

# Tyne and Wear Fire and Rescue Authority

## Local Code of Corporate Governance



### 1. Introduction

Tyne and Wear Fire and Rescue Authority (the Authority) is the publicly accountable body that oversees the policy and service delivery of fire and rescue services on behalf of the community. The Authority is committed to demonstrating it has the necessary arrangements in place to perform effectively. This document sets out the way in which the Authority will meet this commitment.

The Authority has an established governance framework in place, which is aimed at ensuring it is doing the right things, in the right way, for the right people, in a timely, inclusive, open, honest and accountable manner. This framework comprises of systems, processes, cultures and values through which the Authority directs and control its functions, and it is accountable to the public.

The Authority does this by adhering to the *Delivering Good Governance in Local Government Framework*<sup>1</sup> published by the Chartered Institute of Public Finance and Accountancy (CIPFA) in association with the Society of Local Authority Chief Executives (SOLACE). This framework is intended to assist the Authority in developing and shaping an informed approach to governance, aimed at achieving the highest standards in a measured and proportionate way. The overall aim is to ensure that:

- Resources are directed in accordance with agreed policy and according to priorities;
- There is sound and inclusive decision making; and
- There is clear accountability for the use of those resources in order to achieve desired outcomes for service users and communities.

In order to achieve good governance, the Authority is to demonstrate that its governance arrangements comply with the seven principles of the CIPFA/SOLACE framework.

The first two principles focus on **acting in the public interest**:

- A. Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law.
- B. Ensuring openness and comprehensive stakeholder engagement.

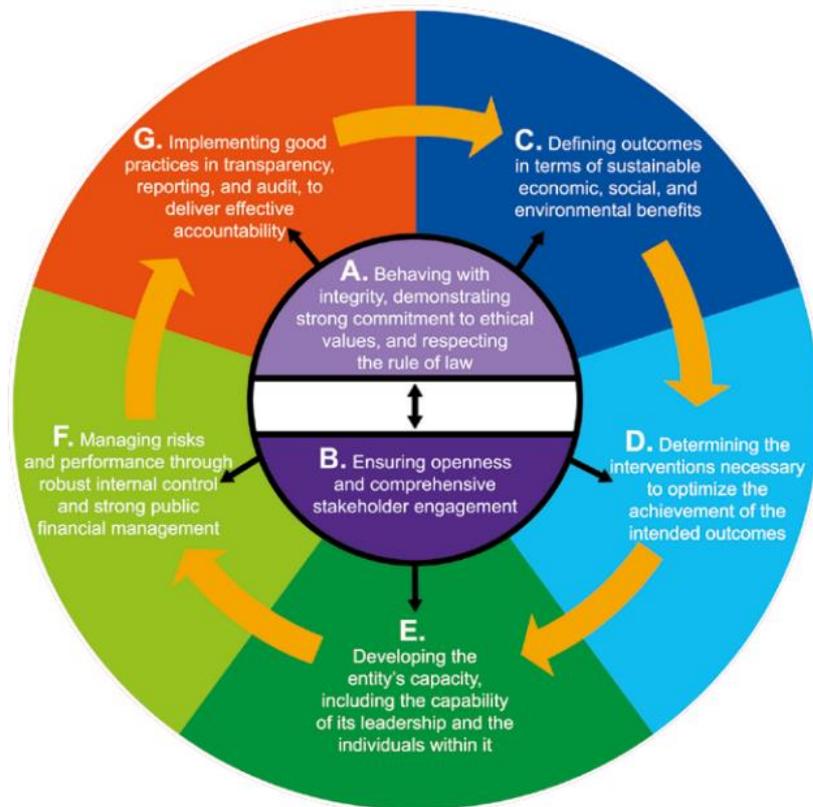
The remaining five principles require **effective arrangements** for:

- C. Defining outcomes in terms of sustainable economic, social, and environmental benefits.
- D. Determining the interventions necessary to optimise the achievement of intended outcomes.
- E. Developing the Authority's capacity, including the capability of its leadership and the individuals within it.
- F. Managing risks and performance through robust internal control and strong public financial management.
- G. Implementing good practices in transparency, reporting, and audit to deliver effective accountability.

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<sup>1</sup> CIPFA/SOLACE (2016) *Delivering Good Governance in Local Government Framework 2016 Edition* <https://www.cipfa.org/policy-and-guidance/publications/d/delivering-good-governance-in-local-government-framework-2016-edition> (Accessed: 6 January 2021)

The diagram below illustrates the CIPFA / SOLACE good governance framework and how the seven principles relate to one another.



## 2. Applying the principles of good governance

Below is an overview of how the Authority adheres to the principles of good governance in order to achieve its intended outcomes while acting in the public interest.

### A. Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law

- The Authority fosters a culture based on shared values, ethical principles and good conduct and Members and staff are required to act in accordance with codes of conduct.
- The Authority is transparent about how decisions are made and recorded and ensures appropriate legal, financial and other professional advice is considered as part of the decision-making process.
- The Authority has whistle blowing arrangements in place and a confidential reporting hotline, details of which have been communicated to staff.

