



STAFFORDSHIRE FIRE AND RESCUE SERVICES

Follow Up

Internal audit report 8.22/23

FINAL

26 April 2023

This report is solely for the use of the persons to whom it is addressed.

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1. EXECUTIVE SUMMARY

Background

As part of the approved internal audit plan for 2022/23, we have undertaken a review to follow up on progress made by Staffordshire Fire and Rescue Services ('the Service') to implement the agreed management actions made as a result of the following Internal Audit reviews:

- Follow Up 6.21/22; and
- Training and Development 5.21/22

The 11 management actions reviewed as part of this audit were comprised of six medium and five low priority actions.

Conclusion

Taking account of the issues identified in the remainder of the report, in our opinion Staffordshire Fire and Rescue Services has demonstrated **reasonable progress** in implementing agreed management actions.

Our work identified that eight of the 11 (73%) management actions reviewed had been fully implemented. Of the three remaining management actions (two medium priority and one low priority), two were confirmed as 'being implemented' and one is reported as not implemented, due to supporting evidence not being received to demonstrate the implementation of the management action.

Full details are provided in section 2 below.

Progress on actions

The following table includes details of the status of each management action:

Implementation status by review	Number of actions agreed	Status of management actions				
		Implemented	Implementation ongoing	Not implemented	Superseded	Completed or no longer necessary
Follow Up 6.21/22	7	4	2	1	0	4
Training and Development 5.21/22	4	4	0	0	0	4

Implementation status by management action priority	Number of actions agreed	Status of management actions				
		Impl. (1)	Impl. ongoing (2)	Not impl. (3)	Superseded (4)	Not due (5)
High	0	0	0	0	0	0
Medium	6	4	1	1	0	0
Low	5	4	1	0	0	0
Total	11	8	2	1	0	0
Percentage	100%	73%	18%	9%	0%	0%

2. FINDINGS AND MANAGEMENT ACTIONS

This report has been prepared by exception. Therefore, we have included only those actions graded as 2, 3 and 5. Each action followed up has been categorised in line with the following:

Status	Detail
1	The entire action has been fully implemented.
2	The action has been partly though not yet fully implemented.
3	The action has not been implemented.
4	The action has been superseded and is no longer applicable.
5	The action is not yet due.

Follow Up 6.21/22 (Safeguarding – Mental Health and Wellbeing)

Original management action / priority The Service will use the results of the Cultural Survey to complete the Wellbeing Strategy Handbook. (Medium)

Original implementation date 31 June 2022

Audit finding / status Evidence was not provided at the time of audit to demonstrate this action had been implemented and we have therefore re-iterated the action.
3 - This action has not been implemented.

Management Action 1	The Service will use the results of the Cultural Survey to complete the Wellbeing Strategy Handbook.	Responsible Owner: Director of Community Safety	Date: 31 July 2023	Priority: Medium
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Follow Up 6.21/22 (Business Continuity 1.21/22)

Original management action / priority	The BCP Test Programme for 2017-2022 will be reviewed and updated to confirm it has been completed in full, with all frequencies and requirements included. A tracker for departmental testing will be created to ensure each department conduct an annual test exercise.			
Original implementation date	(Low) 31 June 2022			
Audit finding / status	At the time of audit we confirmed that the Test Programme has been reviewed and updated. However, the Tracker was still in development and is due to be fully populated once testing has concluded. 2 - This action has been partly though not yet fully implemented.			
Management Action 2	A BCP Test Programme Tracker for departmental testing will be implemented and fully completed to ensure each department conduct an annual test exercise.	Responsible Owner: Strategic Risk Manager	Date: 31 July 2023	Priority: Low

Follow Up 6.21/22 (Business Continuity 1.21/22)

Original management action / priority	Business Impact Assessments (BIAs) will be completed as part of the new templates and completion of BCP's by departments. If required, training will be provided to individuals completing BIA's. The Strategic Risk Manager will assess the returned BIA's to confirm they are adequately completed.			
Original implementation date	(Medium) 31 December 2021			
Audit finding / status	Although formalised training documentation has been produced and released to management regarding the completion of BIAs, it was noted that additional one-to-one training would be required with individual departments to help facilitate the completion of BIAs and ensure all relevant details have been captured. This is currently in progress. 2 - This action has been partly though not yet fully implemented.			
Management Action 3	Business Impact Assessments (BIAs) will be completed as part of the new templates and completion of BCP's by departments. If required, training will be provided to individuals completing BIA's. The Strategic Risk Manager will assess the returned BIA's to confirm they are adequately completed.	Responsible Owner: Strategic Risk Manager	Date: 31 July 2023	Priority: Medium

