COMMISSIONERS FOR FIRE & RESCUE SERVICE

Papers for the Finance and Audit Committee to be held on:

Friday 19 April 2024, 1100hrs

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

Please ensure you join the meeting 15 minutes prior to meeting time

**Any issues please contact
01443 232000 and ask for Member Services**

A G E N D A

1. Apologies for Absence

2. Declarations of Interest

    Commissioners 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 South Wales Fire and Rescue Authority (Exercise of Functions) (Wales) Directions 2024 and the Local Government Act 2000.

3. Chairperson's Announcements

    REPORTS FOR DECISION

    REPORTS FOR INFORMATION

Signature of Monitoring Officer:

MEMBERSHIP

Commissioners:

C	Foulkes
V	Randeniya
Baroness	Wilcox
K	Williams

THIS REPORT IS NOT EXEMPT AND IN THE PUBLIC DOMAIN

SOUTH WALES FIRE & RESCUE SERVICE   AGENDA ITEM NO 4
                                               18 APRIL 2024

FINANCE AND AUDIT COMMITTEE

REPORT OF THE ACFO TECHNICAL SERVICES

COMMUNITY SAFETY FUNDING 2024 – 2025

THIS REPORT IS FOR DECISION

REPORT APPROVED BY ACFO BRIAN THOMPSON
PRESENTING OFFICER ACFO TECHNICAL SERVICES BRIAN THOMPSON

SUMMARY

The Deputy Minister announced that grants to the Fire Authority would be changing this year.

The revenue grant funding is being reduced in community fire safety programmes and the loss to South Wales Fire and Rescue Service equates to £167k, with this funding directly impacting on the Arson Reduction Grant of £107k and the Innovations Grant of £60k.

RECOMMENDATIONS

1. That Commissioners for SWFRS agree to support funding of £20k for 6 months, for the continuation of two distinct arson reduction activities impacted by the loss of grant funding, these being the out of hours services for Domestic Violence and Cylinder Retrieval.

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1   BACKGROUND

1.1   South Wales Fire and Rescue Service's ongoing commitment to prevention and protection is pivotal in maintaining South Wales as a safe place to live and work, forming the cornerstone for building resilient communities and ensuring the safety and well-being of all residents.

1.2   Community safety activities have been integral to the SWFRS mission for many years, with the first Community Safety Strategy published in September 2000. This commitment was further reinforced by the enactment of the Fire and Rescue Services Act 2004, which placed a statutory duty on Fire and Rescue Services to promote community safety and prevention initiatives.

1.3 Community safety encompasses a broad spectrum of activities, including Home Fire Safety, Road Safety, Water Safety, Fire Crime, and Youth Engagement, all addressing various threats, risks, and harms that may impact other partners and agencies. Effective prevention measures significantly reduce the need for emergency response interventions.

1.4 Welsh Fire and Rescue Services face a reduction of £457k from the previous £848k, resulting in the cessation of the Arson Reduction program (£387K) and other smaller savings, including funding for the secondment of an Occupational Therapist to SWFRS.

1.5 This translates to a direct loss of £167k for SWFRS, impacting the Arson Reduction Grant (£107k) and the Innovations Grant (£60k).

1.6 The Innovations Grant (£60k) facilitated the secondment of an Occupational Therapist, stationed at South Wales Fire and Rescue Service Headquarters for five years. Whilst the Occupational Therapist role was located in South Wales, it was an 'all Wales' resource and the £60K was provided for the benefit of the three Welsh FRS.

1.7 The current Arson Reduction Grant funds a seconded Police Officer into SWFRS, the on call Domestic Violence (DV) service and a cylinder retrieval facility on a 365, 24/7 basis. This grant funding encompasses, salary and costs for a Police Officer, and vehicle costs, honorarium payments, and call-out expenses for community safety staff handling DV referrals and cylinder retrieval.

2. ISSUE

2.1 The Domestic Violence service plays a crucial role in mitigating arson related risks for domestic violence victims. Upon notification of arson threats or attacks, the Fire Crime Unit practitioner will provide target hardening measures for the premises. This can include installing a letter box guard that prevents lit materials being pushed through doors, as well as conducting a comprehensive home fire safety check.

2.2 The cylinder retrieval scheme improves firefighter and community safety through the collection of carelessly discarded cylinders, that could cause significant injuries to both staff and the public if they became involved in fire.

2.3 On average SWFRS are carrying out 817 Domestic Violence referrals and removing 60 discarded cylinders per annum. The cost for these safety activities is approximately £40k per annum. The breakdown reveals £22,682 allocated for honorariums among five individuals, accompanied

by £11,599 for call-out payments and £6,231 for expenses related to two on call vehicles.

PROPOSAL

2.4 Temporary financial support is sought from reserves to sustain the two affected Community Safety services - Domestic Violence and cylinder retrieval out-of-hours service, for a period of six months.

The Police Officer and Occupational Therapist's responsibilities and roles will be assimilated into the current Community Safety structure and will form part of a wider Community Safety review, initiated by the ACFO for Technical Services.

2.5 The review aims to identify an efficient approach to integrate the Domestic Violence and cylinder retrieval activities within the existing budgets of the Community Safety department. It will explore alternative solutions for out-of-hours cylinder retrieval and Domestic Violence security measures, using available on-duty resources. Additionally, a fire crime practitioner will attend during the next working day.

3. IMPLICATIONS

3.1 **Community and Environment**

3.1.1 While the loss of Welsh Government grants for Arson Reduction and Innovation poses initial challenges, six months of support will enable a comprehensive review, ensuring sustainable and cost-effective community safety activities that deliver quantifiable value for money.

3.1.2 *Well-Being Of Future Generations (Wales) Act.*
The absence of a 365, 24/7 response to Domestic Violence and cylinder retrieval may heighten fire-related risks while reducing specialised support for domestic violence victims, thereby impacting the objectives of the Well-being of Future Generations Act.

3.1.3 *Socio Economic Duty.*
This may exacerbate socio-economic inequalities by disproportionately affecting vulnerable individuals/communities, impeding efforts to promote equality and well-being across society.

3.1.4 *Safeguarding.*
Loss of services may reduce timely support and intervention for individuals experiencing domestic violence, potentially increasing vulnerability. Moreover, the inability to retrieve cylinders outside

regular hours may impact on firefighter safety and compromise public safety.

3.2 **Resources, Assets and Delivery**

3.2.1 The total cost to sustain the Domestic Violence service and cylinder retrieval out of hours schemes will be £20k for a 6-month period. No additional assets will be required to deliver this.

4   EVALUATION & CONCLUSIONS

4.1 Initially, the loss of Welsh Government grants presents significant challenges in integrating key activities within the community safety structure. However, these challenges can be effectively mitigated through temporary funding for a six-month period. With the support of the Commissioners in agreeing to this temporary funding for two critical areas, this time will be utilised to conduct a thorough review. This review will enable the absorption these activities to be absorbed into the current structure and budgets. Ultimately, this approach ensures that firefighters and vulnerable members of the community are not exposed to any adverse or increased risks, or the loss / reduction of a service.

4.2 The ACFO for Technical Services will monitor the progress of the community safety review and will report to the CFO and Commissioners at timely intervals.

5   RECOMMENDATIONS

5.1 That Commissioners for SWFRS agree to support funding of £20k for 6 months, for the continuation of two distinct arson reduction activities impacted by the loss of grant funding, these being the out of hours services for Domestic Violence and Cylinder Retrieval.

Contact Officer: Mike Wyatt Area Manager Risk Reduction	Brian Thompson ACFO Technical Services	
Background Papers	**Date**	**Source / Contact**
None		

Appendices	
None	

THIS REPORT IS NOT EXEMPT AND IN THE PUBLIC DOMAIN

SOUTH WALES FIRE & RESCUE SERVICE   AGENDA ITEM NO 5
                                                                   18 APRIL 2024

FINANCE AND AUDIT COMMITTEE

REPORT OF ASSISTANT CHIEF OFFICER CORPORATE SERVICES

REVENUE MONITORING REPORT 2023/24

THIS REPORT IS FOR DECISION

REPORT APPROVED BY ASSISTANT CHIEF OFFICER CORPORATE SERVICES
REPORT PRESENTED BY ASSISTANT CHIEF OFFICER CORPORATE SERVICES GERAINT THOMAS

SUMMARY

The Revenue Monitoring Report provides details of the Annual Revenue Budget and associated information for the year ending 31 March 2024.

RECOMMENDATIONS

1. That the Commissioners for South Wales Fire and Rescue Service note and agree the report content.

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1   BACKGROUND

1.1   This report provides an update on significant changes affecting the revenue budget since the Finance, Audit and Performance Management (FAPM) Committee held on 4 December 2023.

1.2   Appendix 1 details the original and revised budgets, transactions to date, the forecast 31 March 2024 position and variance analysis. Monitoring information is inclusive of grant transactions to provide a full financial picture.

1.3   Appendix 2 charts budget variances reported throughout the year at each Finance Committee date.

1.4   The reserves statement at Appendix 3 presents the impact on useable reserves and the forecast, year-end position.

1.5   Appendix 4 details grant funded initiatives and the impact on the revenue budget.

2 ISSUE / PROPOSAL

2.1 Since previous reporting there has been a £493k decrease in the forecast overspend on the revenue budget, from £1.325 million to £832k. This comprises an increase of £184k in employee related spending, offset by a reduction of £622k in other areas in addition to a further £55k of grant funding. Included within these figures is a £118k overspend on grant funded initiatives and this is detailed in Appendix 4 below.

2.2 The following highlights the most significant changes.

2.2.1 EMPLOYEE COSTS - £184k Increase in Overspend

- Employee costs have been updated to reflect the agreed pay award for green book pay staff which saw an increase of £1,925 across all pay scales, (pro-rata for part time staff). Forecasts have been realigned to reflect current staffing levels, agreed pay awards and the cost of implementing Phase 1 and 2 salaries of the new modulated pay awards for on call duty system (OCDS) personnel.

- Ill health retirement forecasts have increased by £96k due to additional retirements and injury allowances.

- Externally funded employee costs are forecast to increase by £35k over and above grant streams.

- Offsetting the above is a £96k decrease in forecast employer pension costs, £78k relates to fire pensions and £17k to Local Government (LGPS). These are due to the number of retirements and leavers being greater than previously forecast.

- Travel and subsistence costs have also decreased by a net £23k despite accommodation costs for training courses increasing by £12k. This is because the 2022/23 industrial action estimates from the Ministry of Defence were less than accrued.

2.2.2 PREMISE COSTS - £20k Increase in Overspend

- Energy costs are anticipated to increase by a further £70k following realignment of forecasts with actual costs received to date. An underspend of £46k in building repair and maintenance budget has offset a portion of the above increase.

2.2.3 **TRAINING COSTS - £104k Increase in Underspend**

- A £68k reduction in training costs has been identified due to courses being rolled into 2024/25, in addition to in-house training replacing what would have been sourced from external providers.

- £10k was set aside for course accommodation costs which are no longer required.

2.2.4 **SUPPLIES AND SERVICES - £377k Increase in Underspend**

- The most significant area of change is within Information Technology, with a reduction of £220k in forecast spending. Support and maintenance charges are anticipated to be £138k less than budgeted due to agreements ending and / or replaced by a more economical alternative. Costs of £92k reported earlier in the year for equipment purchases related to the implementation of the streaming solution to support the Local Government Election Bill, have reduced by £54k for this financial year. In addition, Joint Control recharge costs from South Wales Police are forecast to be £27k less than budget.

- Furniture costs have decreased by £71k due to both fewer kitchen appliances etc needing to be replaced and with the purchase of chairs planned for Joint Control no longer being required due to a 'repair and replace' programme being maximised.

- A review and update to licences and subscription costs has reduced the forecast by £36k.

- Due to a Personal Protective Equipment (PPE) audit on station in relation to retirees and leavers, costs are now forecast to decrease by £25k. More work needs to be completed in relation to reactive clothing and PPE costs and will commence in the new year.

- A £10k reduction of costs within various external funding headings is also anticipated.

2.2.5 **TRANSPORT - £34k Increase in Underspend**

- The reduction in number of lease cars has seen a decrease of £26k due to fewer officer leases being renewed. This has also

had an impact on replacement lease car costs, i.e. tyres, which are anticipated to be £10k less.

2.2.6 CONTRACTED SERVICES - £197k Increase in Overspend

- A further £156k has been incurred in relation to work undertaken by Blake Morgan Solicitors relating to the Independent Culture Review, which will be met from reserves.

- HR Consultancy costs have increased by a further £36k for external investigative work due to insufficient internal resources and an increase in cases arising from historical complaints.

- The annual Service Level Agreement for the provision of Pension Services by RCT has increased by £24k in excess of the budget set.

- The above costs have been offset by a £18k reduction within external funding spends.

2.2.7 CAPITAL COSTS - £284k Increase in Underspend

- This is due to a reduction in capital financing costs, i.e. the minimum revenue provision (MRP), because of a decrease in forecast capital expenditure for the year, primarily due to the underachievement of the vehicle replacement plan for 2023/24. More detail is provided in the capital monitoring report.

2.2.8 INCOME - £95k additional

- Additional grant funding of £55k has been confirmed since previous reporting and changes are as follows:

  - Merseyside FRS secondment – £31.7k to cover extended secondment period.
  - NFCC secondment – £1k
  - FF Apprentices – £16.4k
  - Cyber Training – £6k

- Bank interest receivable has increased by £73k based on amounts currently held in deposit.

- A £19k reimbursement from Mid and West Wales Fire Rescue Service (MWWFRS) for community safety hardware has been received.

- Offsetting the above is a lower estimate of recharge income derived from shared costs with MWWFRS as part of our joint control arrangement.

3 IMPLICATIONS

3.1 An overall projected overspend on the revenue budget equating to £832k, with £573k to be transferred from reserve funding which has been set aside for agreed spend and outlined in the supporting appendices.

3.1.1 Community and Environment

- The revenue budget pays for the running costs of South Wales Fire and Rescue Service and these include response, protection and education work with our communities.

3.1.2 Regulatory, Strategy and Policy

- The Combination Scheme Order 1995 sets out how the Service will be funded and CIPFA codes of practice set out expectations for financial management of public finances.

3.1.3 Resources, Assets and Delivery

- Explanations are set out above and within the body of this report.

4 EVALUATION & CONCLUSIONS

4.1 The overall net revenue expenditure for year is forecast at £92.9million, this includes the costs of running grant funded initiatives. Local Authority funding for the year and grants, equate to £89.4million and £2.7 million respectively, resulting in a £832k overspend. £573k has been set aside from reserves to support identified areas of one-off spend and are detailed in Appendix 3.

5 RECOMMENDATIONS

5.1 That the Commissioners for South Wales Fire and Rescue Service note and agree the report content.

Contact Officer: Lisa Mullan Head of Finance, Procurement & Property	Geraint Thomas Director of Corporate Services	
Background Papers	**Date**	**Source / Contact**
Capital Monitoring Report	2023/24	Head of Finance, Property & Procurement

Appendices	
Appendix 1	Revenue Monitoring 2023/24 (18.04.2024)
Appendix 2	Revenue Variances to Date 2023/24 (18.04.2024)
Appendix 3	Reserve Statement 2023/24 (18.04.2024)
Appendix 4	Grant Monitoring Report 2023/24 (18.04.2024)

REVENUE MONITORING 2023/24
Appendix 1
Revenue Monitoring 2023/24 (18.04.2024)

SOUTH WALES FIRE & RESCUE SERVICE BUDGET MONITORING 2023/24	Original Budget 2023/24 £	Revised Budget (vired budget) 2023/24 £	Original Revenue Grant Funding 2023/24 £	Total Revenue Budget 2023/24 £	Actual Spend at 22.01.24 £	Revenue Forecast at 31.03.24 £	Over/Under Spend Against Revised Budget £	Over/ Under Spend %
Employee Costs								
Salaries, NI & superann.	67,421,592	67,421,592	1,237,393	68,658,985	57,168,577	69,153,465	-494,481	-0.6%
Pensions (ill health)	856,062	856,062	0	856,062	604,775	1,025,146	-169,083	-0.2%
Travel and Subsistence	426,000	426,000	2,225	428,225	267,328	403,899	24,326	0.0%
Total Employee Costs	**68,703,654**	**68,703,654**	**1,239,618**	**69,943,272**	**58,040,679**	**70,582,510**	**-639,238**	**-0.7%**
Premises Related Expenses	6,336,855	6,344,091	0	6,344,091	4,667,489	7,130,722	-786,631	-0.9%
Training Expenses	1,776,112	1,770,496	47,805	1,818,301	364,811	1,670,959	147,342	0.2%
Supplies & Services	5,755,273	5,754,395	1,034,113	6,788,508	5,439,503	6,596,819	191,689	0.2%
Transport Related Expenses	1,619,040	1,619,040	29,285	1,648,325	1,228,163	1,574,688	73,637	0.1%
Third Party Payments (Contracted Services)	1,152,085	1,151,343	114,856	1,266,199	1,294,604	1,839,204	-573,005	-0.6%
Capital costs / leasing	5,069,223	5,069,223	0	5,069,223	571,602	4,822,128	247,095	0.3%
Contingency	0	0	0	0	0	0	0	0.0%
Total Expenditure	**90,412,242**	**90,412,242**	**2,465,677**	**92,877,919**	**71,606,851**	**94,217,029**	**-1,339,110**	**-1.5%**
Income								
Employee Related	-201,687	-201,687	0	-201,687	-48,788	-49,038	-152,649	-0.2%
Lease Car Contributions	-100,500	-100,500	0	-100,500	-67,457	-79,893	-20,607	0.0%
Co-Location Re-imbursement	0	0	0	0	0	0	0	0.0%
Other Income	-734,576	-734,576	0	-734,576	-874,922	-1,150,956	416,379	0.5%
Total Income	**-1,036,763**	**-1,036,763**	**0**	**-1,036,763**	**-991,166**	**-1,279,887**	**243,124**	**0.3%**
NET BUDGET / FORECAST 2023/24	**89,375,478**	**89,375,478**	**2,465,677**	**91,841,156**	**70,615,685**	**92,937,142**	**-1,095,987**	**-1.2%**
Local Authority Contributions	-89,375,478	-89,375,478	0	-89,375,478	-74,479,562	-89,375,478	0	0.0%
External Funding (WG)	-2,465,677	0	-2,465,677	-2,465,677	-1,616,001	-2,729,915	264,238	0.3%
			OVERALL REVENUE OVER / UNDERSPEND				**-831,748**	

Key	
	Overspend
	Underspend

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REVENUE MONITORING 2023/24
Appendix 2
Revenue Variances to Date 2023/24 (18.04.2024)

SOUTH WALES FIRE & RESCUE SERVICE

REVENUE BUDGET MONITORING 2023/24

	Original Budget 2023/24 £	Original Revenue Grant Funding 2023/24 £	Revised Overall Budget (inc vired budget) 2023/24 £	Forecast 18.09.23 £	Forecast 04.12.23 £	Forecast 04.03.24 £	* Variance at1 8.09.23 to Revised Budget	** Variance at 04.12.23 to 18.09.23	*** Variance at 18.04.24 to 04.12.23	Cumulative Variances against Revised Budget	Summary on variances previoulsy reported
Employee Costs											* Grey Book pay awards increased to 5% against 3% budgeted
Salaries, NI & superann.	67,421,592	1,237,393	68,658,985	69,017,017	69,043,560	69,153,465	-358,032	-26,543	-109,905	-494,481	Increase to Ill Health retirements against budgeted
	67,421,592	1,237,393	68,658,985	69,017,017	69,043,560	69,153,465	-358,032	-26,543	-109,905	-494,481	** Green Book pay award at £1,925 and agreed Gold Book pay award included, also reflected in Pensions
Pensions (ill health)	856,062	0	856,062	976,782	928,726	1,025,146	-120,719	48,056	-96,420	-169,083	
Travel and Subsistence	426,000	2,225	428,225	434,468	426,673	403,899	-6,243	7,795	22,774	24,326	
Total Employee Costs	68,703,654	1,239,618	69,943,272	70,428,267	70,398,959	70,582,510	-484,995	29,308	-183,551	-639,238	
Premises Related Expenses	6,336,855	0	6,343,896	7,258,090	7,111,161	7,130,722	-914,194	146,928	-19,560	-786,826	* Increasing energy and Airwave costs due to inflation since budget setting ** Works identified as Capital (Salix funded)
Training Expenses	1,776,112	47,805	1,820,326	1,790,795	1,774,664	1,670,959	29,531	16,131	103,705	149,367	* Reallocation of budget to Supplies & Services ** Fewer courses to be undertaken than budgeted
Supplies & Services	5,755,273	1,034,113	6,785,937	6,886,655	6,973,552	6,596,819	-100,718	-86,897	376,733	189,118	* External Funding overspends, budget reallocation and equipment charges to be met from reserves ** Increase to External Funding overspends
Transport Related Expenses	1,619,040	29,285	1,648,325	1,683,034	1,608,576	1,574,688	-34,709	74,458	33,888	73,637	* Increases to fuel costs since budget setting ** Decrease in fuel forecasts due to introduction of electric service vehicles, fewer lease cars held and reduction in fuel costs
Third Party Payments (contracted services)	1,152,085	114,856	1,266,941	1,409,063	1,642,304	1,839,204	-142,123	-233,240	-196,900	-572,263	* Increase to Consultancy charges, increase to audit charges due to inflation and consultancy charges to be met from reserves in relation to Cultural Review ** Cultural review charges along with external consultancy charges
Capital costs / leasing	5,069,223	0	5,069,223	5,284,425	5,106,522	4,822,128	-215,202	177,903	284,394	247,095	* Increase in MRP forecast in line with capital reporting
Contingency	0	0	0	0	0	0	0	0	0	0	
Income	-1,036,763	-2,465,677	-3,502,441	-3,697,674	-3,915,165	-4,009,802	195,234	217,491	94,637	507,362	* Increase in bank interest rates along with course income offsetting charges within expenditure ** Additional grant funding confirmed since previously reported
CONTRIBUTION BUDGET 2023/2024	89,375,478	0	89,375,478	91,042,654	90,700,573	90,207,227	-1,667,176	342,081	493,346	-831,748	

Key
- Overspend (red)
- Underspend (black)

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REVENUE MONITORING 2023/24
Appendix 3
Reserve Statement 2023/24 (18.04.2024)

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.	-141,021	97,375	-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.	-3,094,370	-97,375 0 -327,498 731,748	-2,787,495	Carry forward reserves transferred from Managed Under Spends Equipment renewals spending transferred from reserve Cultural Review spending transferred from reserve Revenue overspend and transfer of annual joint control lease costs
Cultural Review	To meet costs across the service as part of the Independent Cultural Review process.	-340,000	327,498	-12,502	Cultural Review spending within revenue
Carbon Reduction	Costs to achieve aims set out in the Carbon Deliverly Plan 2020-2030.	-3,000,000	0	-3,000,000	Carbon Reduction spending within revenue
Equality, Diversity & Inclusion	Costs to suport the framework to promote in-house equality, diversity and good practice.	-2,000,000	0	-2,000,000	EDI spending within revenue
Equipment Renewals	To level out cost variances in the required annual provisions for replacement.	-2,000,000	48,131	-1,951,869	Equipment renewals spending within revenue
PFI Equalisation	To meet future costs of the Training Centre PFI project	-3,191,623	285,777	-2,905,846	Current figures which may change slightly with indexation
Capital Receipts	To meet costs of the capital programme. Reserve applied as receipts are generated	0	-86 86	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)	-200,000	100,000	-100,000	Annual Joint Control lease costs
TOTAL		**-16,967,013**	**1,165,656**	**-15,801,357**	

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REVENUE MONITORING 2023/24
Appendix 4
Grant Monitoring Report 2023/24 – Table (18.04.2024)

SOUTH WALES FIRE & RESCUE SERVICE REVENUE GRANT REPORTING 2023/24

	ARSON REDUCTION	HFS STOCK	YOUTH	INNOVATIONS & DIVERSIFICATION	ANTI SOCIAL BEHAVIOUR	NATIONAL RESILIENCE	MTA	USAR	FBU	NRW
Employee Costs										
Salaries, NI & superann.	32,610	0	118,981	0	38,839	315,353	88,325	241,095	49,251	44,329
Travel & Subs	0	0	1,165	0	300	9,396	2,021	112	0	0
Premises Related Expenses	0	0	0	0	0	0	0	0	0	0
Training Expenses	4,960	0	60	0	0	65,141	0	0	0	0
Supplies & Services	31,409	467,307	9,768	0	0	579,057	598	37,882	0	0
Transport Related Expenses	10,020	0	9,766	0	0	3,846	3,619	5,424	0	0
Third Party Payments (Contracted Services)	0	0	0	64,163	0	0	0	0	0	0
Total Expenditure	79,000	467,307	139,740	64,163	39,139	972,793	94,562	284,513	49,251	44,329
Other/Additional Income	0	0	0	0	0	-9,534	0	46,760	-47	-631
Grant Income	-107,748	-329,900	-116,355	-60,000	-40,085	-966,776	-94,238	-355,165	-49,204	-43,699
(Under)/Overspend to be transferred to Revenue	-28,748	137,407	23,385	4,163	-946	-3,516	324	-23,892	-0	-0

	MERSEYSIDE FRS	NFCC	HAFOD	CIRCULAR ECONOMY	FF APPRENT	CYBER TRAINING	TRAINING LAPTOPS	WAST VOLUNTEERS	CARDIFF & VALE UHB	Total
Employee Costs										
Salaries, NI & superann.	94,941	56,263	27,483	0	367,642	0	0	-3,822	-1,025	1,470,264
Travel & Subs	487	153	0	0	0	0	0	-171	0	13,463
Premises Related Expenses	0	0	0	0	0	0	0	0	0	0
Training Expenses	0	0	0	0	0	6,600	0	0	0	76,761
Supplies & Services	29	0	0	16,202	0	0	45,000	0	0	1,187,252
Transport Related Expenses	3,453	0	0	0	0	0	0	0	0	36,128
Third Party Payments (Contracted Services)	0	0	0	0	0	0	0	0	0	64,163
Total Expenditure	98,909	56,416	27,483	16,202	367,642	6,600	45,000	-3,993	-1,025	2,848,030
Other/Additional Income	-31,481	-984	0	0	-262,322	-6,000	0	0	0	-264,238
Grant Income	-67,428	-55,432	-12,526	-16,202	-105,320	-600	-45,000	0	0	-2,465,678
(Under)/Overspend to be transferred to Revenue	0	0	14,957	0	0	0	0	-3,993	-1,025	118,115

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SOUTH WALES FIRE & RESCUE SERVICE   AGENDA ITEM NO 6
                                              18 APRIL 2024

FINANCE AND AUDIT COMMITTEE

REPORT OF ASSISTANT CHIEF OFFICER CORPORATE SERVICES

CAPITAL MONITORING REPORT 2023/24

THIS REPORT IS FOR DECISION

REPORT APPROVED BY ASSISTANT CHIEF OFFICER CORPORATE
SERVICES
REPORT PRESENTED BY ASSISTANT CHIEF OFFICER, CORPORTATE
SERVICES

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 2024.

RECOMMENDATIONS

1. That Commissioners 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 4th December 2023.

1.2   Appendix 1 illustrates the necessary budget information and funding analysis for all approved capital investment plans for the current and previous financial years. Commissioners will note that budgets are phased over more than one financial year and this is referred to as slippage, a typical characteristic of capital budgets and their underpinning investment plans.

1.3   In summary, there is a total budget (2022/23 slippage & 2023/24 budget) of £16.5 million, set against this is the forecast outturn position, budget overspend and slippage of £7.2 million, £1.1 million, and £10.3 million respectively.

1.4   The following narrative supports the above position in greater detail.

2. ISSUE/PROPOSAL

2.1 **Property**

The overall budget available for property investment during the year is £10.3million. The forecast expenditure, budget overspend, and slippage are £3.1m, £379k and £7.6m respectively and the individual schemes contributing to this position are detailed in Appendix 1. More detail on changes that have occurred since previous reporting are provided below.