### B. Ensuring openness and comprehensive stakeholder engagement

- The Authority responds to the views of stakeholders and the community through consultation and service user feedback. The Authority's consultation framework ensures the community is given the opportunity to be involved with and influence decision-making, service delivery and evaluation to continually improve services. The Authority recognises the role it plays in partnership working across Tyne and Wear and the contribution of partners in assisting the Authority to deliver its own objectives. The Authority ensures effective, transparent and accessible arrangements are in place for dealing with complaints.

### **C. Defining outcomes in terms of sustainable economic, social, and environmental benefits**

- The Authority published its vision and priorities as part of its Strategic Community Safety Plan. In delivering its vision and priorities, the Authority reports regularly on activities, performance and its financial position. The Authority is committed to delivering quality services to the public in an efficient and effective way.

### **D. Determining the interventions necessary to optimise the achievement of intended outcomes**

- The Authority has a planning framework in place to help deliver the best outcomes and services link to priorities and statutory responsibilities. The Medium Term Financial Strategy integrates and balances service priorities, affordability and other resource constraints. Performance is managed and monitored through appropriate key performance indicators.

### **E. Developing the entity's capacity, including the capability of its leadership and the individuals within it**

- The Authority recognises the importance of having skilled and motivated staff to deliver its priorities and is committed to staff and Member development. This ensures staff and Members are inducted, trained, developed and assessed for their roles.

### **F. Managing risks and performance through robust internal control and strong public financial management**

- The Authority ensures that Members and key officer roles and functions are set out in the Standing Orders and those charged with overseeing governance activities have the skills, knowledge and experience required to perform. The Authority is compliant with the principles outlined in the CIPFA Statement on the Role of the Chief Financial Officer in Local Government. This role ensures compliance with financial standards and works closely with the Chief Fire Officer to ensure the finance function and the management of the Authority's resources is robust.

### **G. Implementing good practices in transparency, reporting, and audit to deliver effective accountability**

- The Authority conducts business in an open and transparent manner and has processes for declaring relationships or interests to ensure decision-making is transparent and objective. There is a robust system of scrutiny and effective arrangements for managing risk and the publication of performance information.

The following appendices collectively demonstrate the extent to which the Authority complies with the good governance principles:

The following pages, Appendix A summarises the Authority's governance framework. Appendix B provides details of the actions and behaviours adopted by the Authority as aligned with the CIPFA / SOLACE good governance principles and Appendix C maps the Authority's key documents and processes against the principles.

## **3. Monitoring and Review**

The Governance Committee that is responsible for monitoring and reviewing the Authority's corporate governance arrangements and overseeing adherence to this Code.

The purpose of the Committee is to provide independent assurance of the adequacy of the risk management framework and the associated control environment, independent scrutiny of the Authority's financial and non-financial performance to the extent that it affects the Authority's exposure to risk and weakens the control environment and to oversee the financial reporting process.

The Committee also has responsibility for maintaining high standards across the Authority, overview of the Member code of conduct and other relevant protocols.

The Committee will ensure governance arrangements are kept under review through:

- Reports prepared by officers with responsibility for aspects of this Code
- The work of Internal Audit
- External Audit opinion
- Other review agencies and Inspectorates
- Opinion from Statutory Officers.

#### **4. Annual Governance Review**

The Authority will conduct annually a review of the effectiveness of the corporate governance framework including the system of internal control. A report on the findings and recommendation arising from the review will be presented to the Corporate Governance Board, Executive Leadership Team, Governance Committee and the Fire Authority. The Governance Committee approve the actions to be included in the corporate governance action plan and oversee the delivery of the action plan throughout the year.

#### **5. Annual Governance Statement**

In accordance with the Accounts and Audit (England) Regulations 2015, each year the Authority publishes an Annual Governance Statement. This statement provides an assessment of the Authority's governance arrangements and details where improvements are required. The Annual Governance Statement is published as part of the Authority's Annual Statement of Accounts.

## Appendix A - Tyne and Wear Fire and Rescue Authority Corporate Governance Framework

Our vision: **Creating the safest community**

Our mission: **To save life, reduce risk, provide humanitarian services and protect the environment**

Meeting statutory obligations

Striving for excellence

Working together

Maintaining a community focus

Meeting organisational objectives

Continuous improvement

Developing Members and staff

Upholding ethical values

The corporate governance framework comprises the systems, processes, cultures and values through which the Authority directs and controls its functions and through which it accounts to and engages with the communities of Tyne and Wear.

