1 Reduce the impact of false alarms on our resources

Feedback from Welsh Government (WG) audit is due at the end of January. Continue to monitor the effect of the Unwanted Fire Signals (UFS) stages scheme on percentage of premises in stages 3 & 4 (10 or more UFS attended in the previous 12 months) and via assessment of quarterly stats.

1.2 Reduce the number of fires in the home and understand the behaviours and causes of them

Community Safety report that completion of M20 forms, to record home safety interaction following any dwelling-based incident, continues to rise and we can now consider that home fire safety visits are now back to pre-pandemic levels.

The review of how we identify and apply risk rating of Home Safety Checks utilising All Wales Risk Stratification Group is making good progress in conjunction with adopting the Safelincs system which will provide an online home fire safety assessment.

We continually review MOUs and communications with other agencies to identify and information share to assist vulnerable people within our communities. The appointment of a partnership officer will provide a greater capacity to develop new partnerships.

LEAF is in progress - approximately 30 properties have been identified as potential candidates. Once completed, identified properties will then be allocated to practitioners to carry out LEAF visits as follow up to Accidental Dwelling Fire (ADF) incidents and research into behaviour during ADFs.

1.3 Reduce the number of Road Traffic Collisions (RTCs)

It was agreed at the Risk Reduction business planning meeting 17/01/23 that working with Road Safety Partners to reduce RTCs is now embedded as business as usual (BAU).

1.4 Reduce the number of deliberate fires

It was agreed at the Risk Reduction business planning meeting 17/01/23 that developing and delivering innovative approaches to support operations initiatives with regards to arson reduction is now embedded as BAU.

1.5   Improve safety in and around water

We continue to support the National Fire Chiefs Council (NFCC) water prevention agenda and are actively part of the water steering group; including the newly formed All Wales Water rescue and flooding group.

We are the Fire and Rescue Service (FRS) representative on behalf of Water Safety Wales on the strategic group which will deliver Staywise. Permissions for use of materials have been finalised and resources are in the process of being translated and uploaded to the internet.

Water Safety Wales was established in 2017 as the All Wales Water Safety Forum by a group of organisations working on water safety and drowning prevention in Wales. In 2018 the group was renamed Water Safety Wales. The group brings together organisations in Wales with an interest in water safety and downing prevention.

StayWise Cymru aims to provide safety resources, activity packs and lesson plans in the medium of Welsh and English from a diverse range of services for both primary and secondary school age children.

The intranet has been updated with a dedicated page to include resources for stations to utilise in their Community Risk Management Plans (CRMPs). A QR code has been established along with promotional materials including a "Sbarc says float to live" sticker. Once the 'drowning prevention' package is complete, stations can incorporate into their CRMP.

We have completed phase 1 of the Water Rescue Strategy 2020-2025. We are nearing a 'go live' date for our new type C (swift water rescue) teams aligned to all Rescue Tender stations along with training for our fire control team, Water Incident Managers (WIMs) and Tactical Managers. Phase 2 will start in the new financial year (2023-2024) uplifting Type D (First Responder) stations aligned to all Wholetime Duty System (WDS) stations. On Call stations are to continue with Type E (Water Awareness) capability.

The River Usk Trackway project (a deployable boat launch point trackway) is currently underway. Ecology and water surveys in place. Planning will be jointly submitted by consultants to Newport City Council.

1.6   Improve fire safety in buildings in our communities

Stations are making good progress in relation to attending Site Specific Risk Information (SSRI) as per revisit programme and updating Operational Tactical Plans (OTPs) when and where appropriate.

Business Fire Safety (BFS) is manually reviewing risks within the built environment based on statistics available internally. Work with West Midlands Fire Service (WFFS) on the RIDGE project and NFCC risk group is ongoing to automate this process.

RIDGE (Risk Information Data Gathering Engine) identifies and prioritises commercial properties that are most at risk from fire.

Work is ongoing with BFS to develop a reporting module via BMIS to provide management information.

Joint Fire Control (JFC) Systems Team is currently working with Operational Risk Management (ORM) to update SSRI data held within Vision. However, no further progress has been made this quarter and discussions are ongoing around submitting a business case for a green book employee to assist with data updates.

ST02 – Responding to your emergency

2.1 Respond effectively when you need us

The flexible rostering group is in the process of being reinvigorated with the aim of securing a collective agreement to implement a trial of the revised flexible rostering system.

The internal JFC recruits' course is approximately halfway through. The recruitment campaign for 2023 has closed and is progressing for a course of four in April 2023. The Control Development Team (CDT) continues to provide resilience for Emergency Response when required.

Evidence gathering, monitoring and reviewing the five areas of the JFC Review (substantive posts, working conditions, structure, handback and environmental issues) are ongoing.

- One person was successful at middle manager ADC and two were successful at supervisory ADC for development. Two people retaking technical tests at both levels.
- Crewing levels increasing. Using overtime, Head of JFC, Flexi Duty Station Managers covered rank and operator shortages, particularly over festive period.
- Two under establishment at end of year with a further trainee course due to finish early Q4.
- Two further resignations due.
- pdrPro target for go live is April 23.
- General Information (GI) updates not being completed. Plan in place to address in Q4 following loss of Prevention and Protection function.
- Reassignment of Safeguarding recording duty is progressing.

  pdrPro is a planner-based maintenance of competence system that includes all the activities that make up a core skill. Whether attained in training, incidents, courses or e-learning they are recorded and reported in one place. The dashboard provides an overview and a route into all parts of the system.

Due to the JFC review, a report on the efficiency and effectiveness of the new command and control functionality has not progressed. It was agreed at the JFC business planning meeting 16/01/23 that this task could be closed as other actions mean this report is no longer required.

JFC continues to work with partners on the full implementation of Multi Agency Incident Transfer (MAIT).

  MAIT is a highly resilient service for all emergency service providers. It facilitates the fast exchange of secure messages and incident notifications between agency control rooms.

2.2 Do all we can to make sure that our On-Call Duty System is available

The On-Call recruitment process has been streamlined and shortened to 12 weeks from point of contact to initial Firefighting course.

  On-Call Firefighters live or work in local communities to the stations they serve and respond to their station when required, within their contracted hours.

On-Call stations are forecasting short, medium and long term, adapting their recruitment needs with support from media, after review in March this will become BAU.

Skills for Justice (SFJ) are still evaluating changes to the On-Call qualification. On-Call call pre-course learning has now been populated onto pdrPro.

> *SFJ is the leading Awarding Organisation for Fire and Rescue Qualifications offering a wide range of training for individuals, teams, and employers across fire and rescue, including fire safety, fire prevention, and much more.*

2.3 Train our personnel to respond to current and future risks in our communities

Emergency Response Driver Training (ERDT), Light Vehicle and Large Goods Vehicle courses are now aligned with Section 19 of the Road Traffic Act. New courses, in line with Section 19, are in place ready for March 2023. OCG propose maintaining requalification of ERDT to 36 months and not extend to 48 months. This will be kept under review in light of legislation.

The Thermal Imaging Camera (TIC) training package has been finalised by the Training Support Unit. This will be uploaded to the BA intranet page.

ST03 – Using technology well

3.1 Use the most suitable technology and equipment to improve our services

The introduction of the CoreHR Development Group has mapped out the ongoing development opportunities that the system offers which will be progressed in line with the group's action plan.

Increasing HR interaction with internal customers continues with a recent example being the attendance of the CoreHR Development officer at Heads of Service to discuss the iCues feature and how it can be incorporated across the Service.

> iCues are trigger based Insight Reports designed to proactively prompt stakeholders when action is required.

Recruitment have made progress with application forms going online and are currently working on automating the final application form for On-Call recruitment.

The exercise to bring all teams back on to Core Time sheets and to allow managers to take ownership is well underway.

Employee Relations have completed training on using CoreHR Portal for most day-to-day activity and are awaiting some final changes to the HR Officer profile to give full access to the necessary areas. As team members embed in new roles, further capabilities within CoreHR will be exploited.

The module to introduce the Onboarding function within the CoreHR system, which will enhance the introduction of new employees into the workplace, has been deferred to 2023-24.

iPads continue to be rolled out across teams and are now being utilised for remote data entry. The Operational Assurance Support Team (OAST) will be trialling this when the new audits commence in April 2023.

South Wales Police and Gwent Police have implemented the Patient Management System. The Service will procure an independent system but this will not be achieved in during the current financial year.

The Geospatial Data User Group (GDUG) continues to monitor Graphical Information System (GIS) requirements and process for approval of new layers in place. Liaising with ICT re software to enable files to be uploaded to mobile data terminals (MDTs).

> *MDTs comprise a vehicle mounted, fixed, ruggedised computer fitted with a 12-inch touch screen. The MDT and screen are fitted to the cabs of all frontline appliances enabling crews to access mobilising information, messages and operational data.*

We continue developing a Geo Data Hub on the intranet for staff to access information/guidance on the use of GIS data and mapping. Draft to be rewritten to make content accessible and appropriate.

Existing BMIS station dashboards continue to be supported pending the design and implementation of a revised dashboard to replace the existing 47 dashboards. Redesign of BMIS to be launched, review of reports will continue.

Awaiting update on South Wales Police Command and Control solution procurement following presentation by South Wales Police and Gwent Police to all stakeholders to share tender information, specification and project sprints. No further information following this presentation. JFC will liaise to understand impact and to identify a process for the Integrated Communication Control System (ICCS).

> *The ICCS is a touch screen interface enabling users to efficiently manage radio and telephony voice communications whilst being able to easily access other subsystems, for example, CCTV, voice recorders, intercom systems, door locks and alarms.*

There has been no progress regarding the deployment of the Emergency Services Network (ESN).

> *ESN is a cross-government programme, led by the Home Office, to deliver the new Emergency Services critical communications system. This will replace the current Airwave service used by the emergency services in England, Wales and Scotland) and transform how they operate.*

While future procurement of a finance system is being considered in terms of procedure and timescales, our existing system is being upgraded which will provide investment and system benefits.

The pdrPro project is meeting timelines with 35 modules completed and signed off by subject matter experts along with risk assessments. Six are complete awaiting sign off and various others are under construction. The main system went 'live' on 1st July 2022 and the modules are being updated and made 'live' in line with the pdrPro thematic training schedule.

Meetings and demonstrations have taken with Airbus regarding the replacement of the Hydra hydrant monitoring system. A redevelopment of the existing ScCapture system has occurred and will be available from March onwards. A meeting is scheduled with Devon and Somerset FRS to explore the back-office features that will confirm its a suitable replacement for Hydra. Early indication shows this to be the case. The deadline for Hydra to be turned off is Oct 2023.

ICT…
- Are awaiting finalised departmental review plans to create GAP analysis of ICT business continuity management improvement. Meanwhile ICT Plan for our dept functions will be submitted as is by March regardless of that work.
- Have updated, replaced or removed several servers. Server updates from W2K8 nearly complete, 23/24 will need to update W2K12 servers.
- Core switch replacement options confirmed in preparation for tender process.
- Work has now commenced on developing a single client database commencing with Safeguarding. Next will be the Domestic Violence database with Home Fire Safety (HFS) and Fire Setting Intervention Scheme (FIS) following further down the line.
- The new Active Directory Management software has been installed on a 2022 server and is in the process of being configured.
- Replacement printers at HQ, Occupational Health and Cardiff Gate Training and Development Centre have been delivered and servers built. Services will be installed in February which will enable monitoring of printing volumes.
- We worked with our current Asset Management System supplier to build a test, cloud-based, asset system for the management of firefighting equipment. Although we tried to follow a similar process flow as our current software the test system was not able to perform some of the tasks as well as the

current Redkite application. It was also highlighted that it would be difficult to separate the ICT assets from the equipment assets due to limitations within the configuration. On balance it was felt that the limitations and potential issues did not warrant us continuing with the trial and it was decided to remain with our current supplier.

- Firewall config translation completed on new firewalls. Due to changes required to VPNs, worked with several suppliers to update configuration before migration.
- There have been numerous meetings with BT and their Session Internet Protocol (SIP) team regarding migration from Integrated Services Digital Network (ISDN) to SIP. This will ensure continuity of our telephony service should there be an issue with HQ site. We are awaiting dates from BT to configure this resilience but expect completion by 31st March 2023.

> ***ISDN*** *is a circuit-switched telephone network system that transmits both data and voice over a digital line.*
>
> ***SIP*** *trunking is a digital connection enabling voice, video and other messaging to be transmitted via the internet*

- Global supply chain issues have impacted on wireless access point (AP) replacement. An order of 20 APs was delayed and delivery was not received until December 2022. Will begin AP roll out in early 2023.
- Office productivity software rollout to stations is now almost complete. The Information Governance & Compliance Officer is reviewing data retention and we will move onto external collaboration issues and evaluate other features in the next year.

3.2 Review the standard and use of technology and equipment across the Service

Six iPads were issued to BFS auditing officers to establish how software systems can be integrated to report directly into RIDGE. The iPads have been reallocated within the department to expand the scope of the trial. An electronic audit form has been developed and specification from WMFS on android tablets they have procured has been received. Appropriate tablets are planned to be sourced if electronic form is adopted and will be based on feedback from trial.

A report outlining the current situation regarding the Fire Service Emergency Cover (FSEC) system has been drafted and submitted to the Executive Leadership Team (ELT) for further discussion.

A scoping exercise is underway to produce an outline of requirement and reporting for project management. Outline of process has been produced, development to be scheduled and agreed.

We are in the final stages of a redesign of BMIS, confirming permission groups. The review has included monitoring delivery across mobile devices. Launch is imminent.

ST04 – Working with our partners

4.1 Work with our Public Service Boards (PSBs) to support our communities.

A standard dataset has been developed to be shared with all PSBs, providing key incident statistics at Unitary Authority (UA) and for combined PSBs (where appropriate). This will be discussed with Group Managers (GMs) with a view to developing BMIS overview. The redesign of BMIS has created area for this report to be developed. With change to the grouping and structure of our PSBs, this task will be reviewed.

The Refuse Fire Working Group has been re-established as it is important to share weekly refuse fire data with station commanders to allow them to identify hot-spots and work with UA partners to identify priority zones. This has delivered a 45% reduction in November and a 30% reduction in incidents in December.

Natural Resources Wales (NRW) have been asked to establish the top 30 waste sites across South Wales to create the opportunity to collaborate on incident management. We are developing 'Fire Management Plans' for our waste sites which will over lay with our IAP procedure. The product will deliver a faster response to incidents, enhance firefighter safety, resolve incidents more effectively and create an opportunity for all agencies to learn and develop new procedures.

4.2 Work with our partners to deliver our services where they are needed

This tri-service data sharing initiative has not been progressed since the beginning of the pandemic. There have been personnel changes within the other organisations since the group was first formed, which seems to have resulted in the group being discontinued. Head of Service Performance and Communications will continue to monitor the situation and will revive our participation within the group if it is re-formed. However, the action is not being progressed at present.

The specialised housing guide is being reviewed by NFCC. Once the new guidelines and regulations have been adopted the information will be shared to all stakeholders.

Partnership referrals for home fire safety checks have been re-energised with a review of current memoranda of understanding (MOUs). BMIS is being utilised to support stations in identifying our high-risk groups with a risk-based calculation for the most vulnerable households within communities. Directed lists through BMIS will support stations to deliver Home Fire Safety Checks (HFSCs).

A meeting has been held with b Wales FRS (MAWWFRS) to consider how risk information can be shared. We will meet with their GIS team and Ops Intel SSRI team to look at formatting and templates during the first quarter of 2023.

No progress has been with regards to implementing a new Service Level Agreement (SLA) with Dwr Cymru who are currently not fulfilling any SLA arrangements. On hold pending resolution of S-19 hydrants. No appetite from Dwr Cymru to complete.

Meetings taking place between Dwr Cymru and SWFRS as part of All Wales work to resolve the S-19 Hydrant Issue. Initial proposal (non formal) is that SWFRS pay for the repairs. Following the second meeting, Dwr Cymru are now reviewing their proposal and will provide a formal proposal for discussion in Jan.

Initial discussions have been undertaken with MAWWFRS in relation to a JFC information governance and compliance manual although planning for expected industrial action has taken priority. Initial discussion scheduled with Occupational Health and JFC.

No further progress has been made, regarding Social Value criteria being included in all contracts, since the last update, i.e. Training will be provided by WG to prepare for Social Partnership Bill planned for end in 2023. **Home - Social Value Portal**

4.3 Review and evaluate our existing partnerships

Property Services continue to work with our emergency service partners towards a co-ordinated strategy to develop future co-locations. A meeting regarding Monmouth was held on 20th January and full sign off given by all parties to progress design to end of RIBA Stage 2 Concept Design. The architect has baseline information to begin design work and site investigations are to commence February 2023.Work is ongoing with Statistics and Risk for data mapping Wales, once complete access will be available for all Emergency Services in Wales to identify potential sharing opportunities.

We continue to review current lease arrangements leading to replacing with revised cost recovery mechanism Currently waiting for feedback from an operational perspective. An initial draft of Code of Conduct has been done by SWFRS Legal Team and is out for review by the Co-location working group.

ST05 – Engaging and communicating

5.1 Deliver on the recommendations of the Investors in People report

This is now reported on under ST06 Valuing Our People.

5.2 Involve our communities and make sure they have their say in what we do

The review of our Stakeholder Register has taken place and updates have followed. Engagement Team are working to increase the sign-up to the register and engage more often with members.

5.3 Help keep our communities safe through safety education and attending community events

Ops have been working closely with Planning, Performance and Statistics to develop the CRMP process for the wider service. Significant progress being made which is reflective in our recent publication of our Improvement Plan.

We have developed a bespoke package for our youth justice colleagues to support the reduction in deaths and injuries on South Wales roads by targeting individuals on the cusp of serious car crime.

We have developed a behavioural change model to support the Welsh Government's planned reduction of speed limits from 30-20.

We are exploring the 'gamification' of our existing KS1 & KS2 resources to support fire safety interaction in schools, which will enable us to react to the changing activities within this age group. Young people will be able to access the information at any time which will allow them to consolidate their learning, change their behaviour and reduce the risk of their behaviour causing fires within the home.

We are continuing to deliver Crucial Crew which we adapt to meet the area we are operating in and the time of the year. During winter 2022-23 we are embedding our practitioners within warm hubs to create the opportunity to meet the citizens in our communities with the greatest needs to maximise our impact.

ST06 – Valuing our people

6.1 Attract a workforce that reflects and represents our communities

Due to impending industrial action Auxiliary FF recruitment has been prioritised and establishment increased to 120 for the industrial action period. Progress is being monitored via BMIS. Resilience and Planning have facilitated a test call exercise with Securitas to test working partnership. Currently developing operational deployment parameters.

The development and implementation of a Service recruitment strategy, considering the NFCC recruitment hub best practice, is ongoing. A draft document is being finalised before going to consultation.

Recruitment and Statistics continue to explore the use of recruitment metrics through obtaining data through CoreHR. Meetings have taken place to look at the needs of the Service and HR department.

More evaluation and data capture are needed for recruitment sessions and larger scale events. This will be addressed in planning sessions in Jan 2023.

6.2 Develop our people by identifying training and development opportunities

The review of talent management and succession planning has been deferred to 2023-24.

Due to the Occupational Health Unit workload, the development and delivery of bespoke line manager training package for occupational health will be progressed in 2023-24.

The review of talent management and succession planning by Learning and Development (L&D) has been deferred to 2023-2024 once Pathways and Personal Reviews have been embedded.

The JFC Training Plan is in place with external support provided by SWFRS. The target pdrPro go live is April 2023.

The build of the new CoreHR LEARN Learning Management System (LMS) system is progressing and due to launch in March/April 2023. Training will be online / via user guides.

The online option for delivering mandatory Discipline and Grievance Training for Station Managers and Corporate Managers above a Grade 10, is currently being considered and will be issued once the LMS is introduced in March 2023.

The initial review of Service-wide training to raise awareness and cover key data protection principles is completing and consolidation will follow.

Entry Level and Supervisory Level pathways (Apollo) is up and running, supervisory due to launch spring 2023. Final arrangements being made. Middle and Strategic Level pathways programmes are being scoped and under discussion by SMT.