2.1.1 New Inn Station - **£88k decrease**

Commissioners will be aware that plans are in place to develop the site. This is a complex project involving the decanting of crews to a temporary location, whilst the construction of the Service's brand new, net zero carbon station is underway. Unfortunately, the temporary site is no longer available as the landowner has withdrawn due to a change in business need, although fortunately, our agents have identified a new site within the New Inn catchment area. The Operations team are running response tests to ensure the new, temporary location meets our fire cover needs.

Had the above change not occurred, we would have commenced the transfer of crews and the necessary incurring of costs for facilities on the original temporary site. As this is no longer an option, our projected spend on the project has been reduced.

The impact of this change is that approx. £50k of search and planning fees are lost and 18 months of planning and design work are in jeopardy should a new lease agreement not be signed. There is no indication the new site will be withdrawn or that there will be any difficulties and the Property team are working at pace to ensure we secure the lease within the coming weeks. A delay during this phase will impact the start of construction which is due to commence in July and continue for two years.

2.1.2 Penarth Station - **£89k decrease**

The time taken to locate a temporary building to ensure business continuity throughout the refurbishment has delayed the project by a small margin. Buildings works will commence around September 2024 and £214k of unspent budget has been slipped into the new year to progress the project.

2.1.3 On-Call Duty System (OCDS) Station Project - **£200k increase**

Ten stations were included as part of a plan to ensure our OCDS provision has the following. This is in addition to the works previously completed to improve female facilities across all of our sites.

- adequate storage for evolving personal protective equipment (PPE)
- improved energy efficiency i.e. installation of new dry room technology, air source heat pumps, green roofs, Solar PV and EV charging points
- improved lecture room and gym areas that help facilitate better learning and fitness environments

It was estimated that each station would take approx. six months to complete with a cost in the region of £750k per site.

Pontycymer was the blueprint station for this project and was completed in October 2023. This was an opportunity for learning, which could be utilised on subsequent sites.

Work on Treorchy station commenced in July 2023, and is due to complete in May 2024. The longer timeframe is due to the discovery of asbestos and the additional work to remove this and ensure safety has increased costs by £200k.

Work on Gilfach Goch station is scheduled to commence before the end of April shortly followed by Ferndale in May. The below table provides an updated overview of the plan;

	Fire Station	2023/24	2024/25	2025/26	2026/27	2027/28	2028/29
1	Pontycymmer	▓					
2	Treorchy		▓				
3	Gilfach Goch		▓				
4	Fernadale		▓				
5	Brynmawr			▓			
6	Treharris			▓			
7	Rhymney				▓		
8	Pencoed				▓		
9	Abercynon					▓	▓
10	Monmouth	Potential Co-location Project					

Note: Monmouth has not been progressed as we are awaiting a decision as to whether this will be a co-location project.

This project is on track to complete an average of 2 station sites per financial year, there are 9 stations in total indicating a 4.5 year

time horizon, i.e. project completion in 2028/29. The tenth station is in question as a potential co-location endeavour with blue light partners, although a decision has come to fruition to date.

2.1.4 Planned and Preventative - **£61k increase**

This budget heading accommodates smaller capital projects and includes the repair and replacement of station towers that has been on-going over the last two years. Station Towers form a 4 to 5 year strategy following the Property teams audit and classification as follows;

A	As New	3 Sites
B	Minor Repairs Required	8 Sites
C	Major Repairs Required	28 Sites
D	Replacement Required	5 Sites

The five sites requiring replacement were as follows.

1. Pontypridd
2. Whitchurch
3. Roath
4. Treorchy
5. Maindee

From the five station replacements identified Roath and Treorchy towers have been completed and Maindee is expected to be completed by the end of the financial year.

Other areas of work include significant roof repairs across the portfolio and the figures presented in this report include an overspend resulting from work to be undertaken at Aberdare station.

2.2 **Vehicle Replacement Programme (VRP)**

The overall budget equates to £5m, forecast expenditure is £2.5m, with £2.6m slippage currently forecast. A net overspend of £111k relates to the purchase of Detection Identification and Monitoring (DIM) and Urban Search and Rescue (USAR) vehicles which are wholly grant funded.

2.2.1 Truck (slide Deck/ Crane) - **£125k decrease**

Some spend has occurred this year although the full budget will not be used, and the remainder will be slipped into 2024/25 to accommodate delivery in the new financial year. This has been a

difficult vehicle to secure, and we have received little no response each time we have tested the market.

2.2.2 Water Ladders (WL) - **£2m decrease**

Delivery of 7 WL's has been delayed and is not expected until April/May 2024 and so the remaining budget has slipped into next financial year to accommodate final costs of completion. Commissioners may be aware that water ladders undergo a build process whereby the body and chassis are received separately and pending stowage requirements, this process is completed in stages, and when payments are made. There is a minimum timeline of 26 weeks between order and delivery of water ladders. Orders have already been placed for an additional 7 Water Ladders as part of the 2024/25 budget in the hope of securing delivery within 2024/25 bringing WL's inline with our VRP.

2.2.3 Light Utility 4WD - **£700k decrease**

The previous forecast of £700k for the purchase of 9 light utility 4WDs has changed due to the type of vehicle being unavailable from our supplier. Orders will now be placed for 4 Land Rovers with welfare facilities at £100k each, and 3 MAN 4x4s at £60k totalling £580k. Due to the timing of the decision, vehicles will not be delivered until the new financial year and the original, budget of £490k has been slipped into the new financial year to accommodate the purchases.

2.2.4 Rescue Boat - **£40k decrease**

A procurement process is ongoing that will bring this purchase back within budget, however delivery is unlikely to take place before year end and so the budget has slipped into next year.

2.2.5 Water Carrier - **£200k decrease**

The tender process has been unsuccessful and suitable suppliers have not been identified, therefore this budget has slipped into the new year when another option will be explored. The associated risks are being monitored and managed by the service fleet department.

2.2.6 Detection Identification Monitoring (DIM) vehicle **(grant funded)** - **£30k decrease**

An order has been placed for a van costing £30k less than previously forecast and is to be fully grant funded.

2.3 Operational Equipment

The £240k budget has been slipped from 2022/23 to complete an equipment refresh project focussed on road traffic collision (RTC), cutting equipment. The equipment includes a mix of hydraulic and battery-operated items and vehicle stabilisation struts. Following a procurement process actual costs exceeded the budget by £124k for this project.

Overall, the forecast expenditure is £721k, resulting in an overspend of £481k with the majority offset by £357k of grant funding for national resilience items.

2.3.1 Marauding terrorist attack (MTA) equipment contributes significantly to the above overspend. Purchases include items such as manikins, although scope has been broadened to include several high value pieces, including various substance identification units.

2.3.2 Urban Search & rescue (USAR) bio-diesel upgrade - **£38k decrease**

Spending plans have been scaled back due to the reallocation of £32k of grant funding to North Wales Fire and Rescue Service (NWFRS) to assist with the purchase of a vehicle. A further £6k has been reallocated to Mid and West Wales Fire Rescue Service (MWWFRS) to assist the upgrade. This will see a gradual upgrade of fuel tanks at our USAR sites to more sustainable bio-diesel tanks.

2.4 ICT Equipment

The overall budget is £554k and forecast spend is £359k resulting in a £161k underspend. The underspend is largely due to changes to the Backup Replacement System project following the tender process.

2.4.1 End User Computer Replacement - **£50k decrease**

Planned spend has decreased due to a reduction in the number of computers being replaced following an hardware audit and review of the remaining useful life of equipment in use.

2.4.2 Core Switch Replacement - **£19k decrease**

A reduction in forecast over spend of £19k since previous reporting is due to the continuation of the project into the new financial year. Further consultancy at a cost of £19k is required and will bring total project costs to £145k, as previously reported. As this project is overspent by £3k, there is no budget remaining to slip forward.

2.4.3 Servers & Storage Replacement - **£27k decrease**

This project has slipped into next financial year as hardware cannot be purchased due to lack of availability.

2.4.4 Wireless Access Points - **£34k decrease**

Price changes accorded to licencing options have decreased the spending forecast and resulted in a £34k underspend.

2.5   **Joint Control (co-location) - £174k decrease**

This budget relates to the Vision Hardware Refresh at our shared Joint Public Service Centre (JPSC). The costs of this project are to be split 50/50 with MWWFRS with £242k to be recharged. The decrease in forecast since last reporting is due a delay in the supplier meeting project milestones. The budget will be slipped into the new financial year to continue the project which involves a full refresh of hardware to allow the extension of Command and Control system contract.

3   IMPLICATIONS

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

A spend forecast of £7.2m and slippage of £10.3m result in a net (overspends are offset by underspends), £1.1m overspend. The gross overspend of £1.1m is offset by £165k of underspends, £515k of grant funding received after the budget was set, £242k from blue light partners for joint projects as part of co-location arrangements, and £130k of 0% finance (Borrowing from Salix). The remaining £166k is additional to the annual budget set and will be financed as part of the overall capital budget. This is analysed follows.

CAPITAL SCHEME	Over spend	Co-location Cont's	Grant Funding	0% Finance	Under spend	Addtion to budget
PONTYCLUN	-90					-90
MONMOUTH (co-location not confirmed)	-13					-13
PLANNED AND PREVENTATIVE	-100					-100
WHITCHURCH USAR (grant funded)	-46		46			0
SOLAR PANELS (Salix funded)	-130			130		0
LADDERS					1	1
DIM VEHICLE (grant funded)	-54		54			0
USAR VEHICLES (grant funded)	-58		58			0
RTC CUTTING/RESCUE TENDER EQUIPMENT	-124					-124
MTA EQUIPMENT (grant funded)	-350		350			0
HAZMAT RESPONSE UNIT EQUIPMENT (grant funded)	-5		5			0
USAR BIO-DIESEL UPGRADE (grant funded)	-2		2			0
END USER COMPUTER REPLACEMENT					50	50
BACKUP REPLACEMENT SYSTEM					80	80
CORE SWITCH REPLACEMENT	-3					-3
WIRELESS ACCESS POINTS					34	34
JOINT CONTROL (co-location)	-242	242				0
TOTAL	-1,217	242	515	130	165	-166

3.2 Community and Environment

The capital budget facilitates investment in long term assets. Most of these are located and are visible to our communities and need to be planned sustainably to support current and future service delivery and our partners.

3.3 Regulatory, Strategy and Policy

The Treasury Management Strategy Statement (TMSS) sets out affordable limits for capital investment and links the capital and revenue budgets to provide for an overview of the services finances.

3.4 Resources, Assets and Delivery

Impacts on budget are reported within the main body of this report.

4. EVALUATION & CONCLUSION

4.1 The total capital investment for the year is forecast at £7.2m and will be funded through borrowing, contributions from partners, grants, a revenue contribution, and capital receipts.

5.   RECOMMENDATIONS

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

Contact Officer:		Lisa Mullan Head of Finance, Property & Procurement	
Background Papers		**Date**	**Source / Contact**
Revenue Monitoring Report		2023/24	Head of Finance, Property & Procurement

Appendices	
Appendix 1	Capital Monitoring 2023/24 (04.03.2024)

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CAPITAL MONTORING 2023/24
Appendix 1
Capital Monitoring 2023/24 (04.03.2024)

CAPITAL PROGRAMME 2023/24	Project Total £000	SLIPPAGE B/F 2022/23 £000	2023/24 BUDGET £000	ACTUAL AS AT 22.01.24 £000	COMMITTED AS AT 22.01.24 £000	OUTTURN POSITION 31.03.24 £000	BUDGET UNDER/ OVER SPEND £000	SLIPPAGE C/F 2024/25 £000
PROPERTY								
STATION REFURBISHMENTS								
MONMOUTH (co-location not confirmed)	600	338	0	12	12	20	-13	331
NEW INN	3,800	1,848	4,000	362	1,844	412	0	5,436
PONTYCLUN	1,100	10	0	3	0	100	-90	0
PENARTH	3,250	25	250	21	0	61	0	214
ON-CALL (OCDS) STATION PROJECT	1,850	1,210	2,000	1,434	60	1,700	0	1,510
PLANNED & PREVENTATIVE MAINT	0	58	200	355	36	358	-100	0
EQUALITY, DIVERSITY & INCLUSION	0	0	400	163	11	300	0	100
WHITCHURCH USAR (grant funded)	0	0	0	23	0	46	-46	0
SOLAR PANELS (salix funded)	130	0	0	6	0	130	-130	0
	10,730	**3,489**	**6,850**	**2,380**	**1,963**	**3,127**	**-379**	**7,591**
VEHICLES								
TRUCK (SLIDE DECK / CRANE)	150	150	0	72	0	72	0	78
WATER LADDERS	3,692	1,697	1,995	1,859	1,988	1,859	0	1,833
VAN/OPS ESTATE CAR	257	73	184	3	144	257	0	0
LIGHT UTILITY 4WD	250	240	250	0	0	0	0	490
NON OP 4WD	1	26	1	27	0	27	0	0
WILDFIRE UNIT	100	0	100	0	0	100	0	0
RESCUE BOAT	30	0	30	0	0	0	0	30
WATER CARRIER	200	0	200	0	0	0	0	200
LADDERS	95	0	95	94	0	94	1	0
Detection Identification Monitoring (DIM) vehicles (grant funded)	84	0	0	0	54	54	-54	0
USAR VEHICLES (grant funded)	60	0	0	58	0	58	-58	0
	4,919	**2,186**	**2,855**	**2,114**	**2,186**	**2,521**	**-111**	**2,631**
EQUIPMENT								
RTC CUTTING/RESCUE TENDER EQUIPMENT	300	240	0	364	0	364	-124	0
MTA EQUIPMENT (grant funded)	358	0	0	139	28	350	-350	0
HAZMAT MATERIALS RESPONSE UNIT EQUIPMENT (grant funded)	0	0	0	0	0	5	-5	0
USAR BIO-DIESEL UPGRADE (grant funded)	40	0	0	0	0	2	-2	0
	698	**240**	**0**	**364**	**0**	**721**	**-481**	**0**
ICT								
WIRELESS LAN CONTROLLERS	80	27	0	24	0	27	0	0
END USER COMPUTER REPLACEMENT	450	0	150	35	22	100	50	0
BACKUP REPLACEMENT SYSTEM	30	0	80	0	0	0	80	0
CORE SWITCH REPLACEMENT	130	123	0	126	0	126	-3	0
SERVERS AND STORAGE REPLACEMENT	150	27	0	0	0	0	0	27
SERVER SOFTWARE UPGRADE	150	7	0	0	0	0	0	7
WIRELESS ACCESS POINTS	40	0	140	43	48	106	34	0
	1,030	**184**	**370**	**228**	**70**	**359**	**161**	**34**
JOINT CONTROL (co-location scheme)	675	0	310	373	270	483	-242	69
TOTAL	**17,377**	**6,099**	**10,385**	**5,459**	**4,488**	**7,211**	**-1,053**	**10,324**

FUNDING ANALYSIS	
BORROWING	6,026
CO-LOCATION CONTRIBUTIONS	255
REVENUE CONTRIBUTION	200
CAPITAL GRANT	515
SALIX FUNDING	130
CAPITAL RECEIPTS	86
	7,211

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SOUTH WALES FIRE & RESCUE SERVICE   AGENDA ITEM NO 7
                                              18 APRIL 2024

FINANCE AND AUDIT COMMITTEE

REPORT OF THE HEAD OF CORPORATE SUPPORT

REGISTER OF GIFTS AND HOSPITALITY

THIS REPORT IS FOR INFORMATION

REPORT APPROVED BY DIRECTOR CORPORATE SERVICES
PRESENTING OFFICER - DIRECTOR CORPORATE SERVICES, GERAINT
THOMAS

SUMMARY

This report provides Commissioners with an overview of the gifts and hospitality recorded on the Register of Gifts and Hospitality for the 2023 - 2024 financial year.

RECOMMENDATIONS

1. That Commissioners 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 Commissioners and staff.

1.2   The Service's Hospitality and Gifts Procedure (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 / PROPOSAL

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. Commissioners are required to disclose their personal interests and gifts and hospitality they receive in accordance with the 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 Audit / Finance Committee for inspection in accordance with good governance and this be recorded in the minutes.

2.3   It was 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 2023 - 2024 financial year 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.

3   IMPLICATIONS

3.1   **Community and Environment**

3.1.1   It is not considered that there are any issues that need addressing as the requirement to register offers of gifts and hospitality apply equally to all within the Service regardless of protected characteristics under the Single Equality Act.

3.1.2   The maintenance of the register of gifts and hospitality supports equality in the wider sense by ensuring that roles which are offered significant gifts either decline or donate for raffle to support the Fire Fighters Charity. This supports not only the charity but enables others within the service to benefit from the gifts when appropriate.

3.2   **Regulatory, Strategy and Policy**

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.

3.2.2. Compliance with the OP-05.006 Hospitality and Gifts procedure supports transparency and complies with the finding of the Risk Management Anti-Fraud Audit 2017/18. This in turn protects the Service from allegations of fraud or favouritism.

3.2.3. Compliance also supports the seven principles of public life (Nolan Principles) being Selflessness, Integrity, Objectivity, Accountability, Openness, Honesty and Leadership. Additionally, it supports the CIPFA principles of good governance being accountability, fairness,

honesty, integrity, leadership, objectivity, openness, respect and selflessness.

3.2.4. The transparency afforded by adherence to the procedure support the Morris report where greater transparency was recommended in all areas of business within the Service.

3.3 **Resources, Assets and Delivery**

3.3.1. Compliance with the OP-05.006 Hospitality and Gifts procedure protects the reputation and governance within the procurement functions of the Service across the organisation transparency and complies with the finding of the Risk Management Anti-Fraud Audit 2017/18. This in turn protects the Service from allegation of fraud or favouritism.

4 RECOMMENDATIONS

4.1 That Commissioners note the contents of the Register of Gifts and Hospitality in line with Internal Audit recommendations.

Contact Officer:	S Watkins Head of Corporate Support	
Background Papers	**Date**	**Source / Contact**
None		

Appendices	
Appendix 1	Appendix 1: REGISTER OF GIFTS AND HOSPITALITY

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REGISTER OF GIFTS AND HOSPITALITY FY 2023-2024

Date	Name	Gift Received From	Nature of Gift/ Declaration of Interest	Approx Value	MO consulted	Accepted or Declined	What happened to gift
Jan 2024	L Anthony	Supplier	Xmas Hamper containing wine	£30	DMO -YES	Accepted	To be placed in raffle for Fire Fighters Charity
Jan 2024		Member of Public	Cash donation posted at station after HFSC visit.	£10	DMO -YES	Declined	Returned to sender.
Jan 2024	K Yates	Tiny Rebel	Offer of a gift of beer from Tiny Rebal for all crews in attendance at the recent fire in Rogerstone.(via email)	unknown	DMO -YES	Declined	Offer politely declined.
Mar 2024	L. Rose	John Weavers Contractors (JWC)	Attendance at awards ceremony with supplier as customer representative for the 'Considerate Constructors Scheme'.	£75	DMO -YES	Accepted	Liam represented the Service at the awards ceremony.
Mar 2024	M. Lewis	Member of the public	Cheque	£100	DMO -YES	Declined	Unable to return to sender so shredded with witnesses.

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SOUTH WALES FIRE & RESCUE SERVICE   AGENDA ITEM NO 8
                                                          18 APRIL 2024

FINANCE AND AUDIT COMMITTEE

REPORT OF THE ACO CORPORATE SERVICES

INTERNAL AUDIT PROCESS REPORT & AUDIT ACTION UPDATE

THIS REPORT IS FOR INFORMATION

REPORT APPROVED BY ACO GERAINT THOMAS
REPORT PRESENTED BY ACO CORPORATE SERVICES

SUMMARY

This report updates Commissioners on progress being made against the Internal Audit Plans for 2022/23 and 2023/24.

RECOMMENDATIONS

1. Commissioners are asked to note the internal audit recommendations and work completed to date.

---

1   BACKGROUND

1.1   TIAA Limited have been appointed as the Authority's Internal Auditors to undertake work covered in the Internal Audit Plan 2023/24 as approved by the FAPM Committee on 13 March 2023.

1.2   The process is for final audit reports with an assurance level of substantial or reasonable, to have their recommendations only provided and reports with an assurance level of limited or no assurance to be provided in full.

2.   ISSUES

2.1   5 audits from the annual internal audit plans have been completed since previous reporting, as follows:-

- **Station Visits**
- **Budgetary Control**
- **Contract Management**
- **Collaboration – Co-location**
- **Assurance Review of 0365 Implementation**

The Internal Audit Annual report 2022/23 and Indicative Internal Audit Annual Report 2023/24 have been presented to Commissioners on 28 March 2024 and provide an overview of the plans discussed above.

2.2 **Station Visits**

2.2.1 The review considered the arrangements for complying with the organisation's financial procedures at two whole-time duty (WDS) stations and one on-call duty system (OCDS) station. The sample will include stations that are co-located with other emergency services.

2.2.2 The key findings are as follows:-

- The three sites visited were Malpas (WDS), Caerphilly (WDS) and Chepstow (OCDS) Fire Stations.
- South Wales Fire and Rescue Service policies and procedures can be accessed on-line by all staff through the Intranet.
- Health and Safety information was identified within each station; it is confirmed that all notices were prominently displayed, clear and consistent for visitors.
- Asset inventory reconciliations need to take place on stations.

2.3 **Budgetary Control**

2.3.1 The review considered the budget preparation process, the monitoring arrangements, and reporting. The scope of review included consideration of the assumptions used in preparing the budgets.

2.3.2 The key findings are as follows:-

- Appropriate arrangements are in place and operating effectively for the budget setting process.
- Appropriate and regular budget monitoring processes are in place over the capital and revenue budgets. Evidence provided and discussion with the finance team and budget holders confirmed that these are operating effectively.
- Testing performed for virements showed that processes are operating in compliance with the documented virements procedures.
- Reporting processes to the Scrutiny Committee, the Finance, Audit, and Performance Management Committee and the Fire Authority are performed in line with agreed timelines.
- Budget holders demonstrated effective use of the Collaborative Planning (CP) tool for regular budget monitoring, with support from the finance team and a user-friendly manual.

- Budget holders noted effective collaboration with the finance team in the budget setting and monitoring process, and that support and training is provided by Finance when required.

2.4 Contract Management

2.4.1 The review considered the arrangements for managing contracts within the Service and in doing so, considered the allocation of responsibility for managing contracts, relationship management and performance management, change management and payment approval arrangements

2.4.2 The key findings are as follows:-

- Sample testing identified that day-to-day management of contracts and contractor relationships is in place but there is a need to implement formal contract management meetings and performance management structures.
- Formal arrangements to meet with the contractor or supplier to discuss delivery of the contract need to be implemented as a standard practice.
- Routine recommendations and Operational Effectiveness Matter recommendations have been made to support the service to develop its contract management arrangements.
- The Essentials of Contract Management' document has been produced as a collaboration between the three Welsh Fire and Rescue Services.

2.5 Collaboration Co-Location

2.5.1 The review considered the arrangements to manage the co-location contracts and agreements in place and to include allocation of responsibility and charging and payment arrangements. The Joint Control Room will be included within the agreements reviewed.

2.5.2 The key findings are as follows:-

- Contracts in the form of licences, agreements, or memorandums of terms of occupation are in place between South Wales Fire and Rescue Service and partners which define responsibilities and charging and payment arrangements.
- The Service is currently working on a standard contract template and charging mechanism.
- Governance arrangements are in place for monitoring existing and new co-location proposals and delivery is

aligned to the Service's Strategic Plan and associated performance management framework.

- Codes of Conduct have been established between the Service and partners at co-location sites.

2.6 Assurance Review of M365 Implementation

2.6.1 The review considered the project management arrangements in place for implementation of Microsoft 365 within South Wales Fire and Rescue Service.

2.6.2 The key findings are as follows:-

- Some benefits of the project including implementation of new, agile, and more efficient technology have been realised. However, the collaboration with partners that are part of the project and several other deliverables have not been completed to date.
- The project was to be completed in two years and scheduled to be finished in March 2023. It has been extended until January 2024.
- Modifications to the project plans including changes to Microsoft licencing have been made which resulted in increased costs compared to the original estimate.
- The organisation has not formally assessed the risks associated with this project and has not formally approved / signed off the completion of the project activities and transfer to business-as-usual position.
- A strategic board has been established to oversee and manage the project and included representatives from executive leadership and senior leadership teams.

3 IMPLICATIONS

3.1 The auditors' findings and recommendations have been provided in individual audit reports. A mandatory response is required from management outlining how, when and who is responsible for improvements arising.

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 Commissioners are asked to note the internal audit recommendations and work completed to date.

Contact Officer: Lisa Mullan Head of Finance, Procurement & Property	Geraint Thomas ACO Corporate Service	
Background Papers	**Date**	**Source / Contact**
Title: none		
Title: none		

Appendices	
Appendix 1	Station Visits
Appendix 2	Budgetary Control
Appendix 3	Contract Management
Appendix 4	Collaboration – Co-location
Appendix 5	Assurance Review of 0365 Implementation

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Internal Audit

FINAL

South Wales Fire and Rescue Service

Compliance Review of Station Visits

2023/24

Executive Summary

OVERALL ASSESSMENT

REASONABLE ASSURANCE

SUBSTANTIAL ASSURANCE
REASONABLE ASSURANCE
LIMITED ASSURANCE
NO ASSURANCE
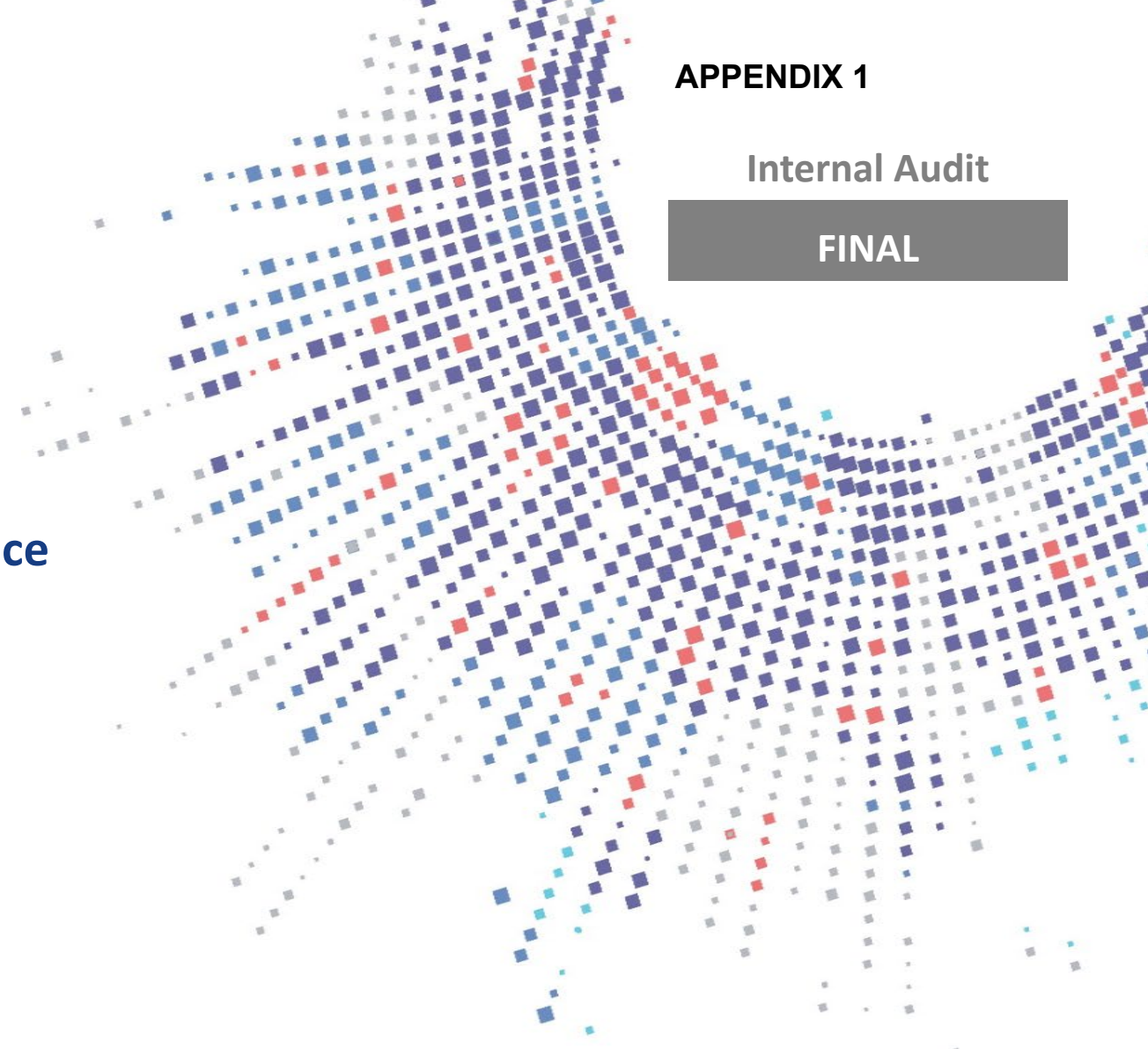
ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Compliance checks were carried on a range of financial and non-financial aspects of the operation of the stations.