Key documents produced / reviewed annually	Key documents produced / reviewed as required	Supporting processes, monitoring and regulation
<ul style="list-style-type: none"> <li>❖ Annual Audit Letter</li> <li>❖ Annual audit plan</li> <li>❖ Annual Governance Statement</li> <li>❖ Annual Statement of Accounts</li> <li>❖ Departmental annual plans</li> <li>❖ Equality and gender pay gap report</li> <li>❖ Local Code of Corporate Governance</li> <li>❖ Medium Term Financial Strategy</li> <li>❖ Members Allowance Scheme</li> <li>❖ Pay Policy and Statement</li> <li>❖ Reserves Policy</li> <li>❖ Statement of Assurance and Annual Report</li> </ul>	<ul style="list-style-type: none"> <li>❖ All personnel code of conduct</li> <li>❖ Anti-Bribery Policy</li> <li>❖ Anti-Fraud Strategy</li> <li>❖ Anti-Fraud and Corruption Policy</li> <li>❖ Capital Policy</li> <li>❖ Complaints and appreciations policy</li> <li>❖ Community Risk Profile</li> <li>❖ Community Safety Strategy</li> <li>❖ Corporate policies and procedures</li> <li>❖ Corporate risk register</li> <li>❖ Delegation scheme and decision records</li> <li>❖ District plans and performance reports</li> <li>❖ Equality impact assessments</li> <li>❖ External audit of accounts and value for money opinion</li> <li>❖ Financial regulations</li> <li>❖ Health and Safety Policy</li> <li>❖ ICT Acceptable Use Policy</li> </ul>	<ul style="list-style-type: none"> <li>❖ Annual governance review</li> <li>❖ Asset management group and register</li> <li>❖ Budget management protocols</li> <li>❖ Business continuity management arrangements</li> <li>❖ Capital programme</li> <li>❖ Community engagement and focus groups</li> <li>❖ Complaints procedure</li> <li>❖ Consultation policy</li> <li>❖ Continuing Professional Development programmes</li> <li>❖ Corporate Risk Management Group</li> <li>❖ Customer feedback / satisfaction surveys</li> <li>❖ Employee surveys</li> <li>❖ Environmental Task Group</li> <li>❖ Equality Committee</li> <li>❖ Estates plan and access audits</li> <li>❖ External audit role</li> </ul>

<ul style="list-style-type: none"> <li>❖ Information Asset Policy and register</li> <li>❖ Information Security Policy</li> <li>❖ Information sharing protocols</li> <li>❖ Job descriptions and profiles</li> <li>❖ Leadership Bond</li> <li>❖ Malpractice occurring in the workplace (whistleblowing)</li> <li>❖ Members code of conduct</li> <li>❖ Member learning and development programme</li> <li>❖ Member induction programme</li> <li>❖ Organisational Development Strategy</li> <li>❖ Partnership register and agreements</li> <li>❖ Privacy notice / policy</li> <li>❖ Procurement codes of practice</li> <li>❖ Protocol on member / employee relationships</li> <li>❖ Risk Management Policy</li> <li>❖ Staff induction programme</li> <li>❖ Standing Orders</li> <li>❖ Strategic Community Safety Plan and Integrated Risk Management Plan</li> <li>❖ Transparency code</li> <li>❖ Treasury Management Strategy</li> <li>❖ Vision, mission and core values</li> </ul>	<ul style="list-style-type: none"> <li>❖ External reviews and accreditations</li> <li>❖ Fire Authority meetings</li> <li>❖ Freedom of information scheme</li> <li>❖ Governance Committee</li> <li>❖ Health and safety inspections / audits</li> <li>❖ Human Resources Committee</li> <li>❖ Internal audit role</li> <li>❖ Joint Consultative Committee</li> <li>❖ Health Safety and Welfare Committee</li> <li>❖ HMICFRS inspection and inspection reports</li> <li>❖ Local resilience Forum / multiagency groups</li> <li>❖ Pension Board</li> <li>❖ Policy and Performance Committee and performance reporting</li> <li>❖ Publication scheme</li> <li>❖ Programme Management Office</li> <li>❖ Register of gifts and interests</li> <li>❖ Risk Management and Assurance Database</li> <li>❖ Safecall confidential helpline</li> <li>❖ Senior Information Risk Owner role</li> <li>❖ Staff engagement sessions</li> <li>❖ Staff network groups</li> <li>❖ Staff Performance Development Reviews</li> <li>❖ Statutory Officer roles</li> <li>❖ Training needs analysis / capability processes</li> <li>❖ Value for money framework</li> </ul>
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## Appendix B – Behaviours and actions to be taken by the Authority that demonstrate good governance