Performance matrix, Continuous Professional Development and technical paper have been built into the Personal Review system.

Workloads have prevented refresher training to Job Evaluators to support the ongoing maintenance of the Service's Job Evaluation Scheme being delivered.

6.3 Support our people to feel well, healthy and happy at work

The newly introduced arrangements to manage policies and procedures via BMIS has now been presented to SMT and the Scrutiny Group. It has been decided to introduce a Task and Finish group to complete this activity.

Guidance has been obtained from our legal advisers and the recommended changes to ensure our suite of employment contracts comply with changing terms, conditions and legislation are being considered/negotiated.

As the Service is about to undergo a cultural review, the holistic Equality, Diversity and Inclusion (EDI) audit and assessment, which was to take place in 2023-2024, would not be appropriate at this time.

The Strategic Equality Plan has been reviewed this year and the Annual Equality Report for 2021-2022 is about to be published. The new EDI Lead is looking at a new Strategic Equality Plan and road map for the Service from 2023 onwards.

The EDI lead is working with the L&D team to progress a line manager training package for ED&I. A Skills booster has just been procured to gain additional EDI packages.

The Equality Allies Network will be reviewed and new communications opportunities for the lifecycle of the employee journey wil be reviewed.

The Fire Fit programme is due to launch and all stations already have the facilities to practice it.

The Wellbeing Delivery Group continues to promote health and wellbeing. This quarter focused on providing information on financial support offered by Care First and other partners, and menopause awareness.

Confirmation of funding to enable an increase in the number of MIND/Mental Health Champions by 30 is awaited.

We continue to pilot the changes to the process of transitioning staff on long term sick to return to work or leave the Service. The focus will be on policy development during the next quarter.

The first tender has been completed to extend 10 On-Call stations to include gyms, drying facilities etc.

We continue to refine the occupational health data reported via BMIS from Attendance Management, Occupational Health and HFA statistics to inform training for middle leaders to deal with complex health and wellbeing situations.

We continue to use existing BMIS dashboards to monitor post-pandemic absences, providing quarterly reports to People Services, SMT, Heads of Service and annual national reports.

Absence Management met with MAWWFRS to develop JFC sickness data. It was agreed the sickness data to be shared by each Service. SWFRS to lead on the collation of the figures. Unable to obtain a licence for MAWWFRS to view the figures but workaround almost complete. Next quarter will focus on collation of figures.

There has been no progress during Q3 in delivering a strategy for improving employment engagement in well-being events. There will be a focus on this during Q4.

Welfare pods are in use by JFC staff at JPSC. New desks ordered to repair and replace the existing desks in JFC and command room. Occupational Health Unit wellbeing days have been cancelled due to Auxiliary FF medicals. No timeline for further improvements until post Feb 23 due to police Command and Control rollout. Welfare pod issues addressed with Police.

> ***JPSC*** *is our joint emergency services control room with staff from three partner organisations – South Wales Police, South Wales Fire and Rescue Service and MAWWFRS.*

Workloads have delayed progress on:
- the review of on-call arrangements for Green Book posts with a view to aligning arrangements where possible. This will include negotiating any changes with the Trade Unions and employees before implementing associated changes.

- the review of post titles for Green Book posts with a view to ensure consistency across teams and departments where appropriate.

- work in consultation with Heads of Service to review Job Descriptions of Green Book posts.

6.4 Delivering on the recommendations of the Investors in People report

The undertaking of a survey to determine the effectiveness of internal communications and implement improvements where required was put on hold while the staff app was being re-promoted to staff and roles were being recruited within the team. Staff app has now been re-promoted and its progress will be evaluated shortly.

An Investors in People (IiP) reporting portal has been developed on BMIS and delivered to the IIP lead.

6.5 Encouraging and supporting a bilingual culture across the Service

A BMIS reporting portal has been designed to track compliance with the <u>Welsh Language Standards</u> and is being developed with Head of HR.

> *The* **Welsh Language Standards** *promote and facilitate the Welsh language and ensure that the Welsh language is not treated less favourably than the English language in Wales.*

ST07 – Protecting our environment

7.1 Reduce our usage of single use materials

Risk Reduction are no longer distributing single use plastic items as "gimmicks". We are embedding QR codes as a lasting reminder to clients of how to obtain information on our website. Practitioners are being developed to multi-disciplinary roles, dealing with three or more aspects of risk reduction. The RTC practitioners will be able to assess sites for potential RTC, suicide and self-harm and access to water courses. We have made the Malpas Hub our youth base which has reduced vehicle movements and a change in base location will support the carbon reduction plan.

7.2 Expand the use of electric vehicles

We have just added four electric vans to the fleet with another seven on order. We will continue to add alternative fuel vehicles wherever possible however charging electric is difficult when providing cars to operational on call staff.

7.3 Reduce our energy use and our carbon footprint

Sub metering on stations plans to be re-evaluated using CIBSE TM39 building energy metering guidance to ensure that installations are appropriate and designed correctly.

The responsibilities of making stations more sustainable is the responsibility of us all but the daily running of stations sits with the commanders. They manage recycling, intelligent electricity/gas/water use etc. Bigger projects such as building efficiency, insulation, heating systems etc. sit with property maintenance.

Presentation made to SMT and agreement to progress with the Net Carbon Zero design of New Inn Fire and Rescue Station to end of RIBS Stage 3 Spatial Coordination. Station engagement meeting 1 has been completed with some changes to the early design as expected. Will now liaise with Design Team to make reasonable alterations and revisit Station for further consultation.

Carbon Reduction Plan (CRP) data for 2021-22 has been collected and data for 2022-23 is being collected throughout the year. Talks to be arranged with Stats Team to relay plan to display CRP baseline comparison as well as other key metrics such as energy use and cost. Energy and waste data will be published in 3 locations:

- BMIS Sustainability page
- Intranet Sustainability page
- Internet Sustainability page

Monitoring the carbon footprint of pool vehicles to help assess the beneficial impact of new electric powered vehicles on the environment has been taken over by the sustainability team although Fleet and Engineering still provide the information via Tranman and Fleet Motus for their calculations.

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7.4 Consider how our activities impact on the environment

A consultant has been instructed to produce a fee for rainwater harvesting and grey water harvesting at HQ. This fee will be for the Design and Tender pack and the Construction Element.

7.5 Reducing the amount of waste produced

The waste management contract is currently going through the tender process. The facilities management team are arranging site visits of prospective providers. Contract award is scheduled for 3rd March 2023 with the contract commencement being scheduled for 1st April 2023.

ST08 – Continuing to work effectively

8.1 Be clear and publicly accountable

Work is progressing to set up a training assurance team. The likely implementation date is to be aligned with the new task reporting for year 23/24.

A review of Treasury Management Practices is scheduled to be conducted during 2023-24.

A BMIS reporting portal is being designed to track progress made against the Gender Pay Gap, the average difference between the remuneration for men and women, action plan, based on tasks previously provided.

This solution regarding FF Pension tapering arrangements will now launch during Quarter 4, and the benefits to both employees and the Service will be realised.

Information, regarding Implementing the national McCloud Pension Reform Exercise, is being provided for those that are retiring from the Service but the whole remedy exercise is yet to be commenced for all other staff. Both Rhondda Cynon Taff County Borough Council (RCTCBC) and SWFRS will face resourcing problems once this exercise is started, which may impact on our ability to continue to deliver services to the standard that we would normally expect. Since April 2022 61% of all retirements are ID cases. An initial meeting with RCTCBC colleagues is arranged for 2/2/23.

This National exercise to Implement the Matthews Pension Remedy Exercise, which relates to On-Call service prior to July 2000 is yet to be consulted on at government level. Anticipated timescales have been proposed for possible consultation early 2023. This exercise is not anticipated to commence until at least Oct 2023. The LGA have initiated early discussions with FRSs. The Pensions team will start to analyse the information that we hold to establish which individuals meet the given criteria. Those that are not eligible will be identified and written to in the first 6 months of 2023.

All data has now been submitted to RCTCBC for Local Government Pension Scheme (LGPS) members back to 2014 as part of the Pensions Reform LGPS exercise and a review of the information is underway.

New IRS data validation checks are in place and working successfully. Documentation to support the process is ongoing. This will improve quality of incident data.

Work is underway to bring archive into compliance with stated retention periods. Once completed we will review and update archive management procedure accordance with priorities and available resources.

A review of information governance website pages is underway. Media and Communications have been consulted with regarding publication of information requests in the form of a disclosure log.

A kick-off meeting, between IG&C and the L&D team, is scheduled to develop an information governance training and awareness plan, including consideration of e-learning, prioritising based on risk.

Initial discussions undertaken in relation the structure of an Information Asset Register. Preliminary review of existing Register of Processing Activities undertaken. Incorporated action into overall information

governance and compliance improvement project plan and will progress in accordance with priorities and available resources.

Data Protection Impact Assessment (DPIA) guidance will be reviewed, updated, and published once the review of the DPIA procedure has been completed.

We are re-establishing and scheduling a programme of Data Protection surgeries in collaboration with JFC and Occupational Health. Some initial discussions undertaken with MAWWFRS in relation to JFC although planning for possible industrial action is taking priority. This will form part of a wider review of IG&C training and awareness needs and how this is best delivered in the coming months.

Two personnel recently attended a level 4 safeguarding course which enhances our knowledge and understanding of our role and responsibilities. We are developing the section 5 professional concerns process within Service to promote transparency, professionalism and accountability. We are developing the referral process by creating an online form which will reduce the burden of non-urgent issues on JFC. We have delivered against all the actions from the most recent TIAA internal audit report and will continue to support the strategic safeguarding board internally. The safeguarding boards within our UAs are focussing on the reduction of violence at work and we have already developed a program of input from external speakers to support positive behaviour in the workplace.

8.2 Maximise value for money

The Real Fire Training Facility (RFTF) required reactive maintenance during quarter 3 due to failing of some building materials which resulted in delay of delivery. A first draft report into the long-term management of the RFTF, with a series of costed options for ELT to consider, is complete and being presented during quarter 4.

Review of standard licences and leases is complete. A code of conduct document has been sent to co-location sites for input, discussions with co-location partners ongoing regarding lease updates which should commence this quarter.

Following some issues in the All-Wales next generation of corporate wear tender process, a decision was made to withdraw and amend it. A successful supplier engagement session was carried out at HQ on the 11th January 2023, whereby suppliers were given a briefing on the services requirements and aspirations. Suppliers will now produce samples for our staff to wear and evaluate. Once this has been completed, the successful supplier will be awarded the contract.

8.3 Develop for a new normal way of working

The NFCC dashboard was not considered suitable, so an in-house spreadsheet has been developed to monitor and maintain the NOG Strategic Gap Analysis (SGA).   The current gap analysis is to be presented to OCG in January 2023, format to be interactive spreadsheet report. This should support a quicker process for maintaining the NOG SGA.

> *The NOG SGA enables us to perform a root and branch review of our policies and procedures and to highlight any areas where we are not compliant or aligned to NOG. It also enables us to complete a*

thorough documented narrative of compliance and actions for areas of non-compliance. Highlighting gaps, improvement opportunities and areas of exposed risk.

Investigating and reviewing the Provision of Operational Risk Information System (PORIS) across all directorates and how these can be accessed in a timely manner through preplanning (non-operational) and operational use continues. Phase 2 report is nearing completion. Fire Standards in Data Management will support how information is held and accessed.

The exact scope and requirements of the development of the organisational filing system have not been determined and the action does not appear to be a high priority at present - conversations around saving electronic documents have recently focused more on the retention of documents, meaning that Head of Service Performance and Communication (SP&C) has been focusing more on working with our Information Governance and Compliance Officer to create an organisational Retention Schedule.

Initial work is underway to collate any required information and evidence that we will need to design and implement a project methodology and documentation to be utilised at project initiation. Some members of the SP&C team have also attended the L&D masterclass on project management as preparation for undertaking this work stream.

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PERFORMANCE MONITORING REPORT

Appendix 1

01 April – 31 December 2022

Gwasanaeth Tân ac Achub
De Cymru

South Wales
Fire and Rescue Service

Produced in

BMIS
Business Management
Information System

Introduction

The Performance Monitoring Report highlights performance for the period 01 April 2022 to 31 December 2022. The report includes:

The performance indicators included show six years of data to demonstrate trends in the Service's long-term performance for communities.

Following consideration by the Senior Management Team and the Fire and Rescue Authority, the report is made available to the public via the internet.

During Q1/3 of 2022/23 the Service carried out 8,774 home fire safety checks, 546 were refused and at 1,161 addresses we were unable to contact the occupier. Most home fire safety checks are now carried out face-to-face.

Noticeable differences to the type of incidents that the Service has attended compared to last year include an increase in fires specifically during the Q2 (July to Sept) period with 2,110 fires attended in this period. The last time we experienced such high numbers was during a period of extremely dry weather in Q2 of 2018/19, when total fires attended was 2,601. In the current year, monthly total peaked in August 2022 at 884 while the previous peak was 1,653 in July 2018.

This extreme weather led to a high numbers of grass fires during Q2 of 2018/19 with 1,208 incidents. Numbers fell to 207 by 2021/22 but rose to 623 (+201%) in Q2 of 2022/23. We have established an association between increased grass fires and refuse fires: there were also 800 refuse fires during Q2 of 2018/19 with numbers falling gradually to 545 in 2021/22 but rising to 938 (+72%) in Q2 of 2022/23.

Peaks in the fires attended also impacts the number of good intent false alarm callouts that we receive and attend. During the extreme weather in Q2 of 2018/19 we attended 1,129 incidents, with 300 good intent calls in relation to grass and 261 in relation to refuse. The number of callouts fell to 839 by 2021/22 but good intent call outs have risen again to 996 (+19%) in Q2 of 2022/23, with 198 calls in relation to grass and 224 in relation to refuse.

As weather patterns change and we experience more frequent extremes in temperature and rainfall, the Service is likely to experience an increase in such demand peaks. In addition, Special Service incident types such as flooding, and water rescues are also determined by extreme conditions and are likely to become more prevalent in future years.

The Service also saw an increase in Assisting other agencies, which has risen from 374 incidents last year in Q1/3 to 529 incidents this year, an increase of 41%. Assistance to the Police/Ambulance has increased from 298 incidents last year to 415 incidents this year, an increase of 39%. Assistance to agencies other than the police/ambulance has also risen from 76 incidents last year to 114 incidents this year in Q1/3, an increase of 50%.

There was also an increase in attendance to bariatric patients with incidents rising from 120 last year in Q1/3 to 155 incidents this year, an increase of 29%. Attendance by crews to suicide or attempted suicide has also increased during Q1/3 of this year. There were 50 incidents compared to 39 the year before, an increase of 28%.

The Service Performance & Communications Department co-ordinates and compiles this report on behalf of the Service Delivery Directorate. Incident data is extracted from the Incident Recording System (IRS) and may be subject to change pending validation by the Statistics and Risk Team. Data for this report was extracted on 31st January 2023.

We are continually seeking to improve this report and welcome comments on additional information or other changes that you would like to see, please feel free to contact Neil Herniman at n-herniman@southwales-fire.gov.uk 01443 232775 or Suzanne Absalom on s-absalom@southwales-fire.gov.uk 01443 232588 to discuss.

Strategic Indicators 2022/23 – Q1/3 Performance

The sunburst below displays the progress of each Strategic Indicator based on its performance against the target set.

Performance Key		⭐ Better than or equal to target	🔴 Up to 5% above target	🔺 Over 5% from target
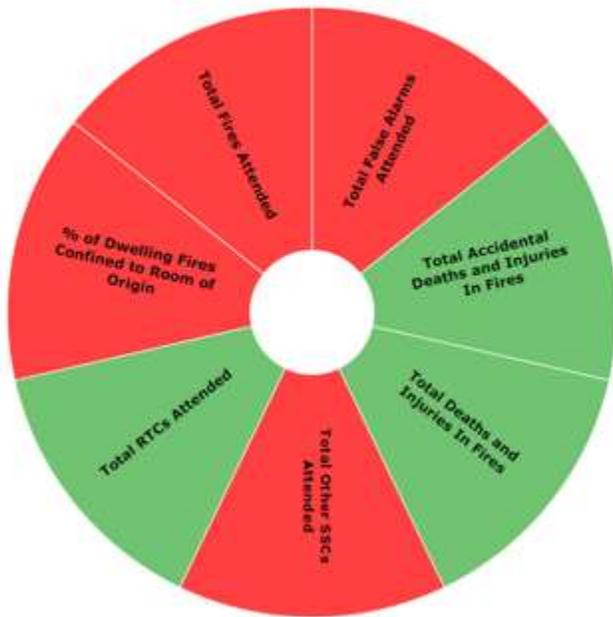
	Q1/3 22-23 (YTD)	Target (YTD)	Q1/3 2022/23 (YTD)	Q1/3 21-22 (YTD)
Total Fires Attended	5,015	4,550	🔺	4,240
Total RTCs Attended	602	672	⭐	658
Total False Alarms Attended	6,758	6,358	🔺	6,451
Total Other SSCs Attended	2,375	1,831	🔺	2,044
% of Dwelling Fires Confined to Room of Origin	80.50%	85.00%	🔺	84.71%
Total Deaths and Injuries in Fires	43	44	⭐	43
Total Accidental Deaths and Injuries in Fires	36	36	⭐	36

Figures in the following charts show the total incidents for year ending on the month shown, eg, Mar 2022 is all incidents for year ending 2021/22. Figures for December 2022 are for the the Q1/3 period only. Numbers in brackets in the commentary are figures for Q1/3 2021/22 in comparison to Q1/3 2022/23 and the corresponding percentage increase/decrease between the two figures.

Total Fires attended
2022/23 Q1/3 Target 4,550

Mar 2018	5,792
Mar 2019	6,898
Mar 2020	5,482
Mar 2021	5,481
Mar 2022	5,565
Dec 2022	5,015
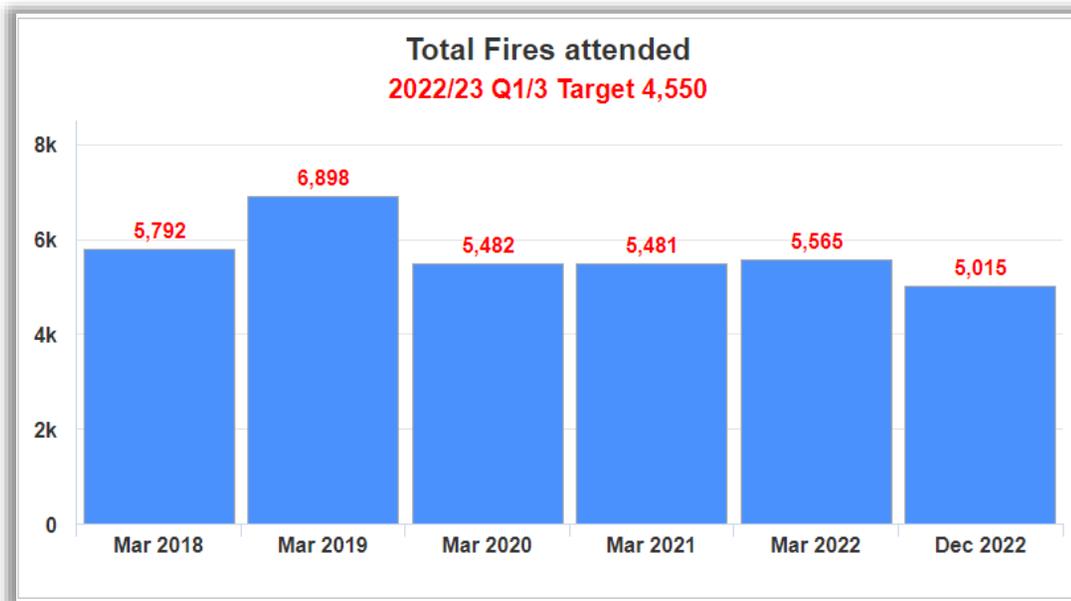
Q1/3 2022/23 Performance V Q1/3 2021/22

- Total fires (4,240 – 5,015) ↑ 18%, 10% above the target of 4,550.
- Accidental fires (1,218 – 1,380) ↑ 13%.
- Deliberate fires (3,022 – 3,635) ↑ 20%
- Deliberate grass fires (743 – 1,029) ↑ 38%
  Deliberate refuse fires (1,758 – 1,964) ↑ 12%
  Deliberate road vehicle fires (281 – 239) ↓ 15%
- Deliberate fires accounted for 72% of all fires.