KEY STRATEGIC FINDINGS

The three stations visited were: Malpas Fire Station, Caerphilly Fire Station and Chepstow Fire Station.

South Wales Fire and Rescue Service Policies and Procedures can be accessed on-line by all staff through the Intranet.

Health and Safety information was identified within each station; it is confirmed that all notices were prominently displayed, clear and consistent for visitors.

Asset inventory reconciliations need to take place on stations.

GOOD PRACTICE IDENTIFIED

No additional areas of good practice were noted as being implemented since the last review.

SCOPE

The review has considered 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.

ACTION POINTS

Urgent	Important	Routine	Operational
0	1	0	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	A sample of assets was selected and checked against the asset inventory for all three Fire Stations. It was noted that the asset inventory list did not reflect all assets within the Fire Stations. For example, items such as desks and televisions were found to be present on station but not recorded on the asset inventory, and which upon inspection were found to have asset labels attached. The Group Manager is aware of the need to rectify the asset management inventory.	The assets held at all Fire Stations be periodically reconciled to asset inventories.	2	OAST to liaise with property to explore asset recording processes for all fire stations. Conduct a review to ensure all assets are identified and recorded with a timely annual audit to ensure all information is updated.	01/04/2024	GM M Evans

Operational - Effectiveness Matter (OEM) Action Plan

Ref	Risk Area	Finding	Suggested Action	Management Comments
No Operational Effectiveness Matters Identified.				

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	-	-
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	1	-

Other Findings

A review of Malpas, Caerphilly and Chepstow Fire Stations were undertaken for the arrangements for complying with the organisation's financial procedures at two whole-time stations and one retained duty system station.

All South Wales Fire and Rescue Service policies and procedures are available to staff on the Intranet.

Other Findings

🔍 Staff members are notified of any updates to policies and procedures through operational bulletins and notifications on 'pdrPro.' Access to IT systems is restricted until operational bulletins have been read.

🔍 The service's Operations Audit and Support Team have carried out their own audits across the service's Fire Stations. Recommendations arising from these audits are monitored on BMIS and reported to the Finance, Audit & Performance Management Committee on an annual basis.

🔍 Health and Safety information was identified within each Fire Station, and it is confirmed that all notices were prominently displayed, clear and consistent for visitors.

🔍 No records of Legionella, Electrical, or Gas safety tests were kept in the visited Fire Stations; it was noted that these are held centrally by the Property Services department.

🔍 First aid boxes were readily available to staff within each Fire Station. All items at each station visited were within date. There is a policy detailing the contents of first aid boxes available on the intranet.

🔍 It was confirmed that up-to-date safety record books were in place at each Fire Station including Fire Alarm Systems tests, Emergency lighting Systems Tests, Fire Equipment, Staff List (Contact information), Emergency Contacts (services), Fire Safety (alarms testing) and Fire extinguisher monthly checks.

🔍 A sample of assets was selected and checked against the asset inventory for all three Fire Stations. It was noted that the asset inventory list did not reflect all assets within the Fire Stations. For example, items such as desks and televisions were found to be present on station but not recorded on the asset inventory, and which upon inspection were found to have asset labels attached. The Group Manager is aware of the need to rectify the asset management inventory (Recommendation 1 refers).

🔍 Any accidents are recorded by the Station Commander along with the Health and Safety department. An investigation is undertaken by the Station Commander unless a potential conflict of interest exists, in which case the Station Commander of a neighbouring Fire Station will undertake the investigation. The recording of accidents was up to date at each Fire Station visited.

🔍 Inspection of fire blankets and fire extinguishers confirmed that fire blankets were available in each Fire Station's kitchen and fire extinguishers had servicing dates of January 2023, and were therefore in date.

Other Findings

A physical inspection of each Fire Station confirmed that no fire exits were locked or blocked during the visits to each station.

All Station Commanders are provided with training upon promotion to their role. Training is provided through pdrPro, which monitors the Station Commander's training and that of their staff.

The Station Managers were all aware of the policies and procedures for the management of leave and overtime.

All overtime is completed on an electronic F15 overtime form which is sent to the Station Commander via e-mail. The Station Commander electronically signs the form and then forwards it to the Payroll overtime e-mail address and this is accepted as the authorisation process for authorising the overtime. Rappel, the Service's duty resource management system, has a live feed of staff availability, including sickness absence and leave. Staff can be allocated to specific places when staff numbers are lower than required. No issues were identified with the rostering process for the three Fire Stations.

The Station Managers were all aware of the policies and procedures for the management of sickness absence.

All sickness is recorded via an online reporting system and is recorded by either the Watch Manager or the Crew Manager. A return-to-work form is completed electronically with a return-to-work interview taking place when staff members return to work after a period of sickness absence. The forms used for sickness absence include P55 - sickness notification form, P56 - welfare check form, P57 – one-to-one return to work form and P59 - return to work interview form. In addition, staff absences are monitored centrally to identify any potential trends and the possible requirement for retraining following a long-term absence. A Trigger Point System is in use to identify three periods of sickness within 12 months. The Station Manager will be notified by the People Services' Absence Management department to investigate.

Training is organised through the use of pdrPro, the personal development system. pdrPro records all training, including online training and quizzes and in-person courses. Training records are overseen on pdrPro by the Station Commanders. Should any mandated training be overdue, the Station Commander will chase up the relevant officer and request that training be completed. All three Fire Stations displayed a high degree of completion of training.

Requisitioning and ordering goods and services are managed centrally. Purchase requests can be made by any member of staff through the eProcurement system and are authorised by the Station Commander. The arrangements for purchasing and payments for goods and services are subject to a separate review within the three-year internal audit strategy cycle.

Other Findings

Petty cash has been phased out of use in Fire Stations. Instead, all officers are provided with credit cards that are used to purchase fuel in an emergency or to purchase meals.

The Group Manager is notified by Barclays of any purchase that has not been made without a receipt being provided. The Group Manager will then chase up the user of the credit card to provide a receipt. Any purchase made with the service credit cards that is deemed inappropriate will be deducted from the card user's salary. Bank statements are reconciled with checked receipts on a monthly basis by the finance department. The arrangements for issuing and use of purchase cards are subject to a separate review within the three-year internal audit strategy cycle.

The Service implements an electronic fuel measuring and delivery system, provided by VECTEC Limited. Selected Stations maintain pumps and keep tanks of fuel for the use of refuelling. Electronic fuel keys are provided for the use of refuelling. The use of these pumps is monitored through the means of officers inputting their Service ID and vehicle mileage when using the pumps and the amount of fuel received by officers is monitored. Merthyr Tydfil also employs the same monitoring system for their electric vehicle charging points. The arrangements for fuel and electric vehicle charging are subject to a separate review within the three-year internal audit strategy cycle

Fuel cards were confirmed to be kept safely in a combination safe along with receipts for fuel purchases.

The procedure for cash raised during charity events depends on the eventual recipient of the income. The income raised is collected and secured in the safe in the Station Manager's office and then passed on to the charity representative through Headquarters to be deposited into the central account. An Operational Effectiveness Matter recommendation relating to this banking of charity income was raised in 2022/23 and was found to have been actioned through this review.

Redkite is an equipment management system used by all Firefighters to ensure that firefighting equipment and tools are regularly tested and to ensure that they are located at the correct location recorded on the Redkite database. Each time new equipment is purchased it is labelled with a Redkite Number which links to the database record. A Due Report which lists all equipment that is due for testing is generated daily by the respective watch in charge.

When equipment is reported as lost or damaged an investigation is undertaken by the Station Manager. Information is gathered, such as where the item was previously used and by whom. Any other Fire Station staff who were present are contacted to ensure that they have not taken the equipment in error. If the items remain unfound Fire Station staff are required to complete an electronic O-39 form to confirm that all reasonable actions have been carried out. An eProcurement request is made stating the nature of the defect or to order a new piece of equipment to replace lost items.

When new or repaired equipment is returned to the station, Firefighters are responsible for registering the item and an acceptance test is carried out when accepted.

Other Findings

South Wales Fire and Rescue Service endeavours to keep communities safe by helping to identify and reduce risk in homes.

Firefighters at all Fire Stations offer Home Safety Visits, during which firefighters provide advice and equipment such as fire alarms and smoke detectors. Home Safety Visits are requested through an online form. The Fire Service has a duty to attempt to carry out a visit within forty-five days of the request. The timescales will vary depending on the availability of the individual requesting the visit. If officers have attempted to contact on three or more occasions and individuals have failed to respond, then the request can be removed from the outstanding list, provided that they have recorded details of attempts, including dates and times.

The Home Safety Visit system is maintained. Malpas Fire Station had four visits outstanding with the oldest at 26 days, Caerphilly had two with the oldest at 44 days and Chepstow had four with the oldest at 34 days. None of the outstanding Home Safety visits were older than 45 days.

An issue relating to security at a co-location site was identified during the station visits in 2022-23, however, no obvious security issues were apparent during the visits carried out and no issues were noted by staff. Each station had the means of visually sighting a visitor before they are permitted entry to the building. A walk around the premises to review the security arrangements for front entrance, back doors, windows and security gates for all stations identified that access to all station buildings was secure. Access to front and back doors for all stations required an access card key.

Malpas and Caerphilly Fire Stations are occupied 24 hours a day. Chepstow station is a on call station and therefore locked when empty. Swipe cards access all doors and intruder alarm linked to the control room in Bridgend.

Access to computers requires the use of a BitLocker login and an individual-specific user ID and password combination that ensures that all users can be identified. All users have been provided with guidance on the management of their user IDs and passwords.

All Fire Stations have access to the Service's centralised ICT network systems. All Firefighters have e-mail access through a generic Watch email account and have access to the Internet. Prior to being given access to the internet an Acceptable Internet Usage Policy pops up for users to sign up to, accepting the Service's terms and conditions of access.

Maintenance certificates and engineers' reports are not kept at the stations as these are sent to the Property Services Department. Each contractor has its own identification access card. Contractors are selected from an approved contractors list held with the Property Services department.

Portable appliance testing (PAT) testing was carried out for all three stations. A review of the PAT testing certificates confirmed all PAT testing was carried out.

Other Findings

All three Fire Stations displayed good practice in using colour-coded chopping boards and knives to avoid contamination and measured and recorded fridge temperatures to ensure adequate food hygiene.

The driving licences of firefighters who undertake driving duties are reviewed annually, as well as any new starters or those who requalify. This check is undertaken by an externally by ABS Driver Check.

South Wales Fire and Rescue Service have implemented initiatives to reduce the Fire Stations' use of carbon. All three Stations visited have motion sensor lighting, Caerphilly and Malpas stations has electric vehicle charging points present that are used for small electric vehicles.

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.	Out of scope	-	-
S	**Sustainability**	The impact on the organisation's sustainability agenda has been considered.	Out of scope	-	-
R	**Resilience**	Good practice to respond to business interruption events and to enhance the economic, effective and efficient delivery is adopted.	Out of scope	-	-

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:	18th August 2023	23rd August 2023
Draft Report:	19th September 2023	7th November 2023
Final Report:	8th November 2023	

AUDIT PLANNING MEMORANDUM   Appendix B

Client:	South Wales Fire and Rescue Service		
Review:	Station Visits		
Type of Review:	Assurance	Audit Lead:	Auditor

Outline scope (per Annual Plan):	The review has considered 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.	
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:	(if required then please provide brief detail)	
Exclusions from scope:		

Planned Start Date:	29/08/2023	Exit Meeting Date:	30/08/2023	Exit Meeting to be held with:	Group Manager

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

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South Wales Fire and Rescue Service

Assurance Review of Budgetary Control

2023/24

Executive Summary

OVERALL ASSESSMENT

SUBSTANTIAL ASSURANCE

- SUBSTANTIAL ASSURANCE
- REASONABLE ASSURANCE
- LIMITED ASSURANCE
- NO ASSURANCE

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Strategic Risk 253: Inflationary Pressure - the risk that if exceptional inflationary pressure continues, this could impact on the structure, resources, and the services South Wales Fire and Rescue can deliver.

SCOPE

The review considered the budget preparation process, the monitoring arrangements, and reporting. The scope of review included consideration of the assumptions used in preparing the budgets.

KEY STRATEGIC FINDINGS

Appropriate arrangements are in place and operating effectively for the budget setting process.

Appropriate and regular budget monitoring processes are in place over the capital and revenue budgets. Evidence provided and discussion with the finance team and budget holders confirmed that these are operating effectively.

Testing performed for virements showed that processes are operating in compliance with the documented virements procedures.

Reporting processes to the Scrutiny Committee, the Finance, Audit, and Performance Management Committee and the Fire Authority are performed in line with agreed timelines.

GOOD PRACTICE IDENTIFIED

Budget holders demonstrated effective use of the Collaborative Planning tool for regular budget monitoring, with support from the finance team and a user-friendly manual.

Budget holders noted effective collaboration with the finance team in the budget setting and monitoring process, and that support and training is provided by Finance when needed.

ACTION POINTS

Urgent	Important	Routine	Operational
0	0	0	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)
No recommendations were made.							

Operational - Effectiveness Matter (OEM) Action Plan

Ref	Risk Area	Finding	Suggested Action	Management Comments	
No Operational Effectiveness Matters were identified.					

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	-	-
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

Risk 253 on the Strategic Risk Register is Inflationary Pressure - the risk that if exceptional inflationary pressure continues, this could impact on the structure, resources, and the services South Wales Fire and Rescue can deliver. The current risk score is 12 and Amber rated. The comments against the risk state that the revenue budget has been set for 2023/24 and will be closely monitored by the Finance, Audit, and Performance Management (FAPM) Committee and budget holders throughout the year, and that cost increases above contractual inflation levels are challenged by the procurement team.

Work performed during the audit confirmed that the budget is closely monitored by the FAPM Committee and budget holders throughout the year. Email correspondence showing the Procurement team's plan to challenge increases over and above CPI (the Consumer Price Index) from Ballycare Ltd was provided as an example of the control measure operating effectively.

There is one finance risk recorded on the Business Management Information System (BMIS) with Risk ID ACC003 Fraud. The risk is that the Service falls victim to fraud which could manifest as improper payments made to suppliers, non-suppliers and employees through the bank and corporate credit card. Close monitoring of budgets mitigates against the risk of fraud as all variances and unexpected expenditure are investigated through the monitoring process.

Other Findings

Finance related tasks on BMIS assigned to the Acting Director of Finance were reviewed and all recorded as completed. Actions assigned to the Acting Senior Accountant were in progress or parked and did not relate directly to the budgetary control process.

Budgetary Control was considered as part of the Key Financial Controls audit performed by TIAA in November 2022. The overall assessment of the audit was Reasonable Assurance, and no recommendations were made regarding budgetary control.

Review of the latest available Audited Statement of Accounts for 2021/22 confirmed that no issues were raised relating to budgetary control in the Auditor's Report.

The Financial Procedure Rules are included in the Constitution which was presented to the Fire and Rescue Authority (FA) on 19th December 2022, and changes to the Constitution were approved by the FA on 27th March 2023.

The Financial Procedures Rules set out the roles and responsibilities of the FA, FAPM Committee, the Chief Financial Officer and Principal Officers with regards to budget setting, approval, and monitoring. The full Fire and Rescue Authority is responsible for agreeing the budget and policy framework which is proposed by FAPM committee in conjunction with the Chief Financial Officer. The preparation of the medium-term financial plan is part of the strategic policy framework of the Authority and aims to ensure that spending plans are prudent, affordable, and sustainable, and reflect the Fire and Rescue Authority priorities. The rules include sections within Section 14.3 Financial Planning on budget preparation, budget approval, budget transfers, budget monitoring and the control of income and expenditure, and reporting authority spending at year end. The Financial Procedures Rules for budget preparation are set out in section 14.3.2 covering the revenue and capital budget.

Discussions were held with the Acting Senior Accountant, four revenue budget holders and two capital budget holders to understand the budget setting and monitoring process. The budget setting process begins in July ahead of the presentation of the proposed budget to the Scrutiny Committee, FAPM Committee, and FA for consultation in September. Budget holders use previous year actuals and up to date projections for the current year to set the following year budget, together with known projects or increases in the following year.

Meetings are held with Accountancy Assistants to finalise revenue budgets and revenue budget submissions are provided to the Accounting Technician. The Accounting Technician uses the Revenue Projects Report to map individual budgets to the Revenue Budget. The Revenue Projections Report maps each budget code to the relevant line in the Revenue Budget that reported is to FAPM Committee and to the FA and was provided for review during the audit. Meetings between capital budget holders and the Acting Senior Accountant are held before capital budgets are submitted, and the Acting Senior Accountant prepares the Capital Budget.

The Revenue and Capital budgets are provided to the Treasurer for the preparation of the Medium Term Financial Strategy (MTFS) which includes the budget for the following year. This is presented to FAPM Committee and the FA in September, at which point the budget undergoes a consultation period. Following the presentation of the MTFS Report in September, consultation meetings are held with individual councils to discuss the contribution requests before the final budget is submitted. A revised budget is presented to FAPM and the FA in December, and the final budget is approved in February.

Through discussion with the Treasurer and review of the Medium Term Financial Strategy, Reserve Strategy, and Revenue Budget Update Reports for September 2022 and September 2023, the process for developing the MTFS was understood. This involves applying the wider context, funding and base cost assumptions, and a broad sensitivity analysis based on pay inflation to the revenue and capital budgets submitted by the Acting Senior Accountant and Accounting Technician.

The report noted the context of inflationary cost pressures due to the rise in energy costs, increased interest rates, and the impact of the cost of living crisis on pay increases. The report also notes the difficulty in forward planning due to a lack of firm forward financial plans released by Central Government. The report recognises and considers the funding position of local councils alongside

Other Findings

their contribution request. By virtue of the 1995 Fire Combination Orders, Fire and Rescue Services in Wales are funding from contributions made by constituent councils within their area proportionally split based on population.

Though no firm forward funding is confirmed by Welsh Government, assumptions of all grant income expected is outlined in the MTFS. Expenditure is set based on the previous year and inflationary increases are applied only where the Service has been notified of increases by contractors or suppliers. Efforts are made by the finance team in partnership with budget holders, and with the support of the Treasurer to identify cost savings or for individual budgets.

After addressing the context and funding position, the report details base budget considerations which include assumptions on pay increases, energy cost increases, capital financing cost increases, planned infrastructure investments, and assumptions on transport cost increases. Finally, an overall budget projection is presented. The September 2022 MTFS Report showed an overall increase in budget of 10.6% for 23/24, 2.0% for 24/25, 2.1% for 25/26, and 1.7% for 26/27. The September 2023 MTFS report shows a projected increase of 7.8% for 24/25, 1.8% for 25/26, and 1.4% for 26/27.

The Medium Term Financial Strategy attached as an Appendix to the report includes sections on Financial Context, Current Cost and Budget Structure, Revenue Funding, Forecast Cost Changes, Forecast Funding Changes, the Medium Term Financial Plan, Reserves Policy, Treasury Management Strategy, Asset Management Programme, Capital Programme, Workforce Strategy, and Risk Management.

Budget submissions from four revenue budget holders were provided for review and were agreed to the Collaborative Planning (CP) downloads at the end of June 2023. Explanations were provided for any agreed changes to the budget from the original submission. Discussion with the Head of IT confirmed that the Strategic Plan and Operational Plan inform the budget setting process, and a sample of items on the strategic plan update for 2023/24 for IT were seen in the budget.

A Virement Process document is in place and was provided for review during the audit. Review of the document show that there are detailed instructions for requesting and approving virements, including keeping appropriate records and audit trail.

Budget holders may request virements between budgets by submitting an online F27 Virement Form located on the finance drive that is received by the Accountancy inbox. The Finance team evaluate the justification, check whether budget is available for virement, and return the form to the budget holder if necessary. If the virement is approved by Finance following evaluation it is saved, changes are made to Collaborative Planning, the Budget Summary tab on the budget monitoring spreadsheet is updated, and the Virement Spreadsheet which records all virements is updated.

A sample of ten virements from 2022/23 and five virements from 2023/24 was selected for testing from the Virements Spreadsheet, and evidence of authorisation by the Acting Senior Accountant was seen in all cases.

Weekly cashflow forecasts are prepared by the Accountancy Assistant and sent to the acting Senior Accountant and acting Director of Finance for review and planning purposes. The latest cashflow forecast prepared on 21st September 2023, and cashflows from December 2022, March 2023, and July 2023 were requested during the audit. Review of the cashflows confirmed that they are prepared on a regular basis. The cashflow spreadsheets record daily cash movements colour coded by type to the end of the following financial year; 2022/23 cashflows project movements to the end of March 2024; and 2023/24 cashflows project movements to the end of March 2025. Bank statements are included in separate tabs on the cashflow spreadsheets and agree to the opening balances. The cashflow spreadsheets also include interest rate forecasts and projections used.

A twelve month cashflow is not included in the Medium Term Financial Plan or Annual Budget presented to FAPM and the Fire Authority but The Treasurer confirmed that adequate assurance over cash is deemed to be provided to FAPM Committee and the FA through the capital budget, monitoring reports, and the treasury management strategy and reports.

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 monitoring tool Collaborative Planning is used by budget holders to monitor actual spend against budget. The tool is linked to the financial system eFin and updates daily. This allows budget holders to have live access to Actuals, Goods Received not Invoiced, Commitments, Budget Spend %, Budget Remaining, Forecast, and Variance Revised Budget, Variance %. A user guide "Collaborative Planning - Budget Holder Manual" is available to budget holders and was provided for review during the audit. Review of the guide showed that clear instructions on using the tool are available with accompanying screenshots.

Budget holders stated during the audit that they check Collaborative Planning (CP) on a weekly basis to identify any variances and monitor over and underspend. Members of the Finance team are available for support on an ad hoc basis, and quarterly meetings are held between budget holders and Finance ahead of the budget monitoring reporting cycle. Key variances and over and underspend are discussed during the meeting, and CP is updated by the Finance team where required. Once all meetings have been held, the Accountancy Technician will update the Revenue Budget Monitoring Spreadsheet and the acting Senior Accountant will update the Capital Budget Monitoring Spreadsheet. These spreadsheets are then used to prepare the quarterly finance updates presented to the FA and FAPM Committee.

Discussions held with budget holders confirmed that where budget holders do not have a financial background appropriate support is provided through shadowing, one to one training from members of the Finance team, and ongoing ad hoc support from Finance.

Other Findings

The Medium Term Financial Strategy 2022/23 to 2026/27 was presented to the Fire Authority on 26th September and was discussed by FAPM Committee on 10th October 2022. It was noted that the Strategy was presented to the FA ahead of FAPM in 2022 due to the timing of meetings. The MTFS included an initial budget for 2023/24 for consultation.

A Revenue and Capital Budget Setting Update Report was presented to FAPM on 5th December 2022 and to the FA on 19th December 2022 for consultation. The minutes to the FA meeting held on 19th December confirmed that updates continue to be delivered to the Local Authority Council meetings, all of which had been fairly well received in terms of the services provided and the projected financial settlements for the Fire Authority.

The 2023/24 Revenue and Capital Budgets were approved by the Fire Authority on 13th February 2023.

Outturn reports and quarterly revenue and capital and budget monitoring updates are presented to the FA and FAPM Committee. Reports from October 2022, December 2022, March 2023, and September 2023 were provided for review. Review of minutes confirmed that reports were presented and discussed by the FA and FAPM Committee.

The budget is presented to the Scrutiny Committee during the consultation period. Feedback received from the Scrutiny Committee on the projected use of reserves was received by the Treasurer and resulted in additional detail on reserves being included in the MTFS.

The Sustainability budget submission for 2023/24 and monitoring screen for June 2023 was reviewed during the audit, and discussion was held with the acting budget holder. It was noted that a Sustainability Officer has been recruited and is due to start in post in October 2023. Discussion with the Head of Property, Premises, and Estates confirmed that the Sustainability budget is set in line with the objectives of the Service's Decarbonisation Plan. The 2023/24 budget for Sustainability is £246k for electrical services up from £11.7k in the previous year, and £9.6k for Consultancy to perform surveys or design consultancy for proposed projects. Not all expenditure that supports the Decarbonisation Plan is reflected in the Sustainability budget, for example the purchase of Electric Vehicles will fall under Fleet Expenditure.

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:	1st September 2023	1st September 2023
Draft Report:	17th October 2023	7th November 2023
Final Report:	8th November 2023	

AUDIT PLANNING MEMORANDUM   Appendix B

Client:	South Wales Fire and Rescue Service		
Review:	Budgetary Control		
Type of Review:	Assurance	Audit Lead:	Principal Auditor

Outline scope (per Annual Plan):	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.	
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:	As above	

Planned Start Date:	25/09/2023	Exit Meeting Date:	28/09/2023	Exit Meeting to be held with:	Acting Senior Accountant

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

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Internal Audit

FINAL

South Wales Fire and Rescue Service

Assurance Review of Contract Management

2022/23

January 2024

Executive Summary

OVERALL ASSESSMENT

REASONABLE ASSURANCE

- SUBSTANTIAL ASSURANCE
- REASONABLE ASSURANCE
- LIMITED ASSURANCE
- NO ASSURANCE

KEY STRATEGIC FINDINGS

Sample testing identified that day-to-day management of contracts and contractor relationships is in place but there is a need to implement formal contract management meetings and performance management structures.

Formal arrangements to meet with the contractor or supplier to discuss delivery of the contract need to be implemented as a standard practice.

Routine recommendations and Operational Effectiveness Matter recommendations have been made to support the service to develop its contract management arrangements.

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

Ineffective contract management due to unclear allocation or understanding of roles or contract management capability can give rise to poor supplier performance and quality of services received and potentially resulting in loss of value for money and increased costs.

GOOD PRACTICE IDENTIFIED

'The Essentials of Contract Management' document has been produced as a collaboration between the three Welsh Fire and Rescue Services.

SCOPE

The review considered the arrangements for managing contracts within the Service. The review considered the allocation of responsibility for managing contracts, relationship management and performance management, change management and payment approval arrangements.

ACTION POINTS

Urgent	Important	Routine	Operational
0	1	2	4

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)
2	Delivery	The review identified that none of the contracts considered had ongoing formal arrangements to meet with the contractor or supplier to discuss delivery of the contract. Closer oversight had been established for the Structural Firefighters Personal Protective Equipment and Care Package and for small works procured through the Electrical and Building maintenance contracts, which follow a standard construction contract management methodology.	Formal periodic contract management meetings take place for all term contracts.	2	*Procurement team recognise that formal contract management on some key strategic contracts is ad-hoc but there are departments who have regular planned contract management meetings with their suppliers. The problem area in most cases lays with the Operational contracts where the initial internal contract manager has moved role. Procurement Team will work with internal contract managers and outline the importance of regular contract management meetings. We also aim to discuss the feasibility of developing a contract management site on the Services Business Management System with Service Performance Team to act as a central repository for all Contracts and generate prompts to remind contract holders of their duties under contract management.*	*30/09/24*	*Senior Procurement Officer*

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.

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
1	Directed	All contracts had provision for contractors to have in place insurance cover in terms of employer's liability, public liability, product liability and professional liability. Discussion with those responsible for day-to-day oversight of the contract identified a lack of clarity on whose role it is to ensure that contractors or suppliers provided confirmation of their up-to-date insurance policies.	Arrangements be put in place to ensure that the responsibility for obtaining contractor insurances are the start of each contract and concurrently throughout its term is formally communicated and understood by the officer assigned responsibility for management of contracts.	3	*Procurement are developing a standard contract management template to use as a prompt and discussion generator at contract management meetings. Insurance, sustainability and social/well-being values will form part of this template due to the WG reporting requirements outlined in the Social Partnership and Public Procurement (Wales) Act. Depending on the outcome of discussions with Service Performance we aim to include this as part of the Contract Management System.*	30/09/24	*Senior Procurement Officer*

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.