Supporting principles	Behaviours and actions that demonstrate good governance in practice
<b>Principle A – Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of the law</b>	
<p><b>A1.</b> Exercising executive leadership by leading by example and clearly communicating the Authority’s purpose, vision and core values.</p>	<ul style="list-style-type: none"> <li>• Promote our purpose and vision through our Strategic Community Safety Plan (SCSP) / Integrated Risk Management Plan (IRMP), Organisational Development Strategy, Community Safety Strategy and Leadership Bond.</li> <li>• The Authority’s vision, strategic plans, priorities and targets in consultation with the local community and key stakeholders.</li> <li>• Review on a regular basis the Authority’s vision for the local area and its impact on the Authority’s governance arrangements.</li> <li>• Publish a Statement of Assurance and Annual Report on a timely basis to communicate the Authority’s activities, achievements, financial position and performance.</li> <li>• Publish a summary of our financial accounts on the website.</li> </ul>
<p><b>A2.</b> Identify and manage potential conflicts of interest that Members and Employees may have.</p>	<ul style="list-style-type: none"> <li>• Standards of conduct and personal behaviour expected of Members and employees, work between Members and employees and between the Authority, its partners and the community are defined and communicated through codes of conduct and protocols.</li> <li>• The Authority has in place appropriate policies, procedures and processes to ensure that they continue to operate in practice.</li> <li>• The Authority leadership sets a tone for the organisation by creating a climate of openness, support and respect.</li> <li>• Arrangements are in place to safeguard Members and employees against conflicts of interest and to ensure that they continue to operate in practice.</li> </ul>
<p><b>A3.</b> Ensuring that the Authority considers the areas of the Service that are at a higher risk of fraud and corruption, ensuring effective processes are in place.</p>	<ul style="list-style-type: none"> <li>• Arrangements are in place to ensure that Members and employees of the Authority are not influenced by prejudice, bias or conflicts of interest in dealing with different stakeholders. The Authority has in place appropriate processes to ensure that they continue to operate in practice.</li> <li>• Value for money is measured and the results considered prior to making decisions. Information to review value for money and performance effectively is available to managers and the Authority.</li> <li>• The Authority measures the effectiveness and impact of policies, plans and decisions.</li> <li>• Procurement and financial guidelines are clear and available to all employees, and are routinely used in processes that could be influenced by unethical behaviour.</li> <li>• A whistleblowing policy is in place, along with a free confidential helpline ‘safecall’ to support staff</li> </ul>
<p><b>A4.</b> Ensure external stakeholders act with integrity and in compliance with ethical standards.</p>	<ul style="list-style-type: none"> <li>• When working in partnership Members are clear about their roles and responsibilities both individually and collectively in relation to the partnership and to the Authority.</li> <li>• When working in partnership:             <ul style="list-style-type: none"> <li>○ There is clarity about the legal status of the partnership.</li> <li>○ Representatives or organisations both understand and make clear to all other partners the extent of their authority to bind their organisation to partner decisions in an ethical way.</li> </ul> </li> <li>• A full procurement process is adhered to on every occasion adhere to our internal supplier management policy, which ensures these ethical standards are upheld.</li> </ul>

<p><b>A5.</b> The Authority comply with relevant statutory provisions and laws within the organisation and develop and maintain robust policies and procedures that place emphasis on agreed ethical values.</p>	<ul style="list-style-type: none"> <li>• The Authority does not operate an executive / scrutiny model; however, the executive and scrutiny functions of the Authority and its other committees are set out in standing orders.</li> <li>• Shared values including leadership values both for the Authority and employees reflecting public expectations have been developed. These have been communicated with Members, employees, the community and partners.</li> <li>• Arrangements are in place to ensure that procedures and operations are designed in conformity with appropriate ethical standards, and monitor their continuing effectiveness in practice.</li> <li>• Equality impact assessment are routinely applied to policies and procedures to verify this.</li> <li>• Purchasing thresholds and tendering processes are adhered to, where there is a local agreement in place to vary this; this is managed by separate checks and balances (e.g. purchasing card reviews).</li> <li>• Shared values act as a guide for decision making and a basis for positive and trusting relationships within the Authority</li> <li>• A scheme of delegation and reserve powers within the constitution, including a formal schedule of those matters specifically reserved for collective decision of the Authority taking account of relevant legislation has been agreed, is monitored and updated when required.</li> <li>• The Authority observe all specific legislative requirements placed upon it, as well as the requirements of general law, and in particular to integrate the key principles of good administrative law – rationality, legality and natural justice into their procedures and decision making processes.</li> <li>• The Authority maintains an information security policy, which exists to protect Authority information against loss, damage or abuse. It maintains a safeguard to ICT that process, store, display and transmit information.</li> <li>• The Senior Information Risk Owner is responsible for the effective implementation of a consistent framework for the management of information security.</li> </ul>
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**Principle B - Ensuring openness and comprehensive stakeholder engagement**

<p><b>B1.</b> The Authority encourages individuals and groups from all sections of the community to engage and consult with members of the community contribute and participate in the work of the Authority.</p>	<ul style="list-style-type: none"> <li>• Protocols are in place to ensure effective communication between Members and officers in their respective roles.</li> <li>• The Authority’s vision, strategic plans, priorities and targets are developed through robust mechanisms, and in consultation with the community and other key stakeholders, and that, they are clearly articulated and disseminated.</li> <li>• The Authority ensures that it is open and accessible to the community and all major decisions are captured, documented and published through Fire Authority and Committee meetings and can be accessed online.</li> <li>• A clear policy on the types of issues the Authority will meaningfully consult on or engage with the public and Service.</li> <li>• Covid-19 restrictions have played a part in minimising the contact permissible with members of the community.</li> </ul>
<p><b>B2.</b> The Authority ensure there are clear channels of communication with all sections of the community and other stakeholders in order to inform assessments and commissioning arrangements.</p>	<ul style="list-style-type: none"> <li>• We ensure there are clear lines of communication with stakeholders to attain the views of the wider community</li> <li>• All outward facing projects we deliver are evaluated by asking local people and stakeholders for feedback.</li> <li>• We clearly publish results of consultation and evaluation for employees and for public viewing.</li> <li>• We comply with the Local Government Transparency Code 2015.</li> <li>• Statement of Assurance and Annual Report is published</li> <li>• External challenge is regularly sought and acted upon.</li> </ul>
<p><b>B3.</b> The Authority takes account of relevant intelligence, data and information in setting Service priorities and KPIs.</p>	<ul style="list-style-type: none"> <li>• The Chief Fire Officer is responsible and accountable to the Authority for all aspects of operational management.</li> <li>• KPI’s are refined to meet the needs of the Service and its priorities to ensure they remain relevant to the Services’ requirements and effective mechanisms are in place to monitor service delivery failures.</li> <li>• Open and effective mechanisms for documenting evidence for decisions and recording the criteria, rationale and considerations on which decisions are based have been implemented.</li> <li>• Procedure for managing appreciations and complaints is in place and the process is promoted via the website.</li> </ul>