Total False Alarms attended
2022/23 Q1/3 Target 6,358

Bar chart showing Total False Alarms attended with values: Mar 2018: 7,684; Mar 2019: 7,847; Mar 2020: 7,858; Mar 2021: 8,324; Mar 2022: 8,367; Dec 2022: 6,758. Y-axis ranges from 0 to 10k.
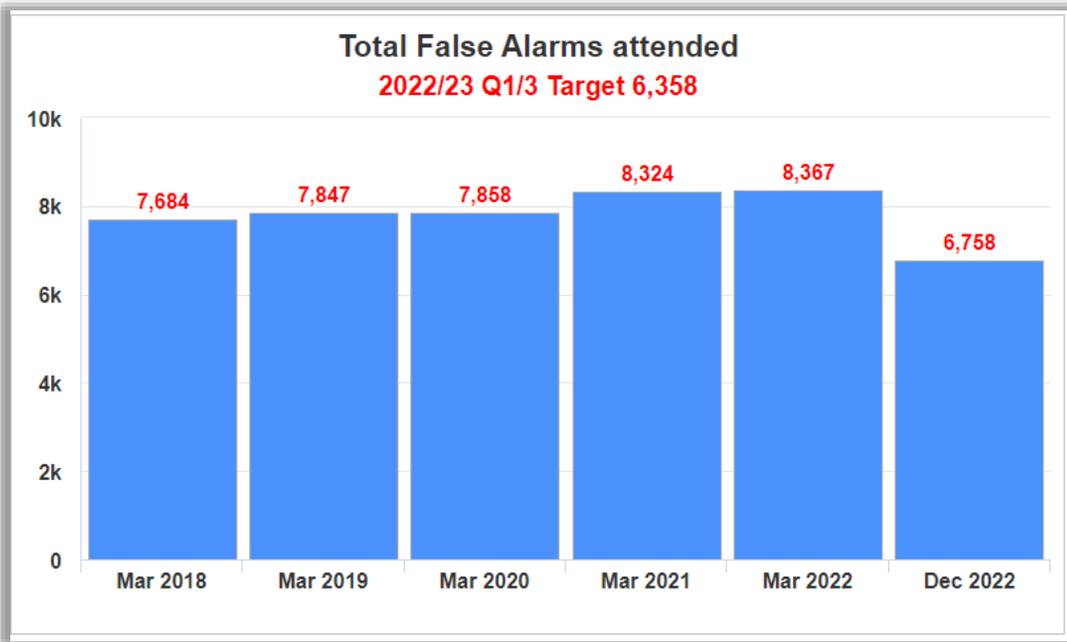
Q1/3 2022/23 Performance V Q1/3 2021/22

- Total False Alarms (6,451 – 6,758) ↑ 307 (5%).
- 6% **above** the target of 6,358.
- False alarm due to apparatus (3,898 – 4,006) ↑ 3%.
- False alarm good intent (2,354 – 2,506) ↑ 6%.
- False Alarm Malicious (199 – 246) ↑ 24%.
- Residential homes (196 – 277) ↑ 41%, Education (431 – 412) ↓ 4%, Hospitals (479 – 493) ↑ 3%.
- Appliances in attendance at Residential homes (295 – 437) ↑ 48%, Education (606 – 578) ↓ 5%, Hospitals (694 – 732) ↑ 5%.

Total Road Traffic collisions attended
2022/23 Q1/3 Target 672

Bar chart showing Total Road Traffic collisions attended with values: Mar 2018: 1,138; Mar 2019: 1,112; Mar 2020: 995; Mar 2021: 643; Mar 2022: 858; Dec 2022: 602. Y-axis ranges from 0 to 1500.
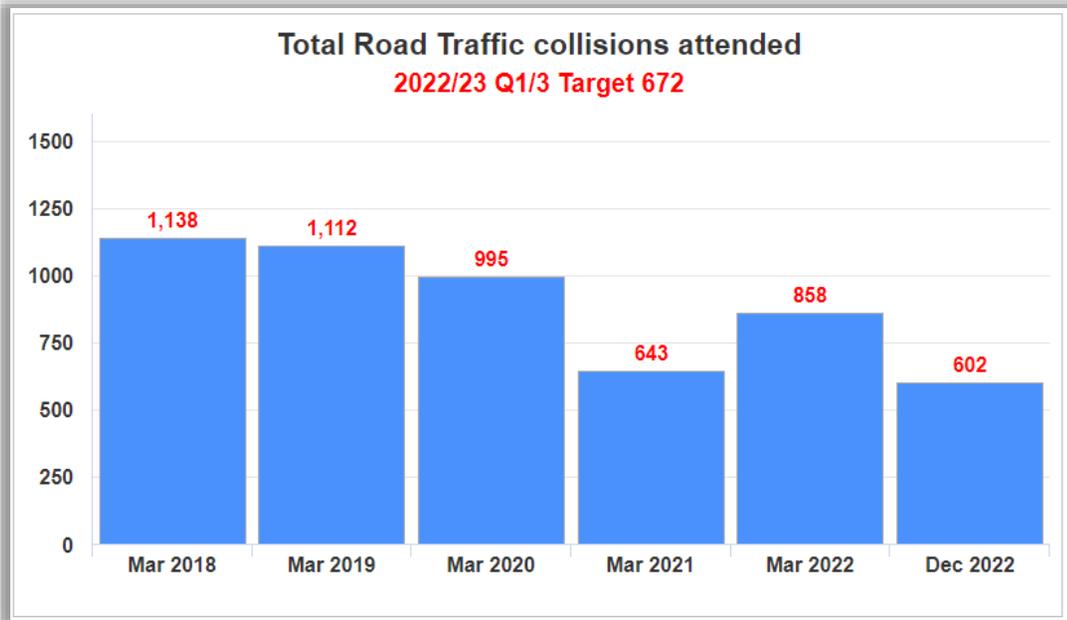
Q1/3 2022/23 Performance V Q1/3 2021/22

- Total RTCs (658 – 602) ↓ 56 (-9%)
- 10% **below** the target of 672
- Numbers were lower than last year but were above the 511 incidents experienced during Q1/3 of 2020/21 when there was less traffic on the roads due to the pandemic.
- Extrications/release of persons in Q1/3 have remained the same as last year with 19% of all RTCs.
- There have been 12 fatalities at RTCs this year (6 males, 6 females) and there were 4 fatalities in RTCs where the fatality was aged 75+.

Total Other SSCs attended
2022/23 Q1/3 Target 1,831
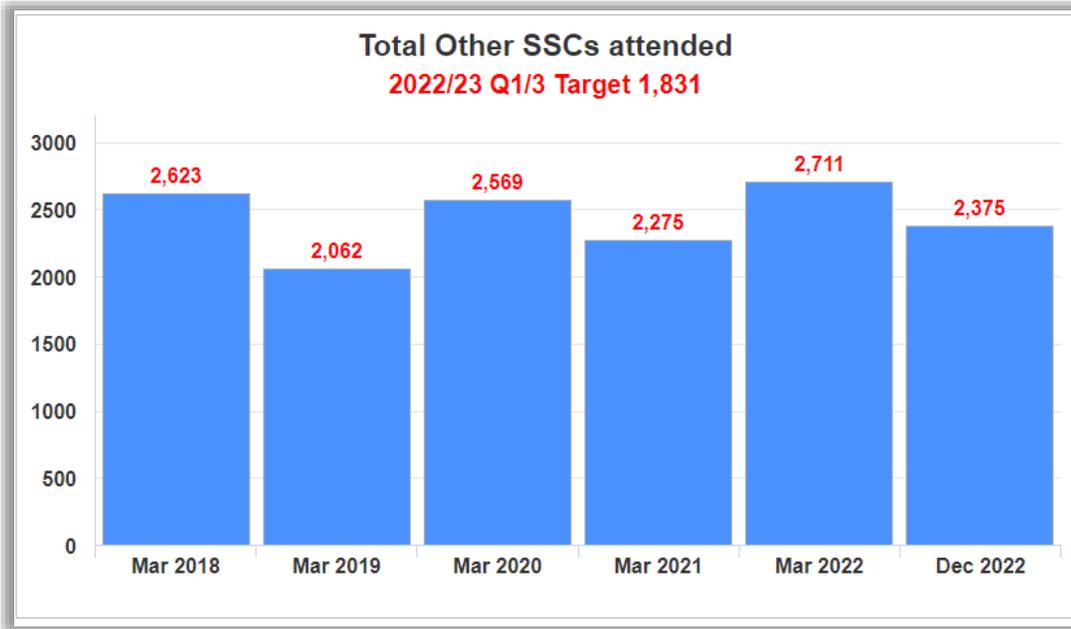
Q1/3 2022/23 Performance V Q1/3 2021/22

- Other SSCs (2,044 – 2,375) ↑ 331(+16%).
- 30% **above** the target of 1,831.
- Effecting entry (261 to 320) ↑ 23%, other rescue release of person (124 to 168) ↑ 35%, animal assistance (138 to 144) ↑ 4%.
- Assisting other agencies (374 – 529) ↑ 41%, Bariatrics (120 – 155) ↑ 29%. Suicides (39 to 50) ↑ 28%.
- Cardiff UA had the highest number of incidents with 612, an increase of 12% from the previous year in Q1/3.

Total Deaths and Injuries in Fires
2022/23 Q1/3 Target 44
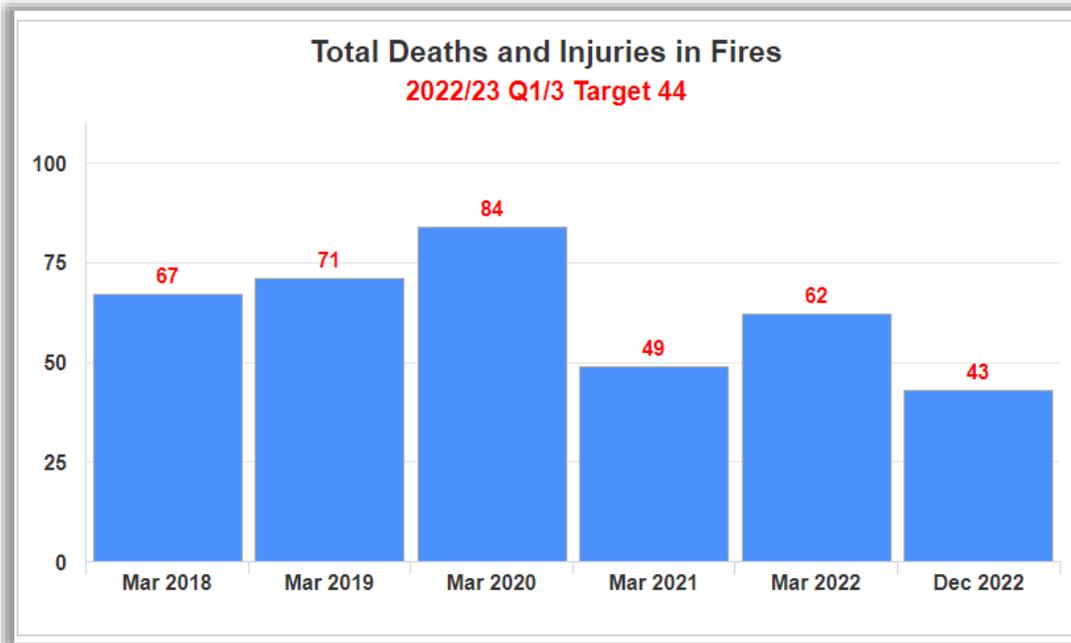
Q1/3 2022/23 Performance V Q1/3 2021/22

- Total fatalities and injuries have remained the same as last year with 43.
- 2% **below** the target of 44.
- 3 fatalities from fire, compared to 7 last year in Q1/3.
- 2 were in accidental dwelling fires and the other was in a vehicle fire.
- There were 9 serious injuries compared to 6 last year.
- There were 31 slight injuries compared to 30 last year.

Total Accidental Deaths and Injuries
2022/23 Q1/3 Target 36
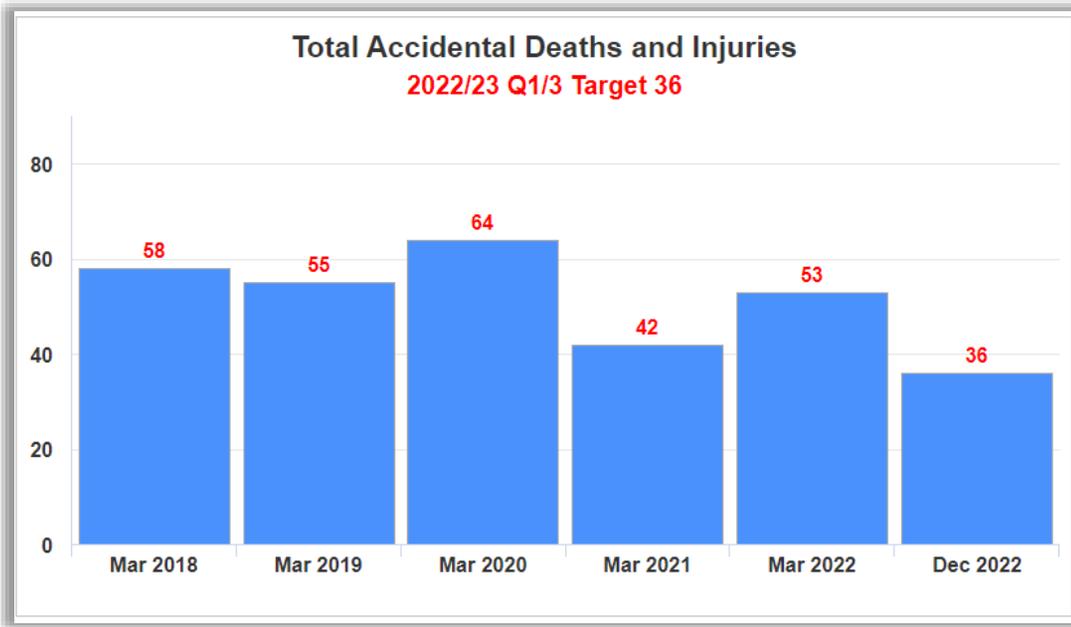
Q1/3 2022/23 Performance V Q1/3 2021/22

- Accidental fatalities and Injuries have remained the same as last year with 36.
- The target of 36 was also matched.
- 2 fatalities were in accidental dwelling fires, both female and both over 60.
- 1 fatality was in a vehicle fire.
- There were 8 accidental serious injuries compared to 5 last year.
- There were 25 accidental slight injuries the same as last year.

% of Dwelling fires Confined to the room of origin
2022/23 Target 85%
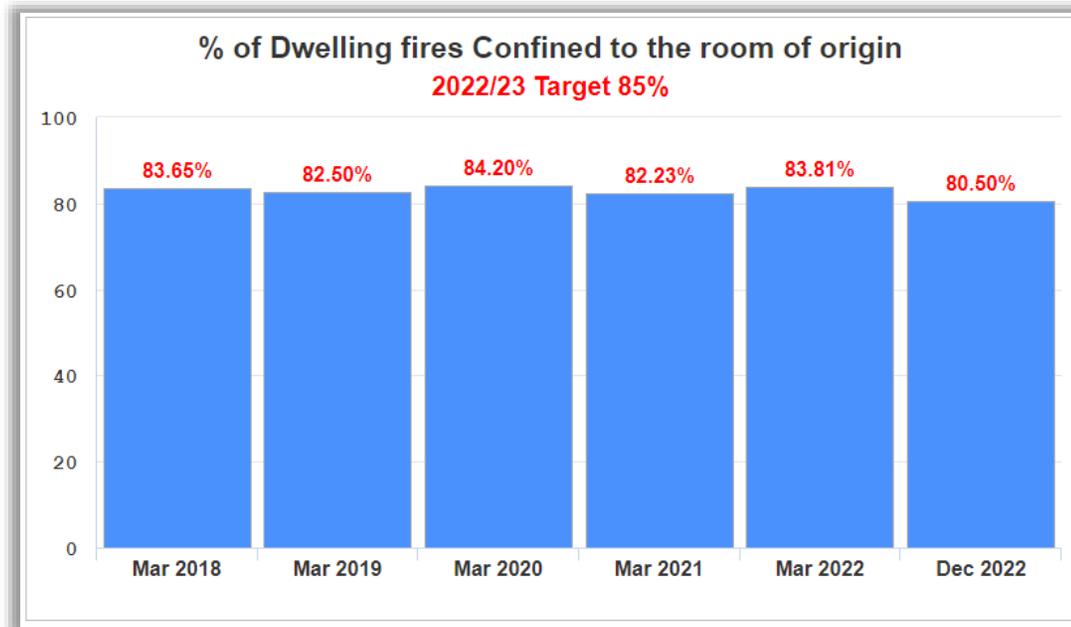
Q1/3 2022/23 Performance V Q1/3 2021/22

- 402 of 499 dwelling fires have been confined to the room of origin (80.5%).
- This is **below** last year and is 4.5% **below** the target set of 85% at the start of the year.
- Bridgend UA had 87% of fires confined to the room of origin.
- Merthyr UA had the **lowest** percentage with 70% of fires confined to the room of origin.

Blaenau Gwent County Borough Council

Incident Categories	Apr 2021 – Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	1003	121	72	88	120	129	104	66	81	77				858	751	107	14%
Special Service Calls	172	10	13	9	27	13	23	14	11	8				128	131	-3	-2%
Total RTCs Attended	37	0	0	1	6	2	5	3	2	1				20	28	-8	-29%
Total Other SSCs Attended	135	10	13	8	21	11	18	11	9	7				108	103	5	5%
Total False Alarms Attended	389	45	29	35	37	52	39	27	28	41				333	302	31	10%
Malicious False Alarms	9	0	0	1	1	2	1	2	0	1				8	6	2	33%
Good Intent False Alarms	193	23	14	16	20	28	19	9	15	13				157	145	12	8%
Automatic False Alarms	187	22	15	18	16	22	19	16	13	27				168	151	17	11%
Total Fires Attended	442	66	30	44	56	64	42	25	42	28				397	318	79	25%
Deliberate Fire	382	60	23	40	48	56	33	19	33	20				332	269	63	23%
Deliberate Grass Fire Attended	88	16	6	6	8	16	9	3	3	0				67	68	-1	-1%
Deliberate Refuse Fire Attended	219	37	15	29	34	33	15	9	23	13				208	150	58	39%
Accidental Fire	60	6	7	3	8	8	9	6	8	8				63	49	14	29%
Accidental Dwelling Fire Attended	22	1	3	1	1	2	3	1	6	4				22	16	6	38%
Total Deaths and Injuries in Fires	1	1	0	0	0	0	0	0	1	1				3	1	2	200%
Total Accidental Deaths and Injuries in Fires	0	0	0	0	0	0	0	0	1	1				2	0	2	200%

An analysis of the statistics relating to accidental dwelling fires suggest that the numbers have increased by 38% compared to last year in Q1/3 with 22 in total compared to 16 last year. There were 5 in Q1, 6 in Q2 and 11 in Q3. 9 of the 22 incidents were caused by cooking compared to 5 of 16 last year. 15 of the 22 fires were due to human factors with distraction (8) and falling asleep (4) the main incident types. The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. There was 1 serious injury and 2 slight injuries in Q1/3, which is 2 more than last year. Attendance at effecting entry incidents has increased from 6 incidents last year in Q1/3 to 18 incidents this year. 6 calls were to persons in distress, 3 for medical cases and 3 were because a child was involved. Assistance to other agencies has decreased from 21 last year to 20 (-5%) this year and is the highest incident category. The number of road traffic collisions attended has decreased from 28 to 20. 12 of the 20 incidents were to make the scene safe. Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents. Deliberate grass fires however have decreased by 1% from 68 to 67. Deliberate refuse fires have increased by 39% from 150 to 208. Automatic false alarms have increased by 11% from 151 to 168. There were particularly high numbers in calls to Residential homes with 42 incidents compared to 12 last year, the majority being to cooking/burnt toast (14). Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have increased from 6 to 8 and there was an 8% increase in good intent false alarms (145 to 157) with calls to loose refuse (53) accounting for most of this call type.