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
3	Delivery	The Supply and Maintenance of Breathing Apparatus has provisions for service credits as a means of measuring contractor performance. An agreed level of service and performance measures are set, which can be defined either through the contract or agreed and formally documented at contract commencement. The agreed measures are subsequently reported and monitored with achievement attracting a monetary benefit to the contractor or service credit to the employer. For example, for the Supply and Maintenance of Breathing Apparatus within the contract service credits defined as to be linked to repair maintenance activities and timeliness of completion and provision of equipment. Although such provisions were included within the above contracts, they had not been applied in practice through the contract management arrangements. Similarly, the contract documents include provision of Key Performance Indicators generally follow a similar approach to the above with either KPIs set within the contract or determined and agreed with the contractor at the outset. For the Supply and Maintenance of Breathing Apparatus the contract states that these will be agreed with the contractor.	Arrangements be put in place to ensure where contracts include provisions for service credits and associated performance monitoring, these are identified and agreed at the outset of the contract and reported and acted upon concurrently throughout the term of the contract.	3	*Inclusion of Key Performance Indicators will become more prevalent with the new Procurement Regulations and Social Partnership Act. Again, the Contract Management template will list the KPI's associated with the individual contract and any Service Credits that are attached to manage poor performance.*	30/09/24	*Senior Procurement Officer*

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
1	Directed	Another TIAA emergency services client has developed a range of proforma documents to help support contract managers with administration of contracts under a single 'contract manual.' This is a tool designed to assist the client department and individual responsible for management of the contract and the contractor in the day-to-day running of the contract. It is completed by the Procurement Team initially and handed over to the client department to be used as a live document. The completed manual differs between contracts depending on the type of supply but typically includes the following: supplier contact details and structure; client stakeholders including budget holder and Finance team owner; details of the change structure, that is the approval and associated requirements for amending the contract; and copies of various tender and contract documents such as the specification, performance monitoring schedules; and, documents relating to the due diligence of the contractor. The Manual also included an embedded template Exit Strategy document, where deemed required. Other proforma documents developed to support contract managers also include template early warning/issues/risk registers or logs, template meeting agendas and contract / project directories.	Consideration be given to developing a proforma contract manual and proforma documents designed to assist the client department and the contractor in the day-to-day running of a contract.	*The Procurement Team are looking into ways to improve how contracts are managed across the Service. Initially we will develop a contract management template for use by internal contract managers to act as an aide to correct management, We'll also be seeking to improve the way that we record contracts with one of the potential solutions being the use of the Service Business Management System.* *Contract Management Training guides will also be developed to assist new managers and act as a refresher for those already undertaking discussions with suppliers.*

ADVISORY NOTE

Operational Effectiveness Matters need to be considered as part of management review of procedures.

Ref	Risk Area	Finding	Suggested Action	Management Comments
2	Directed	The same emergency services client has also defined a process for determining the level of contract management support to be provided by the procurement department on individual contracts whereby the cost, complexity of delivery, speed at which a change of suppliers is possible, and the impact of contract or supplier failure are scored to arrive at an overall assessment. This is used by the procurement department to determine whether the department need to allocate additional support to particular contracts. Where deemed necessary, a member of the procurement department will then provide support to manage the contract and will undertake activities such as take the lead on and arrange contract meetings, ensure due diligence is carried out, maintain risk registers and oversee contractor performance monitoring. Operational departments then remain responsible for activities such as ordering goods and services and payment processing and approval and also day-to-day running of the contract from a service delivery perspective.	Consideration be given to developing a process where the level of contract management support provided by the Procurement team is assessed for each contract.	*This will form part of the contract management improvement exercise that the procurement plan to undertake.*
3	Delivery	The 'Essentials of Contract Management' document does not reference sustainable procurement, the Services' Carbon Reduction Plan or Well-being of Future Generations Act 2015.	Consideration be given to including reference to sustainable procurement and reference to how sustainable procurement supports carbon reduction and social and environmental benefits and Well-being of Future Generations Act 2015 in future iterations.	*Sustainability will form part of the new template. It will also be included in the improvement exercise that the procurement plan to undertake.*

ADVISORY NOTE

Operational Effectiveness Matters need to be considered as part of management review of procedures.

Ref	Risk Area	Finding	Suggested Action	Management Comments
4	Delivery	Discussion with those responsible for management of contracts identified that no formal contract management training had been received, although all had been involved in the current or predecessor contracts for some time. Rollout and access to the 'Essentials of Contract Management' document will go some way to bridge this gap and each member of staff spoken with noted that the Procurement team are also available to provide support. It was also noted that there is a potential to access project management training within Service.	Consideration be given to developing some form of contract management training for those assigned responsibility for managing contracts. This could be aligned to the content of the 'Essentials of Contract Management' document.	*Once the review of contract management has taken place then this will be rolled out to our key internal contract holders.*

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, & 2
RM	Risk Mitigation	The documented process aligns with the mitigating arrangements set out in the corporate risk register.	In place	1	-
C	Compliance	Compliance with statutory, regulatory and policy requirements is demonstrated, with action taken in cases of identified non-compliance.	In place	-	-

Other Findings

A document called 'The Essentials of Contract Management' has been produced as a collaboration between the three Welsh Fire and Rescue Services. The contract management elements covered as stated within the document are:

- Managing the service delivery;

- Managing the supplier relationship;

- Contract administration;

- Seeking performance improvements and innovation;

- Managing changes;

- Encouraging innovation.

The document notes that contract management can be broken down into three distinct areas.

1. Service delivery management – which ensures the services / goods are delivered to the agreed timescales, levels of performance and quality.

2. Relationship management – ensuring an open, trusting, and constructive relationship is maintained between both parties.

3. Contract administration – involving the formal governance of, and variations to, the contract.

Another TIAA emergency services client has developed a range of proforma documents to help support contract managers with administration of contracts under a single 'contract manual.' This is a tool designed to assist the client department and individual responsible for management of the contract and the contractor in the day-to-day running of the contract. It is completed by the Procurement Team initially and handed over to the client department to be used as a live document. The completed manual differs between contracts depending on the type of supply but typically includes the following: supplier contact details and structure; client stakeholders including budget holder and Finance team owner; details of the change structure, that is the approval and associated requirements for amending the contract; and copies of various tender and contract documents such as the specification, performance monitoring schedules; and, documents relating to the due diligence of the contractor. The Manual also included an embedded template Exit Strategy document, where deemed required. Other proforma documents developed to support contract managers also include template early warning/issues/risk registers or logs, template meeting agendas and contract / project directories.

Operational Effectiveness Matter 1 refers.

The same emergency services client has also defined a process for determining the level of contract management support to be provided by the procurement department on individual contracts whereby the cost, complexity of delivery, speed at which a change of suppliers is possible, and the impact of contract or supplier failure are scored to arrive at an overall assessment. This is used by the procurement department to determine whether the department need to allocate additional support to particular contracts. Where deemed necessary, a member of the procurement department will then provide support to manage the contract and will undertake activities such as take the lead on and arrange contract meetings, ensure due diligence is carries out, maintain risk registers and oversee contractor performance monitoring. Operational departments then remain responsible for activities such as ordering goods and services and payment processing and approval and also day-to-day running of the contract from a service delivery perspective.

Operational Effectiveness Matter 2 refers.

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Other Findings

For the contracts considered as part of this review, responsibility for day-to-day activities such as ordering goods and services, oversight of receipt of items and completion of work and subsequent confirmation of the quality and delivery and subsequent payments was well established. Similarly, also for dealing more immediate or urgent issues relating to the contracts.

However, the review identified a need to improve the more strategic oversight of the contracts for example in terms of contract progress meetings and performance management as defined within the contracts. See further detail below.

All contracts had provision for contractors to have in place insurance cover in terms of employer's liability, public liability, product liability and professional liability. Discussion with those responsible for day-to-day oversight of the contract identified a lack of clarity on whose role it is to ensure that contractors or suppliers provided confirmation of their up-to-date insurance policies.

Recommendation 1 refers.

For the purposes of obtaining assurances over the Service's arrangements for the allocation of responsibility for managing contracts, relationship management and performance management, change management and payment approval processes the following contracts were selected for sample testing.

- Structural Firefighters Personal Protective Equipment and Care Package;
- Supply and Maintenance of Breathing Apparatus;
- Electrical: Reactive Repairs and Maintenance Works, Remedial and Small Works;
- Building Maintenance: Lots 1, 3 plumbing, Lot 2 Painting and Decorating and Lot 4 reactive and general maintenance.

The following is noted on an exception basis.

Formal contract documents were in place for each the contracts selected for sample testing.

Arrangements were found to be in place for each contract within the sample to ensure that claims for payments made were subject to adequate scrutiny and approval prior to payment.

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.	Partially in place	2, & 3	-
S	Sustainability	The impact on the organisation's sustainability agenda has been considered.	In place	-	3
R	Resilience	Good practice to respond to business interruption events and to enhance the economic, effective, and efficient delivery is adopted.	In place	-	4

Other Findings

The review identified that none of the contracts considered had ongoing formal arrangements to meet with the contractor or supplier to discuss delivery of the contract.

All contracts included within the sample had provision for the submission of management reports by the contractor and periodic contract meetings, for example, monthly or quarterly. However, the reporting and meeting frequency were to be inconsistently applied. Closer oversight had been established for the Structural Firefighters Personal Protective Equipment and Care Package and for small works procured through the Electrical and Building maintenance contracts, which follow a standard construction contract management methodology.

In place of such formal meeting structures contract management often takes place at an informal level between contract manager or those tasked with delivery of the associated service on a day-to-day basis through direct contact with their counterparts within the supplier's delivery teams.

More formal periodic meetings and receipt of contractual management information will enable the service to more clearly communicate and document any issues with contractor poor performance.

Recommendation 2 refers.

Other Findings

The Supply and Maintenance of Breathing Apparatus has provisions for service credits as a means of measuring contractor performance. Under such arrangements an agreed level of service and performance measures are set, which can be defined either through the contract or agreed and formally documented at contract commencement. The agreed measures are subsequently reported and monitored with achievement attracting a monetary benefit to the contractor or service credit to the employer. For example, for the Supply and Maintenance of Breathing Apparatus within the contract service credits defined as to be linked to repair maintenance activities and timeliness of completion and provision of equipment.

Although such provisions were included within the above contracts, they had not been applied in practice through the contract management arrangements.

Similarly, the above contract documents include provision of Key Performance Indicators generally follow a similar approach to the above with either KPIs set within the contract or determined and agreed with the contractor at the outset. For the Supply and Maintenance of Breathing Apparatus the contract states that these will be agreed with the contractor.

Recommendation 3 refers.

The 'Essentials of Contract Management' document does not reference sustainable procurement or the Services' Carbon Reduction Plan.

Operational Effectiveness Matter 3 refers.

Environmental requirements and sustainable development clauses, including reference to the Well-being of Future Generations Act 2015 were found to be included within tender and contract provisions.

For the Structural Firefighters Personal Protective Equipment and Care Package and the Supply and Maintenance of Breathing Apparatus contracts South Wales Fire and Rescue are a member of wider user groups where the items purchased are discussed with other Fire and Rescue Services. Discussion with officers noted that the issues discussed includes the quality and performance of the items and also supply issues.

Discussion with those responsible for management of contracts identified that no formal contract management training had been received, although all had been involved in the current or predecessor contracts for some time. Rollout and access to the 'Essentials of Contract Management' document will go some way to bridge this gap and each member of those spoken with noted that the Procurement team are also available to provide support. It was also noted that there is a potential to access project management training within Service.

Operational Effectiveness 4 refers.

EXPLANATORY INFORMATION

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:	17th August 2022	17th August 2022
Draft Report:	13th December 2023	21st December 2023
Final Report:	9th January 2024	

AUDIT PLANNING MEMORANDUM

Appendix B

Client:	South Wales Fire and Rescue Service
Review:	Contract Management

Type of Review:	Assurance	**Audit Lead:**	Audit Manager

Outline scope (per Annual Plan):	The review considers the arrangements for managing contracts within the Service. The review considers the allocation of responsibility for managing contracts, relationship management and performance management, change management and payment approval 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:	As above.	

Planned Start Date:	12/09/2022	**Exit Meeting Date:**	16/09/2023	**Exit Meeting to be held with:**	Various

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

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Internal Audit

FINAL

South Wales Fire and Rescue Service

Assurance Review of Collaboration – Co-Location

2022/23
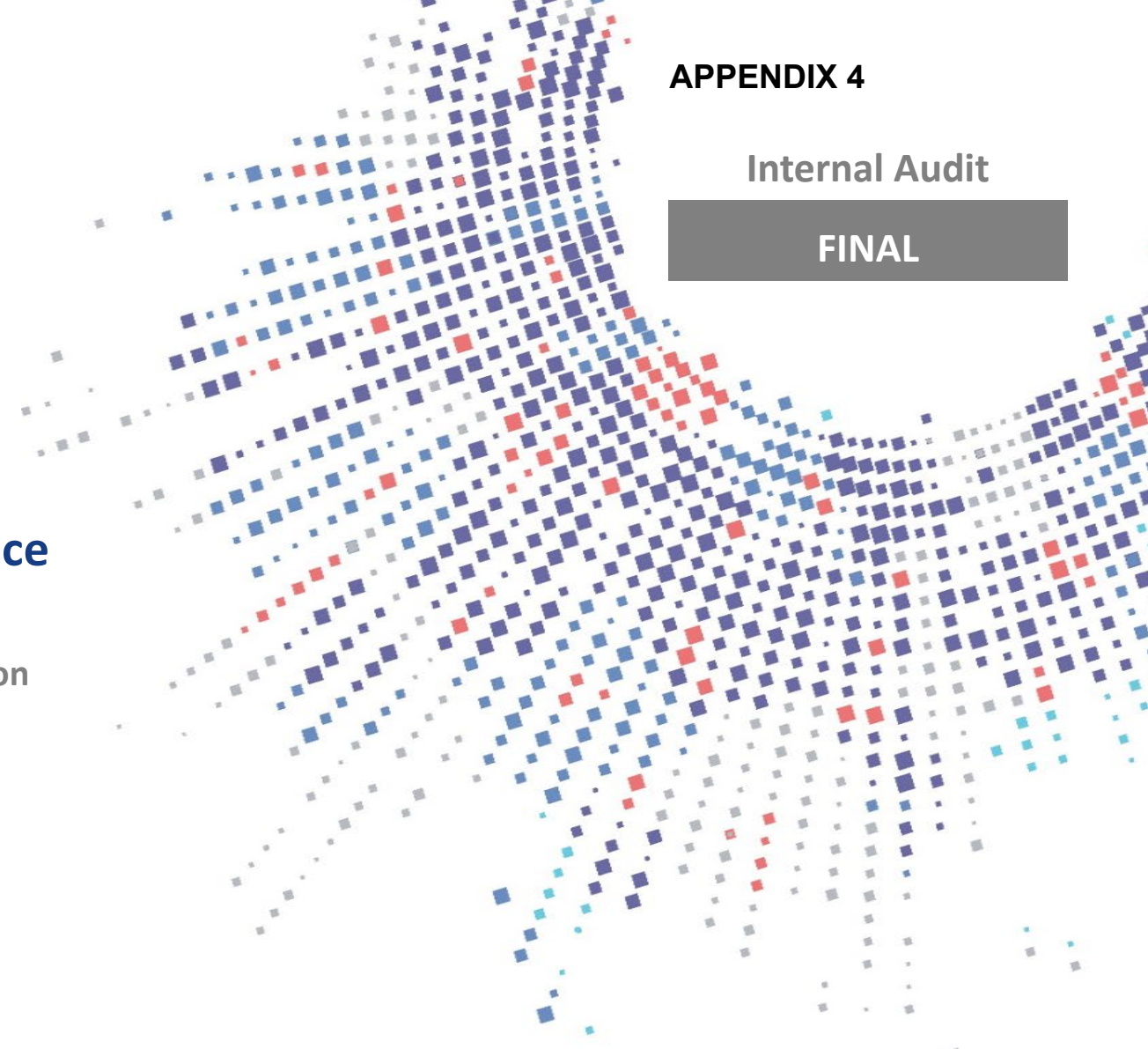
Executive Summary

OVERALL ASSESSMENT

REASONABLE ASSURANCE

Adequate & effective governance, risk and control processes

- SUBSTANTIAL ASSURANCE
- REASONABLE ASSURANCE
- LIMITED ASSURANCE
- NO ASSURANCE

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

There are no risks relating to co-location on the Strategic Risk Register.

KEY STRATEGIC FINDINGS

Contracts in the form of licences, agreements or memorandums of terms of occupation are in place between South Wales Fire and Rescue Service and partners which define responsibilities and charging and payment arrangements.

The Service is currently working on a standard contract template and charging mechanism.

Governance arrangements are in place for monitoring existing and new co-location proposals and delivery is aligned to the Service's Strategic Plan and associated performance management framework.

GOOD PRACTICE IDENTIFIED

Codes of Conduct have been established between the Service and partners at co-location sites.

SCOPE

The review considered the arrangements in place to manage to the co-location contracts and agreements in place to include allocation of responsibility and charging and payment arrangements. The Joint Control Room will be included within the agreements reviewed.

ACTION POINTS

Urgent	Important	Routine	Operational
0	1	0	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	South Wales Fire and Rescue are in the process of reviewing current lease arrangements for co-location sites with a view to replacing with a standardised cost recovery mechanism. As of December 2023, the Service have liaised with a firm of chartered surveyors who are putting together a proposal for the recharge mechanism, for discussion with co-location partners.	South Wales Fire and Rescue Service to finalise the current lease agreement template and standardised cost recovery mechanism.	2	*We have now received the report and recharge mechanism summary from Cooke and Arkwright. We now need to meet internally and engage with external stakeholders to gather accurate information on numbers of staff, site usage etc.*	30/04/24	*Mike Davies – Property Strategy Manager & Gabbie Greathead – Legal Manager*

Operational - Effectiveness Matter (OEM) Action Plan

Ref	Risk Area	Finding	Suggested Action	Management Comments	
No Operational Effectiveness Matter recommendations are made.					

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	-	-
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.	Partially in place	1	-

Other Findings

South Wales Fire and Rescue Authority had a strategic theme for 2023/24 of 'working with partners' and objectives of 'Working with our partners to deliver our services where they are needed' and 'Reviewing and evaluating our existing partnerships' which includes opportunities for co-location. The strategic themes and objectives out for consultation (ending January 2024) for 2024/25 include the same themes and objectives.

An Asset Management Strategy is in place which is supported by several management plans including that relating to Land and Buildings. These are linked to the Capital Programme.

Other Findings

For 2021/22, Audit Wales' Audit of South Wales Fire and Rescue Authority's Assessment of Performance in relation to its conclusions on Joint Working between Emergency Services as of January 2022, that: "Joint working across emergency services to make best use of resources is not a new concept. Emergency services have been working closely together to provide a better service to the public for many years. Innovative partnership initiatives have saved money, reduced local response times and have contributed to protecting the public. Despite this, there are growing expectations from government policy and legislation that collaboration needs to happen more deeply and quickly to ensure front line services can meet the challenges facing 21st century Wales. Overall, we concluded that blue light emergency service collaboration is slowly growing but requires a step change in activity to maximise impact and make best use of resources."

A 'Project Review Group' has been established which has a documented terms of reference. The Group meets every two months, or as required, with the meeting to be chaired by the Property Strategy Manager. An agenda is circulated prior to each meeting and notes are made of the meeting. To provide the Group with a brief overview of projects being reviewed a proforma has been developed to capture key details. Through the Group business cases will be received and decisions will be recommended to senior management team on future priorities and individual projects, including that relating to proposed co-locations, and the progress of current projects will be monitored.

Review of a sample of notes made identified that the areas discussed include current and proposed co-location sites, gym licences at co-location sites and the standard lease contract – see below.

During January and February 2023, the Planning, Performance and Risk Team held planning meetings with all directorates in order to capture tasks for the forthcoming year. The Strategic Plan includes the tasks the Service intend to carry out and what Objective and Theme they support. These tasks are mapped to our Strategic Themes, Objectives, Wellbeing Goals, National Framework Chapters and Equality Outcomes. This enables the service to monitor its progress against the delivery of the Strategic Plan and compliance with key legislation.

Summary and outcomes of Business Plan Actions linked to the Strategic Themes and Objectives are reported to Fire Authority. For 2022/23 this was reported in February 2023 and most recently reported in December 2023.

South Wales Fire and Rescue Service are members of the Joint Emergency Services Group (JESG) which includes the Service, Welsh Ambulance Services NHS Trust (WAST), South Wales Police and Gwent Police. The Group identifies and discusses potential future co-location and existing arrangements.

South Wales Fire and Rescue are in the process of reviewing current lease arrangements for co-location sites with a view to replacing with a standardised cost recovery mechanism. As of December 2023, the Service has liaised with a firm of chartered surveyors who are putting together a proposal for the recharge mechanism, for discussion with co-location partners. Recommendation 1 refers.

At the time of the internal audit fieldwork the Service was in the process of implementing gym licences with partners at co-location sites to allow usage by each partner and enable recharging in relation to repair and replacement of equipment, as well as a mechanism for dealing with accidents. No such agreements had been in place previously and the Service worked with an external legal firm to develop the licence, with the document also produced including consultation from partner officers.

There had been no insurance claims relating to accidents or other events relating to partners at co-location sites at the time of the internal audit fieldwork.

Other Findings

In terms of payments to capital works relating to new or existing co-locations sites, a contribution is agreed between all parties. South Wales Fire and Rescue Service arrange the works and bill the co-location partners depending on the agreed contribution. The level of contribution depends on a number of factors including the benefit or use for partner involved. For example, works purely for the use of one partner will be charged fully to that partner plus a fee for administration. Revenue contributions from partners include a rent and South Wales Fire and Rescue also provide typically a full facilities management service including cleaning which is also recharged.

All capital works contributions and revenue contributions are billed directly by the Service's finance team using profiles established for each site and partner.

South Wales Fire and Rescue has a lease agreement with South Wales Police in respect of the Joint Control Room based at South Wales Police Headquarters in Bridgend. The lease agreement sets out the service expectations. The agreement includes a full facilities management package including ICT support. The fee is agreed on an annual basis, negotiation and agreement to which is overseen by the Head of Operations. In 2022/23 the fee paid was approximately £1.8m payment which is invoiced in 12 monthly instalments by South Wales Police and approved in line with the Service's scheme of delegation.

It was noted at the time of the internal audit fieldwork that the Head of Operations was working with South Wales Police on a '6-point plan' aimed at improving working relationships and culture between the Service and South Wales Police.

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

Ongoing reporting on estates matters takes place through Capital and Monitoring reports presented to the Finance and Performance Committee, Scrutiny Group and Fire Authority.

Review of the minutes of these groups identified that reporting in 2022/23 and 2023/24 to date included that relating to partnership working on estates, delivery of Strategic Theme and Business Plan objectives through reporting on performance of BMIS actions and tasks.

Delivery and slippage relating to the capital programme are recognised as a risk and reported as such through the Finance and Audit Committee and Fire Authority. Causes include internal staffing as well as availability of contractors and consultants to deliver works.

Through JESG South Wales Fire and Rescue Service have led on a project mapping of Fire, Ambulance and Police sites across South Wales utilising Data Map Wales. This will allow all Services to access this information securely when looking at strategic areas for new or further sites for co-location. Work has progressed with the data mapping now up and running. As of December 2023, the next phase is for other Services to begin populating their information.

At the time of the internal audit fieldwork the Service was in the process of agreeing Code of Conducts with the partners at each site. The Code of Conduct is a voluntary agreement that the partners enter into at each site that defines behaviours and how those using the sites conduct themselves in terms of the working arrangements and treatment of the building.

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:	29th April 2022	29th April 2022
Draft Report:	10th January 2024	22nd January 2024
Final Report:	22nd January 2024	

AUDIT PLANNING MEMORANDUM   Appendix B

Client:	South Wales Fire and Rescue Service		
Review:	Collaboration – Co-location		
Type of Review:	Assurance	Audit Lead:	Audit Manager

Outline scope (per Annual Plan):	The review considers the arrangements in place to manage to the co-location contracts and agreements in place to include allocation of responsibility and charging and payment arrangements. The Joint Control Room will be included within the agreements reviewed.

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:	As above.	

Planned Start Date:	15/08/2022	Exit Meeting Date:	18/08/2022	Exit Meeting to be held with:	Various

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

tiaa

Internal Audit

FINAL

South Wales Fire and Rescue Service

Assurance Review of O365 Implementation

2023/24
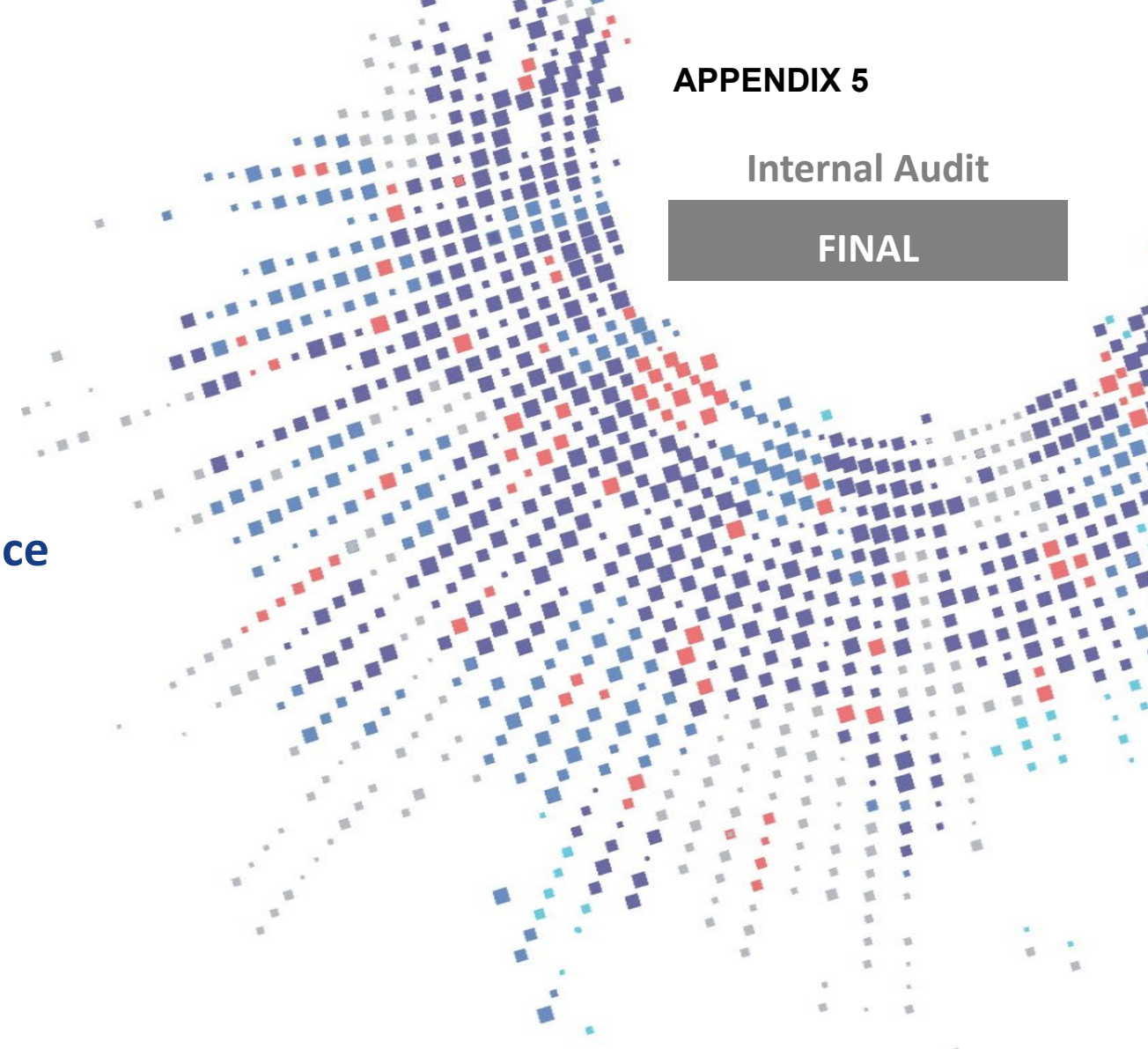
Executive Summary

OVERALL ASSESSMENT

REASONABLE ASSURANCE

Adequate & effective governance, risk and control processes

- SUBSTANTIAL ASSURANCE
- REASONABLE ASSURANCE
- LIMITED ASSURANCE
- NO ASSURANCE

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

No key strategic risk has been provided for this audit

SCOPE

The review considered the project management arrangements in place for implementation of Microsoft Office 365 within South Wales Fire and Rescue Service.