<p><b>B4.</b> The Authority maximises the use of partnerships to efficiently deliver outcomes, and measure how effective those partnerships are in delivering outcomes for the Authority.</p>	<ul style="list-style-type: none"> <li>• Ensure that partnerships are underpinned by a common vision that is understood and agreed by all parties.</li> <li>• When working in partnership Members are clear about their roles and responsibilities both individually and collectively in relation to the partnership and to the Authority.</li> <li>• In pursuing the vision of a partnership, a set of values has been agreed against which decision making and actions can be judged. Such values must be demonstrated by partner's behaviour both individually and collectively.</li> <li>• Collaborative procurements taking place with external partners to ensure maximum efficiencies realised.</li> <li>• Knowledge sharing takes place with local authority and public sector partners to learn and improve outcomes.</li> <li>• Supplier management focused upon partner type approach to ensure greatest value from these arrangements.</li> </ul>
<p><b>B5.</b> The Authority implements effective feedback mechanisms in order to demonstrate how views have been taken into account.</p>	<ul style="list-style-type: none"> <li>• We comply with the Local Government Transparency Code 2015.</li> <li>• We publish results of consultation and evaluation for employees / public viewing.</li> <li>• Effective transparent and accessible arrangements for dealing with complaints and compliments are implemented.</li> <li>• Those making decisions, whether for the Authority or a partnership, are provided with information that is fit for purpose – relevant, timely and gives clear explanations of technical issues and their implications.</li> <li>• The Authority produce a publication scheme which is a guide to information available to the public, where it can be found and whether or so free of subject to charge.</li> </ul>
<p><b>B6.</b> The Authority ensures an open culture through demonstrating, documenting and communicating TWFRS commitment to openness.</p>	<ul style="list-style-type: none"> <li>• We comply with the Local Government Transparency Code 2015.</li> <li>• The Authority leadership sets a tone for the organisation by creating a climate of openness, support and respect.</li> <li>• An effective independent Governance Committee is maintained.</li> <li>• All major decisions are captured, documented and published through Fire Authority /Committee meetings.</li> <li>• The public are permitted to attend Fire Authority / Committee meetings (during covid-19 meetings were live streamed)</li> </ul>
<p><b>Principle C: Defining outcomes in terms of sustainable economic, social, and environmental benefits</b></p>	
<p><b>C1.</b> There is a clear vision of what outcomes the Authority are aiming to achieve, linking to the Authority's vision mission and goals.</p>	<ul style="list-style-type: none"> <li>• The Authority leadership sets a tone for the organisation by creating a climate of openness, support and respect.</li> <li>• The SCSP/IRMP explains the approach the Authority will take to support the vision, mission and goals and the planned activity to achieve the intended outcomes.</li> <li>• Standards of conduct and behaviour expected of Members and employees and between the Authority and its partners and the community are defined and communicated through codes of conduct.</li> <li>• Protocols have been developed to ensure that the Chair and Chief Fire Officer negotiate their respective roles early in the relationship and that a shared understanding of roles and objectives is maintained.</li> <li>• Production of the Annual Governance Statement, which is clearly written and easy to read.</li> </ul>
<p><b>C2.</b> The benefits to be achieved (Economic, Social and Environmental) have been clearly defined, and any conflicts considered.</p>	<ul style="list-style-type: none"> <li>• Arrangements are in place to ensure that Members and employees of the Authority are not influenced by prejudice, bias or conflicts of interest in dealing with different stakeholders. The Authority has in place appropriate processes to ensure that they continue to operate in practice.</li> <li>• Arrangements are in place to ensure that procedures and operations are designed in conformity with appropriate ethical standards, and monitor their continuing effectiveness in practice.</li> </ul>
<p><b>C3.</b> The Authority identifies the impact of any decisions or changes on stakeholders / communities and understands the outcomes to be delivered.</p>	<ul style="list-style-type: none"> <li>• Shared values including leadership values both for the Authority and employees reflecting public expectations have been developed. These have been communicated with Members, employees, the community and partners.</li> <li>• Shared values act as a guide for decision making and as a basis for developing positive and trusting relationships within the Authority.</li> </ul>