South Wales Fire and Rescue Service — Gwasanaeth Tân ac Achub De Cymru

Bridgend County Borough Council

Incident Categories	Apr 2021 - Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	1594	176	116	150	147	182	114	99	108	124				1216	1169	47	4%
Special Service Calls	375	19	27	37	23	43	23	31	25	33				261	265	-4	-2%
Total RTCs Attended	98	2	5	10	6	11	2	11	4	7				58	78	-20	-26%
Total Other SSCs Attended	277	17	22	27	17	32	21	20	21	26				203	187	16	9%
Total False Alarms Attended	764	67	55	64	71	78	62	49	65	67				578	566	12	2%
Malicious False Alarms	13	1	2	0	1	1	2	4	0	7				18	13	5	38%
Good Intent False Alarms	340	30	17	26	38	48	19	13	31	30				252	226	26	12%
Automatic False Alarms	411	36	36	38	32	29	41	32	34	30				308	327	-19	-6%
Total Fires Attended	455	90	34	49	53	61	29	19	18	24				377	338	39	12%
Deliberate Fire	322	67	26	31	39	46	20	12	10	13				264	240	24	10%
Deliberate Grass Fire Attended	117	36	6	6	12	13	3	0	0	1				77	71	6	8%
Deliberate Refuse Fire Attended	150	23	16	22	26	28	12	8	6	7				148	125	23	18%
Accidental Fire	133	22	8	17	14	13	9	7	8	10				108	98	10	10%
Accidental Dwelling Fire Attended	44	8	3	7	3	2	2	3	1	3				32	34	-2	-6%
Total Deaths and Injuries in Fires	5	0	1	0	0	0	0	0	0	0				1	3	-2	-50%
Total Accidental Deaths and Injuries in Fires	5	0	1	0	0	0	0	0	0	0				1	3	-2	-50%

An analysis of the statistics relating to accidental dwelling fires suggest that the numbers have decreased by 6% compared to last year in Q1/3 with 32 in total compared to 34 last year. There were 18 incidents in Q1,7 in Q2 and 7 in Q3. 11 of the 32 incidents were caused by cooking compared to 11 of 34 last year. 18 of the 32 fires were due to human factors with distraction (7) and falling asleep (3) the main reasons. The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. Sadly, there was 1 serious injury in Q1 in an accidental dwelling fire, a female aged 87 caused by candles. Attendance at Other special service calls have increased from 187 to 203 (+9%) with assistance to other agencies increasing from 30 to 53 (+77%) compared to Q1/3 last year. Crews also attended 17 bariatric incidents compared to 12 (-29%) last year. There were also increases to effecting entry incidents with numbers rising from 19 to 27 (+42%). The number of road traffic collisions attended has decreased from 78 to 58 (-26%) with crews attending 12 extrications/release of persons compared to 15 last year. Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents. Deliberate grass fires have increased by 8% from 71 to 77. Deliberate refuse fires have also increased by 18% from 125 to 148. Automatic false alarms have decreased by 6% from 327 to 308. There was however an increase in attendance at Residential homes (27 to 47) and Hospitals (18 to 21), but most other property types experienced a decrease in calls. Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have increased from 13 to 18 (+38%) and there was a 12% (338 to 377) increase in good intent false alarms with calls to loose refuse accounting for 46 of these calls.

South Wales Gwasanaeth Tân ac Achub De Cymru — Fire and Rescue Service

Caerphilly County Borough Council

CAERPHILLY COUNTY BOROUGH COUNCIL — **CAERFFILI**

Incident Categories	Apr 2021 - Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	2044	261	170	181	210	265	176	156	146	139				1704	1547	157	10%
Special Service Calls	346	27	22	20	37	42	28	38	31	37				282	263	19	7%
Total RTCs Attended	88	8	7	4	10	10	5	9	8	7				68	67	1	1%
Total Other SSCs Attended	258	19	15	16	27	32	23	29	23	30				214	196	18	9%
Total False Alarms Attended	817	78	61	80	89	84	71	71	72	70				676	626	50	8%
Malicious False Alarms	17	1	0	4	4	1	2	5	2	0				19	16	3	19%
Good Intent False Alarms	418	45	40	38	45	50	33	27	39	28				345	313	32	10%
Automatic False Alarms	382	32	21	38	40	33	36	39	31	42				312	297	15	5%
Total Fires Attended	881	156	87	81	84	139	77	47	43	32				746	658	88	13%
Deliberate Fire	696	134	69	59	58	105	61	36	32	15				569	515	54	10%
Deliberate Grass Fire Attended	163	54	23	12	14	38	12	1	3	2				159	126	33	26%
Deliberate Refuse Fire Attended	440	71	34	35	33	54	43	25	15	7				317	312	5	2%
Accidental Fire	185	22	18	22	26	34	16	11	11	17				177	143	34	24%
Accidental Dwelling Fire Attended	66	8	8	6	9	8	4	2	3	8				56	53	3	6%
Total Deaths and Injuries in Fires	11	0	1	0	1	3	0	0	0	2				7	10	-3	-30%
Total Accidental Deaths and Injuries in Fires	11	0	1	0	1	3	0	0	0	2				7	10	-3	-30%

An analysis of the statistics relating to accidental dwelling fires suggest that there has been an increase of 6% in incidents compared to last year. The number of incidents has risen from 53 to 56. There were 20 incidents in Q1, 21 in Q2 and 13 in Q3. 14 of the 56 incidents were caused by cooking compared to 16 of 53 last year. 28 of the fires were due to human factors with distraction (6) and incidents involving disabled persons (5) the main reasons. The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. Sadly, there was a fatality in Q1/3, a 43-year-old male in a vehicle fire. There were also 3 serious and 3 slight injuries. Attendance at Other special service calls have increased by 9% with Assistance to other agencies increasing from 49 to 60 (+22%) compared to last year. There were increases to animal assistance incidents from 11 to 23 (+109%) and other rescue/release of persons,11 to 16 (+45%). The number of road traffic collisions attended has increased from 67 to 68 (+1%) with crews attending 17 extrications/release of persons compared to 12 last year. Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents. Deliberate grass fires have increased by 26% from 126 to 159. Deliberate refuse fires have increased by 2% from 312 to 317. Automatic false alarms have increased by 5% from 297 to 312. The property type accounting for the most call outs was industrial manufacturing although numbers did fall from 68 to 55.Incidents at educational premises increased from 21 to 28 (+33%). Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have increased from 16 to 19 (+19%) and there was a 10% increase in good intent false alarms with calls to loose refuse (80) being the reason for most of these calls.

South Wales Fire and Rescue Service — Gwasanaeth Tân ac Achub De Cymru

Cardiff City Council

CARDIFF CAERDYDD

Incident Categories	Apr 2021 - Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	4076	371	364	371	475	452	371	338	322	375				3439	3136	303	10%
Special Service Calls	863	63	89	85	92	83	69	80	66	98				725	657	68	10%
Total RTCs Attended	156	10	12	11	10	15	11	16	8	20				113	111	2	2%
Total Other SSCs Attended	707	53	77	74	82	68	58	64	58	78				612	546	66	12%
Total False Alarms Attended	2217	181	168	196	220	218	181	181	201	230				1776	1681	95	6%
Malicious False Alarms	76	10	10	2	10	5	6	2	8	12				65	59	6	10%
Good Intent False Alarms	706	51	44	58	69	73	45	46	56	64				506	511	-5	-1%
Automatic False Alarms	1435	120	114	136	141	140	130	133	137	154				1205	1111	94	8%
Total Fires Attended	996	127	107	90	163	151	121	77	55	47				938	798	140	18%
Deliberate Fire	657	100	74	60	122	107	74	54	29	29				649	546	103	19%
Deliberate Grass Fire Attended	129	36	8	13	40	54	25	6	1	3				186	104	82	79%
Deliberate Refuse Fire Attended	402	56	54	37	63	49	47	33	14	19				372	340	32	9%
Accidental Fire	339	27	33	30	41	44	47	23	26	18				289	252	37	15%
Accidental Dwelling Fire Attended	164	12	8	14	8	12	20	9	13	11				107	116	-9	-8%
Total Deaths and Injuries in Fires	11	0	1	0	2	2	1	1	0	2				9	9	0	0%
Total Accidental Deaths and Injuries in Fires	8	0	1	0	1	2	1	1	0	2				8	6	2	33%

An analysis of the statistics relating to accidental dwelling fires suggest that there has been a decrease of 8% in incidents compared to last year. The number of incidents has fallen from 116 to 107 in Q1/3. There was 34 incidents Q1, 40 in Q2 and 33 in Q3. 30 of the 107 (28%) incidents were caused by cooking which was lower than last year when there was 43 of 116 (37%) fires caused by cooking. 49 of the fires were due to human factors with distraction (9) and falling asleep (9) two of the main reasons. The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. Sadly, there was a fatality in August, a female aged 65, caused by smoking materials. There was also 2 serious and 6 slight injuries in Q1/3. Attendance at Other special service calls have increased by 12% from 546 to 612 with assistance to other agencies increasing from 88 to 105 (+19%) compared to last year. There was also an increase to effecting entry/exit, 85 to 106 (+25%). The number of road traffic collisions attended has increased from 111 to 113 (+2%) with crews attending 17 extrications/release of persons compared to 10 last year. Most of the calls attended were to making the scene/vehicle safe (59). Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents. Deliberate grass fires have increased by 79% from 104 to 186. Deliberate refuse fires have also increased by 9% from 340 to 372. Automatic false alarms have increased by 8% from 1,111 to 1,205. There was an increase in attendance hospitals (180 to 194) and educational properties (76 to 121). Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have increased from 59 to 65 (+10%) and there was a 1% (511 to 506) decrease in good intent false alarms with calls to domestic premises accounting for most of these calls.

Merthyr Tydfil County Borough Council

Gwasanaeth Tân ac Achub De Cymru — South Wales Fire and Rescue Service

Cyngor Bwrdeistref Sirol MERTHYR TUDFUL MERTHYR TYDFIL County Borough Council

Incident Categories	Apr 2021 - Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	828	81	70	48	78	85	53	59	51	58				583	646	-63	-10%
Special Service Calls	152	9	14	8	17	17	15	11	11	19				121	119	2	2%
Total RTCs Attended	49	1	3	1	6	7	5	4	1	2				30	41	-11	-27%
Total Other SSCs Attended	103	8	11	7	11	10	10	7	10	17				91	78	13	17%
Total False Alarms Attended	345	26	23	19	32	39	23	32	30	22				246	270	-24	-9%
Malicious False Alarms	14	2	2	0	1	1	2	2	2	0				12	10	2	20%
Good Intent False Alarms	134	15	7	8	16	14	9	7	13	10				99	106	-7	-7%
Automatic False Alarms	197	9	14	11	15	24	12	23	15	12				135	154	-19	-12%
Total Fires Attended	331	46	33	21	29	29	15	16	10	17				216	257	-41	-16%
Deliberate Fire	264	40	25	19	23	26	12	11	6	11				173	207	-34	-16%
Deliberate Grass Fire Attended	117	24	6	7	7	14	3	0	0	3				64	94	-30	-32%
Deliberate Refuse Fire Attended	111	15	14	7	15	10	8	5	1	7				82	90	-8	-9%
Accidental Fire	67	6	8	2	6	3	3	5	4	6				43	50	-7	-14%
Accidental Dwelling Fire Attended	30	5	4	1	1	1	0	3	1	3				19	25	-6	-24%
Total Deaths and Injuries in Fires	3	2	2	0	0	1	0	3	0	0				8	3	5	167%
Total Accidental Deaths and Injuries in Fires	3	2	2	0	0	0	0	0	0	0				4	3	1	33%

An analysis of the statistics relating to accidental dwelling fires suggest that there has been a decrease of 24% in incidents compared to last year. The number of incidents has fallen from 25 to 19. There were 10 incidents Q1, 2 in Q2 and 7 in Q3. 8 of the 19 (42%) incidents were caused by cooking compared to 11 of 25 (44%) last year. 9 of the fires were due to human factors with falling asleep (4) and unknown circumstances (2) the main reasons. The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. Sadly, there was 1 fatality in Q1, a female aged 65 caused by cooking. There were also 6 slight injuries and 1 serious injury. Attendance at Other special service calls have increased by 17% with assisting other agencies the main incident type rising from 14 last year to 21 (+50%) in Q1/3. The number of road traffic collisions attended has decreased from 41 to 30 (-27%) with crews attending 6 extrications/release of persons compared to 5 last year. Other calls were to making the scene/vehicle safe (14) and medical incidents (5). Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents. Deliberate refuse fires however have decreased by 9% from 90 to 82. Deliberate grass fires have also decreased by 32% from 94 to 64. Automatic false alarms have decreased by 12% from 154 to 135. There were 32 calls to hospitals and medical care and 24 calls to educational properties. Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have increased from 10 to 12 and there was a 7% (106 to 99) reduction in good intent false alarms with calls to loose refuse accounting for most of these calls.

South Wales Fire and Rescue Service (Gwasanaeth Tân ac Achub De Cymru)

Monmouthshire Council

monmouthshire sir fynwy

Incident Categories	Apr 2021 - Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	905	75	88	101	83	94	78	71	89	84				763	708	55	8%
Special Service Calls	230	19	23	25	13	21	24	18	18	20				181	184	-3	-2%
Total RTCs Attended	76	6	10	5	4	10	6	1	6	4				52	58	-6	-10%
Total Other SSCs Attended	154	13	13	20	9	11	18	17	12	16				129	126	3	2%
Total False Alarms Attended	475	32	44	46	39	48	40	42	56	51				398	367	31	8%
Malicious False Alarms	3	1	0	0	0	0	0	3	1	0				5	2	3	150%
Good Intent False Alarms	143	15	14	12	18	19	14	9	16	18				135	101	34	34%
Automatic False Alarms	329	16	30	34	21	29	26	30	39	33				258	264	-6	-2%
Total Fires Attended	200	24	21	30	31	25	14	11	15	13				184	157	27	17%
Deliberate Fire	66	9	9	11	16	9	7	3	5	0				69	51	18	35%
Deliberate Grass Fire Attended	20	1	2	5	5	5	2	2	0	0				22	18	4	22%
Deliberate Refuse Fire Attended	21	7	5	6	10	2	5	1	1	0				37	13	24	185%
Accidental Fire	134	15	12	19	15	16	7	8	10	13				115	106	9	8%
Accidental Dwelling Fire Attended	29	4	3	4	1	2	1	3	5	4				27	19	8	42%
Total Deaths and Injuries in Fires	3	1	1	0	0	0	0	0	0	0				2	1	1	100%
Total Accidental Deaths and Injuries in Fires	0	1	1	0	0	0	0	0	0	0				2	1	1	100%

An analysis of the statistics relating to accidental dwelling fires suggest that there has been an increase of 42% in incidents compared to last year. The number of incidents has risen from 19 to 27. There was 11 incidents Q1,4 in Q2 and 12 in Q3. Cooking accounted for 10 of the 27 incidents. 8 of the fires were because of human factors with persons falling asleep accounting for 6 incidents. The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. Sadly, there was 1 serious injury in Q1, a male aged 92 caused by cooking and 1 slight injury. Attendance at Other special service calls have increased by 2% however assistance to other agencies fell from 30 to 28 (-7%) compared to last year. There were also 11 calls to flooding compared to 1 last year. The number of road traffic collisions attended has decreased from 58 to 52 (-10%) with crews attending 17 extrications/release of persons compared to 19 last year in Q1/3. 23 of the calls were making the scene/vehicle safe. Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents as restrictions are eased. Deliberate grass fires have increased by 22% from 18 to 22. Deliberate refuse fires have increased by 185% from 106 to 115. Automatic false alarms have decreased by 2% from 264 to 258. There were 38 calls to hospitals which was the same as last year and calls to residential homes increased from 17 to 22. Educational premises experienced a decrease from 35 to 32. Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have increased from 2 to 5 and there was a 34% (101 to 135) increase in good intent false alarms with calls to dwellings and loose refuse accounting for most of these calls.

South Wales Fire and Rescue Service — Gwasanaeth Tân ac Achub De Cymru

Newport City Council

Newport CITY COUNCIL CYNGOR DINAS Casnewydd

Incident Categories	Apr 2021 - Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	2181	232	189	188	235	320	265	190	210	189				2018	1695	323	19%
Special Service Calls	360	35	20	26	41	44	41	23	42	53				325	280	45	16%
Total RTCs Attended	72	4	8	4	6	4	5	7	9	10				57	52	5	10%
Total Other SSCs Attended	288	31	12	22	35	40	36	16	33	43				268	228	40	18%
Total False Alarms Attended	1068	111	84	81	84	97	99	109	98	99				862	843	19	2%
Malicious False Alarms	64	5	2	5	3	5	3	8	9	4				44	42	2	5%
Good Intent False Alarms	351	38	29	32	29	41	32	23	32	19				275	281	-6	-2%
Automatic False Alarms	653	68	53	44	52	51	64	78	57	76				543	520	23	4%
Total Fires Attended	753	86	85	81	110	179	125	58	70	37				831	572	259	45%
Deliberate Fire	574	71	65	61	90	156	112	50	52	25				682	434	248	57%
Deliberate Grass Fire Attended	70	11	13	16	23	70	26	2	2	0				163	59	104	176%
Deliberate Refuse Fire Attended	384	34	36	34	54	70	61	28	25	14				356	281	75	27%
Accidental Fire	179	15	20	20	20	23	13	8	18	12				149	138	11	8%
Accidental Dwelling Fire Attended	67	6	6	5	6	3	4	5	6	8				49	50	-1	-2%
Total Deaths and Injuries in Fires	8	0	0	1	0	1	0	0	0	0				2	6	-4	-67%
Total Accidental Deaths and Injuries in Fires	6	0	0	1	0	0	0	0	0	0				1	6	-5	-83%

An analysis of the statistics relating to accidental dwelling fires suggest that there has been a reduction of 2% in incidents compared to last year. The number of incidents has fallen from 50 to 49. There were 17 incidents, 13 in Q2 and 19 in Q3.19 of the 49 incidents were caused by cooking compared to 9 of 50 last year in Q1/3. 26 of fires were due to human factors with distraction (8) and unknown (6) the main reasons for the calls. The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. There were 2 slight injuries in Q1/3 compared to 2 fatalities, 2 serious and 2 slight injuries last year. Attendance at Other special service calls have increased by 18%, with assistance to other agencies rising from 26 to 64 incidents, an increase of 146%. There were 20 calls to bariatric incidents compared to 10 last year in Q1/3. The number of road traffic collisions attended has increased from 52 to 57 (+10%) with crews attending 6 extrication/release of persons compared to 9 last year in Q1/3. Most of the calls were to making the scene/vehicle safe (37). Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents. Deliberate grass fires have increased by 176% from 59 to 163 the majority being in Q2(119). Deliberate refuse fires have also increased by 27% from 281 to 356. Automatic false alarms have increased by 4% from 520 to 543. Calls to hospitals increased from (44 to 50) and Industrial Manufacturing by 150% from 8 to 20, but there was a decrease in calls to educational premises from 85 to 56. Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have increased from 42 to 44 (+5%) and there was a 2% decrease in good intent false alarms from 281 to 275 with calls to dwellings (74) and loose refuse (52) accounting for most of these calls.