KEY STRATEGIC FINDINGS

Some benefits of the project including implementation of new, agile and more efficient technology have been realised. However, the collaboration with partners that are part of the project and a number of other deliverables have not been completed to date.

The project was to be completed in two years and scheduled to be finished in March 2023. It has been extended until January 2024.

Modifications to the project plans including changes to Microsoft licencing have been made which resulted in increased costs compared to the original estimate.

The organisation has not formally assessed the risks associated with this project and has not formally approved / signed off the completion of the project activities and transfer to business-as-usual position.

GOOD PRACTICE IDENTIFIED

A strategic board has been established to oversee and manage the project and included representatives from executive leadership and senior leadership teams.

ACTION POINTS

Urgent	Important	Routine	Operational
0	3	2	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	The organisation has not established a project management policy.	Establish a project management policy to provide guidelines that outline processes, procedures, and principles that an organisation follows to manage its future projects effectively.	2	*Project Management Policy to be created.*	*31/03/26*	*Head of Corporate Services*
3	Directed	The audit was informed that a decision was made to terminate the project strategy board meetings in April 2023 on the basis that the stage of the project which requires strategic co-ordination was achieved. Most project deliverables are in the business-as-usual stage and the remaining activities are to be completed by individual departments. However, we were unable to verify that this was documented. The lack of formally documented key project decisions increases the risk that relevant events that require such decisions are actioned without agreement from all parties.	Formally document the approval / sign-off of the project activities and transfer to business-as-usual position by the strategic project board.	2	*Agreed.*	*31/03/24*	*Head of ICT*

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
2	Directed	The organisation has identified risks associated with this project and documented them in the project plan. However, no formal risk assessment has been carried out to evaluate risks and their impact on the project.	Formal risk assessments are to be established for all projects to evaluate project risks and implement mitigating measures in line with the organisation's risk appetite.	2	*Risks were documented for each meeting and reported to Security Risk Group.* *To be added to project management policy.*	*31/03/26*	*Head of Corporate Services*
4	Delivery	The organisation did not maintain a log of risks and issues to assist in project post implementation review.	Ensure that a log of risks and issues is maintained for all projects to facilitate lessons learnt process.	3	*To be added to project management policy.*	*31/03/26*	*Head of Corporate Services*
5	Delivery	The organisation has not carried out lessons learnt exercise for this project.	Carry out a review of the project to learn lessons from mistakes and to encourage good practice.	3	*Agreed.*	*30/06/24*	*Head of ICT*

Operational - Effectiveness Matter (OEM) Action Plan

Ref	Risk Area	Finding	Suggested Action	Management Comments
No Operational Effectiveness Matters were raised.				

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.	Partially in place	1	-
RM	Risk Mitigation	The documented process aligns with the mitigating arrangements set out in the corporate risk register.	Partially in place	2	-
C	Compliance	Compliance with statutory, regulatory and policy requirements is demonstrated, with action taken in cases of identified non-compliance.	In place	3	-

Other Findings

The ICT Office Productivity and Software Services project was presented to South Wales Fire & Rescue Authority in December 2020.

The strategic project board was established to oversee and manage the project and included representatives from the executive leadership team and the senior leadership team.

The project benefits have been defined based on the wider corporate plan 2020-2030.

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.	Partially in place	4	-
S	Sustainability	The impact on the organisation's sustainability agenda has been considered.	Out of scope	-	-
R	Resilience	Good practice to respond to business interruption events and to enhance the economic, effective and efficient delivery is adopted.	Partially in place	5	-

Other Findings

The project was to be completed in two years and scheduled to be finished in March 2023 but it has been extended until January 2024 as not all deliverables have been completed to date. This includes among others collaboration with partners, data archival and retention, O365 backup and email gateway.

The project cost has increased compared with the original estimated cost and was around £16,000 at the time of audit. However, the total approved overspend is £31,000 including £14,000 for additional Microsoft licenses and £17,000 for consultancy services. These increases have been discussed at the strategy board meetings and are documented in the minutes of the meeting.

EXPLANATORY INFORMATION

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.

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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.
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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:	17th July 2023	27th July 2023
Draft Report:	29th January 2024	27th February 2024
Final Report:	28th February 2024	

AUDIT PLANNING MEMORANDUM

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Appendix B

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Client:	South Wales Fire and Rescue Service
Review:	O365 Implementation

Type of Review:	Assurance	**Audit Lead:**	Digital and Cyber Assurance Specialist

Outline scope (per Annual Plan):	The review will consider the project management arrangements in place for implementation of Microsoft Office 365 within South Wales Fire and Rescue Service.

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:	As above	
Exclusions from scope:	Sustainability	

Planned Start Date:	2nd October 2023	**Exit Meeting Date:**	5th October 2023	**Exit Meeting to be held with:**	ICT Transformation Manager

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

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THIS REPORT IS NOT EXEMPT AND IN THE PUBLIC DOMAIN

SOUTH WALES FIRE & RESCUE SERVICE   AGENDA ITEM NO 9
                                                                               18 APRIL 2024

FINANCE AND AUDIT COMMITTEE

REPORT OF THE HEAD OF CORPORATE SUPPORT

BUSINESS PLAN ACTIONS REPORT 2023 – 2024 QUARTER 3

THIS REPORT IS FOR INFORMATION

REPORT APPROVED BY CHIEF FIRE OFFICER
PRESENTING OFFICER - DIRECTOR CORPORATE SERVICES, GERAINT
THOMAS

SUMMARY

This report provides Commissioners with an overview of the Business Plan Actions Report Health Check 2023 – 2024 Quarter 3 (1st October – 31st December 2023), but then goes on to consider this report in the context of the unprecedented actions taken by Welsh Government to replace the Fire Authority with Commissioners shortly after this reporting period. The report also describes the proposal to strengthen the planning and reporting processes within the Service to provide more balanced and accurate reporting in the future.

RECOMMENDATIONS

1 That Commissioners note the contents of the Business Plan Actions Report Health Check 2023 – 2024 Quarter 3 but recognise that the updates contained within were from a moment in time when the internal perspective relating to performance was different to the position that it is today.

2 That Commissioners note the planned amendments to the planning and reporting processes that will ensure future reports against the Business Plan Actions are more accurate, honest, and meaningful.

3 That Commissioners agree that the next Health Check Report received will be the Business Plan Actions Report Health Check 2024 – 2025 Quarter 1. (1st April - 30th June 2024).

---

1   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 long-term Strategic Plan, implementing actions, and measuring indicators to enable the Service to achieve these organisational goals.

1.2   In 2023-2024 all departments linked actions within their annual departmental plans to the appropriate Strategic Themes. This should have enabled the Service to measure how well it was performing against these themes by assessing how many of the linked actions were on target and review how the associated indicators were performing.

1.3   Quarterly updates are recorded by action owners onto the Business Management Information System (BMIS). To further support the performance management framework, National Strategic Indicators were introduced during the reporting year 2015/16. Together these provide data and information to inform and support decision making processes within the Service, supposedly to target activity and drive improvement. A wider suite of localised performance indicators is also monitored and reported on through this process.

1.4   The report in Appendix A provides Commissioners and Officers with an internal snapshot view of the Quarter 3 health check on performance against the Strategic Objectives and Strategic Indicators for the period 1st October – 31st December 2023. The updates drafted and collated in the attached report were written at that time.

2   ISSUE / PROPOSAL

2.1   The report attached at Appendix A is reflective of the Business Plans that were drawn up in the Financial Year 2023 – 2024. The updates in this report were collated at a time prior to the publication of the Morris Report and subsequent Welsh Government intervention, when the internal perspective in relation to performance was in a different place to where it is today.

2.2   The style and format of the report, along with the processes underpinning it have proven to be deficient in providing robust assurance and scrutiny. The attached report is clearly not reflective of the true and proper situation that the Service was in at that time and is more reflective of a snapshot of the internal thinking at that moment, being heavily influenced by previous custom and practice.

2.3   To ensure that future reports are truly reflective several improvements will be implemented as follows:

i. The departmental actions that provide the foundation of the planning and reporting system will be reviewed to ensure that all improvement actions are included. This will include the work of the Culture Review Working Groups from the Morris Report recommendations and progress on the activities of the Thematic Review Working Groups to embed the recommendations from the Chief Fire and Rescue Advisor's Thematic Reviews.

ii. The narrative assessment of performance against these actions will be robustly reviewed to ensure that a balanced account of what has or has not made progress is reported ensuring that there is no positive bias. It is essential that within the narrative, barriers to success are identified, so that support can be provided to ensure successful outcomes. The quality of these narratives will be improved at source and during the reporting process.

iii. Future reports supplied will provide a less granular more strategic viewpoint to enable Commissioners to assess the overall picture. However, the granularity of the background system will be maintained, enabling deep dive functionality when required.

iv. A quality assurance process will be implemented where all reports for Commissioners will be sighted by the responsible Strategic Lead prior to submission, to ensure that they are of appropriate quality.

v. In addition to the quality assurance on each separate report, the overall report pack presented to Commissioners for publication will undergo an additional quality assurance process prior to submission to the Chief Fire Officer.

2.4 It is anticipated that by encompassing the points identified above, future qualitative reporting will be more balanced and meaningful, providing additional robust scrutiny to the planning and reporting processes of the Service. Regarding quantitative reporting, a review of performance indicators and assurance measures across the Service is underway and the results of this work will also be incorporated into future reporting.

2.5 Due to the shortcomings identified in this covering report, and because a significant portion of the next reporting period will also contain updates that are equally as biased, it is proposed that the next issue of the Business Plan Actions Report Health Check received by Commissioners be for quarter 1 of 2024/25 and cover the period between 1st April - 30th June 2024. This will enable the proposals in 2.3 to be actioned and embedded, resulting in succinct strategic overview of holistic performance of the Service, inclusive of the Morris Report recommendations and the Chief Fire Advisor Thematic Reviews.

3 IMPLICATIONS

3.1 Regulatory, Strategy and Policy

3.2.1. Development of the business plan actions is carried out considering the regulatory frameworks under which the Service is mandated to operate.

3.2.2. By discounting update reports for Q3 and Q4 of 2023/24, would be to recognise the unprecedented position that the Service was in, and that attempting to provide a more realistic position by re writing these reports would not be as worthwhile as focussing effort and resources on the future and on plans to reinstate a more accurate reporting process from the beginning of this financial year.

3.2 Resources, Assets and Delivery

3.3.1. A future effective and robust business planning process and associated reporting will enable the Service to shape the resources and assets that are required to deliver effective and efficient services to the communities of South Wales.

4 RECOMMENDATIONS

4.1 That Commissioners note the contents of the Business Plan Actions Report Health Check 2023 – 2024 Quarter 3 but recognise that the updates contained within were from a moment in time when the internal perspective relating to performance was different to the position that it is today.

4.2 That Commissioners note the planned amendments to the planning and reporting processes that will ensure future reports against the Business Plan Actions are more accurate, honest, and meaningful.

4.3 That Commissioners agree that the next Health Check Report received will be the Business Plan Actions Report Health Check 2024 – 2025 Quarter 1. (1st April - 30th June 2024).

Contact Officer:	S Watkins Head of Corporate Support	
Background Papers	Date	Source / Contact
None		

Appendices	
Appendix A	Business Plan Actions Report Health Check 2023 – 2024 Quarter 3.

APPENDIX A

BUSINESS PLAN ACTIONS REPORT

Health Check

2023-2024 Quarter 3 (1st October – 31st December 2023)

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 Commissioners of South Wales Fire and Rescue Service and senior leadership on progress towards achievement of the Strategic Themes and Strategic Performance Indicators for the period 01 October – 31 December 2023.

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.

1.2 All departments link actions within their annual departmental 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 the associated indicators.

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 Commissioners and Officers with a health check on performance against the Strategic Themes and Strategic Indicators for the period 01 October – 31 December 2023.

Issue

2.1   For Commissioners' 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 2023.

2.3   Appendix 1 attached is a summary of the Performance Monitoring Report, which reviews performance against agreed targets for the period 01 April – 31 December 2023. It also includes a summary comment for each Strategic Performance Indicator.

2.4   Appendix 1 identifies that two indicators have not met their targets and performed worse than last year, one indicator did not meet its target but was within 5% of the target and performed better than last year, three indicators have met their targets and performed better than last year, and one indicator has met their target, but incidents were higher than last year.

2.5   Two indicators did not achieve the targets set and performed worse than last year:

STRATEGIC PERFORMANCE INDICATOR	Q1/3 2022-23 Actual	Q1/3 2023-24 Target	Q1/3 2023-24 Actual	% Under (-) or Over (+) Target	Q1/3 Year on Year Change
Total Other SSCs Attended	2,371	2,123	2,468	+16%	+97
Total False Alarms Attended	6,774	6,469	7,101	+10%	+327

2.6   One indicator did not meet but was within 5% of the set target and performed better than last year:

STRATEGIC PERFORMANCE INDICATOR	Q1/3 2022-23 Actual	Q1/3 2023-24 Target	Q1/3 2023-24 Actual	% Under (-) or Over (+) Target	Q1/3 Year on Year Change
% of dwelling fires confined to the room of origin	81.90%	85.00%	83.60%	-1.40% points	+1.70% points

2.7   Three indicators met or exceeded targets set and performed better than last year:

STRATEGIC PERFORMANCE INDICATOR	Q1/3 2022-23 Actual	Q1/3 2023-24 Target	Q1/3 2023-24 Actual	% Under (-) or Over (+) Target	Q1/3 Year on Year Change
Total Fires Attended	5,009	4,727	4,518	-4%	-491
Total Deaths and Injuries	49	45	28	-38%	-21
Accidental Deaths and Injuries	41	38	24	-37%	-17

2.8   One indicator met or exceeded the target but incidents increased compared to last year:

STRATEGIC PERFORMANCE INDICATOR	Q1/3 2022-23 Actual	Q1/3 2023-24 Target	Q1/3 2023-24 Actual	% Under (-) or Over (+) Target	Q1/3 Year on Year Change
Total Road Traffic Collisions	614	664	635	-4%	+21

2.9   Appendix 1 attached provides information on the Service's performance during the period 01 April – 31 December 2023.

Equality Risk Assessment

3.1   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.

3.2   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 Commissioners review the performance details and statistical data for the period 01 October – 31 December 2023 contained within this report.

Strategic Theme Task Overview

Theme ID	Theme	RED	AMBER	GREEN	DELAYED
ST01	Keeping you safe	1	4	13	1
ST02	Responding to your emergency	0	8	8	0
ST03	Using technology well	0	14	21	1
ST04	Working with our partners	2	3	10	0
ST05	Engaging and communicating	0	8	4	0
ST06	Valuing our people	0	10	17	0
ST07	Protecting our environment	0	2	11	0
ST08	Continuing to work effectively	0	12	20	0
	TOTAL	**3**	**59**	**104**	**2**

Since the Quarter Two report 14 business plan tasks have been closed of which:

- 7 have now been completed.
- 2 have now been embedded as business as usual.
- 1 have been superseded by new tasks.
- 1 is a duplicate of another task.
- 3 have been cancelled.

ORM23.11 **Conduct Emergency Service Network (ESN) Coverage Project working as a Welsh multi agency approach with the Welsh Ambulance Services NHS Trust (WAST) and Gwent and South Wales Police.**
This project has been completed although there may be further requests and requirements of the project and coverage meetings are programmed for the coming year.

RR20.11 **To support stations to include water safety in their Community Risk Management Plans (CRMP's).**
The Water Safety team has met with all Station Commanders and guidance has been put into effect by stations. All information is also available on the intranet.

F&E23.04 **Carry out appliance modifications for the new holmatro pantheon cutting equipment.**
All appliance modifications are now complete.

ICT23.03 **Provide the Occupational Health Unit (OHU) with a method whereby they can simultaneously text a group of people with their appointment details and get a report back of all messages that have been successfully received. This will improve efficiency and provide evidence that a message has been received.**
Task closed.

CS21.25 **Develop a Fire & Rescue Authority (FRA) members reporting portal on our Business Management Information System (BMIS) to allow access to relevant service performance data.**
This task is no longer applicable and has been closed.

RR23.04   **Coordinate and promote our involvement in major events working with internal/external stakeholders to ensure all persons attending the events (and staff) are safe.**
An Event Risk Assessment has been produced.

PS22.28   **Contribute towards developing a cohesive 'new starter' process using People-XD functionality. This includes implementing the required functionality from appointment to on-boarding, ensuring a seamless transition for the new starter and an efficient process that makes best use of the technology available (in collaboration with Recruitment, Learning & Development, Payroll, Pensions).**
This task has been merged with PS22.35 "Develop and implement an updated Probation process making best use of available technology" and will be progressed and reported as part of that development.

PS23.05   **Develop our understanding of the career journey of our people, from recruitment to retirement including streamlining our promotional processes.**
This has been identified as a duplication of tasks being undertaken under other workstreams.

PS21.10   **Develop a focus group to increase awareness, membership, and participation.**
There is currently an Inclusive Working Group and Neurodiversity Partner Network to increase awareness of Equality, Diversity and Inclusion (EDI) issues and to gain support and ideas.

PS22.39   **Develop, promote, monitor the Organisational EDI Map.**
The Strategic Equality Plan has been created for 2023-2026 and has been promoted across the Service.

PS23.08   **Reshape our EDI framework to meet the needs and challenges of a modern FRS.**
The first draft of the Inclusive Action Plan (IAP) has been completed and is currently with the Senior Management Team (SMT).

PS22.05   **Use existing BMIS data to monitor post-pandemic absences, providing quarterly reports to People Services, SMT, Heads of Service (HoS) and annual national reports.**
Monitoring is now business as usual, reporting via BMIS on a weekly basis.

PS23.07   **Review our working arrangements with external agencies to ensure suitable support for our Mental Health.**
Discussions have taken place with agencies such as Mind as to supporting mental health support and this is now embedded.

CS22.13   **Undertake a survey to determine the effectiveness of internal communications and implement improvements.**
Middle and Senior Leaders were surveyed in Spring 2023 and findings circulated to staff via the Shout newsletter in August. This has now been superseded by the Independent Culture Review Report (ICRR) publication.

Strategic Theme Task Commentary

ST01 – Keeping you safe

1.1 Reduce the impact of false alarms on our resources

The Unwanted Fire Signals (UFS) Working Group continues to respond to the recommendations of the **Audit Wales report on False Fire Alarm Reduction** (published 27/07/23 – see below).

The UFS reduction strategy is in draft. Sharing of information is being conducted with other FRSs alongside a questionnaire on approaches taken by other services. Data analysis is being undertaken prior to engagement with Alarm Receiving Centres (ARCs) on the impact of false alarms on resources. A reporting portal has been set up to support the Working Group.

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

The review of how we identify and apply risk rating of Home Safety Checks utilising the All-Wales Risk Stratification Group is making good progress in conjunction with adopting the **Safelincs** online system which will provide an online home fire safety assessment. Welsh translation completed and estimated go live date is likely to be Spring 2024. The introduction of Safelincs will provide additional means of reaching out and supporting our high-risk communities.

Analysing the behaviours of persons that have experienced an accidental dwelling fire continues with positive marks against individuals' behaviours during fire. A report to be complied and presented to SMT and at the National Fire Chiefs Council (NFCC) data conference.

1.3 Reduce the number of Road Traffic Collisions (RTCs)

We continue to work with Welsh Government (WG) and **Go Safe Wales** to explore areas where we can initiate behavioural change amongst road users. The Domino presentation is routinely being delivered to further education colleges.

1.4 Reduce the number of deliberate fires

The Arson Reduction Team continues to work with Community Safety (CS) Partnerships and local partners, including **Natural Resources Wales** (NRW) and unitary authorities (UAs), to address deliberate fires through focussed interventions, campaigns and collaborative work.

In relation to reducing wildfires, a land management information form is being developed to collect information from landowners and managers. This will populate a central database to monitor and evaluate risk and will be updated onto appliance mobile data terminals (MDTs) over the coming months. Work on identifying and building relationships with landowners and partners continues.

1.5 Improve safety in and around water

Phase 2 upskill of all E-type wholetime duty system (WDS) stations to D-type continues. 2023-24 tasks are as follows.

- Three WDS stations trained to D-type – completed.
- D-type equipment roll out – two out of three stations completed. Final station will be completed by the end of Feb 24.
- Pontyclun and Porthcawl On-Call stations have been changed from D-type stations to E-type.

The 2024-25 tasking has been set and the project is on track to be completed by the end of March 25.

The Water Safety team continue to:
- Work with Water Safety Wales, in particular the Education Subgroup on the supply of resources for use in schools.
- Develop the Crucial Crew partnership with the Royal National Lifeboat Institution (RNLI).

The River Usk Trackway project (a deployable boat launch point trackway) is underway. All relevant surveys have now been completed and submitted to Newport City Council Planning who have provided comment, this has been circulated to the relevant people and a response will be provided on return.

1.6   Improve fire safety in buildings in our communities

A decision regarding our partnership project RIDGE with West Midlands Fire Service (WMFS) has been made and it will not continue into the next financial year. As such the current manual method of implementing our Risk Based Inspection Programme (RBIP) will continue along with the commencement of a working group to consider a system to support Business Fire Safety (BFS) workloads.

> **RIDGE** *(risk information data gathering engine) identifies and prioritises domestic and commercial properties that are most at risk from fire.*

The proposal for a trial of fire safety checks on non-domestic buildings by operational crews was presented at OCG, SMT Business and Fire Brigades Union (FBU) other ranks meetings during Q3 and the pilot process was authorised to commence from April 24 at the identified stations. The project planning phase is ongoing and training is due to be delivered to the pilot stations in March 24.

High-Rise Phase 3 audits continue following completion of PRP surveys that have identified deficiencies with external walls of high-rise residential buildings which now fall under the amendments to legislation.

Work on our BFS regulating officers gaining access to the National Contextualized Auditors Register (CAR) is progressing. However, Information from the NFCC is that they have issues with the number of assessors that they can utilise. This has an impact on our officers accessing the register. Awaiting information from NFCC regarding their capacity to provide assessors.

Work is ongoing to develop a reporting module via BMIS to provide BFS management information and this is scheduled to be completed by the end of February.

Joint Fire Control (JFC) continue to work with Mid and West Wales FRS (MAWWFRS) and BFS to improve Site Specific Risk Information (SSRI), Pre-Determined Attendance (PDA) and vicinity information. We await agreement of timescales to maintain the information. Aligning of information across the two Services is still not in place. SWFRS reviewing OTPs and PDAs and will advise Control of the alterations required. Due to complexities of updating the PDAs and reviewing SSRIs and separate projects this will remain ongoing until at least 2025.

ST02 – Responding to your emergency

2.1 Respond effectively when you need us

There is currently no directive to implement a trial of the flexible rostering system. The flexible rostering group is focussed on identifying issues and areas to improve with the current systems.

Joint Fire Control (JFC) establishment is increasing slowly, with four new recruits joining their respective watches although they are not yet counted for crewing. Planning on the 2024 recruitment campaign will commence in the second quarter of 2024. Resilience support to Emergency Response (ER) during busy periods by the training and systems teams. Numbers on watch high during January due to no leave.

JFC continues to test Multi Agency Incident Transfer (MAIT) with other agencies every Thursday. Fortnightly meetings with WAST, Police and Fire to further progress with a view to go live within 6 months.

> *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.*

The final draft of the review of Operation Ategol is nearing completion which takes regard of industrial action planning assumptions, SOPs (Standard Operating Procedures), training regime and concept of operations. This includes the new Auxiliary Control training plan. Consultation with the SLT and Executive Leadership Team (ELT) members has been delayed slightly due to SOP updates and exercising outcomes, expected to go to Heads of Service (HOS) in January 2024 for consultation prior to publishing.

Recruitment of Auxiliary Control staff is ongoing. Auxiliary training and exercising continues: Auxiliary Control staff have received full initial training, and the first combined exercise will take place in January and February 2024. Compliance visits undertaken to observe incident command (IC) revalidation and SOP discussions.

Three of the seven chassis ordered for "fit for purpose" 4x4 fire appliances have been delivered to the manufacturers for body builds with completion scheduled for March / April 2024.

SSRI Phase 1 Data Cleanse Report and Phase 2 Risk Information Flow Report are progressing with a new SSRI system planned 2024/25. Most areas of this work will form part of the new Operational Intelligence System (OIS). Ops Intel are working on automated ways to update and cleanse the system.

We are conducting research and development into emergency response to fires involving electric vehicles including visits to equipment manufacturers to view options. We attended the Emergency Services Show at the National Exhibition Centre (NEC). Demo day arranged covering fire blankets and branches. ORG report being drafted by aimed at bringing fire blankets for trials.

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

Improving the training pathway from initial recruitment to competent On-Call firefighter continues. A new one-week initial course has been designed followed by a two-week breathing apparatus (BA) course which will enhance firefighting capabilities for new entrants.

> *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.

The Retained Management Team (RMT) continue to work with <u>Skills for Justice</u> (SFJ) to embed newly designed qualification. This will also dovetail with the new trial one-week initial course

> *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

The Training and Development (T&D) department is working closely with Staffing, Operations and RMT to ensure training delivery minimises impact on service delivery.   Monthly meetings are held with T&D and Operations Staffing to determine course requirements and impacts. Close liaison between departments has improved in minimising impact to operational capacity and maximising attendance.

The Efficiencies and Effectiveness working group met during Q3. The working group has developed a draft station instruction that will incorporate expected routines along with an increase in training time for operational maintenance of competence.

Following national guidance, the introduction of Section 19 of the 2006 Road Traffic Act will go to legislative consultation during the first quarter of 2024. It will then be submitted to Parliament to implement legislative changes. It is anticipated that this would not happen until Autumn of 2024. SWFRS have already re-evaluated courses and can implement training packages that adhere to the changes proposed.

BA Refresher (BAR) material has been reviewed and course adaptations are in progress to meet the training guidance from themed incidents involving high-rise and basements. BA online content continues to be developed and submitted to the Training Support Unit (TSU) for publication into online training packages.

ST03 – Using technology well

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

A decision was made by the SMT that the contract for RIDGE with WMFS will not be renewed from April 2024. A working group has been established to support sourcing a new RBIP system provider for the Service.

The design and implementation of a front-facing, online Procedural Library that supports easy access to relevant policies and procedures is ongoing and will be informed by the Culture Review Working Group for Policies & Procedures.

The development and implementation of an updated probation process, making best use of available technology, is awaiting recommendations from the Independent Culture Review.

The Service intends to source and implement a digital platform around attendance management to ensure more accurate and up to date reporting with respect to staff attendance.

Procuring a Patient Management System for use within OHU is subject to a re-assessment of budgets and may be delayed.

Operational Risk Management (ORM) continue to explore the use of digital devices to promote new and innovative working practices that can lead to sustainable efficiencies. Quotes for iPads have been drafted by ICT.

Several projects are currently being undertaken by BFS to improve the suite of risk reduction undertaken to deliver efficiencies through use of technology whilst undertaking core risk reduction activities. Although the project with WMFS is due to end, the new working group for this area will be utilising technology for continuous improvement.

Our HR system, People-xd (previously Core), is now utilised for all recruitment where possible. Additional work required across HR to ensure full integration across all HR teams.

Release of an upgrade to our finance system, E-Fin, has been delayed and we anticipate it will take place October 2024.