<p><b>C4.</b> The Authority manages the risks to the achievement of outcomes.</p>	<ul style="list-style-type: none"> <li>Professional advice on matters that have legal or financial implications is available and recorded well in advance of decision making and used appropriately.</li> <li>Risk systems are readily available and the corporate risk register and overseen by the Corporate Risk Management Group and monitored through our risk management assurance database (RMAD).</li> </ul>
<p><b>C5.</b> There is fair access to the services delivered, and arrangements are in place to identify and deal with failures in service delivery (i.e. complaints).</p>	<ul style="list-style-type: none"> <li>An effective Governance Committee is in place.</li> <li>An effective scrutiny function which encourages constructive challenge and enhances the Authority's performance overall and of any organisation for which it is responsible is in place.</li> <li>There are effective, transparent and accessible arrangements in place for dealing with service failures and the service operates a complaints and appreciations policy.</li> <li>Effective arrangements are in place to identify and deal with failures in service.</li> <li>Arrangements are in place for whistleblowing, which employees and those contracting with the Authority have access.</li> <li>Business Continuity plans are continually reviewed and updated to ensure they are fit for purpose.</li> <li>Incident Management processes account for high priority and high impact failures.</li> </ul>
<p><b>Principle D: Determine the interventions necessary to optimise the achievement of the intended outcomes</b></p>	
<p><b>D1.</b> The Authority has objective and rigorous analysis of options for achieving outcomes.</p>	<ul style="list-style-type: none"> <li>There are a number of groups within the Authority structure to apply scrutiny to all processes and ensure that the correct outcome is achieved.</li> <li>Open and effective mechanisms for documenting evidence for decisions and recording the criteria, rationale and considerations on which decisions are based have been implemented.</li> <li>Prior to commencement, projects have clear objectives, expected outcomes set, and risks are identified.</li> <li>An effective Governance Committee, which its independence is maintained.</li> </ul>
<p><b>D2.</b> The Authority prioritises competing demands within limited resources available and arrangements are flexible to adapt to changing circumstances.</p>	<ul style="list-style-type: none"> <li>Those making decisions, whether for the Authority or a partnership, are provided with information that is fit for the purpose – relevant, timely and gives clear explanations of technical issues and their implications.</li> <li>Arrangements are in place to enable the Authority to engage with all sections of the community effectively. These arrangements recognise that different sections of the community have different priorities and establish explicit processes for dealing with these competing demands.</li> <li>Prioritisation of demands is performed robustly on a consistent basis to ensure maximum delivery in line with Service expectations. The Programme Management office has been established to manage project workloads of behalf of the Service. The programme Office has introduced a new system of managing projects; this is replicated across the Service.</li> </ul>
<p><b>D3.</b> The Authority has arrangements in place to set organisational standards including quality measures, with meaningful KPIs to measure the achievement of desired outcomes.</p>	<ul style="list-style-type: none"> <li>Risk management is embedded into the culture of the organisation; with Members and managers, at all levels recognising that risk management is part of their job.</li> <li>A clear policy on the types of issues it will meaningfully consult on or engage with the public and service which includes a feedback mechanism for those consultees to demonstrate what has changed as a result has been established.</li> <li>Departmental KPIs are closely aligned to organisational objectives and are specific and measurable.</li> </ul>

<p><b>D4.</b> The Authority has arrangements in place to measure and monitor performance and report to relevant stakeholders on the achievement of desired outcomes.</p>	<ul style="list-style-type: none"> <li>• The Authority actively recognises the limits of lawful activity placed on it by, for example the ultra vires doctrine but also strives to utilise powers to the full benefit of our communities.</li> <li>• The Authority recognises the limits of lawful action and observes both the specific requirements of legislation and the general responsibilities placed on the Authority by public law.</li> <li>• KPIs are in place to monitor performance and are regularly reviewed and reported on.</li> </ul>
<p><b>D5.</b> The Authority identifies the quality of services delivered and takes action to address inadequate delivery of service (including those delivered by a third party).</p>	<ul style="list-style-type: none"> <li>• Effective arrangements to identify and deal with failure in service delivery are in place.</li> <li>• Effective mechanisms exist to monitor service delivery.</li> <li>• When working in partnership Members are clear about their roles and responsibilities both individually and collectively in relation to the partnership and to the Authority.</li> <li>• Stakeholders to whom we are accountable are considered and the effectiveness of the relationships assessed with appropriate changes made.</li> </ul>
<p><b>D6.</b> Members and employees have a full understanding of their roles and of the processes they are expected to follow, as well as a clear understanding of the powers delegated to them (e.g. spending authorisation levels).</p>	<ul style="list-style-type: none"> <li>• The Monitoring Officer is responsible to the Authority for ensuring that agreed procedures are followed and that all applicable statutes, regulations are complied with.</li> <li>• The Finance Director is responsible to the Authority for ensuring that appropriate advice is given on all financial matters, for keeping proper financial records and accounts, and for maintaining an effective system of internal financial control.</li> <li>• The Finance Director is the Authority's Section 151 Officer.</li> <li>• The Finance Officer has statutory duties in relation to the financial administration and stewardship of the Authority. This statutory responsibility cannot be overridden.</li> <li>• The statutory duties arise from: Section 73 of the Local Government Act 1985; The Local Government Finance Act 1988; The Local Government Act 2003 and The Accounts and Audit Regulations.</li> <li>• As the officer designated by the Authority for the purposes of Section 73 of the Local Government Act 1985, the Finance Officer is responsible for ensuring the proper financial administration of the Authority's services and affairs and acts as financial adviser to the Authority and its Committees, and to such other bodies as the Authority shall approve.</li> <li>• The Constitution sets out the functions of Section 151 Officer as follows Ensuring lawfulness and financial prudence of decision making; administration of financial affairs; contributing to corporate management, supporting the Standards Committee and providing advice.</li> </ul>
<p><b>D7.</b> Authority Members are accessible to all employees.</p>	<ul style="list-style-type: none"> <li>• The public and employees may attend all committee meetings subject to the exceptions set out in the standing orders.</li> <li>• The Authority ensures that it is open and accessible to the community, service users and its employees and that it has made a commitment to openness and transparency in all its dealings, including partnerships subject only to the need to preserve confidentiality in those specific circumstances where it is proper and appropriate to do so.</li> </ul>
<p><b>Principle E: Developing the Authority's capacity, including the capability of its leadership and the individuals within it</b></p>	
<p><b>E1.</b> The Authority ensures all employees are adequately trained and skilled to deliver services and remain up to date.</p>	<ul style="list-style-type: none"> <li>• We provide induction and training programmes tailored to individual needs and opportunities for Members and Officers to update their knowledge on a regular basis.</li> <li>• We ensure that the statutory officers have the skills, resources and support necessary to perform effectively in their roles and that these roles are properly understood throughout the organisation.</li> <li>• New employees receive an induction. Staff transferring into a department receive an appropriate induction and PDR</li> <li>• Member's skills are assessed at recruitment and the Service provides a themed learning and development programme.</li> </ul>