South Wales Fire and Rescue Service / Gwasanaeth Tân ac Achub De Cymru — Rhondda Cynon Taf County Borough Council — RHONDDA CYNON TAF — STRONG HERITAGE | STRONG FUTURE / TREFTADAETH GADARN | DYFODOL SICR

Incident Categories	Apr 2021 - Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	2548	335	209	215	257	249	195	183	183	239				2065	1980	85	4%
Special Service Calls	464	51	49	51	61	49	53	66	49	92				521	430	91	21%
Total RTCs Attended	165	12	7	11	12	11	10	15	9	23				110	132	-22	-17%
Total Other SSCs Attended	399	39	42	40	49	38	43	51	40	69				411	298	113	38%
Total False Alarms Attended	1078	117	69	87	101	110	92	79	102	105				862	862	0	0%
Malicious False Alarms	33	11	2	1	4	4	1	3	3	4				33	27	6	22%
Good Intent False Alarms	482	51	29	32	57	54	46	27	40	32				368	378	-10	-3%
Automatic False Alarms	563	55	38	54	40	52	45	49	59	69				461	457	4	1%
Total Fires Attended	906	167	91	77	95	90	50	38	32	42				682	688	-6	-1%
Deliberate Fire	665	148	70	54	60	64	35	22	14	14				481	510	-29	-6%
Deliberate Grass Fire Attended	204	78	26	13	14	23	9	0	1	0				164	144	20	14%
Deliberate Refuse Fire Attended	374	62	33	28	37	33	20	13	11	5				242	296	-54	-18%
Accidental Fire	241	19	21	23	35	26	15	16	18	28				201	178	23	13%
Accidental Dwelling Fire Attended	101	9	11	7	7	7	5	8	9	14				77	75	2	3%
Total Deaths and Injuries in Fires	12	0	1	0	0	0	1	0	0	0				2	6	-4	-67%
Total Accidental Deaths and Injuries in Fires	11	0	1	0	0	0	1	0	0	0				2	5	-3	-60%

An analysis of the statistics relating to accidental dwelling fires suggest that there has been a 3% increase in incidents compared to last year. The number of incidents has risen from 75 to 77. There were 26 incidents in Q1, 19 in Q2 and 31 in Q3. 36 of the incidents were caused by cooking compared to 27 last year. 49 of the fires were due to human factors with distraction (18) and falling asleep (12) the main reasons for the incidents. The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. There were 2 slight injuries in Q1/3 compared to 2 fatalities, 3 slight and 1 serious injury last year. Attendance at Other special service calls have increased by 38% with assistance to other agencies increasing from 61 to 101 (+66%) compared to Q1/3 last year. There were also 31 calls to bariatric incidents compared to 21 last year. The number of road traffic collisions attended has decreased from 132 to 110 (-17%) with crews attending 20 extrications/release of persons compared to 27 last year in Q1/3. Most of the calls were making the scene/vehicle safe (64). Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents. Deliberate grass fires have increased by 14% from 144 to 164. Deliberate refuse fires however have decreased by 18% from 296 to 242. Automatic false alarms have increased by 1% from 457 to 461. There was an increase in calls to residential homes from 42 to 54, educational properties 43 to 59 and retail premises 22 to 39. Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have increased from 27 to 33 (+22%) and there was a 3% (378 to 368) decrease in good intent false alarms with calls to dwellings and loose refuse accounting for most of these calls.

South Wales Fire and Rescue Service — Gwasanaeth Tân ac Achub De Cymru

Torfaen County Borough Council

TORFAEN COUNTY BOROUGH / **BWRDEISTREF SIROL TORFAEN**

Incident Categories	Apr 2021 - Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	1110	119	147	111	109	169	89	110	95	77				1026	851	175	21%
Special Service Calls	207	16	23	19	16	15	22	17	18	25				171	159	12	8%
Total RTCs Attended	43	1	3	4	1	3	6	3	4	6				31	30	1	3%
Total Other SSCs Attended	164	15	20	15	15	12	16	14	14	19				140	129	11	9%
Total False Alarms Attended	601	46	78	56	57	71	48	62	56	39				513	474	39	8%
Malicious False Alarms	18	3	2	0	1	2	2	2	2	2				16	15	1	7%
Good Intent False Alarms	182	12	28	21	20	47	12	11	23	11				185	141	44	31%
Automatic False Alarms	401	31	48	35	36	22	34	49	31	26				312	318	-6	-2%
Total Fires Attended	302	57	46	36	36	83	19	31	21	13				342	218	124	57%
Deliberate Fire	187	40	38	25	23	64	12	25	11	9				247	133	114	86%
Deliberate Grass Fire Attended	40	19	11	6	11	35	3	5	2	2				94	28	66	236%
Deliberate Refuse Fire Attended	105	18	17	14	8	21	8	12	4	3				105	79	26	33%
Accidental Fire	115	17	8	11	13	19	7	6	10	4				95	85	10	12%
Accidental Dwelling Fire Attended	34	7	4	2	2	4	1	3	7	2				32	23	9	39%
Total Deaths and Injuries in Fires	5	1	0	2	0	1	0	0	0	0				4	1	3	300%
Total Accidental Deaths and Injuries in Fires	5	1	0	2	0	1	0	0	0	0				4	1	3	300%

An analysis of the statistics relating to accidental dwelling fires suggest that there has been an increase of 39% in incidents compared to last year in Q1/3. The number of incidents has risen from 23 to 32. There were 13 incidents in Q1,7 in Q2 and 12 in Q3. 9 of the incidents were caused by cooking compared to 10 last year in Q1/3. 16 of the fires were due to human factors, including distraction (8) and falling asleep (1). The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. There were 4 slight injuries in Q1/3 compared to 1 last year. Attendance at Other special service calls have increased by 9%, with assistance to other agencies rising from 23 to 33 (+43%). There were also 11 calls to bariatric incidents compared to 8 last year in Q1/3. There were 9 calls to flooding this year compared to 4 last year in Q1/3. The number of road traffic collisions attended has increased slightly from 30 to 31 with crews attending 3 extrications/release of persons compared to 11 last year. Most of the calls were making the scene/vehicle safe (17). Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents. Deliberate grass fires have increased by 236% from 28 to 94. Deliberate refuse fires have also increased by 33% from 79 to 105. Automatic false alarms have decreased by 2% from 318 to 312. Calls to educational properties experienced the largest decrease falling from 71 to 34 (-52%). Calls to residential homes have risen from 28 to 39 (+39%). Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have experienced a small rise from 15 to 16 and there was a 31% (141 to 185) increase in good intent false alarms with calls to dwellings and loose refuse accounting for most of the incidents.

The Vale of Glamorgan County Borough Council

South Wales Fire and Rescue Service

Gwasanaeth Tân ac Achub De Cymru

VALE of GLAMORGAN BRO MORGANNWG

Incident Categories	Apr 2021 - Mar 2022	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3	Q1/3 Last year	Q1/3 diff	Q1/3 %
Total Incidents	1213	120	84	118	157	166	113	100	116	105				1079	910	169	19%
Special Service Calls	300	26	20	17	33	33	27	31	32	43				262	214	48	22%
Total RTCs Attended	74	7	4	4	7	6	11	9	7	8				63	61	2	3%
Total Other SSCs Attended	226	19	16	13	26	27	16	22	25	35				199	153	46	30%
Total False Alarms Attended	613	54	42	71	71	69	60	52	49	47				515	460	55	12%
Malicious False Alarms	14	2	0	0	2	2	7	6	4	3				26	9	17	189%
Good Intent False Alarms	219	20	17	18	30	34	17	21	15	12				184	152	32	21%
Automatic False Alarms	380	32	25	53	39	33	36	25	30	32				305	299	6	2%
Total Fires Attended	300	40	22	30	53	64	26	17	35	15				302	236	66	28%
Deliberate Fire	155	22	14	16	26	36	15	6	26	7				168	117	51	44%
Deliberate Grass Fire Attended	41	1	2	2	6	18	2	1	1	0				33	31	2	6%
Deliberate Refuse Fire Attended	94	15	9	12	18	15	9	4	11	4				97	72	25	35%
Accidental Fire	145	18	8	14	27	28	11	11	9	8				134	119	15	13%
Accidental Dwelling Fire Attended	57	5	2	1	4	3	5	5	3	3				31	48	-17	-35%
Total Deaths and Injuries in Fires	3	2	0	1	1	0	0	1	0	0				5	3	2	67%
Total Accidental Deaths and Injuries in Fires	3	2	0	1	1	0	0	1	0	0				5	3	2	67%

An analysis of the statistics relating to accidental dwelling fires suggest that there has been a decrease of 35% in incidents compared to last year. The number of incidents has fallen from 48 to 31. There were 8 incidents in Q1, 12 in Q2 and 11 in Q3. 10 of the incidents were caused by cooking compared to 19 last year. 17 of the fires were due to human factors, including distraction (6) and reason not known (6). The South Wales Fire and Rescue strategy to reduce accidental dwelling fires is closely linked to the Welsh Government wider social justice and supporting people agendas by targeting the most vulnerable groups within our society and making them safer within their homes. There was 1 serious injury and 4 slight injuries this year in Q1/3, compared to 2 serious and 1 slight injury last year in Q1/3. Attendance at Other special service calls have increased by 30%, with assistance to other agencies rising from 32 to 40 (+25%). Effecting entry calls have also increased from 21 to 29 (+38%). There were also 7 calls to a bariatric persons compared to 10 last year in Q1/3. The number of road traffic collisions attended has increased from 61 to 63 (+3%) with crews attending 12 extrications/release of persons compared to 13 last year. Most of the calls were making the scene/vehicle safe (38). Deliberate fire setting remains an issue within the UA and therefore stations will continue to seek opportunities to reduce the number of these types of incidents. Deliberate grass fires have increased from 31 to 33 (+6%). Deliberate refuse fires have also increased by 35% from 72 to 97. Automatic false alarms have increased slightly from 299 to 305 (+2%) compared to last year. There was an increase in calls to residential homes from 13 to 20 (+54%) and calls to educational properties have also increased from 27 to 42 (+56%) compared to last year. Crews will continue to target premises that are identified on the Business Management Information system to identify causes and trends to be able to liaise with premises owners to provide advice on reducing these call outs. Malicious false alarms have increased from 9 to 26 (+189%) with 8 activation of alarm points in hospitals and there was an increase of 43% in good intent false alarms from 152 to 184 with calls to dwellings and loose refuse accounting for most of these calls.

THIS REPORT IS NOT EXEMPT AND IN THE PUBLIC DOMAIN

SOUTH WALES FIRE & RESCUE AUTHORITY   AGENDA ITEM NO 12
                                                                        13 MARCH 2023

FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

REPORT OF THE TREASURER

PREPARATION, CERTIFICATION AND PUBLICATION OF THE ANNUAL STATUTORY STATEMENT OF ACCOUNTS 2022/23

THIS REPORT IS FOR INFORMATION

REPORT APPROVED BY ASSISTANT CHIEF OFFICER CORPORATE SERVICES
REPORT PRESENTED BY TEMP HEAD OF FINANCE, PROCUREMENT & PROPERTY

SUMMARY
This report outlines changes to the 2022/23 annual statutory statement of account (the accounts) certification timelines and process, as advised by Audit Wales.

RECOMMENDATIONS
That FAPM committee note the:

1   delay of the certification and publication process of the 2022/23 accounts
2   statutory duty arising as a result of non-compliance
3   changed Audit Wales approach to the 2022/23 audit
4   increased cost of external audit service

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1. BACKGROUND

1.1   As part of the financial year end planning process, the Treasurer and finance team meet with Audit Wales (AW) to discuss the financial year end closure plan, any issues affecting the information being presented or impeding the preparation of the accounts. During this year's meeting, Audit Wales highlighted their challenges in resourcing financial audits to meet statutory deadlines.

1.2   The current requirement is to prepare accounts for the period 1 April – 31 March each year and the milestones for approving and reporting these to our stakeholders are as follows:

         (a) The Treasurer certifies the draft accounts by 31 May

(b) Audit Wales undertake their audit work June - July
(c) The Treasurer re-certifies the audited accounts 31 July
(d) Fire Authority approval 31 July
(e) Sign off and publication 31 July

1.3 AW have indicated they are 3 - 4 months behind schedule and are unlikely to commence their audit until September with a provisional sign off date of 30 November. This schedule is in line with the plan for all Local Authority's and can be subject to change.

1.4 The main drivers of the above are resourcing shortages and regulatory changes affecting AW.

2. ISSUE / PROPOSAL

2.1 The South Wales Fire and Rescue Services' (SWFRS) intention is to continue as planned to prepare the draft accounts for the Treasurers certification by 31 May. This will be reported with the draft revenue and capital budget outturns and reserve statement in July as is usual. This ensures Member oversight and awareness of our financial performance and position for 2022/23 and the starting position for 2023/24 albeit, this will not be a final position until AW have completed their work. This is important as Members will be aware, 2022/23 has been a challenging budget year and at the time of writing this report, pay awards for most of the organisation, i.e., operational, grey book staff, have not been agreed.

2.2 Regulation 10(3) of the Accounts and Audit (Wales) Regulations 2014 requires the Authority to immediately publish a statement setting out the reasons for non-compliance and agree a course of action to rectify this position. This statement will be drafted ready for publication on the SWFRS website for the 1 June and the latter point is already in action as part of our ongoing liaison with AW.

2.3 In consequence, the annual audit plan is overdue, this document sets out the work, approach, timeframes, and fees payable to AW. In addition, we have been notified audit fees will increase in the region of 15.6% which is in line with those of national auditing bodies. The increase is split 10.8% for the impact of regulatory change and 4.8% for inflationary pressures. It is hoped this will help secure the necessary resources and with richer skills mix, to deliver a new auditing approach brought about by the introduction of International Standards of Auditing (ISA) 315 – Identifying and Assessing the Risks of Material Misstatement. The application of ISA 315 is effective for audits of accounts, for periods beginning on or after 15 December 2021 and is set to be more resource intensive. In addition, it

has always been part of the plan to undertake a preliminary audit, prior to the audit proper, whereby records for 10 out 12 months are verified and there is opportunity for early identification of issues that may otherwise have a negative affect on the draft accounts prepared by 31 May. Not having a preliminary audit presents an increased risk of misstatement with a potentially 'busier than usual', ISA 260 report to by Members.

2.4 The Finance team will work with Audit Wales to determine availability of staff resource although the team is small and plan their leave around the closure timetable. There is a risk that audit work will be underway during the annual budget setting and monitoring phases and will increase workloads and decrease focus as a result, and so it could be a challenging period for the team.

3. IMPLICATIONS

3.1 **Community and Environment**

Equality, Diversity and Inclusion	No
Welsh Language	No
Well-Being Of Future Generations (Wales) Act	No
Socio Economic Duty	No
Sustainability / Environment / Carbon Reduction	No
Safeguarding	No
Consultation and Communications	Yes
Consultation with Representative Bodies	No
Impact Assessment	No

3.2 **Regulatory, Strategy and Policy**

Legal	No
Financial	Yes
Procurement	No
Corporate Risk	No
Information Management	No
Data Protection / Privacy	No
Health, Safety and Wellbeing	No
Governance & Audit	Yes
Service Policy	No
National Policy	No

3.3 **Resources, Assets and Delivery**

Human Resources and People Development	No
Assets and Resources (Property/Fleet/ICT/Equipment)	No
Service Delivery	No
Procurement	No
Budget Revenue/Capital	Yes

4. EVALUATION & CONCLUSIONS

4.1 SWFRS will be unable to meet statutory financial reporting requirements as outlined above. It is important to note this will not be reflective of the SWFRS capability to record, measure and report financial performance or position but due to a resource shortage with external auditors.

Contact Officer:	Lisa Mullan Temp Head of Finance, Property & Procurement	
Background Papers	**Date**	**Source / Contact**
		Temp Head of Finance, Procurement & Property

THIS REPORT IS NOT EXEMPT AND IN THE PUBLIC DOMAIN

SOUTH WALES FIRE & RESCUE AUTHORITY   AGENDA ITEM NO 13
                                                                        13 MARCH 2023

FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

REPORT OF THE ACO CORPORATE SERVICES

INTERNAL AUDIT PROGRESS REPORT & AUDIT ACTION UPDATE

THIS REPORT IS FOR INFORMATION

REPORT APPROVED BY ACO CORPORATE SERVICES

REPORT PRESENTED BY TEMP HEAD OF FINANCE, PROCUREMENT & PROPERTY

SUMMARY
This report updates Members upon progress being made against the Internal Audit Plan 2022/2023.

RECOMMENDATIONS
Members are asked to note internal audit recommendations and work completed to date on the Internal Audit Annual Plan 2022/2023.

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1. **BACKGROUND**

1.1 TIAA Limited have been appointed as the Authority's Internal Auditors to undertake work covered in the Internal Audit Plan 2022/2023. The plan was approved by the FAPM Committee on 11 April 2022.

1.2 As previously agreed, all audit reports with an assurance level of limited or no assurance will be provided in full. Recommendations only will be provided for reports with an assurance level of substantial or reasonable.

2. **ISSUES**

2.1 The areas of internal audit reviews within the Annual Plan were completed with **4** final reports being issued:-

- **Rosters**
- **ICT Network Security**
- **Human Resources – Training**
- **Key Financial Controls**

The Summary Internal Audit Progress Report written by TIAA limited is attached as Appendix 5.

2.2 **ROSTERS**

2.2.1 The review considered the effectiveness of the arrangements for scheduling and rostering across the Service.

2.2.2 Key strategic findings are as follows:-

- Flexible rostering procedures operating in the South Wales Fire & Rescue Service are well established and understood and are generally operating effectively.

- Arrangements for the operation of the Retained Duty System (RDS) are effective in providing flexibility to address staffing requirements across all stations.

2.3 **ICT NETWORK SECURITY**

2.3.1 The review considered the arrangements for the physical and access security of hardware and software. The scope of the review did not include consideration of the merits of the types of hardware and software used, the access rights to the individual software, or the depreciation policies.

2.3.2 Key strategic findings are as follows:-

- The most recent penetration test was performed in 2018 when a new version of DATA Cabs was deployed.

- The Service has ten servers running the out of support Microsoft Windows Server 2008 R2 Data Centre that cannot be upgraded or patched.

- The Service utilises a software solution for inventorying hardware and software assets. Asset tags are attached to each piece of hardware and matched to records.

- All employees are subjected to a mock phishing attack on a regular basis, and any employee who falls for it is required to undertake additional training.

2.4   **HUMAN RESOURCES – TRAINING**

2.4.1   The review considered the arrangements for:- determining the training requirements, the monitoring arrangements, management information produced, and governance and reporting

2.4.2   Key strategic findings are as follows:-

- South Wales Fire & Rescue Service have effective arrangements in place for determining and allocating required training.

- Training is monitored to ensure that staff are aware of training which is required to be undertaken and when.

- An effective process is in place to initiate and update course content and material in accordance with legislation and guidance.

2.5   **KEY FINANCIAL CONTROLS**

2.5.1   This review considered the effectiveness of the Key Financial Controls which provide assurance that the following systems are operating in accordance with the Service's requirements:- Budgetary Control, General Ledger, Cash, Banking & Treasury Management, Cash flow planning, Income and Debtors, Payments (including payment cards), Security of assets. The review did not include payroll which is the subject of a separate audit.

2.5.2   Key strategic findings are as follows:-

- The Authority has controls in place to support the function of the key financial control processes reviewed during the audit.

- Financial Procedure Rules are expected to be finalised before the end of the financial year. A recommendation was raised in the 2021/33 Key Financial Controls audit in relation to this and has not been repeated in this review to avoid duplication.

- One recommendation has been raised relating to Procurement Cardholder Agreement forms.

3.   IMPLICATIONS

3.1   **Community and Environment**

Equality, Diversity and Inclusion	No
Welsh Language	No
Wellbeing of Future Generations (Wales) Act 2015	No
Socio Economic Duty	No
Sustainability/Environment/Carbon Reduction	No
Safeguarding	No
Consultation and Communications	No
Consultation with Representative Bodies	No
Impact Assessment	No

3.2   **Regulatory, Strategy and Policy**

Legal	No	Data Protection / Privacy	Yes
Financial	No	Health, Safety and Wellbeing	No
Procurement	No	Governance & Audit	No
Corporate Risk	No	Service Policy	Yes
Information Management	Yes	National Policy	No

3.3   **Resources, Assets and Delivery**

Human Resource and People Development	Yes
Assets and Resources (Property/Fleet/ICT/Equipment)	Yes
Service Delivery	No
Procurement	No
Budget Revenue/Capital	No

4.   EVALUATION & CONCLUSIONS

4.1   The issues raised within this report have no adverse impact on the protected characteristics and would have been considered during the audit process.