Development of a Geo Data Hub on the intranet for staff to access information/guidance on the use of geographic information system (GIS) data and mapping is ongoing. Due date has been extended to enable this development to progress with work on the Service's geospatial strategy.

Existing BMIS station dashboards continue to be supported pending the design and implementation of a revised dashboard to replace the existing 47 dashboards. Due date has been further postponed due to team resource. Work on CRMP reporting will inform this task.

South Wales Police (SWP) replacement Command and Control solution is expected to go live in 2025. This will have implications for the ICCS which is being discussed with ICT to determine support required. Possible requirement for evacuation to BC Site for new mobilising system when installed. Red Box recording system may also be affected by the upgrade - again options being explored by ICT.

> *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.*

The deployment of the **Emergency Services Network** (ESN) has been delayed with a likely implementation date of 2029.

> *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.*

Progress on re-instating the Ops Intel intranet presence has been slow due to staff change overs. A basic framework has been set out on paper.

The due date for the hydrant recording system update has been extended to enable this development to progress with work on the Service's geospatial strategy.

Ops Intel are reviewing the SSRI Management System database in preparation for migration to the Operational Intelligence System during 2024-2025.

The options paper, which outlined the different opportunities available for purchasing/creating a new Management Information System, was presented to the SMT during Q3. A decision was made on how to progress with procuring a new system - drafting the documentation required to initiate a procurement process will be the next step.

ICT have:

- Received hardware for the replacement of the existing core layer 2 switches at HQ and the disaster recovery (DR) site. Meeting is being arranged to discuss plans for setup, configuration and installation of new hardware. We will liaise with the contractor with regards plans for setup, configuration and installation.

- Purchased virtual Firewall Management Centre (vFMC) software for the replacement of the HQ inner firewall allowing management of new JFC firewalls as well as SWFRS. FMC software has been updated. Compatibility issues have been identified and a meeting has been arranged with the contractor to discuss a way forward.

- Reviewed progress on developing and integrating the Gazetteer and Geospatial Data (G2D) system. In August 2023 we visited WMFS for a project update. At this meeting they confirmed that they were re-evaluating their direction and were not able to provide us with the assurances we needed that the system would be developed any further. We have subsequently concluded that SWFRS would not continue to work in partnership with WMFS any further. A Project Team is being established to consider requirements.

- Phase one of the creation of a client database to manage Community Safety (CS) contacts has been completed and has had some initial testing. This will enable the CS manager to interrogate the system to identify any interactions an individual has had with the Service or activities in relation to a premises.

- Updated the Virtual Desktop Infrastructure (VDI) build with the latest software and are preparing the test plan.

    VDI is a virtualisation solution that uses virtual machines to provide and manage virtual desktops. VDI hosts desktop environments on a centralized server and deploys them to end-users on request. accessed over the network with an endpoint device (laptop, tablet, etc.).

- Commenced backups on the new system and working towards a disaster recovery test.

- Worked with Information Governance (IG) to explore new tools to improve our information management and data retention – this will lay the groundwork to allow more data to be held in the cloud long term and adopt more tools in the Microsoft 365 ecosystem. Before this project can be started, IG need to identify the retention policies they would like enforced.

- The contract award for the WG Cymru Security Operations Centre (SOC) initiative to deliver the needed in house systems and process procurement is due to take place late March so we will not know final likely costs for the authority to finalize the needed budget until then.

- Continue to upgrade the wireless access points at all locations with the change to the controller allowing the use of the latest wi-fi technology. There are still a few outstanding items to resolve, mainly hardware to be delivered and documentation of changes by our contractor.

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

We have replaced most iPhone 7 Plus mobile phone devices and are purchasing final replacements of on-call watch manager devices and iPads, now becoming end of life, with new devices linked into Microsoft 365.

Due to current priorities, the options paper regarding the status of our risk modelling system and the options available to the Service going forward is yet to be presented for consideration. It is understood that the Fire Service Emergency Cover (FSEC) system is no longer available, therefore any decisions around fire cover would be made on other available risk-based information.

FSEC was a software-based toolkit, used to assist FRSs in assessment of risk. FSEC can also be used to identify and help to reduce the number of people at significant risk and the amount of property, environment and heritage at significant risk from fire and other emergencies within the community.

ST04 – Working with our partners

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

PSB meetings have continued throughout Q3 and Operational GMs have attended to represent the service. Our station commander cadre attend a number of sub-working groups in full support of the PSBs, this information is fed through Ops management and captured via BMIS planning tasks

An 18% reduction in deliberate fires was recorded, a contributing factor being collaboration between our Arson Reduction Team and our work with NRW and UAs. We will solidify this by producing an arson reduction guide for the public sector.

Work continues on the design and implementation of a PSB area on BMIS for collation and reporting of evidence to support the PSB wellbeing objectives. Reviewing requests received to identify common metrics for central dashboard.

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

Work on the specialised housing guide (addressing sheltered housing) is on hold pending publication of the new guide.

CS continue to strengthen partnership working including with Public Health Wales utilising All Wales NHS Manual Handling to identify referral pathway for bariatric patients. Established links within health, ongoing discussion regarding referral pathways.

Data sharing agreement nearly completed for sharing risk information for over border incidents.

Health and Safety maintain regular communication with both MAWWFRS and NWFRS promoting shared understandings and benchmarking processes. An all-Wales meeting is planned to take place 08/02/2024 at Rhayader.

Work is ongoing as Local Resilience Forum (LRF) groups reinvigorate in line with each LRFs forward work plan.

> **LRFs** are multi-agency partnerships made up of representatives from local public services, including the emergency services, local authorities, the NHS and others. These agencies are known as Category 1 Responders, as defined by the Civil Contingencies Act.

4.3 Review and evaluate our existing partnerships

We continue to consolidate existing partnerships and review opportunities for the future. An appointment has been made to the Partnership Ops BFS Link role, the remit for which will include a review of current memoranda of understanding (MOU). Wales Accord on the Sharing of Personal Information (WASPI) to be completed with a view of strengthening partnerships.

> *WASPI is a tool to help share personal information effectively and lawfully. The consistent approach promoted by WASPI, and the good practice shared via this website, help organisations to meet their data protection responsibilities as they move to collaborative service models within a changing legislative landscape.*

Property Services continue to work with our emergency service partners towards a co-ordinated strategy to develop future co-locations. Progress has been made with mapping of Fire, Ambulance and Police sites across South Wales utilising **Data Map Wales**. This will allow all Services to access this information securely when looking at strategic areas for new/further sites. Work has progressed with the data mapping now up and running. We are awaiting other services to begin populating their information.

We continue to review current lease arrangements for co-location sites with a view to replacing with a standardised cost recovery mechanism. Good progress is being made and a firm of chartered surveyors have produced a report for our recharge mechanism, for discussion with our co-location partners.

ST05 – Involving 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

Due to ongoing security concerns around use of TikTok, plus reputational issues raised via social media usage, reviewing the Service' social media channels is parked. We will continue to concentrate on better use of LinkedIn and Instagram. Threads does not seem to have taken off as intended.

Our stakeholder register is continuously under review. New sign-up sheets are being designed to be filled out during events for people to sign-up. A contact form and area of the website is also in progress to allow people to sign up online.

The engagement area of the Intranet is still in progress. Engagement Toolkit has been updated.

The Shout Forum had begun rotating locations across SWFRS to encourage more active participation and we have also started gathering feedback from teams that are attending recruitment/engagement events on behalf of the Service.

The Service's website accessibility score (referencing the Silktide Index) has dropped from its previous mark of 66% in October 2023, to 59% as of January 2024. This has lowered the rating from 'Good' to 'Fair'. The risk owner is currently investigating this with the Service's website provider and could be linked to several out-of-date plugins that the website uses, and the inability to install Cookie Control due to an ongoing server issue, which would improve the website's accessibility. The review of the website's content is continuing, both in terms of accessibility improvements that can be made to page content, as well as 'back end' changes that can be made to improve functionality. This work will continue beyond 2023-24, to provide the best possible user experience and ensure compliance in advance of any further Government review, until the Service is able to commission a new website that is built with accessibility as a key priority.

We continue to maintain awareness of high impact community events. Co-ordination and chair of the events group is ongoing, with many major events planned for over the last quarter. Work to enhance representation on unitary authority (UA) planning groups is ongoing.

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

The starting point for developing a UA CRMP that links to Service strategic objectives is the Annual Improvement Plan which has been completed. We currently have an overall CRMP which is incorporated into our improvement plan together with station based CRMP plans. The work to complete a UA CRMP for Cardiff and Caerphilly is currently ongoing.

The Road and Water Safety Team regularly share content with the Media Team. Conversations are taking place to increase our coverage across FRS media streams along with ongoing review of the messaging that goes out from service. We are currently producing a new winter video for Road Safety and Water Safety with our internal media team.

We are carrying out a review of all Community Safety activities to ensure they are aligned with our strategic priorities and community needs. For example, recognising the emerging issue of lithium-ion battery safety, this has been integrated into the home fire safety check process.

Coordinating and promoting risk reduction involvement in large scale events is now embedded within policy with some work required to monitor completion of associated documentation.

A digital campaign calendar will be discussed in the next Consultation and Engagement Group meeting to decide what events shall be included and what method would be most effective for the delivery of this.

ST06 – Valuing our people

6.1 Attract a workforce that reflects and represents our communities

Adopting more data capture for recruitment and evaluation has been parked due to unfilled posts in the Communication, Attraction and Engagement team.

Work is ongoing with new initiatives aimed at increasing the diversity of applicants to the Service. Community outreach continues with underrepresented groups.

The development and implementation of a Service recruitment strategy, considering the **NFCC recruitment hub** best practice, is in draft format for consultation but since findings of cultural review published will need to be revisited.

Recruitment continues to explore the use of metrics via People-xd data.

6.2 Develop our people by identifying training and development opportunities

The structure of BFS has been embedded although through recent promotions, retirements and transfers still requires attention to attract, retain and develop officers in role.

A team has been set up to develop all BFS tactical officers on engineered buildings via site visits and department training days. Dates have been set whereby BFS tactical officers will be attending buildings to gain information on engineered solutions within specific buildings and access further knowledge on similar devices.

The development of a range of Health and Safety training packages that can be delivered via Teams across the Service continues. Corporate staff induction is now live online.

Learning and Development have launched four of the five learning pathways with the final one, Strategic, to be launched April/May 2024. Further communication and engagement required with corporate staff.

Two members of the JFC training team have now been trained on pdrPro admin so are now able to update and amend pdrPro. A review meeting is due this month to work on finalising pdrPro so that further training tasks can be rolled out.

> *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.*

JFC training opportunities continue to increase. A large amount of work is required to expand pdrPro and introduce National Operational Guidance (NOG) to meet Fire Standard for Control; this requires resource.

IG training and awareness materials to be reviewed and updated in accordance with priorities and resources.

A programme of IG surgeries in collaboration with JFC and Occupational Health is yet to be formalised.

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

BMIS data is used to provide information around key areas of sickness by Attendance Management, Occupational Health and HFA statistics. The next phase to provide further training and information to middle leaders.

We are currently evaluating research into the efficiency of mental health champions.

The decision to fully implement the 'Fire Fit Programme' is to be considered by SLT.

Work to extend 10 On-Call fire and rescue stations to include gyms, drying facilities, etc, is progressing. Pontycymmer is completed and was handed over in November 2023. Treorchy completion date has been extended until May 2024 due to essential unforeseen works being required. Tender pack for Gilfach Goch has been completed ahead of schedule on 29th November and the tender award is due on 6th February, with construction is due to start March 2024. Ferndale tender pack is being finalised and is planned to go out to market by 22nd January, with the view to start construction in May 2024.

Incorporating inclusive facilities within our buildings has started. Both Roath and Whitchurch dormitories are now complete and designs have been received for Duffryn. Design work will now commence for Merthyr station and bathroom areas on other stations.

6.4 Deliver on the recommendations of the Investors in People report

Middle and Senior Leaders were surveyed on communication within the Service during Spring 2023 and this was reported to SLT on 20 July and included in the August Shout newsletter.

6.5 Encourage and support a bilingual culture across the Service

A BMIS reporting portal has been designed to track compliance with the **Welsh Language Standards** and is awaiting sign off by 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

The Sustainable Procurement Principles document has been developed and will be published on the Services Procurement pages.

7.2 Expand the use of electric vehicles

We continue to expand our network of electric vehicle (EV) charging points to support increased use of EVs. All chargers that we received funding for have been installed. Another grant has been applied for to install bigger chargers at four sites.

A paper was submitted to SLT in September and it was agreed that employees will be able to use the charging infrastructure following the introduction of the EV charging policy. Policy drafted for consultation, expect to complete by end February.

We continue to review developments and opportunities in fuel and other technologies including the use of biodiesel (a form of diesel fuel derived from plants or animals).

We are in the process of devising and implementing a light vehicle replacement policy to meet Welsh Government 2030 target for zero emissions. Currently the are no tax exemptions to operate a blue light vehicle and this, along with the charging infrastructure, will cause delays in going fully electric. Awaiting consultant feedback from HMRC but will require upgrade to charging facilities.

7.3 Reduce our energy use and our carbon footprint

The main build for the Net Carbon Zero New Inn fire and rescue station is in planning consultation.

A gap analysis has been conducted to determine what needs to be done to implement an accredited Environmental Management System (EMS) to gain recognition for our environmental practices and demonstrate our commitments to sustainability, consideration of environmental impacts, compliance with legislation and environmental protection. We are aiming for a minimum of level 3 out of 5 of the Green Dragon Environmental Standard. An EMS options paper is being drafted for consideration by SLT. A gap analysis has been conducted and work begun on essential documents such as environmental legal and aspects register.

Energy use data for 2021-22 and 2022-23 at all sites is currently on the Sustainability Intranet Page. Waste data is being received following award of contract in April and will be published once data is reviewed and validated. Latest data published internally; waste data will be published when issues are addressed. Re-baselining will allow for corroboration of data and further publishing externally.

Meetings between the Statistics and Risk Team and Sustainability Team have been ongoing with progress made on developing a dashboard of metrics on BMIS to demonstrate change on a granular level. Energy usage has recently been added to the dashboard and permission granted to re-baseline using WG reporting methods so that data discrepancies across different mediums internally and externally can be addressed.

7.4 Consider how our activities impact on the environment

We are developing open dialogue with staff on our carbon reduction position and the challenges we face. The intranet page has been made live and is a work in progress. This allows messages to be communicated to all staff members and provides contact details of the sustainability team as well as a link to the innovations scheme for any suggestions from staff members. A champions network and training package proposals have been drafted.

Plans for station sustainability champions have been made with enthusiastic individuals from a station level being asked to volunteer time. Quarterly meetings will be chaired by the Sustainability Officer. Call to arms has been drafted for circulation across the Service.

7.5 Reduce the amount of waste produced

The new waste contract has been awarded and stations being brought on according to previous contracts' end dates. All stations will be on the new contract by 24th April 2024.

Engagement is currently ongoing in cooperation with sustainability, waste contractor and Station Commanders to explain new recycling legislation requirements.

ST08 – Continuing to work effectively

8.1 Be clear and publicly accountable

Training assurance is now carried out by each Station Manager lead.

The introduction of a new Accident and Near Miss Reporting Process continues with JFC training planned for March.

Implementing the Matthews Pension Remedy Exercise, which relates to On Call service prior to July 2000, is an extensive piece of work, with some calculations stretching back as far as the 1960s and is running alongside the McCloud exercise. Once enacted, the Service will have 18 months to fully implement. Letters have gone out to both those that are eligible and those that do not meet the criteria, further letters are planned once the legislation has changed.

Information, regarding implementing the national McCloud Pension Reform Exercise, is being provided for those that are retiring from the Service and the legislation changed on 1st October 2023. Both Rhondda Cynon Taff County Borough Fires (RCTCBC) and SWFRS are experiencing resourcing difficulties, which may impact on our ability to continue to deliver services to the standard that we would normally expect. The McCloud data remedy exercise has commenced and we are prioritising cases, as recommended in legislation. This remains a manual process, with seven years of pay and service information needing to be compiled for 1200+ members and returned to RCTCBC. This exercise has an 18-month window for completion. Once the Service has provided all the retired information to RCTCBC there is a requirement for a Remediable Service Statement to be sent out to all members. Immediate Choice members are being prioritised, they include, normal and ill health retirements, dependants of the deceased, transfers in and out, non-eligible individuals and those that have a deferred record or have opted out. All other member data will follow. Additionally, work to agree an RSS template that complies to the Wales specific pension changes is also underway.

Information Governance (IG):

- Continue to develop framework, methodology, and schedule information governance audits. Limited feedback received on proposed information security questionnaire. Original draft needs to be adapted so that we can create a HQ specific questionnaire. Once create scoring matrices will be finalised before it is deployed. Responses to the questionnaire will inform a future IG audit program.
- Continue to discuss work required to support implementation of FSB Data Management Framework.
- Continue work with Property Services and Sustainability on bringing archive into compliance with currently stated retention periods. Deployment of confidential waste bins to all stations to be reviewed following completion of the information security questionnaire.
- Continue to update to IG webpages. Discussions continue with Media and Communications on creating a Disclosure Log for publication of information requests with the Publications Library on the website.
- Continue drafting an IG training and awareness plan, it will be progressed in accordance with priorities and available resources.
- Progressed the creation, publishing, and promotion of a Information Asset Register (IAR) with support from the Stats Team. Update to be provided to SLT on importance of IAR, Register of Processing Activities (RoPA) etc in advance to engaging with individual departments.
- Will review, update and publish Data Protection Impact Assessment (DPIA) guidance once the review of the DPIA procedure has been completed.

- Will progress the JFC IG manual according to joint priorities between SWFRS and MAWWFRS. Current Information Governance Officer at MAWW is leaving their role which will inherently cause delays to this being progressed.

The Strategic Safeguarding Group has been established and a robust 'dealing with allegations' process has been established. This has created opportunities to work with our colleagues within the UAs and ensure we are meeting the duties placed upon us. Training levels are yet to be established nationally but band a training has been adopted from Social Care Wales and will be rolled out across electronic training platforms.

The design and implementation of a dashboard within BMIS to monitor the complaints procedure and provide a quarterly report is complete and is updated monthly.

A draft of the initial Cyber / Forensic Readiness Policy has been produced which will contribute to the overall Cyber plan when we integrate NFCC and Gwent LRF plans. Lack of resource has prevented this work being completed hopefully it will be completed once the new security staff member is appointed.

Gaining accreditation to Cyber Essentials Plus and the wider Information Assurance for Small and Medium Enterprises Consortium (IASME) framework has been parked by the Security Risk Group. In the meantime NFCC is looking at some recommendations for FRS to achieve the **Cyber Assessment Framework (CAF)** assessment baseline profile - we have mapped our assessment against that to inform the GAP and task list being presented to ELT/SMT

> **CAF** *provides a systematic and comprehensive approach to assessing the extent to which cyber risks to essential functions are being managed by the organisation responsible.*

> **Cyber Essentials** *is an effective, Government backed scheme that helps to protect organisations against a whole range of the most common cyber attacks.*

We are conducting a **Fire Standards** gap analysis and benchmarking exercise. Progress being made, standards currently going via Heads of Service to SLT for approval. Most tasks following SLT are either evidence of compliance or tasks already in progress.

Work has commenced to develop a Community Safety and Partnerships data quality assurance guide/procedure. recording of the processes involved with CS work. This will be developed in Q3/4.

8.2 Maximise value for money

We will review vehicle disposal procedure being developed by the Police via the Transport Officers' Group. Fit in with broader consideration of asset disposal procedure.

An options paper is being presented to SLT in January 24 aimed at shaping the future of facilities management for the Real Fire Training Facility (RFTF).

Review of standard licences and leases is complete, agreements have been reviewed and standard documents created. Property Management are to provide a standard charging mechanism and then these will be shared with our partner agencies. Licences updated from legal position. Awaiting finance data and then can be rolled out. Information has been sent to WAST to determine their ongoing needs on station. Information regarding charging mechanism has been obtained.

Operational Risk Management (ORM) and Procurement are working through the programme of events in relation to the tender specification for the all-Wales next generation of corporate wear. Desk top evaluations have been completed and suppliers have been invited to provide samples for trail. Performance trails will run from 20th Feb to 30th April 2024.

8.3 Develop new ways of working

The detail surrounding the development of the organisational filing system remains unclear. Head of Service Performance and Communications will research this further in Q4 to determine whether this action, along with the current deadline, remain.

A draft process for project proposal and initiation processes are being developed, paper for consideration of approval and monitoring processes has not yet been produced. Team resource may mean this is delayed.

Developing operating procedures to provide resilience within Business Support is progressing well.

Implementing the National Pensions Dashboard Project led by the Department for Work and Pensions (DWP) has recently been relaunched by the Government, with a revised completion date of October 2026. It is proposed that FRSs nationally will have a revised connection date, this is yet to be finalised. Most of the workload will be the responsibility of RCTCBC, although there will be some links back to the SWFRS Pensions Team.

Hand-back of tasks previously undertaken by JFC, as part of the JFC Review, continues with progress being made with On-Call processes but no progress on sickness or safeguarding.

PERFORMANCE MONITORING REPORT

Appendix 1

01 April 2023 – 31 December 2023

Gwasanaeth Tân ac Achub
De Cymru

South Wales
Fire and Rescue Service

Produced in
BMIS
Business Management
Information System

Introduction

The Performance Monitoring Report reviews the Service's performance for the period 01 April 2023 to 31 December 2023. The report includes:

The performance indicators show six years of data to demonstrate trends in the Service's longer-term performance.

Following consideration by the Commissioners of South Wales Fire and Rescue Service and the Senior Leadership Team, the report is made available to the public via the internet.

When comparing Q1/3 2022-2023 to Q1/3 2023-2024, incident numbers for fires were:

- Total fires: decreased from 5,009 to 4,518, -9.8%
    - Accidental fires: 1,384 to 1,346, -2.7%
    - Accidental dwelling fires: 445 to 448, -1.5%
    - Deliberate fires: 3,625 to 3,167, -12.6%
    - Deliberate refuse fires: 2,068 to 1,768, -14.5%
    - Deliberate grass fires: 1,004 to 742, -26.1%

Following an increase in grass fires during Q1 associated with an extended period of extreme hot weather in June, grass fires increased compared to last year from 462 to 610 (+32%). During Q2+3 the incident numbers fell from 542 to 135 (-75%) as the Service area experienced widespread rain. Increased grass fires are associated with an increase in good intent false alarm incidents and in Q1 these incidents increased. During Q2+3 these incidents reduced alongside the reduction in grass fires:

- Q1 - Good intent false alarm calls: 799 to 877, +10.0%
- Q2+3 - Good intent false alarm calls: 1,653 to 1,554, -6%

The recent Audit Wales report (2023) into False Alarm reduction highlighted the need to make more use of data and learning from elsewhere to identify opportunities to better manage performance and risks. This included aligning performance monitoring and reporting to the new four-stage approach for Unwanted Fire Signals (UFS), ie, actuation of an Automatic Fire Alarm for any reason other than fire. This policy for targeting reductions from high volume premises was adopted in 2020. It created a four-stage system for monitoring and building on data recorded by crews following incidents. Each stage is based on the volume of alarms generated at a premises in the preceding rolling 12 months.

> Stage 1 – Up to 4 Unwanted Fire Signals in the 12-month period
>
> Stage 2 - 5 to 9 Unwanted Fire Signals in the 12-month period
>
> Stage 3 - 10 to 19 Unwanted Fire Signals in the 12-month period
>
> Stage 4 – 20 or more incidents in the 12-month period

The following table shows a monthly snapshot of premises in Stages 2-4 since January 2023. Numbers in Stage 2 have increased since January 2023 with some variation in Stage 3. Premises in Stage 4 have increased from 6 in January 2023 to 10 in December 2023 (all hospitals which have historically recorded highest volumes on UFS).

Stages	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Stage 2 - 5 to 9 UFS in 12 months	131	143	149	159	162	164	165	167	163	165	170	161
Stage 3 - 10 - 19 UFS in 12 months	31	30	30	30	32	26	27	27	29	30	33	38
Stage 4 - 20 or more incidents in a 12 month period	6	6	8	8	7	8	8	7	9	8	10	10
Totals	168	179	187	197	201	198	200	201	201	203	213	209

Other Special Service incidents have shown an upward trend since 2020-2021 when incident numbers for the full financial year were 2,275, rising to 2,712 in 2021-2022 and 3,079 in 2022-2023. For Q1/3 of this year this upward trend has continued with the Service seeing a 4% increase in Other Special Service Calls compared to Q1/3 of the previous year. The following incident types have recorded an increase:

- Assist other agencies: 510 to 657, +28.8%
- Assistance to Ambulance: 348 to 446, +28.2%
- Bariatric patients: 158 to 221, +39.9%
- Suicide or attempted suicide: 41 to 66, +61.0.%
- Lift release: 83 to 90, +8.4%
- Hazardous materials incidents: 93 to 108, +16.1%

Other Special Service incident types such as water rescues and flooding and are influenced by extreme weather conditions and are likely to become more prevalent in future years. Increased water rescues in Q1 coincided with the period of hot weather experienced in June, 3 last year Q1 compared to 12 this year (due to heavy rainfall on parched ground). For Q2, the numbers rose from 9 last year to 21 this year with 10 incidents in July, 4 in August and 7 in September. For Q3, the numbers have risen from 12 last year to 13 this year. Compared to Q1/3 of the previous year the incident numbers were:

- Rescue or evacuation from water: 24 to 46, +91.7%

Flooding calls in Q1 have also increased although most of these were internal flooding and not related to weather conditions. For the period Q1-Q3 flooding calls have reduced:

- Flooding Q1: 30 to 46, +11.4%
- Flooding Q1-Q3 : 167 to 145, -13.2%

The Service experienced an increase of 3% in calls to Road Traffic Collisions (RTCs) from 614 in Q1/3 2022-2023 to 635 in Q1/3 2023-2024. Although these incidents are increasing, they have not yet returned to pre-pandemic volume. The proportion of incidents involving Extrications/release of persons in Q1/3 2023-2024 was 18.6% of all RTCs, slightly higher than Q1/3 of 2022-2023 rate of 18.0% of RTC incidents, although the number of incidents has increased. There have been 13 fatalities at RTCs attended in Q1/3 2023-2024 compared to 21 in Q1/3 of 2022-2023 and there were 371 injuries (incl. rescue with injury) compared to 522 in the previous year for Q1/3.

During Q1/3 2023/24 the Service recorded 13,005 home fire safety checks: 10,371 were carried out, 558 were refused by the occupant and at 1,332 addresses we were unable to contact the occupier. The majority of home fire safety checks are now carried out face-to-face.

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 23rd January 2024.

If you have any questions or comments on this report, please contact Suzanne Absalom on s-absalom@southwales-fire.gov.uk 01443 232588 to discuss.

Strategic Indicators 2023-24 Q1/3 Performance

The table 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% from target	🔺 Over 5% from target

	Q1/3 23-24 Actual	Q1/3 23-24 Target	Q1/3 23-24 Performance	Q1/3 22-23 Actual	Q1/3 23-24 v 22-23
Total Fires Attended	4,518	4,727	⭐	5,009	-491
Total RTCs Attended	635	664	⭐	614	+21
Total False Alarms Attended	7,101	6,469	🔺	6,774	+327
Total Other SSCs Attended	2,468	2,123	🔺	2,371	+97
% of Dwelling Fires Confined to Room of Origin	83.60%	85.00%	🟠	81.90%	+1.70%
Total Deaths and Injuries in Fires	28	45	⭐	49	-21
Total Accidental Deaths and Injuries in Fires	24	38	⭐	41	-17

The following charts show the total incident numbers (orange bar) for Q1/3 of each financial year versus the Q1/3 Target (yellow) for that year. The grey bar indicates incidents recorded in the remainder of the year for previous years compared to the target (blue) set for the whole year.

Numbers in brackets in the commentary are figures for Q1/3 2022-2023 in comparison to Q1/3 2023-2024 and the corresponding percentage increase/decrease between the two figures.