<p><b>E2.</b> The Authority ensures that appropriate inductions are in place for new employees, and appropriate appraisals / PDRs / performance reviews are carried out</p>	<ul style="list-style-type: none"> <li>• Member and employee induction programme</li> <li>• Officer skills are regularly assessed and the Authority is committed to developing those skills to enable roles to be carried out effectively.</li> <li>• Member's skills are assessed at recruitment and the Service provides a themed learning and development programme.</li> <li>• National Joint Council for Local Government Services National Agreement on Pay and Conditions of Service.</li> <li>• Staff undertake detailed PDRs, which detail required training and skills. These are kept up to date and conducted several times a year. PDRs are performed regularly to ensure skills are kept in line with required performance.</li> </ul>
<p><b>E3.</b> The Authority ensures that effective arrangements are in place for reviewing the Service as a whole, and of individual Members and employees with action plans agreed for development / improvement needs.</p>	<ul style="list-style-type: none"> <li>• The Authority actively develops skills on a continuing basis to improve performance including the ability to scrutinise and challenge and to recognise when outside expert advice is needed.</li> <li>• Ensuring that effective arrangements are in place for reviewing the performance of the Service as a whole and of individual Members and agreeing action plans which aim to address any training or development needs.</li> </ul>
<p><b>E4.</b> The Authority ensures the use of assets in the organisation is reviewed regularly to ensure their continued effectiveness and efficiency.</p>	<ul style="list-style-type: none"> <li>• All departments regularly review assets and update the Information Asset Register.</li> <li>• The Asset Management Group and Capital Management Group utilise capital funding effectively to ensure our assets continue to meet the requirements of the Service and its users.</li> <li>• All staff, their training and the equipment they use is assessed both internally and externally to ensure competence. All equipment is included in the Service Miquest procedure ensuring its effectiveness.</li> </ul>
<p><b>Principle F: Managing risk and performance through robust internal control and strong public financial management</b></p>	
<p><b>F1.</b> There are effective arrangements in place to monitor the use of The Authority's budget(s) and the achievement of efficiency targets.</p>	<ul style="list-style-type: none"> <li>• The Authority makes clear its role and responsibilities to Members, employees and the community.</li> <li>• Role of Finance Director and Deputy Clerk. The Deputy Clerk is the Authority's Monitoring Officer.</li> <li>• An agreed Pay Policy sets out the terms and conditions for remuneration of officers including an effective structure for managing the review process. In addition, Members allowances are reviewed by a remuneration panel as appropriate.</li> <li>• The Finance Officer has responsibility to maintain a continuous, adequate and effective internal audit of the Authority's accounting, financial and other processes, including the approval of the Internal Audit Strategy and annual audit plans.</li> <li>• The Finance Officer has a duty to report to the Authority where it appears that the Authority, a committee of the Authority, or a person holding any office or employment under the Authority has made or is about to make a decision that would involve unlawful expenditure, has taken or is about to take a course of action which, if pursued to its conclusion, would be unlawful and likely to cause a loss or deficiency on the part of the Authority or is about to enter an item of account the entry of which is unlawful, or if proposed expenditure is in excess of available resources (Section 114, Local Government Finance Act 1988).</li> </ul>
<p><b>F2.</b> The Authority understands the importance of complying with established controls to prevent the risk of fraud and error.</p>	<ul style="list-style-type: none"> <li>• A range of tools are available for employees and Members to assist them to carry out their roles effectively, signatory lists, tender procedures, standing orders and financial regulations.</li> </ul>
<p><b>F3.</b> The Authority has an up to date business continuity plan (BCP) in place to resume</p>	<ul style="list-style-type: none"> <li>• BCPs are regularly reviewed with the support from our risk management team and kept in accessible locations.</li> <li>• The Service is aligned with ISO22301. All staff are aware of BCP and actions to be taken in the event of interruption to activities.</li> </ul>