5.   RECOMMENDATIONS

5.1   Members are asked to note the internal audit recommendations and work completed to date on the Internal Audit Annual Plan 2022/2023.

Contact Officer:	Lisa Mullan – T/Head of Finance & Procurement
Background Papers	Appendix 1 – Final Report Rosters Appendix 2 – Final Report ICT Network Security Appendix 3 – Final Report – Human Resources – Training Appendix 4 – Final report – Key Financial Controls Appendix 5 – SICA Report

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APPENDIX 1

Executive Summary

OVERALL ASSESSMENT

REASONABLE ASSURANCE

- SUBSTANTIAL ASSURANCE
- REASONABLE ASSURANCE
- LIMITED ASSURANCE
- NO ASSURANCE

Adequate & effective governance, risk and control processes

KEY STRATEGIC FINDINGS

Flexible rostering procedures operating in the South Wales Fire and Rescue Service are well established and understood and are generally operating effectively.

Arrangements for the operation of the Retained Duty System (RDS) are effective in providing flexibility to address staffing requirements across all stations.

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

There are no risks specific to the roster function on the Service's departmental risk register however there are staff resource risks relating to staffing, crewing reduction, vacancies and turnover, workforce skills and demand.

GOOD PRACTICE IDENTIFIED

Extensive management information is collected and reviewed by management to monitor the effective operation of staffing arrangements.

A programme of station audits is undertaken which ensures correct completion of staffing records in accordance with relevant HR policies.

SCOPE

The review considered the effectiveness of the arrangements for scheduling and rostering across the Service.

ACTION POINTS

Urgent	Important	Routine	Operational
0	1	4	0

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APPENDIX 2

Executive Summary

OVERALL ASSESSMENT

REASONABLE ASSURANCE

SUBSTANTIAL ASSURANCE
REASONABLE ASSURANCE
LIMITED ASSURANCE
NO ASSURANCE

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Risk 203 - Cyber Risk - ICT services are affected by a cyber-attack

KEY STRATEGIC FINDINGS

	The most recent penetration test was performed in 2018 when a new version of DATA Cabs was deployed.
	The Service has ten servers running the out of support Microsoft Windows Server 2008 R2 Data centre that cannot be upgraded or patched.
	The Service utilises a software solution for inventorying hardware and software assets. Asset tags are attached to each piece of hardware and matched to records
	All employees are subjected to a mock phishing attack on a regular basis, and any employee who falls for it is required to undertake additional training.

GOOD PRACTICE IDENTIFIED

	Each new system undergoes a security assessment as part of its data protection impact assessment (DPIA).
	Logs are held in a secure location to which only authorised administrators have access.

SCOPE

The review considered the arrangements for the physical and access security of hardware and software. The scope of the review did not include consideration of the merits of the types of hardware and software used, the access rights to the individual software; or the depreciation policies.

ACTION POINTS

Urgent	Important	Routine	Operational
0	3	1	0

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Internal Audit

FINAL

South Wales Fire and Rescue Service

Assurance Review of Human Resources Management – Training

2022/23

December 2022

tiaa

Executive Summary

OVERALL ASSESSMENT

SUBSTANTIAL ASSURANCE

REASONABLE ASSURANCE

LIMITED ASSURANCE

NO ASSURANCE

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Risk 019b Reported in the Risk Register is "if we suffer the loss of life/ life changing injuries for a member of staff or the member of the public through the commission of our duties"

KEY STRATEGIC FINDINGS

South Wales Fire and Rescue Service have effective arrangements in place for determining and allocating required training.

Training is monitored to ensure that staff are aware of training which is required to be undertaken and when.

An effective process is in place to initiate and update course content and material in accordance with legislation and guidance.

GOOD PRACTICE IDENTIFIED

Two systems are in place to notify staff of training required and allow management to view whether training has been completed or not.

SCOPE

The review considered the arrangements for: determining the training requirements; the monitoring arrangements; management information produced; and governance and reporting arrangements.

ACTION POINTS

Urgent	Important	Routine	Operational
0	**0**	**1**	**0**

Assurance - Key Findings and Management Action Plan (MAP)

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
1	Directed	Procedural documents have been developed and implemented for each core competency course. These were provided for review during the audit and are to be reviewed on a three yearly cycle. It was noted on review that four of these were due to be reviewed in 2022 but had not been completed although they were in the process of being done: • Road Traffic Collisions (2nd quarter 2022), • Rope Rescue (1st quarter 2022), • Large Animal Rescue (1st quarter 2022) and, • Compartment Fire Behaviour Instructor's Health Management (2nd quarter 2022).	Procedural documents be updated in accordance with agreed frequencies.	3	*All procedural documents are in the process of being reviewed. Consultation with the relevant working group's is underway to ensure accuracy and relevance.*	15/12/22	*GM S Jenkins*

PRIORITY GRADINGS

1	URGENT	Fundamental control issue on which action should be taken immediately.
2	IMPORTANT	Control issue on which action should be taken at the earliest opportunity.
3	ROUTINE	Control issue on which action should be taken.

Operational - Effectiveness Matter (OEM) Action Plan

Ref	Risk Area	Finding	Suggested Action	Management Comments	
No Operational Effectiveness Matters were identified.					

ADVISORY NOTE

Operational Effectiveness Matters need to be considered as part of management review of procedures.

Findings

Directed Risk:

Failure to properly direct the service to ensure compliance with the requirements of the organisation.

Ref	Expected Key Risk Mitigation		Effectiveness of arrangements	Cross Reference to MAP	Cross Reference to OEM
GF	Governance Framework	There is a documented process instruction which accords with the relevant regulatory guidance, Financial Instructions and Scheme of Delegation.	In place	1	-
RM	Risk Mitigation	The documented process aligns with the mitigating arrangements set out in the corporate risk register.	In place	-	-
C	Compliance	Compliance with statutory, regulatory and policy requirements is demonstrated, with action taken in cases of identified non-compliance.	In place	-	-

Other Findings

TIAA undertook an audit of Human Resources Management - Training in September 2020. Reasonable assurance was provided with two important recommendations both of which were part of the process before the implementation of the Course Management System (CMS) and are no longer relevant.

The Service's Training and Development Department facilitates the planning and delivery of an annual training planner based on organisational training needs, determined by the size of the establishment and the functions delivered. The annual training plan is delivered from April to March each year and a timetable of events is developed which outlines the key tasks to be undertaken to ensure the finalisation of the training plan. The Department is based at the Cardiff Gate Training and Development Centre which is operated in partnership with Babcock International through a private finance initiative (PFI). The partnership arrangement with Babcock is evident through the tasks outlined within the timetable for developing the annual training plan, which by December of each year requires the finalisation and formal sign off of the plan by both partners.

Other Findings

Cardiff Gate Training & Development Centre has a training strategy in place - "Preparing Firefighters for today's risks and tomorrow's challenges". This was released in September 2021. The plan outlines the Training Department's strategic direction over the next five business planning years and explains how the centre intends deliver high quality operational training. There are four training priority actions that link into SWFRS Strategic Themes. The leadership team within the Training Department is responsible for reviewing all aspects of the training schools. The role of an operational firefighter is directly linked to the national firefighter role maps. The role map is basically the firefighter job description, and the requirements of skill sets are aligned to National Occupational Standards (NOS) and National Operational Guidance (NOG) which is referenced within the strategy. The PDR pro system is reviewed every 12 months against any NOG updates and subsequent legislative changes should also be considered.

Responsibility for identifying training is down to station management level. A number of mandatory training courses such as breathing apparatus or trauma are constantly on the course programme, but ad hoc courses may be added throughout the year. The training teams at the Cardiff Gate Training & Development Centre and South Wales Fire and Rescue Service (SWFRS) Headquarters are responsible for the administration of the training and booking individuals on courses. They monitor the system on an ongoing basis. It is the responsibility of individual staff members to ensure that they attend booked courses and their line management to confirm that they have attended. Should an individual not attend a course, this is logged on PDR Pro by the course co-ordinator and both the individual and their line a manger receive an automated email. Automated emails are also sent to the individuals and their line managers on them being booked on a course and when the course is completed. A report is run monthly to confirm what invites have been opened (the booking confirmation). If these have not been opened, the individual's line manager is informed. This information is also viewed on the staff record on PDR Pro - a red notice for a message appears on the home screen which provides data once clicked on. This was viewed during the audit via a walkthrough of the PDR Pro system with the Watch Manager at Day Duty Cardiff Gate.

The PDR Pro system allows for management to view courses completed per individual at their stations or if they have a multiple station view, at a regional level. The training team have this administrative view. Each individual record in PDR Pro shows the percentage of training completed with the aim that 100% is completed in a given year from the allocation that the individual has been given. However, this view is not completely accurate as if an individual begins their contract in quarter two of a particular year, for example, but they should have allocated training in quarter one for the role they are doing, the percentage will not show as completed until quarter two of the next year. Quarter one of the first year, during which they were not employed, will show as 0% and non-compliant. This might also be the case if the individual is non-operational or has missed that particular training. The output is the same if an individual is not required to attend breathing apparatus training as they are non-operational or on long term sick and not attending training, they will show as non-compliant. The percentage view is, therefore, not a good basis for monitoring without prior knowledge of the individual. Non-compliance is RAG (red, amber, green) rated as red with green indicating completed and compliant. Again, an individual shows red even if for some reason they are not required to complete the course. Otherwise, the system is an effective tool for showing past, current and future training required, where and when the training will be undertaken and what is required.

Other Findings

🔍 A training needs analysis is undertaken annually which includes input from subject matter experts via a working group which meets at the end of each year. This determines the mandatory courses and examines the frequency and currency of each course and what amendments are required. Once confirmed, the course details and content are updated to ensure the correct and current information is being taught.

🔍 The CMS system has a separate log of training undertaken to that on PDR Pro. PDR Pro records the theoretical and practical side of station training whereas CMS contains courses profiles and compliance courses. Non-compliance on PDR Pro is monitored at a station level by the individual's line management. The Training Systems Administrator confirmed that accounts which are non-operational are updated to show as 'Modified Duties' which would remove them from CMS reports that are run to ascertain what Day Duty personnel need requalification courses. CMS reports are produced to show non-compliance or what level of training has been booked or is required. Compliance reports were provided for five key areas: fire trauma, Road Traffic Collision (RTC), type B water, rope rescue and breathing apparatus. The following compliance figures were noted:

- Breathing Apparatus – 96% compliant, 4% non-compliant (orange 15; purple 32). 1 person who had not been booked in.

- Fire Trauma – 91% compliant, 9% non-compliant (orange 32; purple 12). 24 personnel who were not booked in.

- Road Traffic Collision - 92% compliant, 8% non-compliant (orange 65; purple 6). 14 personnel who were not booked in.

- Rope Rescue - 92% compliant, 8% non-compliant (orange 6; purple 0). 2 personnel who were not booked in.

- Type B Water - 87% compliant, 13% non-compliant (orange 11; purple 0). 2 personnel who were not booked in.

Of the non-compliant figures, the CMS system records new recruits who have yet to complete a course as out of compliance. These were highlighted on the report in purple. In addition, the report highlighted in orange personnel who are booked on either an Initial course or a Requalification course in the near future. It is not known to what extent the personnel who have not completed the training has been truly taken off those related duties. This is based on the Station Manager's discretion. However, the compliance levels when viewed on PDR Pro may be different in terms of compliance for individual stations due to the point referred to above regarding other reasons for not undertaking the training, such as being non-operational. This is seen as appropriate as the systems are used for two different purposes even though similar information is lodged.

🔍 Feedback is requested from each course. This is collated and shared across the service. If an individual does not attend a course, the course tutor logs this on PDR Pro and the individual's line manager is able to access. Responsibility is with the individual's manager to collect the details of the non-attendance and determine whether this is appropriate.

🔍 Training instructor competencies and qualifications are held on CMS and are audited annually with Babcock, the PFI partners aligned to SWFRS annual documentation review for course suitability. Documentation was provided as evidence of this review. No issues were noted.

Other Findings

Mandated training is identified at station management level and requested through the training team to be allocated to the relevant staff member. There is a formal process in place whereby a course commissioning document is completed and sent to the training team outlining the requirements of the course, lesson plan, duration, frequency for refreshment and required attendance level. Once approved, the course is input on the Course Management System (CMS) system and allocated to staff. The training team have access to staff calendars and are able to book in courses which are informed to the staff member through their individual profile to PDR Pro, the staff member's interface for all training required, undertaken or missed. Wholetime staff have no choice but to attend the course as their place is booked with the knowledge that they are on a shift at that time; on call staff are given a number of choices to confirm as they might have other commitments on those days. This is done on an annual basis ahead of schedule. Any additions to the annual plan are included in the training plan for those individuals following the same process.

A sample of five courses was selected from the Master List and evidence requested to show that course commissioning documents and related required requests had been completed. These were for: Institution of Occupational Safety and Health (IOSH), Inland Water – Water Rescue First Responder, Mass Decontamination Requalification, Large Animal Rescue Requal and Breathing Apparatus Instructor Continuous Performance Development Day. Signed course commissioning documents were provided along with lesson plans, pre course learning where appropriate and joining instructions. No issues were noted.

Delivery Risk:

Failure to deliver the service in an effective manner which meets the requirements of the organisation.

Ref	Expected Key Risk Mitigation		Effectiveness of arrangements	Cross Reference to MAP	Cross Reference to OEM
PM	Performance Monitoring	There are agreed KPIs for the process which align with the business plan requirements and are independently monitored, with corrective action taken in a timely manner.	In place	-	-
S	Sustainability	The impact on the organisation's sustainability agenda has been considered.	In place	-	-
R	Resilience	Good practice to respond to business interruption events and to enhance the economic, effective, and efficient delivery is adopted.	In place	-	-

Other Findings

The Performance and Statistical Department provides bi-monthly reports to the Senior Management Team with an overview of training needs. An Ops Training Performance Metrics Insight Report was undertaken for year end 2021/22. This annual report looks at the current status at the end of April 2022 as training moves into a new cycle. While 100% compliance is unrealistic given the issues outlined earlier in this report including timing differences, the Insight Report concluded that since December'2021, the core competency compliance percentage has been steadily rising and was at 82.8% at the end of April 2022. Core Competency Compliance among competent firefighters had risen to over 86% in April 2022. The report found that sickness (presumably relating to Covid-19 in many cases given the report timeframe) was the primary reason for course non-attendance and associated dips in Service-wide Core Competency Compliance. In 2021/22, Cardiff Gate delivered 1,060 courses, 3.5% higher than the year before. The attendance vs course capacity rate was over 70%, with just 6% of nominated attendees not taking part in a scheduled course.

Other Findings

In addition, the Training Systems Administrator provides a monthly report to group managers at Cardiff Gate and Headquarters with information on courses ran, places available and needed to fill, pass rate and failure rates, non-attendance, and cancellations (for individuals rather than courses). The report is accumulative with tabs dating back to May 2021. The development of the report is visible. The September 2022 report showed that of 317 places available, 267 (84%) were filled and 257 (81%) were actually assessed/passed.

There is little financial risk in terms of expenditure as the majority of courses are run in house through the training facilities which are specially built. Some courses require external influence such as water work which is undertaken at the White-Water Rafting Centre in Cardiff. Courses are based on six-person attendance and the training team are tasked to ensure that these places are filled in order to gain the best value for money. As a result, the courses are allocated on a pump-by-pump basis which allows for individuals to be safely missed from the station rota and that six persons attend at a time.

Throughout the first years of Covid-19, there were some issues in training not being completed either because of illness or restrictions on training conditions. This was known and critical skills training was prioritised. Normal footfall in the centre was not possible. Mandatory training such as breathing apparatus, trauma and driving were monitored to ensure compliance in accordance with the National Operational Guidance.

EXPLANATORY INFORMATION

Appendix A

Scope and Limitations of the Review

1. The definition of the type of review, the limitations and the responsibilities of management in regard to this review are set out in the Annual Plan. As set out in the Audit Charter, substantive testing is only carried out where this has been agreed with management and unless explicitly shown in the scope no such work has been performed.

Disclaimer

2. The matters raised in this report are only those that came to the attention of the auditor during the course of the review and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. This report has been prepared solely for management's use and must not be recited or referred to in whole or in part to third parties without our prior written consent. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.

Effectiveness of arrangements

3. The definitions of the effectiveness of arrangements are set out below. These are based solely upon the audit work performed, assume business as usual, and do not necessarily cover management override or exceptional circumstances.

In place	The control arrangements in place mitigate the risk from arising.
Partially in place	The control arrangements in place only partially mitigate the risk from arising.
Not in place	The control arrangements in place do not effectively mitigate the risk from arising.

Assurance Assessment

4. The definitions of the assurance assessments are:

Substantial Assurance	There is a robust system of internal controls operating effectively to ensure that risks are managed, and process objectives achieved.
Reasonable Assurance	The system of internal controls is generally adequate and operating effectively but some improvements are required to ensure that risks are managed, and process objectives achieved.
Limited Assurance	The system of internal controls is generally inadequate or not operating effectively and significant improvements are required to ensure that risks are managed, and process objectives achieved.
No Assurance	There is a fundamental breakdown or absence of core internal controls requiring immediate action.

Acknowledgement

5.	We would like to thank staff for their co-operation and assistance during the course of our work.

Release of Report

6.	The table below sets out the history of this report.

Stage	Issued	Response Received
Audit Planning Memorandum:	15th September 2022	15th September 2022
Draft Report:	25th November 2022	5th December 2022
Final Report:	7th December 2022	

AUDIT PLANNING MEMORANDUM

Appendix B

Client:	South Wales Fire and Rescue Service		
Review:	Human Resources Management – Training		
Type of Review:	Assurance	**Audit Lead:**	Audit Manager

Outline scope (per Annual Plan):	The review considers the arrangements for: determining the training requirements; the monitoring arrangements; management information produced; and governance and reporting arrangements.	
Detailed scope will consider:	Directed Governance Framework: There is a documented process instruction which accords with the relevant regulatory guidance, Financial Instructions and Scheme of Delegation. Risk Mitigation: The documented process aligns with the mitigating arrangements set out in the corporate risk register. Compliance: Compliance with statutory, regulatory and policy requirements is demonstrated, with action taken in cases of identified non-compliance.	Delivery Performance monitoring: There are agreed KPIs for the process which align with the business plan requirements and are independently monitored, with corrective action taken in a timely manner. Sustainability: The impact on the organisation's sustainability agenda has been considered. Resilience: Good practice to respond to business interruption events and to enhance the economic, effective and efficient delivery is adopted.
Requested additions to scope:	None	
Exclusions from scope:	None	

Planned Start Date:	31/10/2022	Exit Meeting Date:	18/11/2022	Exit Meeting to be held with:	Head of Training

SELF ASSESSMENT RESPONSE	
Matters over the previous 12 months relating to activity to be reviewed	**Y/N (if Y then please provide brief details separately)**
Has there been any reduction in the effectiveness of the internal controls due to staff absences through sickness and/or vacancies etc?	N
Have there been any breakdowns in the internal controls resulting in disciplinary action or similar?	N
Have there been any significant changes to the process?	N
Are there any particular matters/periods of time you would like the review to consider?	N

APPENDIX 4

Executive Summary

OVERALL ASSESSMENT

REASONABLE ASSURANCE

- SUBSTANTIAL ASSURANCE
- REASONABLE ASSURANCE
- LIMITED ASSURANCE
- NO ASSURANCE

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Poor or ineffective financial control may result in budget estimates not being met, inappropriate payments being made or income due not being collected in full or in a timely manner.

KEY STRATEGIC FINDINGS

The Authority has controls in place to support the function of the key financial control processes reviewed during the audit.

Financial Procedure Rules are expected to be finalised before the end of the financial year. A recommendation was raised in the 2021/22 Key Financial Controls audit in relation to this and has not been repeated in this review to avoid duplication.