Total Fires attended compared to targets with Q1/3 breakdown

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Annual Total	1,288	1,038	1,173	1,325	1,022	
Actual Q1/3	5,610	4,444	4,308	4,240	5,009	4,518
Target Q1/3	4,661	5,021	4,827	4,679	4,551	4,727
Annual Target	5,900	6,200	5,942	5,760	5,600	
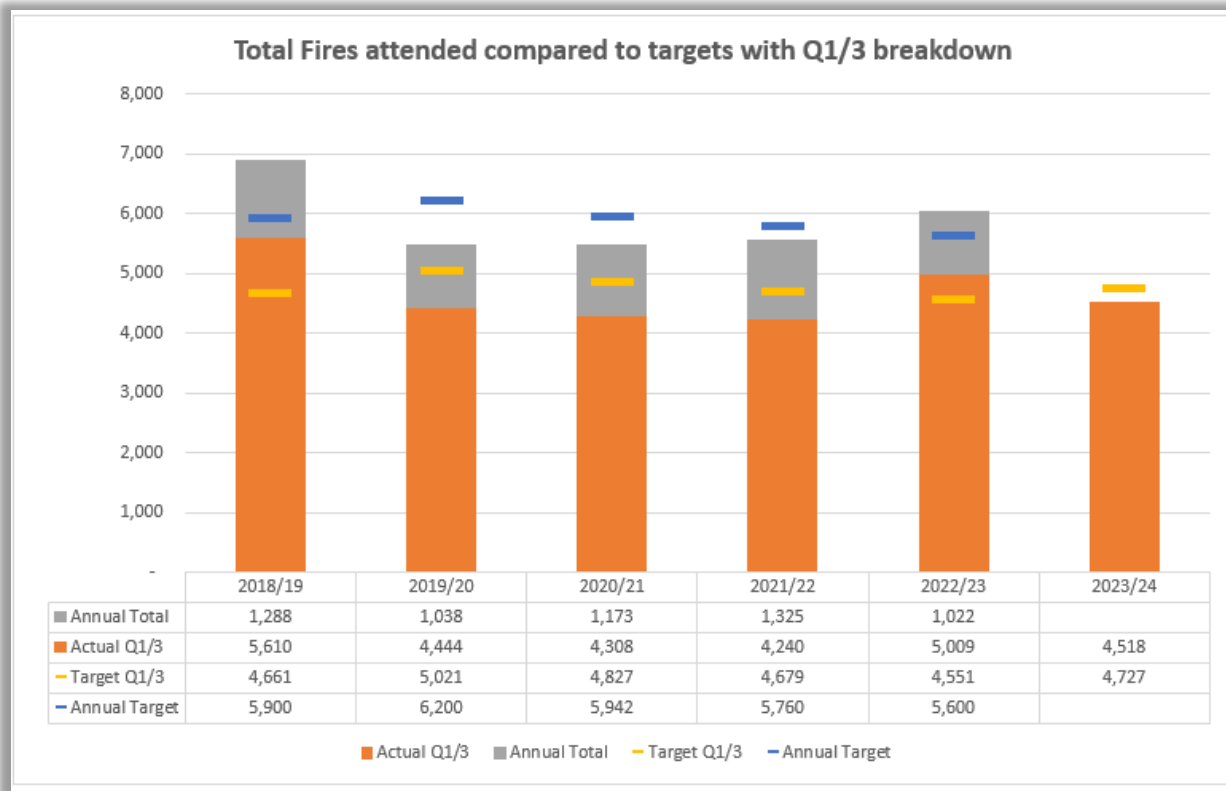
Q1/3 2022/23 Performance V Q1/3 2023/24

- Total Fires (5,009 – 4,518) ↓ 10%, -4% below the Q1/3 target of 4,727
- Accidental Fires (1,384 – 1,346) ↓ 3%,
- Deliberate Fires (3,625 – 3,167) ↓ 13%,
- Deliberate Grass Fires (1,004 – 742) ↓ 26%,
- Deliberate Refuse Fires (2,068 – 1,768) ↓ 15%,
- Deliberate Road Vehicle Fires (237 – 305) ↑ 29%
- Deliberate Fires accounted for 70% of all fires.

Total False Alarms attended compared to targets with Q1/3 breakdown

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Annual Total	1,659	1,720	906	1,915	1,972	
Actual Q1/3	6,188	6,138	6,418	6,451	6,774	7,101
Target Q1/3	5,850	5,991	5,868	6,240	6,356	6,469
Annual Target	7,500	7,655	7,500	7,974	8,115	

Actual Q1/3   Annual Total   Target Q1/3   Annual Target
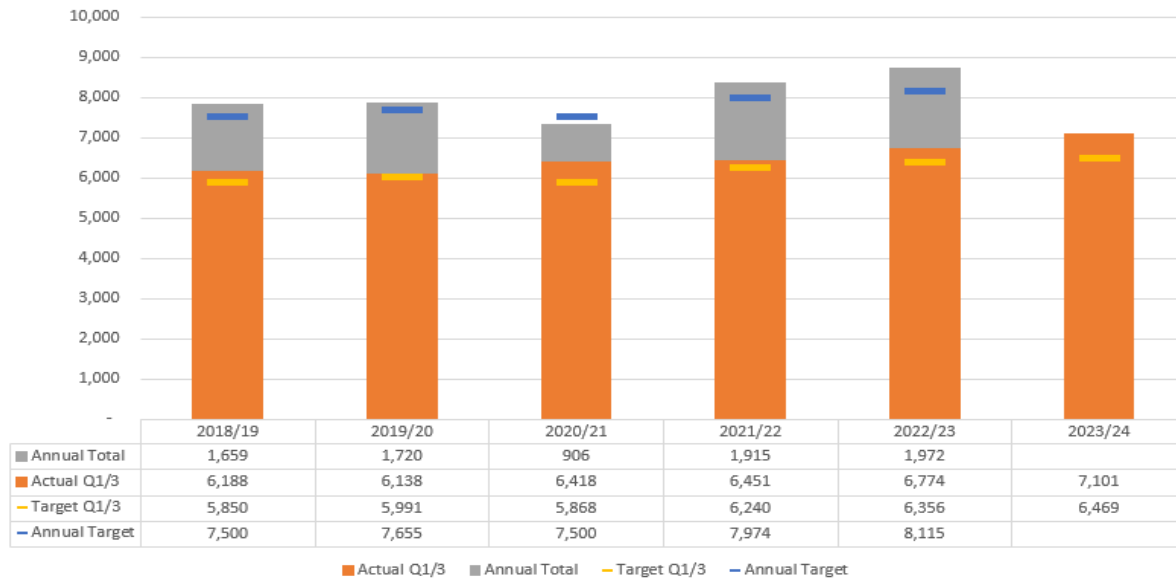
Q1/3 2022/23 Performance V Q1/3 2023/24

- Total False Alarms (7,101 – 6,774) ↑ 327(5%)
- 10% above the Q1/3 target of 6,469
- False Alarm Due to Apparatus (4,095 – 4,402) ↑ 7%
- False Alarm Good Intent (2,452 – 2,479) ↑ 1%
- False Alarm Malicious (227 – 208) ↓ 8%
- Appliances in attendance at Residential homes (342 – 312) ↓ 9%, Education (457 – 497) ↑ 9%, Hospitals (524 – 549) ↑ 5%. Purpose built flats (531-589) ↑ 11%.

Total RTCs attended compared to targets with Q1/3 breakdown

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Annual Total	255	205	132	198	234	
Actual Q1/3	857	790	511	659	614	635
Target Q1/3	798	813	763	754	671	664
Annual Target	1,050	1,074	1,002	992	872	

Actual Q1/3   Annual Total   Target Q1/3   Annual Target
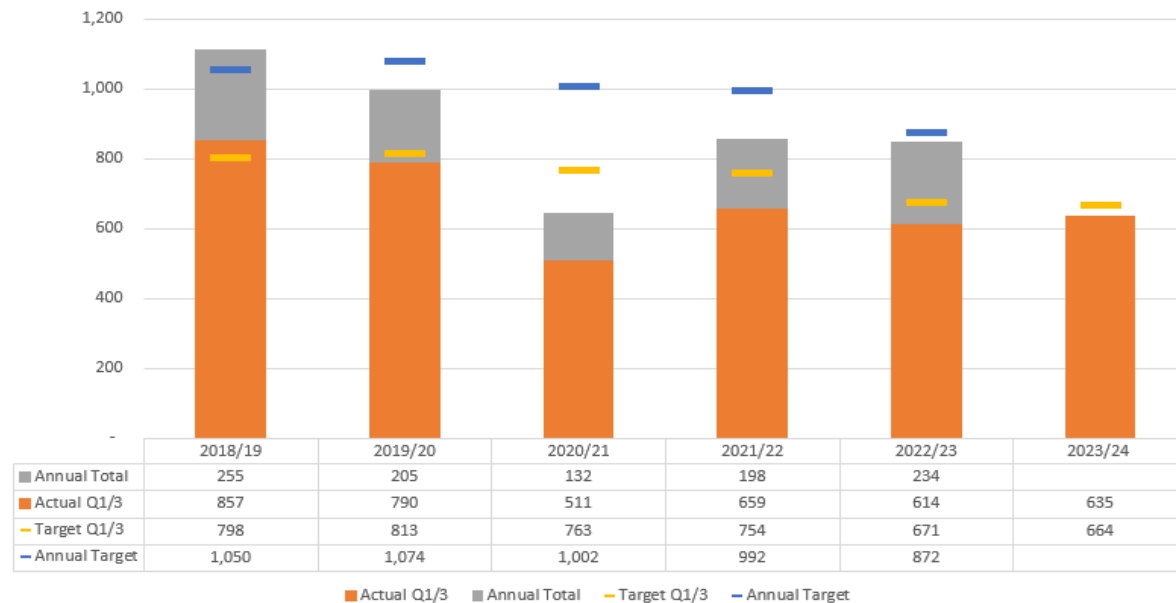
Q1/3 2022/23 Performance V Q1/3 2023/24

- Total RTCs (614 – 635) ↑ 21 (3%)
- 4% below the target of 664
- Extrications/release of persons in Q1/3 were 18.6% of all RTCs which is slightly higher than last year when it was 18.0%.
- There have been 13 fatalities at RTCs this year compared to 21 last year in Q1/3.
- There have been 371 injuries compared to 522 last year in Q1/3.
- There have been 72 rescues without injury compared to 80 last year in Q1/3.

Total Other SSCs attended compared to targets with Q1/3 breakdown

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Annual Total	494	805	566	669	708	
Actual Q1/3	1,568	1,764	1,709	2,043	2,371	2,468
Target Q1/3	1,500	1,533	1,668	1,733	1,830	2,123
Annual Target	2,000	2,048	2,276	2,364	2,468	

Actual Q1/3   Annual Total   Target Q1/3   Annual Target
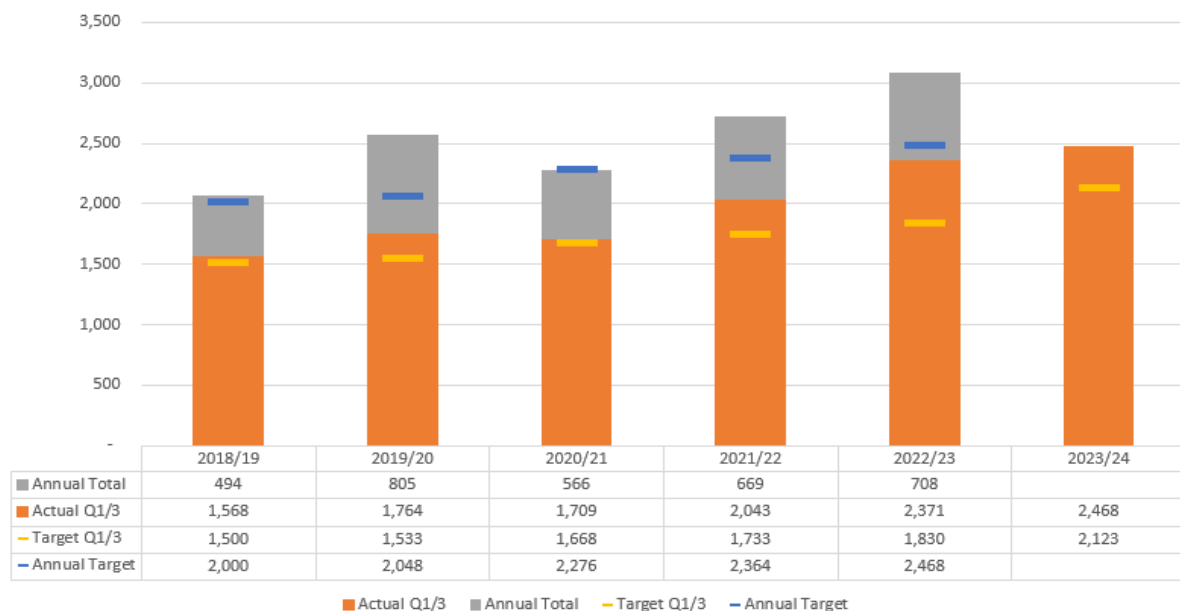
Q1/3 2022/23 Performance V Q1/3 2023/24

- Other SSCs (2,371 – 2,468) ↑ 4%
- 16% **above** the target of 2,123
- Flooding ↓13% (167 -145), Rescue or evacuation from water ↑ 92% (24 to 46)
- Other rescue/release of persons ↑ 11% (157 to 175)
- Assisting other agencies (510 – 657) ↑ 29%, Bariatrics (158 – 221) ↑ 40%, Suicides (41 to 66) ↑ 61%
- Compared to last year in Q1/3 calls originating from the Ambulance Service were 28% higher (348 to 446)

Total Fatalities & Injuries compared to targets with Q1/3 breakdown

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Annual Total	18	19	16	19	14	
Actual Q1/3	53	65	33	43	49	28
Target Q1/3	48	50	51	50	44	45
Annual Target	66	66	68	66	63	

Actual Q1/3   Annual Total   Target Q1/3   Annual Target
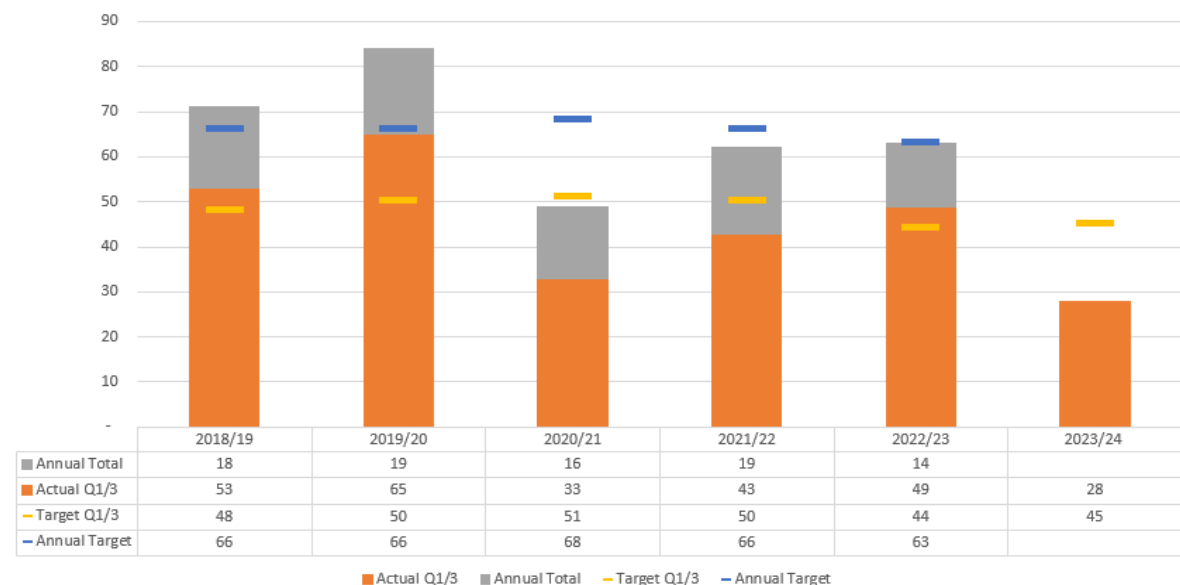
Q1/3 2022/23 Performance V Q1/3 2023/24

- Total fatalities and injuries have fallen from 49 in Q1/3 2022/23 to 28 in Q1/3 2023/24.
- 38% **below** the target of 45.
- 3 fatalities from fire, the same as last year.
- 2 of the fatalities were in accidental dwelling fires and started in the bedroom. Alarms were present during both incidents and raised the alarm.
- There were 6 serious injuries this year compared to 14 last year.
- There were 19 slight injuries compared to 32 last year.

Total Accidental Fatalities & Injuries compared to targets with Q1/3 breakdown

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Annual Total	12	13	15	17	11	
Actual Q1/3	43	51	27	36	41	24
Target Q1/3	42	44	44	46	36	38
Annual Target	59	59	57	59	48	

Actual Q1/3 ■ Annual Total — Target Q1/3 — Annual Target
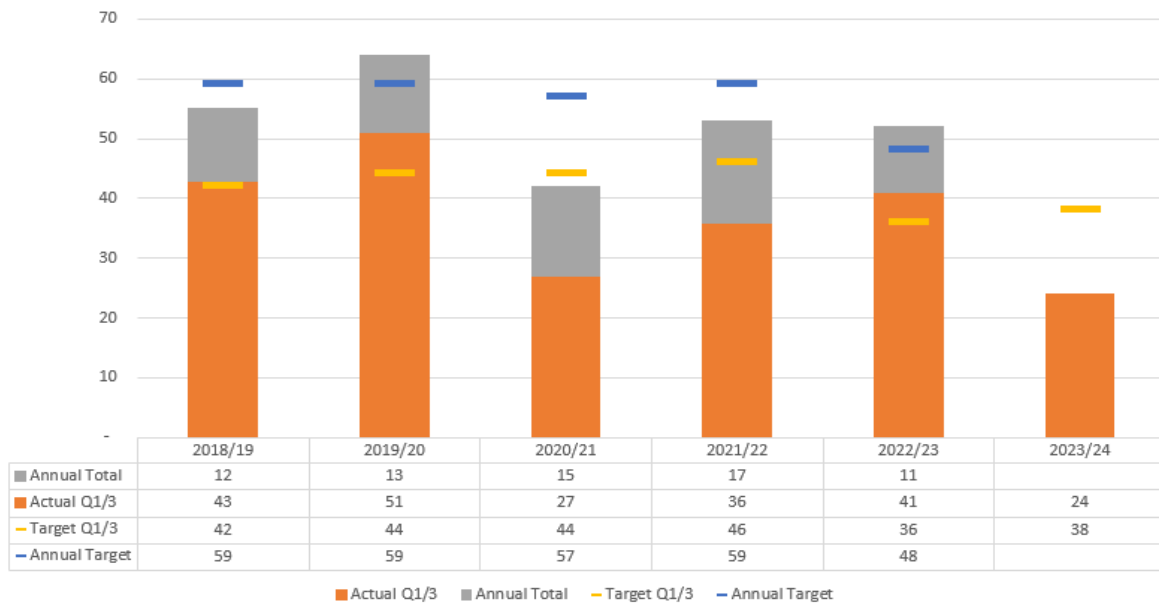
Q1/3 2022/23 Performance V Q1/3 2023/24

- Accidental fatalities and Injuries have reduced from 41 last year to 24 this year (-41%).
- 37% below the target of 38.
- There were 2 accidental fatalities which started in the bedroom. Alarms were present during both incidents and raised the alarm.
- There were 3 accidental serious injuries compared to 16 last year.
- There were 19 accidental slight injuries compared to 31 last year.

% of Dwelling Fires contained to room of origin compared to target - This year Q1-Q3 and same period in previous years

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24
Q1-Q3 Actual %	81.90%	84.00%	82.00%	84.70%	81.90%	83.60%
Annual Target	85%	85%	85%	85%	85%	85%

■ Q1-Q3 Actual % — Annual Target
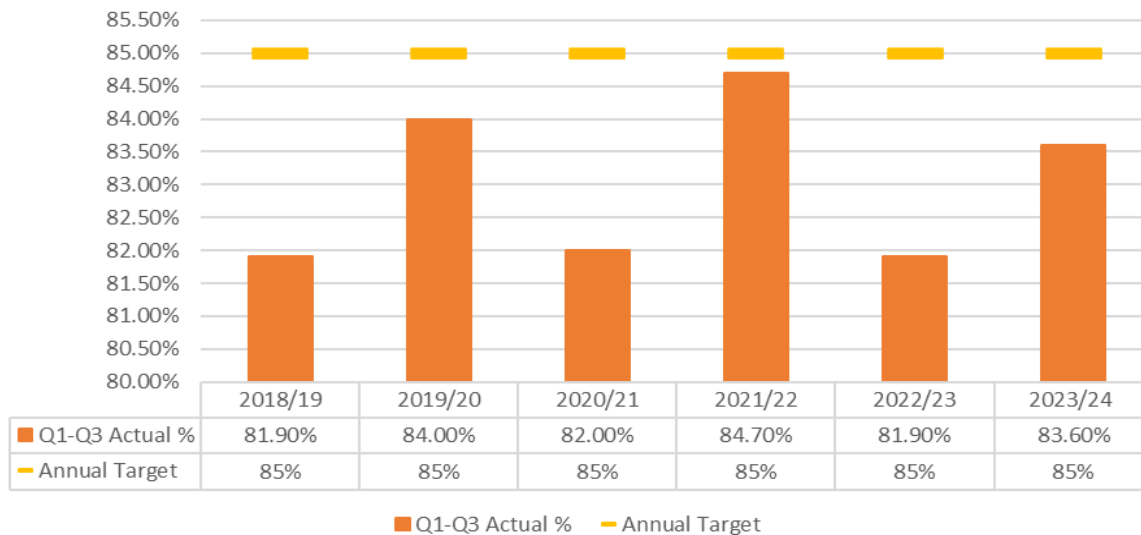
Q1/3 2022/23 Performance V Q1/3 2023/24

- 418 of 500 Dwelling Fires have been Confined to The Room of Origin (83.6%)
- This is above last year and is 1.4% below the target set of 85% at the start of the year
- Torfaen had the highest percentage, with 94% of fires Confined to The Room of Origin (30 of 32)
- Merthyr had the lowest percentage, with 65% of fires Confined to The Room of Origin (17 of 26)
- Of the 82 fires *not confined* to the room of origin in 37 of them (45%) there was no alarm present

Blaenau Gwent County Borough Council

Incident Categories	Apr 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	1,091	98	115	151	95	83	70	90	64	69				835	860	-25	-3%
Special Service Calls	165	22	12	17	18	15	15	22	15	14				150	127	23	18%
Total RTCs Attended	32	5	2	4	1	4	3	5	1	2				27	19	8	42%
Total Other SSCs Attended	133	17	10	13	17	11	12	17	14	12				123	108	15	14%
Total False Alarms Attended	413	33	32	39	39	22	28	35	29	36				293	333	-40	-12%
Malicious False Alarms	13	3	1	1	1	1	1	1	1	2				12	8	4	50%
Good Intent False Alarms	178	14	17	22	16	14	14	10	15	11				133	147	-14	-10%
Automatic False Alarms	222	16	14	16	22	7	13	24	13	23				148	178	-30	-17%
Total Fires Attended	513	43	71	95	38	46	27	33	20	19				392	400	-8	-2%
Deliberate Fire	430	31	57	69	32	38	24	28	13	14				306	332	-26	-8%
Deliberate Grass Fire Attended	76	9	30	35	8	2	1	1	0	0				86	63	23	37%
Deliberate Refuse Fire Attended	298	16	22	28	14	26	19	22	11	9				167	226	-59	-26%
Accidental Fire	83	12	14	26	6	8	3	5	7	5				86	68	18	26%
Accidental Dwelling Fire Attended	32	5	3	2	2	3	0	1	2	3				21	24	-3	-13%
Total Deaths and Injuries in Fires	3	1	0	1	0	0	0	0	0	0				2	1	1	100%
Total Accidental Deaths and Injuries in Fires	2	1	0	1	0	0	0	0	0	0				2	0	2	200%

- ADFs decreased from 24 to 21 (-13%).
- 2 slight injuries.
- Other SSCs increased from 108 to 123 (14%).
  - Assistance to other agencies increased from 18 to 38 (53%).
  - Bariatric incidents increased from 9 to 14.
  - Effecting entry/exit decreased from 20 to 13.
- RTCs increased from 19 to 27 (42%).
  - Of the 27, 13 were making vehicle safe and 5 were making the scene safe.
- Deliberate grass increased from 63 to 86 (37%).
- Deliberate refuse decreased from 226 to 167 (-26%).
- AFAs decreased from 178 to 148 (-17%).
- Malicious false alarms increased from 8 to 12.
- Good intent false alarms decreased from 147 to 133 (-10%).
  - Calls to dwelling (39), refuse (35), and grass (18) 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 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	1,522	148	134	197	112	127	134	152	119	139				1262	1220	42	3%
Special Service Calls	345	26	22	34	22	25	34	30	25	48				266	264	2	1%
Total RTCs Attended	80	9	5	4	6	4	6	6	10	7				57	58	-1	-2%
Total Other SSCs Attended	265	17	17	30	16	21	28	24	15	41				209	206	3	1%
Total False Alarms Attended	722	61	44	67	51	63	64	93	69	74				586	578	8	1%
Malicious False Alarms	21	2	2	0	1	1	3	6	6	1				22	15	7	47%
Good Intent False Alarms	291	23	23	33	24	20	30	29	24	34				240	244	-4	-2%
Automatic False Alarms	410	36	19	34	26	42	31	58	39	39				324	319	5	2%
Total Fires Attended	455	61	68	96	39	39	36	29	25	17				410	378	32	8%
Deliberate Fire	314	49	52	65	22	27	25	23	17	12				292	264	28	11%
Deliberate Grass Fire Attended	84	17	21	39	10	1	3	2	5	0				98	75	23	31%
Deliberate Refuse Fire Attended	172	16	19	17	8	20	16	13	8	3				120	155	-35	-23%
Accidental Fire	141	12	16	30	16	11	11	6	8	5				115	114	1	1%
Accidental Dwelling Fire Attended	48	5	4	7	2	3	4	2	4	4				35	32	3	9%
Total Deaths and Injuries in Fires	3	0	0	0	0	1	0	0	0	0				1	1	0	0%
Total Accidental Deaths and Injuries in Fires	2	0	0	0	0	0	0	0	0	0				0	1	-1	-100%

- ADFs decreased from 32 to 35 (9%).
- 1 serious injury.
- Other SSCs increased from 206 to 209 (1%).
  - Assistance to other agencies decreased from 54 to 48.
  - Bariatric incidents decreased from 21 to 20.
  - Other rescue/release of persons increased from 12 to 25.
- RTCs decreased from 58 to 57.
  - Of the 57, 18 were making scene safe and 15 were making the vehicle safe.
- Deliberate grass increased from 75 to 98 (31%).
- Deliberate refuse decreased from 155 to 120 (-23%).
- AFAs increased from 319 to 324 (2%).
- Malicious false alarms increased from 15 to 22.
- Good intent false alarms decreased from 244 to 240 (-2%).
  - Calls to dwelling (113), refuse (33), and grass (29) accounting for most of this call type.