APPENDIX A: DEFINITIONS FOR PROGRESS MADE

Progress in implementing actions	Overall number of actions fully implemented	Consideration of high priority actions	Consideration of medium priority actions	Consideration of low priority actions
Good	75% +	None outstanding.	None outstanding.	All low actions outstanding are in the process of being implemented.
Reasonable	51 – 75%	None outstanding.	75% of medium actions made are in the process of being implemented.	75% of low actions made are in the process of being implemented.
Little	30 – 50%	All high actions outstanding are in the process of being implemented.	50% of medium actions made are in the process of being implemented.	50% of low actions made are in the process of being implemented.
Poor	< 30%	Unsatisfactory progress has been made to implement high priority actions.	Unsatisfactory progress has been made to implement medium actions.	Unsatisfactory progress has been made to implement low actions.

The following opinions are given on the progress made in implementing actions. This opinion relates solely to the implementation of those actions followed up and does not reflect an opinion on the entire control environment.

APPENDIX B: ACTIONS IMPLEMENTED

From the testing conducted during this review we have found the following actions to have been fully implemented or superseded.

Assignment title	Management actions	Priority	Status
Follow Up 6.21/22 (Business Continuity 1.21/22)	The Business Continuity Management Framework will be formally approved by the Service Delivery Board (SDB). Once approved this will be available via the Service's intranet page.	Low	This action has been fully implemented.
Follow Up 6.21/22 (Business Continuity 1.21/22)	The Service will deliver training on the Business Continuity Toolkit and Procedure for those staff responsible for delivering Business Continuity.	Low	This action has been fully implemented.
Follow Up 6.21/22 (Business Continuity 1.21/22)	Training around the new BCP templates will be developed and delivered for relevant staff.	Medium	This action has been fully implemented.
Follow Up 6.21/22 (Business Continuity 1.21/22)	Key performance indicators for business continuity management will be created and reported on a quarterly basis through to the Strategic Delivery Board.	Low	This action has been fully implemented.
Training and Development 5.21/22	The Service will ensure that operational training risk assessments are uploaded into the PDR Pro System against the relevant training session upon completion.	Medium	This action has been fully implemented.
Training and Development 5.21/22	The Workforce Development Team will continue to chase management for the relevant staff members identified to ensure a development plan is completed and uploaded to the PDR Pro System.	Medium	This action has been fully implemented.
Training and Development 5.21/22	Close monitoring will be completed of the outstanding Technical Documents as part of the National Operational Guidance Programme to ensure these are fully completed and signed off.	Medium	This action has been fully implemented.
Training and Development 5.21/22	The Operational Debriefing, Performance Monitoring and Assurance Policy will be reviewed and updated to ensure it is reflective of current working practices.	Low	This action has been fully implemented.

APPENDIX C: SCOPE

The scope below is a copy of the original document issued.

Scope of the review

The internal audit assignment has been scoped to provide assurance on how UHNM manages the following area:

Objective of the area under review

Management has introduced effective systems for the monitoring of implementation of agreed management actions and ensuring that these are implemented in line with the agreed timescales.

When planning the audit, the following areas for consideration and limitations were agreed:

Areas for consideration:

As part of the approved internal audit periodic plan for the 2022/23 Financial Year, we will be completing a follow up review of all agreed management actions to ascertain their current status. We will seek management assurance for those categorised as 'low' priority actions.

As part of this review, we will be reviewing the resulting six 'medium' and five 'low' priority management actions from the following internal audit reports:

- Follow Up 6.21/22; and
- Training and Development 5.21/22.

Limitations to the scope of the audit assignment:

- The review only covers audit recommendations previously made and does not review the whole control framework of the areas listed above, therefore we are not providing assurance on the entire risk and control framework.
- Where relevant to the recommendation being followed up, we will ascertain whether policies/procedures /documentation have been established but we have not assessed whether these are fit for purpose.
- Our work does not provide absolute assurance that material errors, loss or fraud do not exist.

Debrief held 11 April 2023
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We have no responsibility to update this report for events and circumstances occurring after the date of this report.

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