One recommendation has been raised relating to Procurement Cardholder Agreement forms.

GOOD PRACTICE IDENTIFIED

It was noted that the Finance Team has historically employed staff through the apprenticeship scheme. In addition to providing an opportunity of employment, this also helps to provide continuity and succession arrangements within the team.

SCOPE

This review considered the effectiveness of the key financial controls which provide assurance that the following systems are operating in accordance with the Service's requirements: Budgetary control; General ledger; Cash, banking & treasury management; Cash flow planning; Income and debtors; Payments including payment cards; Security of assets. The review did not include payroll which is the subject of a separate audit.

ACTION POINTS

Urgent	Important	Routine	Operational
0	1	0	0

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South Wales Fire and Rescue Service

Summary Internal Controls Assurance (SICA) Report

2022/23

February 2023

Summary Internal Controls Assurance

Introduction

1. This summary controls assurance report provides the Finance Audit and Performance Management (FAPM) Committee with an update on the emerging Governance, Risk and Internal Control related issues and the progress of our work at South Wales Fire and Rescue Service as of 21st February 2023.

TIAA'S Conformance to the IIA Standards and Codes of Practice

2. TIAA Limited commissioned an External Quality Assessment (EQA) of its internal audit services in 2022. An EQA is required every five years, in line with the requirements of the International Professional Practices Framework (IPPF) and the Standards set by the Global Institute of Internal Auditors (IIA). The independent EQA considered our conformance with the IPPF and the Standards and also the Public Sector Internal Audit Standards (PSIAS), which govern internal audit in the public sector.

    Our independent EQA was undertaken by a senior partner at Chiene + Tait, a long-established and high-quality accountancy firm headquartered in Edinburgh with offices in Scotland and London. The review assessed TIAA's internal audit methodology and delivery against the Core Principles, the Code of Ethics and the Standards. It took into account our comprehensive framework, our guiding policies, organisational culture, planning and delivery, investment in our people, tools and techniques and our quality assurance framework, including feedback from clients.

    We are pleased to confirm that the independent EQA assessor was able to conclude that TIAA 'generally conforms to the requirements of the Public Sector Internal Audit Standards and the mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF)'. 'Generally conforms' is the highest rating that can be achieved using the IIA's EQA assessment model. It was also noted that there were no areas of non-conformance or partial conformance with the Standards.

    TIAA was also complimented on the standard of documentation provided which enabled them to form a positive conclusion.

Audits completed since the last SICA report to the Finance, Audit and Performance Management Committee

3.   The table below sets out details of audits finalised since the previous meeting of the Finance, Audit and Performance Management Committee.

Audits completed since previous SICA report

Review	Evaluation	Key Dates			Number of Recommendations			
		Draft issued	Responses Received	Final issued	1	2	3	OEM
ICT – Network Security	Reasonable	3rd November 2022	8th November 2022	11th November 2022	-	3	1	-
Human Resources Management – Training	Substantial	25th November 2022	5th December 2022	7th December 2022	-	-	1	-
Rosters	Reasonable	16th November 2022	16th December 2022	19th December 2022	-	1	4	-
Key Financial Controls	Reasonable	20th November 2022	14th February 2023	15th February 2023	-	1	-	-

4.   There are no issues arising which would require the annual Head of Audit Opinion to be qualified.

Progress against the 2022/23 Annual Plan

5.   Our progress against the Annual Plan for 2022/23 is set out in Appendix A.

Changes to the Annual Plan 2022/23

6.   There are no additional areas where internal audit work is recommended to enable an unqualified Head of Audit Opinion to be provided for 2022/23.

Progress in actioning priority 1 recommendations

7.   We have made no new Priority 1 recommendations (i.e. fundamental control issue on which action should be taken immediately) since the previous SICA and no Priority 1 recommendations were reported in the previous report. More information is provided in Appendix B.

Root Cause Indicators

8. The Root Cause Indicators (RCI) have been developed by TIAA to provide a strategic rolling direction of travel governance, risk and control assessment for South Wales Fire and Rescue Service. Each recommendation made is analysed to establish the underlying cause of the issue giving rise to the recommendation (RCI). The analysis needs to be considered over a sustained period, rather than on an individual quarter basis. Percentages, rather than actual number of reviews/recommendations made permits more effective identification of the direction of travel. A downward arrow signifies a positive reduction in risk in relation to the specific RCI.

RCI – Direction of Travel Assessment

Root Cause Indicator	2021/22	Qtr 1 (2022/23)	Qtr 2 (2022/23)	Qtr 3 (2022/23)	Qtr 4 (2022/23)	Medium term Direction of Travel	Audit Observation
Directed							
Governance Framework	35% (6)	-	-	50% (4)	55% (6)	↑	No significant trend identified.
Risk Mitigation	6% (1)	-	-	37.5% (3)	18% (2)	↓	
Control Compliance	35% (6)	-	-	12.5% (1)	27% (3)	↑	
Delivery							
Performance Monitoring	18% (3)	-	-	-	-	↔	
Resources (2021/22) / Sustainability (2022/23)	-	-	-	-	-	↔	
Resilience	6% (1)	-	-	-	-	↔	

Frauds/Irregularities

9. We were advised of a potential irregularity in relation to the unapproved use of a fuel card. This was investigated by the Service and found not to be fraudulent.

Other Matters

10.   We have issued a number of briefing notes and fraud digests, shown in Appendix C, since the previous SICA report. The actions taken by South Wales Fire and Rescue Service are summarised below:

Briefing Note
Government sets out plans to protect public places from terrorist attacks

Fraud Alert
Fake invoices in circulation for payment of office supplies
Security Camera Risk
Vigilance with staff identity checks

Responsibility/Disclaimer

11.   This report has been prepared solely for management's use and must not be recited or referred to in whole or in part to third parties without our prior written consent. The matters raised in this report not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.
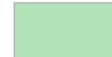

Progress against Annual Plan 2022-23

System	Planned Quarter	Current Status	Comments
Collaboration – Co-location	1	Fieldwork commenced	Draft report pending
Rosters	1	Final Report Issued: 19/12/2022	Presented to February 2023 meeting
Human Resources Management – Wellbeing	1	Final Report Issued: 09/11/2022	Presented to November 2022 meeting
Station Visits	2	Draft Report Issued: 06/01/2023	
Payroll	2	Fieldwork completed	Draft report pending
Contract Management	2	Fieldwork completed	Draft report pending
General Data Protection Regulation (GDPR)	2	Final Report Issued: 08/11/2022	Presented to November 2022 meeting
ICT Network Security	3	Final Report Issued: 11/11/2022	Presented to February 2023 meeting
Key Financial Controls	3	Final Report Issued: 15/02/2023	Presented to February 2023 meeting
Risk Management – Mitigating Controls	3	Draft Report Issued: 23/01/2023	
Human Resources Management – Training	3	Final Report Issued: 07/12/2022	Presented to February 2023 meeting
Sustainable Procurement	4	Fieldwork start date: 20/02/2023	
Follow Up	4	Fieldwork completed	Draft report pending
Annual Planning	1	Final issued: 20/04/2022	
Annual Report	4		
Audit Management	1 – 4		

KEY:

To be commenced	Site work commenced	Draft report issued	Final report issued

Priority 1 Recommendations - Progress update (Not Applicable

Recommendation	Priority	Management Comments	Implementation Timetable	Responsible Officer	Action taken to date (and any extant risk exposure)	Risk Mitigated
No new priority 1 recommendations						

KEY:

Priority Grading

1	URGENT	Fundamental control issue on which action should be taken immediately.

Risk Mitigation

	CLEARED	Internal audit work confirms action taken addresses the risk exposure.		ON TARGET	Control issue on which action should be taken at the earliest opportunity.		EXPOSED	Target date not met & risk exposure still extant

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Briefings on developments in Governance, Risk and Control

TIAA produces regular briefing notes to summarise new developments in Governance, Risk, Control and Counter Fraud which may have an impact on our clients. These are shared with clients and made available through our Online Client Portal. A summary list of those CBNs and Fraud Alerts issued since the last Finance Audit and Performance Management (FAPM) Committee which may be of relevance to South Wales Fire and Rescue Service is given below. Copies of any CBNs are available on request from your local TIAA team.

Summary of recent Client Briefing Notes (CBNs)

Date Issued	CBN Ref	Subject	Status	TIAA Comments
27/01/2023	23002	Government sets out plans to protect public places from terrorist attacks		**Action Required:** Organisations should ensure they are aware of the new regulations regarding public safety and to review their existing emergency plans frequently.

Summary of recent Anti-Crime Alerts

Date Issued	Subject	Status	TIAA Comments
January 2023	Fake invoices in circulation for payment of office supplies		**Action Required** This alert provides information and advice to staff about fraud and economic crime, and the risks associated with it. If you think that your organisation has been a victim of invoice fraud, contact your Anti-Crime Specialist immediately for advice

Date Issued	Subject	Status	TIAA Comments
December 2022	Security Camera Risk		**Action Required** It is recommended that an urgent action be undertaken that clients review their CCTV provider, the cameras and systems installed and to consider replacing their existing cameras if they are either of the mentioned banned companies or to at least ensure the cameras are not on an accessible (even via hacking) network.
December 2022	Vigilance with staff identity checks		**Action Required** This alert provides information and advice to staff about security risks. • Carry out identity checks and introduce new staff to teams • Wear your identity card lanyard and if lost, report it immediately • Keep your identity card secure when not in use • Contact your TIAA Local Security Management Specialist for further crime prevention advice

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DEPARTMENTAL RISK REGISTER REPORT

2022/23 Quarter 2 (April-September 2022)

Gwasanaeth Tân ac Achub
De Cymru

South Wales
Fire and Rescue Service

Produced in

BMIS
Business Management
Information System

Introduction

This report details progress made on the management of risks identified on the Departmental Risk Register as at Quarter 2 (April – September 2022).

These risks are those that are considered significant risks emerging within one or more Departments and are separate to service-wide risks that are recorded on our Strategic Risk register.

In recent months, Officers from our Planning, Performance and Risk team have met regularly with Heads of Service to develop reporting of departmental risks. This process is intended to enhance the scrutiny of these risks and provide a pathway to identifying potential strategic risks.

Risks are updated quarterly by risk owners providing an update commentary along with a Red, Amber or Green (RAG) status and risk scores are reviewed based on current likelihood and impact. The Risk control tasks are also updated each quarter.

Directors, department heads and team leaders are responsible for identifying risks during the business planning process and identifying appropriate actions to manage or mitigate risk within their areas.

The Senior Management Team formally reviews the Risk Register on a regular basis and endorses the escalation of risk from the Departmental to Strategic Register.

The Risk Performance RAG colour coding shown in the report is as follows:

Colour	Risk Score (Likelihood (1-5) * Impact (1, 2, 4, 8 or 16)
Red (high risk)	16 and over
Amber (medium risk)	8 to 12
Green (low risk)	1 to 5

Recommendation:

It is recommended that Members note the highlighted points raised, the list of all Departmental risks and the latest Quarter 2 updates including the scores direction of travel as shown.

Contact Officer: Suzanne Absalom (Planning Performance and Risk Manager)

Highlights of this report

- Four new Departmental risks were identified (Gazetteer updates, IRS, Login Privileges and Encrypted ICT Devices).

Please note that the Login Privileges and Encrypted ICT Devices risks were identified by the Security Risk Group but further discussions with Heads of Service are to take place regarding these risks and consequently there are no updates for these risks.

- One Departmental Risk has been closed (DR FE004 Vehicle fuelling change requirements)

- No existing Strategic Risks have been downgraded to Departmental Risks.

- No existing Departmental Risks have been upgraded to Strategic Risks.

a. List of all Departmental Risks and current Performance.

	Current Risk Score		
	30/09/22		
	Performance	Actual▾	Owner
DR JFC002 Staffing	▲	40	Natalie Pearce
DR ORM001 Supplier difficulties	▲	24	Neil Davies
DR PROP002 Building Compliance	▲	16	Mike Davies
DR PROP001 Maintenance of Buildings	▲	16	Mike Davies
DR TD004 Training Real Estate	▲	16	Dean Loader
DR TD003 Crewing Reduction	●	12	Dean Loader
DR TD002 Vacancies	●	12	Dean Loader
DR CS007 National Framework Changes	●	12	Wayne Thomas
DR PROC001 Team keeping up to date with Regs.	●	12	Lee Bunkham
DR CS010 Gazetteer Updates	●	12	Suzanne Absalom
DR CS011 IRS	●	12	Wayne Thomas
CDR ICT001 Systems Failure	●	8	Chris Williams
DR ICT002 Technology Change	●	8	Chris Williams
DR TD005 Sustaining current demands	●	8	Dean Loader
DR FE003 Skilled workforce	●	8	Chris Temby
DR HR05 lack of knowledge of Pension Legislation	●	8	Alison Reed
DR HR06 Departmental workload not managed	●	8	Andrew Jones
CDR PS001 Staff Turnover	★	4	Andrew Jones
DR RR001 FS Legislation	★	4	Jason Evans
DR CS006 Engagement	★	4	Wayne Thomas
DR CS008 BMIS Contract Review	★	4	Suzanne Absalom
DR CS009 PP&R Cross-skilling	★	4	Suzanne Absalom
DR HR07 Health & Wellbeing	★	4	Andrew Jones
DR OPS001 Crewing Appliances	★	4	Mike Wyatt
DR HR01 Welsh Language	★	4	Alison Reed
DR OPS002 Accurate Data Completion	★	4	John Treherne
DR ACC003 Fraud	★	2	Jennifer Sambell
DR ICT001 Shadow ICT	★	2	Chris Williams
DR FE004 Vehicle Fuelling change	★	1	Chris Temby
DR ICT004 Encrypted ICT Devices	?		Chris Williams
DR ICT003 Login Privileges	?		Chris Williams

b. Report of Risk Details and Quarter 2 update score and comments

Please note this list is presented in current RAG score sequence with the Direction of Travel based on risk score between Quarter 1 and Quarter 2 shown as follows: ↔ = no change, ↑ = the score increased and ↓ = the score decreased.

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Natalie Pearce	DR JFC002 Staffing	If Joint Fire Control is unable to maintain sufficient staffing levels due to the retirement profile (36% of staff could retire in next 6 years), sickness, maternity, etc.	then JFC may be unable to fulfil its statutory obligations of receiving calls for assistance and mobilising resources.	40	We had a difficult summer period with crewing, of the planned 4 for the 2nd trainee course, only 1 person accepted the post. An interim internal recruitment has taken place with 4 staff starting on the 15th of Dec. The recruitment for the next course of 4 for March 2023 is at risk of delay due to potential IA preparation and subsequent potential for disruption. There have been 4 resignations and 3 ill health/resignations pending. Pay is an issue with staff leaving for work elsewhere with more flexible working conditions. Prediction is 2 under establishment at end of year with the last 2 courses filling 5 of the 7 known/predicted vacancies. Sickness has improved with 8 absences, 2 RTW and 1 maternity absence due to end November. We have been unable to raise minimum staffing levels to 8 from 6. Covid began to impact crewing again at the end of September at short notice.	↔

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Neil Davies	DR ORM001 Supplier difficulties	If a large supplier / manufacturer went into financial difficulties suddenly	Then we would lose the facility of support, care package, parts, servicing and H&S back up.	24	Discussions are taking place at an all Wales level around the PPE contract management. We are represented at these discussions by Lisa Mullan and Lee Bunkham. Further information may become available following these discussions.	↑
Mike Davies	DR PROP002 Building Compliance	If we do not have adequate measures in place for the strategic monitoring of building compliance areas	then we will be in breach of our statutory requirements in several priority risk areas, such as: fire safety, gas safety, legionella, electrical, asbestos. Failure to comply adequately may result in fines and or legal action.	16	This has been parked until we go through the process of appointing a new Facilities Manager following the retirement of the current postholder.	↔
Mike Davies	DR PROP001 Maintenance of Buildings	If we don't maintain our buildings to a reasonable standard as required by the Fire Authority	then there is a risk of not being able to provide fit for purpose safe property assets from which to deliver an emergency service.	16	Work is still progressing well with the first of the RDS project out to tender currently with a view to getting into construction in September. Also design work is advancing on all other RDS sites that were identified, along with New Inn demolition and rebuild.	↔

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Dean Loader	DR TD004 Training Real Estate	If loss of training real estate due to unplanned work disruptions and / or failure of current systems (RFTF)	then we would be unable to deliver realistic and effective training.	16	Q2 activity has included the evaluation of the CFBT building by property services and facility management companies. This has been completed to identify replacement programmes and frequency of testing regimes. Ongoing replacement of particular consumables has continued throughout Q2 to enhance longevity of CFBT.	↔
Dean Loader	DR TD003 Crewing Reduction	If crewing reduction due to pandemics, and widespread absence	then schools unable to meet training commitments impacting service delivery in operations.	12	No issues within Q2, stock of LFT replenished recently to allow testing if and when required.	↔
Dean Loader	DR TD002 Vacancies	If Training and Development was unable to fill the vacancies within Training	then the 'schools' would be unable to meet their respective training commitment.	12	All vacancies within Q2 have been permanently filled with instructors. Current forecasts are being managed and identified vacancies being planned for with replacements.	↔

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Wayne Thomas	DR CS007 National Framework Changes	If we fail to adequately consider the requirements of the National Fire Framework enforced under new Wales Measure in relation to our Annual Improvement Report arrangements	then the required work involved could result in us being unable to comply with the Welsh Government reporting requirements.	12	We continue to wait for an update from Welsh Government regarding any proposed changes to our current annual reporting requirements. The all-Wales Improvement Planning Steering Group (a meeting between WG and representatives from the three FRSs where any proposed changes to our National Fire Framework were being discussed) has not met since before the COVID pandemic. We will continue to satisfy our annual reporting requirement in the meantime - work to complete our statutory Annual Improvement plan by the end October 2022 commenced in Q2.	↔
Lee Bunkham	DR PROC001 Team keeping up to date with Regs.	If the Procurement Team fail to keep up to date with EU/Public Procurement Regulations and Service CSO's	then we could misinform user departments over correct procurement procedures increasing the risk of challenge from suppliers.	12	Currently two staff retain membership to CIPS	↔

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Chris Williams	CDR ICT001 Systems Failure	If we had a major ICT systems or services failure and our Disaster Recovery plans are not robust	then it would impact the service's business continuity	8	Continue to work with departments on their DR plans that are linked with ICT	↔
Chris Williams	DR ICT002 Technology Change	If we do not keep up with the appropriate advances in technology	then the service may not be using the most efficient and effective solutions for its needs.	8	ICT Managers attend relevant seminars and webinars to review latest technology and thinking.ICT continue to meet with suppliers to observe latest product offerings.\n\nEmerging technologies are discussed at the monthly ICT Managers Meeting.	↔
Dean Loader	DR TD005 Sustaining current demands	If we are unable to sustain the current demands on Training and Development	then welfare issues for training instructors in particular cancellation of courses could adversely impact operations.	8	There have been no issues throughout Q2. The training planner has been fully catered for and all operational training courses facilitated.	↔
Chris Temby	DR FE003 Skilled workforce	If we are not able to maintain a suitably trained and skilled technician workforce due to retirements and/or external market factors	then we will be unable to provide the necessary support for our vehicle fleet.	8	The department is currently working with HR to advertise and fill the current supervisory gaps.	↔

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Alison Reed	DR HR05 lack of knowledge of Pension Legislation	If there is a lack of provision, knowledge and understanding of pension and tax legislation	then employees of the Service will face the potential of not receiving correct advice and ultimately a unforeseen tax burden.	8	We have a resourced team of people with pensions expertise within the HR function who are supported by our pensions administrator, RCT Pensions. We are not anticipating any changes to this resourcing model.	↓
Andrew Jones	DR HR06 Departmental workload not managed	If the HR workload is not managed and monitored to ensure a fair distribution of work activity	then employees will have difficulty in establishing a health work/life balance.	8	The dept is currently undertaking a functional model exercise to ensure appropriate alignment of tasks to the respective teams.	↔
Andrew Jones	CDR PS001 Staff Turnover	If we were to suffer high staff absence due to our retirement profile, increased sickness or any other reason	Then the resultant loss of experience could have a detrimental impact on our performance	4	We continue to monitor the retirement profile and encourage staff to undertake meaningful handovers to ensure continuity of service.	↔
Jason Evans	DR RR001 FS Legislation	If major changes to legislation and the role of business fire safety as a result of the findings from the Grenfell Tower inquiry.	then SWFRS may not have sufficient resources to cope with the impact.	4	Dept changes completed to address changes post Grenfell	↔