Caerphilly County Borough Council

Incident Categories	Apr 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	2,156	196	206	267	183	188	216	173	164	147				1740	1705	35	2%
Special Service Calls	383	46	43	31	36	35	48	33	26	38				336	284	52	18%
Total RTCs Attended	96	13	11	12	10	9	11	6	4	5				81	70	11	16%
Total Other SSCs Attended	287	33	32	19	26	26	37	27	22	33				255	214	41	19%
Total False Alarms Attended	889	61	68	94	72	68	96	73	89	79				700	677	23	3%
Malicious False Alarms	26	1	0	1	2	3	3	3	2	2				17	18	-1	-6%
Good Intent False Alarms	420	26	39	60	31	30	47	26	46	21				326	332	-6	-2%
Automatic False Alarms	443	34	29	33	39	35	46	44	41	56				357	327	30	9%
Total Fires Attended	884	89	95	142	75	85	72	67	49	30				704	744	-40	-5%
Deliberate Fire	664	72	72	112	59	65	59	56	40	16				551	567	-16	-3%
Deliberate Grass Fire Attended	160	18	33	50	11	5	1	3	2	0				123	153	-30	-20%
Deliberate Refuse Fire Attended	408	43	35	50	38	45	43	41	24	13				332	332	0	0%
Accidental Fire	220	17	23	30	16	20	13	11	9	14				153	177	-24	-14%
Accidental Dwelling Fire Attended	78	4	4	3	5	9	3	6	4	9				47	56	-9	-16%
Total Deaths and Injuries in Fires	9	0	0	0	1	1	0	0	0	0				2	5	-3	-60%
Total Accidental Deaths and Injuries in Fires	9	0	0	0	1	1	0	0	0	0				2	5	-3	-100%

- ADFs decreased from 56 to 47 (-14%).
- 2 slight injuries.
- Other SSCs increased from 214 to 255 (19%).
  - Assistance to other agencies decreased from 89 to 57 (-56%).
  - Bariatric incidents increased from 25 to 43.
  - Suicide/attempts increased from 3 to 14.
- RTCs increased from 70 to 81.
  - Of the 81, 26 were making scene safe and 19 were making the vehicle safe.
- Deliberate grass decreased from 153 to 123 (-20%).
- Deliberate refuse remained consistent at 332.
- AFAs increased from 327 to 357 (9%).
- Malicious false alarms decreased from 18 to 17.
- Good intent false alarms decreased from 332 to 326 (-2%).
  - Calls to dwelling (83), refuse (74), and grass (55) accounting for most of this call type.

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

Cardiff City Council

CARDIFF CAERDYDD

Incident Categories	Apr 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	4,413	341	429	444	418	384	418	386	412	341				3573	3,445	128	4%
Special Service Calls	925	68	88	75	83	86	81	69	79	81				710	728	-18	-2%
Total RTCs Attended	155	12	15	12	14	17	14	7	10	16				117	114	3	3%
Total Other SSCs Attended	770	56	73	63	69	69	67	62	69	65				593	614	-21	-3%
Total False Alarms Attended	2,371	183	201	197	221	204	245	239	248	217				1955	1,777	178	10%
Malicious False Alarms	88	3	8	6	6	9	4	5	5	4				50	62	-12	-19%
Good Intent False Alarms	628	42	58	75	58	50	79	66	43	58				529	501	28	6%
Automatic False Alarms	1,655	138	135	116	157	145	162	168	200	155				1376	1,214	162	13%
Total Fires Attended	1,117	90	140	172	114	94	92	78	85	43				908	940	-32	-3%
Deliberate Fire	752	61	104	120	77	70	69	45	51	17				614	649	-35	-5%
Deliberate Grass Fire Attended	193	13	18	34	11	4	2	1	3	0				86	186	-100	-54%
Deliberate Refuse Fire Attended	462	39	70	64	52	40	52	32	32	12				393	394	-1	0%
Accidental Fire	365	29	36	52	37	24	23	33	34	26				294	291	3	1%
Accidental Dwelling Fire Attended	138	13	12	19	18	11	6	15	13	11				118	107	11	10%
Total Deaths and Injuries in Fires	10	1	0	3	1	0	5	1	0	0				11	6	5	83%
Total Accidental Deaths and Injuries in Fires	8	1	0	2	1	0	5	1	0	0				10	5	5	500%

- ADFs increased from 107 to 118 (10%).
- 1 fatality, 1 serious injury, 9 slight injuries.
- Other SSCs decreased from 614 to 593 (-3%).
  - Assistance to other agencies increased from 100 to 146 (32%).
  - Bariatric incidents increased from 38 to 43.
- RTCs increased from 114 to 117.
  - Of the 117, 42 were making scene safe and 31 were making the vehicle safe.
- Deliberate grass decreased from 186 to 86 (-54%).
- Deliberate refuse decreased from 394 to 393 (0%).
- AFAs increased from 1,214 to 1,376 (13%).
- Malicious false alarms decreased from 62 to 50 (-19%).
- Good intent false alarms increased from 501 to 529 (6%).
  - Calls to dwelling (256) and refuse (68) accounting for most of this call type.

Merthyr Tydfil County Borough Council

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

Incident Categories	Apr 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	735	69	87	116	69	69	63	82	46	68				669	583	86	15%
Special Service Calls	162	18	11	18	20	21	14	16	6	18				142	121	21	17%
Total RTCs Attended	42	5	3	4	4	7	0	3	0	1				27	31	-4	-13%
Total Other SSCs Attended	120	13	8	14	16	14	14	13	6	17				115	90	25	28%
Total False Alarms Attended	312	24	28	36	30	30	33	40	25	33				279	246	33	13%
Malicious False Alarms	12	1	3	2	2	0	3	6	1	2				20	10	10	100%
Good Intent False Alarms	118	8	13	22	13	9	11	13	13	13				115	96	19	20%
Automatic False Alarms	182	15	12	12	15	21	19	21	11	18				144	140	4	3%
Total Fires Attended	261	27	48	62	19	18	16	26	15	17				248	216	32	15%
Deliberate Fire	203	22	38	50	13	9	13	20	10	13				188	173	15	9%
Deliberate Grass Fire Attended	67	12	23	27	4	0	0	1	0	1				68	63	5	8%
Deliberate Refuse Fire Attended	102	9	9	19	4	7	11	11	9	8				87	85	2	2%
Accidental Fire	58	5	10	12	6	9	3	6	5	4				60	43	17	40%
Accidental Dwelling Fire Attended	26	2	2	4	1	3	3	3	2	4				24	18	6	33%
Total Deaths and Injuries in Fires	13	0	0	0	0	0	0	0	0	0				0	5	-5	-100%
Total Accidental Deaths and Injuries in Fires	7	0	0	0	0	0	0	0	0	0				0	4	-4	-100%

- ADFs increased from 18 to 24 (33%).
- 0 injuries or fatalities.
- Other SSCs increased from 90 to 115 (28%).
  - Assistance to other agencies increased from 22 to 34 (35%).
  - Bariatric incidents increased from 15 to 16.
  - Effecting entry/exit increased from 7 to 16.
- RTCs decreased from 31 to 27.
  - Of the 27, 13 were making scene safe.
- Deliberate grass increased from 63 to 68 (8%).
- Deliberate refuse increased from 85 to 87 (2%).
- AFAs increased from 140 to 144 (3%).
- Malicious false alarms increased from 10 to 20.
- Good intent false alarms increased from 96 to 115 (20%).
  - Calls to dwelling (47) and refuse (25) accounting for most of this call type.

Monmouthshire Council

Incident Categories	Apr 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	984	66	83	76	86	61	83	92	101	67				715	766	-51	-7%
Special Service Calls	246	19	23	19	21	17	17	21	21	9				167	183	-16	-9%
Total RTCs Attended	75	7	6	5	6	6	6	4	7	2				49	54	-5	-9%
Total Other SSCs Attended	171	12	17	14	15	11	11	17	14	7				118	129	-11	-9%
Total False Alarms Attended	511	27	37	38	48	34	53	51	59	46				393	400	-7	-2%
Malicious False Alarms	5	0	0	1	0	0	0	1	2	1				5	4	1	25%
Good Intent False Alarms	150	8	12	7	11	12	17	15	16	13				111	125	-14	-11%
Automatic False Alarms	356	19	25	30	37	22	36	35	41	32				277	271	6	2%
Total Fires Attended	227	20	23	19	17	10	13	20	21	12				155	183	-28	-15%
Deliberate Fire	81	9	4	6	6	2	4	8	9	5				53	68	-15	-22%
Deliberate Grass Fire Attended	22	5	3	2	1	0	1	2	1	0				15	20	-5	-25%
Deliberate Refuse Fire Attended	47	1	0	3	3	2	1	3	7	1				21	39	-18	-46%
Accidental Fire	146	11	19	13	11	7	9	12	12	7				101	115	-14	-12%
Accidental Dwelling Fire Attended	34	1	4	4	2	1	1	3	6	3				25	28	-3	-11%
Total Deaths and Injuries in Fires	2	0	1	0	0	0	0	1	0	1				3	2	1	50%
Total Accidental Deaths and Injuries in Fires	2	0	1	0	0	0	0	1	0	0				2	2	0	0%

- ADFs decreased from 28 to 25 (-11%).
- 1 fatality, 1 serious injury, and 1 slight injury.
- Other SSCs decreased from 129 to 118 (-9%).
  - Assistance to other agencies increased from 30 to 34.
  - Bariatric incidents decreased from 13 to 8.
  - Effecting entry/exit decreased from 14 to 8.
- RTCs decreased from 54 to 49.
  - Of the 49, 17 were making scene safe and 14 were making vehicle safe.
- Deliberate grass decreased from 20 to 15 (-25%).
- Deliberate refuse decreased from 39 to 21 (-46%).
- AFAs increased from 271 to 277 (2%).
- Malicious false alarms increased from 4 to 5.
- Good intent false alarms decreased from 125 to 111 (-11%).
  - Calls to dwelling (40) and road vehicle (15) accounting for most of this call type.

Newport City Council

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

Incident Categories	Apr 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	2,505	176	173	237	183	185	211	185	188	182				1720	2,020	-300	-15%
Special Service Calls	416	32	29	45	41	40	50	23	25	29				314	327	-13	-4%
Total RTCs Attended	80	3	7	5	12	6	7	4	3	8				55	60	-5	-8%
Total Other SSCs Attended	336	29	22	40	29	34	43	19	22	21				259	267	-8	-3%
Total False Alarms Attended	1,127	88	75	92	84	89	120	98	99	120				865	866	-1	0%
Malicious False Alarms	56	1	1	0	6	3	4	3	4	4				26	42	-16	-38%
Good Intent False Alarms	335	22	28	35	32	22	29	20	40	24				252	267	-15	-6%
Automatic False Alarms	736	65	46	57	46	64	87	75	55	92				587	557	30	5%
Total Fires Attended	962	56	69	100	58	56	41	64	64	33				541	827	-286	-35%
Deliberate Fire	775	47	47	86	48	48	27	54	57	19				433	680	-247	-36%
Deliberate Grass Fire Attended	163	4	7	18	5	2	0	5	4	1				46	160	-114	-71%
Deliberate Refuse Fire Attended	433	27	34	49	32	30	18	32	39	13				274	366	-92	-25%
Accidental Fire	187	9	22	14	10	8	14	10	7	14				108	147	-39	-27%
Accidental Dwelling Fire Attended	69	5	10	1	4	1	6	4	2	3				36	51	-15	-29%
Total Deaths and Injuries in Fires	3	1	1	0	1	1	0	0	0	0				4	2	2	100%
Total Accidental Deaths and Injuries in Fires	2	1	1	0	1	1	0	0	0	0				4	1	3	300%

- ADFs decreased from 51 to 36 (-29%).
- 1 serious injury, 3 slight injuries.
- Other SSCs decreased from 267 to 259 (-3%).
  - Assistance to other agencies increased from 61 to 66 (8%).
  - Bariatric incidents increased from 23 to 21.
  - Removal of objects from people decreased from 18 to 10.
- RTCs decreased from 60 to 55 (-8%).
  - Of the 55, 19 were making scene safe.
- Deliberate grass decreased from 160 to 46 (-71%).
- Deliberate refuse decreased from 366 to 274 (-25%).
- AFAs increased from 557 to 587 (5%).
- Malicious false alarms decreased from 42 to 26.
- Good intent false alarms decreased from 267 to 252 (-6%).
  - Calls to dwelling (29), road vehicle (39), and refuse (39) accounting for most of this call type.

Rhondda Cynon Taf County Borough Council

Incident Categories	Apr 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	2,605	220	264	406	204	237	224	219	224	208				2206	2,065	141	7%
Special Service Calls	711	59	65	55	53	71	61	68	63	67				562	521	41	8%
Total RTCs Attended	156	17	20	14	8	17	10	15	9	9				119	113	6	5%
Total Other SSCs Attended	555	42	45	41	45	54	51	53	54	58				443	408	35	9%
Total False Alarms Attended	1,072	87	82	144	99	117	113	108	109	98				957	864	93	11%
Malicious False Alarms	36	2	4	4	1	2	3	1	4	7				28	29	-1	-3%
Good Intent False Alarms	448	39	39	76	46	41	41	53	44	32				411	367	44	12%
Automatic False Alarms	588	46	39	64	52	74	69	54	61	59				518	468	50	11%
Total Fires Attended	822	74	117	207	52	49	50	43	52	43				687	680	7	1%
Deliberate Fire	565	47	94	162	42	28	30	25	31	22				481	479	2	0%
Deliberate Grass Fire Attended	185	23	42	76	9	1	4	0	0	2				157	164	-7	-4%
Deliberate Refuse Fire Attended	298	17	45	69	25	14	18	15	22	12				237	249	-12	-5%
Accidental Fire	257	27	23	45	10	21	20	18	21	21				206	201	5	2%
Accidental Dwelling Fire Attended	108	14	7	7	3	10	9	9	4	7				70	77	-7	-9%
Total Deaths and Injuries in Fires	5	0	0	0	0	1	0	0	0	1				2	1	1	100%
Total Accidental Deaths and Injuries in Fires	5	0	0	0	0	1	0	0	0	1				2	1	1	100%

- ADFs increased from 77 to 70 (-9%).
- 1 serious injury, and 1 slight injury.
- Other SSCs increased from 408 to 443 (9%).
  - Assistance to other agencies increased from 100 to 123.
  - Bariatric incidents increased from 52 to 56.
  - Effecting entry/exit increased from 46 to 59.
- RTCs increased from 113 to 119.
  - Of the 119, 50 were making scene safe and 21 were extrication of person/s.
- Deliberate grass decreased from 164 to 157 (-4%).
- Deliberate refuse decreased from 249 to 237 (-5%).
- AFAs increased from 468 to 518 (11%).
- Malicious false alarms decreased from 29 to 18.
- Good intent false alarms increased from 367 to 411 (12%).
  - Calls to dwelling (136), refuse (85), and grass (65) accounting for most of this call type.

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 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	1,299	95	115	128	97	105	113	100	84	82				919	1,025	-106	-10%
Special Service Calls	228	24	20	23	18	22	23	23	18	14				185	171	14	8%
Total RTCs Attended	42	7	5	3	6	2	6	6	4	2				41	31	10	32%
Total Other SSCs Attended	186	17	15	20	12	20	17	17	14	12				144	140	4	3%
Total False Alarms Attended	653	47	49	65	57	59	65	57	50	52				501	514	-13	-3%
Malicious False Alarms	17	1	1	4	0	1	0	3	3	2				15	13	2	15%
Good Intent False Alarms	227	14	23	25	15	19	21	9	15	17				158	185	-27	-15%
Automatic False Alarms	409	32	25	36	42	39	44	45	32	33				328	316	12	4%
Total Fires Attended	418	24	46	40	22	24	25	20	16	16				233	340	-107	-31%
Deliberate Fire	293	16	24	28	12	18	13	13	6	7				137	246	-109	-44%
Deliberate Grass Fire Attended	88	4	12	16	2	0	0	4	0	1				39	87	-48	-55%
Deliberate Refuse Fire Attended	147	9	10	6	7	10	7	7	5	4				65	115	-50	-43%
Accidental Fire	125	8	22	12	10	6	12	7	10	9				96	94	2	2%
Accidental Dwelling Fire Attended	46	2	4	2	4	2	5	3	5	4				31	32	-1	-3%
Total Deaths and Injuries in Fires	7	0	0	0	0	0	0	0	1	0				1	5	-4	-80%
Total Accidental Deaths and Injuries in Fires	7	0	0	0	0	0	0	0	0	0				0	5	-5	-100%

- ADFs decreased from 32 to 31 (-3%).
- 1 serious injury.
- Other SSCs increased from 140 to 144 (3%).
  - Assistance to other agencies increased from 30 to 36.
  - Bariatric incidents decreased from 13 to 11.
  - Lift Release increased from 3 to 10.
- RTCs increased from 31 to 41 (32%).
  - Of the 41, 17 were making scene safe.
- Deliberate grass decreased from 87 to 39 (-55%).
- Deliberate refuse decreased from 115 to 65 (-43%).
- AFAs increased from 316 to 328 (4%).
- Malicious false alarms increased from 13 to 15.
- Good intent false alarms decreased from 158 to 185 (-15%).
  - Calls to dwelling (48), refuse (31), and grass (27) accounting for most of this call type.

South Wales
Fire and Rescue Service

The Vale of Glamorgan County Borough Council

Incident Categories	Apr 2022 - Mar 2023	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Q1/3 23-24	Q1/3 22-23	Q1/3 diff	Q1/3 %
Total Incidents	1,395	116	140	123	133	122	121	117	111	100				1083	1079	4	0%
Special Service Calls	347	29	29	23	28	29	31	33	32	37				271	259	12	5%
Total RTCs Attended	90	7	10	3	9	6	6	6	8	8				63	64	-1	-2%
Total Other SSCs Attended	257	22	19	20	19	23	25	27	24	29				208	195	13	7%
Total False Alarms Attended	676	57	72	55	69	70	66	71	63	50				573	519	54	10%
Malicious False Alarms	30	1	1		3	2	2	1	3	1				14	26	-12	-46%
Good Intent False Alarms	228	19	36	18	21	20	21	22	24	23				204	188	16	9%
Automatic False Alarms	418	37	35	37	45	48	43	48	36	26				355	305	50	16%
Total Fires Attended	372	30	39	45	36	23	24	13	16	13				239	301	-62	-21%
Deliberate Fire	205	12	23	22	15	12	16	3	6	0				109	167	-58	-35%
Deliberate Grass Fire Attended	35	1	9	9	2	1	1	0	0	1				24	33	-9	-27%
Deliberate Refuse Fire Attended	131	9	14	7	12	11	14	1	2	2				72	107	-35	-33%
Accidental Fire	167	18	16	23	21	11	8	10	10	10				127	134	-7	-5%
Accidental Dwelling Fire Attended	44	7	6	1	6	5	4	5	5	1				40	30	10	33%
Total Deaths and Injuries in Fires	8	0	0	0	0	0	1	0	1	0				2	5	-3	-60%
Total Accidental Deaths and Injuries in Fires	8	0	0	0	0	0	1	0	1	0				2	5	-3	-60%

- ADFs increased from 30 to 40 (33%).
- 1 fatality and 1 slight injury.
- Other SSCs increased from 195 to 208 (7%).
    - Assistance to other agencies increased from 38 to 54.
    - Bariatric incidents decreased from 12 to 11.
    - Effecting entry/exit decreased from 31 to 28.
- RTCs decreased from 64 to 63.
    - Of the 63, 24 were making scene safe and 19 were making vehicle safe.
- Deliberate grass decreased from 33 to 24.
- Deliberate refuse decreased from 107 to 72 (-33%).
- AFAs increased from 305 to 355 (16%).
- Malicious false alarms decreased from 26 to 14 (-46%).
- Good intent false alarms increased from 188 to 204 (9%).
    - Calls to dwelling (99) and refuse (25) accounting for most of this call type.

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FORWARD WORK PROGRAMME FOR
THE BOARD OF COMMISSIONERS FOR SOUTH WALES FIRE AND RESCUE SERVICE

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
Mar 2024	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	
Mar 2024	Pay Policy Statement 2022/23	To consider the Service's Pay Policy Statement in compliance with the Localism Act 2011 and associated guidance.	D	ACO PS Contact Officer: Alison Reed	
Mar 2024	Gender Pay Gap Statement	To update on the analysis of the gender pay gap across the Service.	D	ACO PS Contact Officer: Alison Reed	
Mar 2024	Treasury Management Strategy Report	To secure Commissioners' approval to the adoption of the Treasury Management Strategy for the following financial year	D	Treasurer Contact Officer: Lisa Mullan	
Mar 2024	Strategic Themes and Objectives for 2024/25 – Plan Publication	Commissioners to approve the proposed strategic themes and objectives for 2024/25	D	ACO CS Contact Officer: Sarah Watkins	

FORWARD WORK PROGRAMME FOR
THE BOARD OF COMMISSIONERS FOR SOUTH WALES FIRE AND RESCUE SERVICE

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
Mar 2024	Setting Statutory Strategic Performance Indicators and Strategic Objectives	To set the targets for the following financial year.	D	T/ACFO SD Contact Officer: Dean Loader	
Mar 2024	Calendar of Meetings for next municipal year	To present Commissioners proposed dates of Board & Committee meetings for the next municipal year.	D	ACO CS Contact Officer: Geraint Thomas	
May 2024	Unwanted Fire Signal Response Proposal	To present the proposals for consideration of changes to the Service response model for unwanted fire signals prior to a public consultation process.	D	T/T/ACFO SD Contact Officer Dean Loader	
May 2024	Audit Wales Audit Plan 2024	To advise Commissioners of the work set out by Audit Wales to be undertaken during 2024.	I	ACO CS Contact Officer: Lisa Mullan	
May 2024	Strategic Equality Plan	To provide Commissioners with the current Strategic Equality Plan.	D	ACO PS Contact Officer: Lisa Shroll	
Aug 2024	Welsh Language Standards	To update Commissioners on compliance against the Welsh Language Standards.	I	ACO PS Contact Officer: Alison Reed	

FORWARD WORK PROGRAMME FOR
THE BOARD OF COMMISSIONERS FOR SOUTH WALES FIRE AND RESCUE SERVICE

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
Aug 2024	Health & Safety Annual Report 2022/23	To advise Commissioners of Health & Safety performance of the organisation.	I	T/ACFO TS Contact Officer: Brian Thompson	
Aug 2024	Review Strategic Risk	To advise Commissioners of the Strategic Risks of the organisation and how these are being treated, managed or reduced.	I	ACO CS Contact Officer: Sarah Watkins	
Sep 2024	MTFS and Reserves Strategy	To update Commissioners on the Financial Strategy and Reserves Strategy of the Service prior to considering the report on the 2024/25 Budget Setting Strategy.	D	Treasurer Contact Officer: Lisa Mullan	
Sep 2024	Budget Strategy	To obtain clarification upon the political steer for the Budget Strategy for 2024/25 budget setting process.	D	Treasurer Contact Officer: Lisa Mullan	
Sep 2024	Audit Wales Certificate of Compliance	To receive Audit Wales' certificate of audit of the Service's 2024/25 Improvement Plan.	I	ACO CS Contact Officer: Geraint Thomas	
Sep 2024	Carbon Reduction Plan and Progress Reports	To advise Commissioners on the progress towards the actions set out in the Carbon Reduction and Biodiversity Plans	I	ACO CS Contact Officer: Lisa Mullan	

**FORWARD WORK PROGRAMME FOR
THE BOARD OF COMMISSIONERS FOR SOUTH WALES FIRE AND RESCUE SERVICE**

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
Sep 2024	Treasury Management Outturn 2023/24	To advise Commissioners of the year end treasury management position.	I	Treasurer Contact Officer: Lisa Mullan	
Sep 2024	Audit Wales Final Audit Letter	To advise on conclusion of financial audit	I	Treasurer Contact Officer: Lisa Mullan	
Dec 2024	Budget Setting Proposal for Consultation 2025/26	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	
Dec 2024	Treasury Management Mid Term Report 2024/25	To advise Commissioners of the mid-year position in relation to our treasury management.	I	Treasurer Contact Officer: Lisa Mullan	
Dec 2024	Independent Remuneration Panel for Wales' Draft Report	To consider the IRPW's draft Annual Report and enable comments to be submitted to the Panel within required timescales.	I	ACO CS Contact Officer: Geraint Thomas	

FORWARD WORK PROGRAMME FOR
THE BOARD OF COMMISSIONERS FOR SOUTH WALES FIRE AND RESCUE SERVICE

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
Dec 2024	Audit Wales Thematic Reviews Report (24/25 Targeted High Risk Prevention)	To consider the recommendations made by Audit Wales following their review of targeted high risk prevention.	I	T/ACFO SD Contact Officer Dean Loader	
Mar 2024	PSB Well-being Plans	To consider and accept the Well-being Plans of each of the PSBs	D	ACO CS Contact Officer: Sarah Watkins	

Finance and Audit Committee

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
Apr 2024	Annual Governance Statement	To consider the draft Annual Governance Statement and associated governance improvement plan for 2024/25 prior to inclusion in the annual statement of accounts.	D	ACO CS Contact Officer Sarah Watkins	
Apr 2024	Community Safety Funding 2024/25	To provide an overview of the approved Welsh Government grant funding for Community Safety workstreams in 2024/25 and the implications from reduced revenue and capital funds.	D	T/ACFO SD Contact Officer Dean Loader	
Apr 2024	Internal Audit Annual plan	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	

Finance and Audit Committee

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
Apr 2024	Register of Gifts and Hospitality	To advise Commissioners of gifts and hospitality accepted and declined during the year	I	ACO CS Contact Officer: Sarah Watkins	
Jul 2024	Audited Statement of Accounts / Audit Wales ISA 260 Report	To advise Commissioners 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	
Jul 2024	Treasury Management Monitoring Report	To update Commissioners on progress against Treasury Management activities of the first quarter of the financial year.	I	Treasurer Contact Officer: Lisa Mullan	
Jul2024	Proposed Priority Actions 2025/26	To advise Commissioners of the proposed Priority Actions 2024/25 and to seek authority to enter into public consultation on these.	D	ACO CS Contact Officer: Sarah Watkins	
Jul 2024	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	

Finance and Audit Committee

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
Jul 2024	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	
Jul 2024	Departmental Risk Register	To seek Commissioners' views upon the Corporate Departmental Risk Register	I	ACO CS Contact Officer: Wayne Thomas	
Apr / Jul / Sept / Dec / Feb	Revenue Budget Monitoring Reports	To provide an update on revenue expenditure against the revenue budget for the year	D	Treasurer Contact Officer: Lisa Mullan	
Apr / Jul / Sept / Dec / Feb	Capital Programme Monitoring Reports	To provide an update on capital expenditure against the capital budget for the year	D	Treasurer Contact Officer: Lisa Mullan	
Apr / Jul / Sept / Dec / Feb	Internal Audit Update Reports	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	ACO CS Contact Officer: Lisa Mullan	

Finance and Audit Committee

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
Apr / Jul / Sept / Dec / Feb	Performance Reports – Statutory PI's (Quarterly)	To scrutinise progress of the Service's Priority Actions and statutory PI's as at the end of Q1	I	ACO CS & T/ACFO SD Contact Officer: Sarah Watkins	

People Committee

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
~~May 2024~~ Jun 2024	Recruitment & Attraction Annual Report	To update Commissioners	I	ACO PS Contact Officer: Head of HR	
~~May 2024~~ Jun 2024	Occupational Health Activity / Sickness Report	Purpose is to update Commissioners on Occupational Health Activity and sickness absence	I	ACO PS Contact Officers: Serena Ford, Ruth Hazell	
~~May 2024~~ Jun 2024	Grievance / Discipline Cases Overview	Purpose is to update Commissioners on disciplinary and grievance cases that have occurred through the Service	I	ACO PS Contact Officer: Head of HR	
~~May 2024~~ Jun 2024	Whistleblowing / Complaints / Compliments Report	To update Commissioners	I	ACO PS Contact officer: Sarah Watkins	
~~Aug 2024~~ Nov 2024	Training Activity Annual Report	To update Commissioners	I	ACO PS Contact Officer: Alison Reed	

~~Aug 2024~~ Nov 2024	Performance Reviews Annual Report	To update Commissioners on the Performance Review Process	I	ACO PS Contact Officer: Lisa Shroll	
~~Aug 2024~~ Nov 2024	Investors in People (IIp) Update Report	To update Commissioners	I	ACO PS Contact Officer: Alison Reed	
~~Aug 2024~~ Nov 2024	Job Evaluation	To update Commissioners on the Job Evaluation Process	I	ACO PS Contact Officer: Lisa Shroll	
Mar 2025	Pay Policy Statement 2022/23	To consider the Service's Pay Policy Statement in compliance with the Localism Act 2011 and associated guidance.	D	ACO PS Contact Officer: Alison Reed	
Mar 2025	Gender Pay Gap Statement	To update on the analysis of the gender pay gap across the Service.	D	ACO PS Contact Officer: Alison Reed	

Local Pension Board Committee

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
TO BE DEVELOPED					

Culture Review Programme Governance Committee

Expected Date of Report	Report Name	Purpose of Piece of Work	Information or Decision	Lead Director/ Contact Officer	Progress
TO BE DEVELOPED					

**To consider any items of business that the Chairperson deems urgent
(Part 1 or 2)**