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Wayne Thomas	DR CS006 Engagement	If we fail to communicate, consult, engage and involve our communities and staff effectively	then the reputation, public confidence and efficiency of the service could be compromised.	4	The Service has been able to re-introduce a number of face-to-face engagement activities with our partners and the public in recent months, since the easing of COVID restrictions. Engagement activities of this nature have historically proven to be very effective - we attended the PRIDE Cymru parade and are working towards hosting our own 999 day in October 2022.We continue to plan our campaign activities to include both digital and non digital methods of communication - our plan for OpBang (Halloween and Bonfire safety) has included radio advertising, a newspaper article and the use of digital screens in areas of high footfall, in addition to promotion on our social media channels. We continue to plan, discuss and evaluate our engagement activities at meeting of the Consultation and Engagement Group - the last meeting of the group occurred on 11th October 2022.	↔

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Suzanne Absalom	DR CS008 BMIS Contract Review	If we do not review and assess our Contract and use of the Inphase Business Management system in line with our future requirements in good time	then we will not be able to develop the Tender documents and due process in time to enable us to agree and implement an effective performance system beyond the end of our current Contract.	4	Review of BMIS to commence Q3 to inform contract requirement. This will be developed with support from Procurement Team.	↔
Suzanne Absalom	DR CS009 PP&R Cross-skilling	If we do not provide adequate cross-skilling within the PP&R team to cover potential staff absence	then our ability to provide the necessary service to Users will be compromised which in turn could result in decisions being made on insufficient information.	4	Training was held on-site with members of PPR and Stats team. Skills matrix has been progressed. New PPR Assistant due to commence employment. Opportunities for cross-skilling are identified and developed where possible.	↓
Andrew Jones	DR HR07 Health & Wellbeing	If we do not maintain the Health and Wellbeing of all our workforce	then we may incur excessive staff absence with potential degradation in service to our communities.	4	We continue to monitor sickness levels which are only slightly affected by the Covid pandemic. Case reviews continue to be undertaken in respect of the most serious cases.	↔

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Mike Wyatt	DR OPS001 Crewing Appliances	If we cannot adequately crew our appliances	then we may not be able to provide the appropriate operational response to our communities.	4	Crewing levels are being maintained with a WDS recruitment course ongoing at present. Following completion of the course we will be slightly over establishment. Work is currently ongoing to establish the structure of all departments and establish clear time frames for secondments to other departments.	↔
Alison Reed	DR HR01 Welsh Language	If we fail to effectively resource the implementation year of the Welsh Language Standards	then we will be unable to deliver our obligations under the standard.	4	We have a dedicated resource in place to monitor and record our progress against the Welsh Language Scheme standards. In future we will be moving to a different monitoring system through our Business Management Information System.	↔
John Treherne	DR OPS002 Accurate Data Completion	If we do not complete information held within our electronic systems promptly and accurately	then the quality of our reports to Senior Management and Welsh Government will be compromised.	4	Weekly formal meeting are currently held every Tuesday and GM's are updated on current information held within our current systems in their particular unitary authority.	↔
Jennifer Sambell	DR ACC003 Fraud	If we fall victim to fraud	then it could manifest as financial loss as improper payments are made to suppliers, non-suppliers and employees through the bank and the corporate credit card.	2	All mitigations remain in place.	↔

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22	Risk Score Direction of travel Q1 to Q2
Chris Williams	DR ICT001 Shadow ICT	If users, teams or departments do not engage with ICT at the first opportunity when purchasing or using ICT solutions	then there could be wasted time, inconsistent approach, wasted investment, inefficiencies, higher risk of data loss or leaks, barrier to enhancement and has an effect on ICT Dept.	2	Heads of Service share the same room and meet fortnightly to discuss issues and opportunities. Managers and users are engaging with ICT to discuss issues and find solutions either directly or via formal meetings e.g. OCG	↓
Chris Temby	DR FE004 Vehicle Fuelling change	If we do not adequately provide the required training, infrastructure and change in processes for fuelling vehicles	then we will not be able to use our electric vehicle fleet effectively.	1	Advised by the risk owner that this risk can now be closed	↔

c. The updates provided for the four new risks are as shown below:

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22
Suzanne Absalom	DR CS010 Gazetteer Updates	If the SWFRS gazetteers used to underpin our various key information systems are not aligned and up to date	then numerous addresses may not be available within these systems. Consequently the Service may not be able to respond effectively to incidents and will not be able to validate, match and analyse location-related data.	12	There has been no news on refresh of SWFRS gazetteers and systems which rely on addresses/UPRNs fall further out of date as new buildings cannot be identified. Work around processes put in place where possible, but will require resource to correct when the gazetteer is refreshed.
Wayne Thomas	DR CS011 IRS	If we do not plan for the Home Office implementation of a replacement to the current Incident Recording System (IRS)	then the recording and flow of incident data will be disrupted, compromising our operational planning, incident reporting and ability to report/share data with Welsh Government, the Home Office, NFCC and partners.	12	We continue to ensure that we are part of the ongoing discussions around any changes currently being discussed regarding the Incident Recording System, as we have various key stakeholders from our organisation participating in a number of NFCC working groups. Any proposals or discussions tabled at these meetings are subsequently discussed between our key stakeholders (i.e., ICT, Statistics, Information Governance) to prepare ourselves for any potential amendments. We have also re-invigorated meetings between ourselves and the Performance Management teams of the other 2 Welsh FRSs, to ensure that we are prepared on an all-Wales basis

Owner	Risk ID	IF	THEN	Risk Score 30/09/22	Comments 30/09/22
Chris Williams	DR ICT003 Login Privileges	If we do not have a joined-up approach to removing the login privileges of staff from all relevant software systems within the service when they no longer need them	then individuals could continue to have access to confidential organisational intelligence		See note under the highlight section of this report
Chris Williams	DR ICT004 Encrypted ICT Devices	If members of staff attempt to take encrypted ICT devices abroad	then these devices may be confiscated by customs, resulting in a potential loss of hardware and sensitive digital information		See note under the highlight section of this report

THIS REPORT IS NOT EXEMPT AND IN THE PUBLIC DOMAIN

SOUTH WALES FIRE & RESCUE AUTHORITY   AGENDA ITEM NO 15
13 MARCH 2023

FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE

REPORT OF DIRECTOR OF CORPORATE SERVICES

REGISTER OF GIFTS AND HOSPITALITY 2022

THIS REPORT IS FOR INFORMATION

REPORT APPROVED BY DIRECTOR OF CORPORATE SERVICES

REPORT PRESENTED BY SARAH WATKINS, HEAD OF CORPORATE SUPPORT

SUMMARY This report provides Members with an overview of the gifts and hospitality recorded on the Register of Gifts and Hospitality for 2022. **RECOMMENDATION** That Members note the contents of the Register of Gifts and Hospitality in line with Internal Audit recommendations.

1. **BACKGROUND**

1.1 South Wales Fire & Rescue Service is committed to carrying out our business fairly, openly and honestly, preserving the integrity and reputation of the Service, our Members and staff.

1.2 The Service's Hospitality and Gifts Policy (OP-05.006 Hospitality and Gifts) is intended to establish and maintain a consistent approach in relation to the offer, refusal and acceptance of hospitality and gifts to ensure that conflicts of interest are avoided.

2. **ISSUE**

2.1 All gifts and hospitality are to be recorded in the Gifts and Hospitality Register, whether accepted or declined, in accordance with the General Standing Orders. Members are required to disclose their personal interests and gifts and hospitality they receive in accordance with the Members' Code of Conduct. Similarly Officers are required to disclose their personal interests and gifts and hospitality they are offered or receive in accordance with the Officers' Code of Conduct.

2.2 Following an observation by the Internal Auditors during the Risk Management Anti-fraud Audit 2017/18, it was recommended that the Gifts and Hospitality Register be presented regularly to the Finance, Audit & Performance Management Committee for inspection in accordance with good governance and this be recorded in the minutes.

2.3 The Finance, Audit & Performance Management Committee agreed in 2019 to receive the Register of Gifts and Hospitality on an annual basis.

2.4 The current register details the entries for the financial year 2022 identifying the gifts and/or hospitality entries declined and accepted. Further information can be found within the register attached as Appendix 1 to this report – Register of Gifts and Hospitality 2022.

2.5 There is an entry within the Appendix where the details of the individual have been redacted for GDPR purposes. This is due to the fact that permission to accept the gift was declined after a retrospective application via the M10 form. The gift had been accepted and appropraite management action was carried out.

3. IMPLICATIONS

3.1 Community and Environment

Equality, Diversity and Inclusion	No
Welsh Language	No
Well-Being Of Future Generations (Wales) Act	No
Socio Economic Duty	No
Sustainability / Environment / Carbon Reduction	No
Safeguarding	No
Consultation and Communications	No
Consultation with Representative Bodies	No
Impact Assessment	No

3.2 Regulatory, Strategy and Policy

Legal	Yes
Financial	Yes
Procurement	No
Corporate Risk	Yes
Information Management	No
Data Protection / Privacy	No
Health, Safety and Wellbeing	No
Governance & Audit	Yes
Service Policy	No
National Policy	No

3.2.1 The rigour of the process of the hospitality register, approval process and production of this report satisfies the legal and ethical requirements of serving the public. By openly reporting the hospitality and gifts accepted within the organisation, the Service is displaying transparency and preventing potential reputational risk.

3.3 **Resources, Assets and Delivery**

Human Resources and People Development	No
Assets and Resources (Property/Fleet/ICT/Equipment)	No
Service Delivery	No
Procurement	No
Budget Revenue/Capital	No

4. RECOMMENDATION

4.1 That Members note the contents of the Register of Gifts and Hospitality in line with Internal Audit recommendations.

Contact Officer:	Sarah Watkins Head of Corporate Support
Background Papers	Appendix 1 – Register of Gifts and Hospitality 2022

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Register of Declarations of Interest & Hospitality/Gifts 2022 **APPENDIX 1**

Date	Name	Gift Received From	Nature of Gift/ Declaration of Interest	Approx Value	MO consulted	Accepted or Declined	What happened to gift
01.06.22	Darren Cleaves, Stn 40 Abergavenny	Mr Gareth Hankins	Cash donation to crew of Abergavenny Fire Station	£610	Y	Accepted	Cash was paid into the Wellbeing Area Fund for use at the station
17.05.22	Rachel Trusler, IG&C	Nuffield Health	Free gym trial for staff	n/a	Y	Accepted	Attended the swimming pool
17.05.22	Garry Davies, Head of Ops	Nuffield Health	Free gym trial for staff	n/a	Y	Accepted	Attended the gym
08.08.22	Mike Nash, Stn 15	LBS Builders Merchants	Voucher to be use for Pontyclun Fire Station's well-being area	£150	Y	Accepted	Submitted to the Finance Department for allocation to future spends on the station's well-being area
09.08.22	Mike Nash, Stn 15	Renishaw Charities Committee	Donation awarded by the Charity for Pontyclun Fire Station's well-being area	£2500	Y	Accepted	Submitted to the Finance Department for allocation to future spends on the station's well-being area
26.08.22	Joshua Davies, Stn 52	Susan Sparks	Cash donation whilst the crew were delivering smoke alarms	£10	Y	Accepted	Donation to be made to The Fire Fighters Charity
25.09.22	███████	Capital Radio	2 x tickets for a rugby match at Rodney Parade	£70	Y	Declined	
08.10.22	Justin Hillier, Stn 1	Member of the public	Cash donation enclosed within a thank you card for White Watch, Bridgend	£60	Y	Accepted	Will contribute towards a meal for White Watch

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FORWARD WORK PROGRAMME FOR
FINANCE, AUDIT & PERFORMANCE MANAGEMENT COMMITTEE 2022/23

Expected Date of Report	Report Name	Purpose of Piece of Work	Information /Decision	Lead Director/ Contact Officer	Progress
As required	Audit Wales Reports	To advise Members of the conclusions of Audit Wales reports and to consider the implications for the Service	D	T/ACO CS Contact Officer: Geraint Thomas	
As required	Internal Audit Progress Report & Audit Action Updates	To provide an updated position of work performed against the internal audit plan and to highlight any significant issues arising from the internal audit work performed	I	T/ACO CS Contact Officer: Lisa Mullan	
As required	Performance Report	To scrutinise specific issues of performance identified and referred by Fire Authority	I	ACFO SD Contact Officer: Sarah Watkins	
As required	Statistics Report	To scrutinise specific statistics or trends as identified and referred by the Fire Authority	I	T/ACO CS Contact Officer: Sarah Watkins	
25 July 2022	Revenue Outturn	To advise on total revenue expenditure for the year against the set revenue budget following the year end and to explain variations and impact on reserves	D	Treasurer Contact Officer: Lisa Mullan	Completed

FAPM/FWP 2022/23 – Updated 17.02.23

Expected Date of Report	Report Name	Purpose of Piece of Work	Information /Decision	Lead Director/ Contact Officer	Progress
25 July 2022	Capital Outturn	To advise on total capital expenditure for the year against the set capital budget following the year end and to explain variations	D	Treasurer Contact Officer: Lisa Mullan	Completed
25 July 2022	Audit Wales Audit Plan 2022	To advise Members of the work set out by Audit Wales to be undertaken during 2022	I	T/ACO CS Contact Officer: Lisa Mullan	Completed
25 July 2022	Audited Statement of Accounts	To advise Members of the content of the Audited Statement of Accounts	I	Treasurer Contact Officer: Lisa Mullan	Completed
25 July 2022	Audit Accounts report (ISA 260 Report)	To advise Members of the content of the Auditor General's ISA 260 report including the final letter of representation, proposed audit opinion and corrections/recommendations	I	Treasurer Contact Officer: Lisa Mullan	Completed
10 Oct 2022	Medium Term Financial Strategy Update, Reserves Strategy and Revenue & Capital Budget Setting Report	To update Members on the MTFS to inform and influence the budget setting process to meet the Service's requirements for the following financial year	D	Treasurer Contact Officer: Lisa Mullan	Completed

Expected Date of Report	Report Name	Purpose of Piece of Work	Information /Decision	Lead Director/ Contact Officer	Progress
10 Oct 2022	Revenue Monitor	To provide an update on revenue expenditure against the revenue budget for the year	D	Treasurer Contact Officer: Lisa Mullan	Completed
10 Oct 2022	Capital Monitor	To provide an update on capital expenditure against the capital budget for the year	D	Treasurer Contact Officer: Lisa Mullan	Completed
10 Oct 2022	Treasury Management Outturn Report	To advise on performance against the treasury management policy and strategy following financial year end	I	Treasurer Contact Officer: Lisa Mullan	Completed
10 Oct 2022	Health Check of Priority Actions and Q1 progress against the Statutory PI's	To scrutinise progress of the Service's Priority Actions and statutory PI's as at the end of Q1	I	T/ACO CS & ACFO SD Contact Officer: Sarah Watkins	Completed
10 Oct 2022	Audit Wales Final Audit Letter	To advise on conclusion of financial audit	I	Treasurer Contact Officer: Lisa Mullan	Completed
5 Dec 2022	Revenue Monitor	To provide an update on revenue expenditure against the revenue budget for the year	D	Treasurer Contact Officer: Lisa Mullan	Completed

Expected Date of Report	Report Name	Purpose of Piece of Work	Information /Decision	Lead Director/ Contact Officer	Progress
5 Dec 2022	Capital Monitor	To provide an update on capital expenditure against the capital budget for the year	D	Treasurer Contact Officer: Lisa Mullan	Completed
5 Dec 2022	Revenue & Capital Budget Setting Update Report	To assist in determining the appropriate revenue & capital budget required to meet the Service's requirements for the financial year	D	Treasurer Contact Officer: Lisa Mullan	Completed
5 Dec 2022	Treasury Management Interim Report	To update Members on treasury management activity during the year to date	I	Treasurer Contact Officer: Lisa Mullan	Completed
5 Dec 2022	Audit & Plan Scheme Updates	To seek Members' views upon the progress of Audit & Plan Scheme Actions	I	ACO CS Contact Officer: Sarah Watkins	Completed
~~5 Dec 2022~~ 13 March 2023	Annual Audit Plan Financial Audits	To advise Members of the proposed timetable for financial audits in the forthcoming audit year	I	Treasurer Contact Officer: Lisa Mullan	On agenda
13 March 2023	Treasury Management Strategy Report	To secure Members' approval to the adoption of the Treasury Management Strategy for the following financial year	D	Treasurer Contact Officer: Lisa Mullan	On agenda

FAPM/FWP 2022/23 – Updated 17.02.23

Expected Date of Report	Report Name	Purpose of Piece of Work	Information /Decision	Lead Director/ Contact Officer	Progress
13 March 2023	Draft Annual Report of the Work of the FAPM Committee and the Discharge of the Terms of Reference of the Finance, Asset & Performance Management Scrutiny Group	To consider the draft report on the annual work of the Committee before its submission to the Fire Authority and to ensure the Authority has efficient use of resources and robust procedures in place to ensure and manage this	D	Chair of FAPM & ACO CS Contact Officer: Sarah Watkins	On agenda
13 March 2023	Internal Audit Programme	To outline the planned internal audit coverage for the financial year and to seek comment and approval	D	ACO CS Contact Officer: Lisa Mullan	On agenda
13 March 2023	Revenue Monitor	To provide an update on revenue expenditure against the revenue budget for the year	D	Treasurer Contact Officer: Lisa Mullan	On agenda
13 March 2023	Capital Monitor	To provide an update on capital expenditure against the capital budget for the year	D	Treasurer Contact Officer: Lisa Mullan	On agenda
13 March 2023	Health Check of Priority Actions and Q3 progress against the Statutory PI's	To scrutinise progress of the Service's Priority Actions and statutory PI's as at the end of Q3	I	ACO CS & ACFO SD Contact Officer: Sarah Watkins	On agenda

Expected Date of Report	Report Name	Purpose of Piece of Work	Information /Decision	Lead Director/ Contact Officer	Progress
13 March 2023	Internal Audit Annual Report	To provide an opinion on the adequacy and effectiveness of risk management, control and governance processes based on the internal audit work undertaken during the financial year. This will support the statement of internal control.	I	ACO CS Contact Officer: Lisa Mullan	On agenda
13 March 2023	Corporate Departmental Risk Register	To seek Members' views upon the Corporate Departmental Risk Register	I	ACO CS Contact Officer: Wayne Thomas	On agenda
13 March 2023	Register of Gifts and Hospitality	To advise Members of gifts and hospitality accepted and declined by Members and Officers during the year	I	ACO CS Contact Officer: Sarah Watkins	On agenda
13 March 2023	ICT Cyber Security Response	To update Members on the Service's response to the Audit Wales report on Learning from Cyber-Attacks		ACFO TS Contact Officer: Chris Williams	On agenda

**To consider any items of business that the Chairperson deems urgent
(Part 1 or 2)**

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PART II

Exclusion of the Press and Public
Information included in the following item is not for publication by virtue of paragraphs 12 and 13 of Part 4 of Schedule 12A, Local Government Act 1972.

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**ICT Cyber Security Response
-
Presentation on the day**

Report presented by: Chris Williams, Head of ICT

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1.   Apologies for Absence

2.   Declarations of Interest

      Members of the Fire & Rescue Authority are reminded of their personal responsibility to declare both orally and in writing any personal and/or prejudicial interest in respect of matters contained in this agenda in accordance with the provisions of the Local Government Act 2000, the Fire & Rescue Authority's Standing Orders and the Members Code of Conduct.

3.   Chairperson's Announcements

4.   To receive the minutes of;

REPORTS FOR DECISION

REPORTS FOR INFORMATION

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