services in the case of disruption / emergency and understands what action should be taken in the case of service disruption.	<ul style="list-style-type: none"> <li>• Relevant BCP across organisation service areas.</li> <li>• The Authority ensures all BCP are maintained and tested on an ad-hoc basis.</li> </ul>
<b>F4.</b> The Authority ensures the health and safety of employees, customers and third parties are protected.	<ul style="list-style-type: none"> <li>• The Authority observe all specific legislative requirements placed upon it, as well as the requirements of general law, and in particular to integrate the key principles of good administrative law – rationality, legality and natural justice into their procedures and decision making processes.</li> <li>• All staff undergo regular H&amp;S training to ensure compliance with the HASAW Act 1974 and all subsequent H&amp;S legislation. Staff undertake IOSH training where necessary</li> </ul>
<b>F5.</b> The Authority has business processes in place to identify and record details of all of the information and records held by the Organisation in compliance with GDPR.	<ul style="list-style-type: none"> <li>• An information sharing protocol has been developed, this protocol underpins information sharing agreements with partners where required.</li> <li>• A data breach policy has been implemented including an overarching data protection policy and privacy notice.</li> <li>• A review of records and compliance with GDPR was completed prior to introduction. All employees completed a GDPR training package.</li> <li>• The Service works in alignment with ISO: 27001 with the introduction of an information asset register in 2017.</li> </ul>
<b>Principle G: Implementing good practices in transparency, reporting, and audit to deliver effective accountability</b>	
<b>G1.</b> Decision making is rigorous and transparent with constructive scrutiny listened to and acted upon.	<ul style="list-style-type: none"> <li>• The Authority makes clear its role and responsibilities to Members, employees and the community.</li> <li>• Stakeholders to whom we are accountable are considered and the effectiveness of the relationships assessed with appropriate changes made.</li> <li>• External challenge is regularly sought and acted upon.</li> <li>• The Authority ensures that it is open and accessible to the community, service users and its employees and that it has made a commitment to openness and transparency in all its dealings, including partnerships subject only to the need to preserve confidentiality in those specific circumstances where it is proper and appropriate to do so.</li> <li>• The Service has adopted the model publication scheme, as set out by the Information Commissioners Office.</li> </ul>
<b>G2.</b> Recommendations made by Internal Audit, External Audit and external agencies / reviews are acted upon.	<ul style="list-style-type: none"> <li>• A Statement of Assurance and Annual Report is published on an annual basis giving information on the Authority's vision, strategies, plans and financial statements as well as information about its outcomes, achievements and the satisfaction of service users in the previous period.</li> <li>• Recommendations from audits are taken seriously and constructively and are viewed as a valuable independent assessment. Audit findings have highlighted processes for amendment and correctly updated.</li> </ul>
<b>G3.</b> When working in partnership, arrangements for accountability are clear and the need for wider public accountability is recognised and met.	<ul style="list-style-type: none"> <li>• We clearly publish results of consultation and evaluation involving employees and stakeholders. We ensure that partnerships are underpinned by a common vision that is understood and agreed by all parties.</li> <li>• Partnership policy and annual evaluation. SLAs and MOUs reviewed when appropriate.</li> </ul>

## Appendix C– Behaviours and actions to be taken by the Authority that demonstrate good governance

Principles	A Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law	B Ensuring openness and comprehensive stakeholder engagement	C Defining outcomes in terms of sustainable economic, social, and environmental benefits	D Determining the interventions necessary to optimise the achievement of the intended outcomes	E Developing the Authority's capacity, including the capability of its leadership and the individuals within it	F Managing risks and performance through robust internal control and strong public financial management	G Implementing good practices in transparency, reporting, and audit to deliver effective accountability
Evidence of good governance (Key documents, processes and monitoring)	Vision, mission and core values	Equality and gender pay gap report	Community Safety Strategy	Medium Term Financial Strategy	Member induction and development programme	Risk management policy	Annual Statement of Accounts
	Member codes of conduct	Customer feedback / satisfaction surveys	District plans and performance reports	Annual governance review	Staff induction programme	Corporate risk register	Publication scheme
	All personnel codes of conduct	Freedom of information scheme	Local resilience forum / multi agency groups	Community engagement and focus groups	Training needs analysis / capability processes	Corporate Risk Profile	External audit of accounts and value for money opinion
	Safecall confidential helpline	Annual Statement of Accounts	Policy and Performance Committee	Customer feedback / satisfaction surveys	Continuing professional development programmes	Corporate Risk Management Group	Annual Governance Statement / assurance framework
	Member and staff Register of gifts and Interests	Annual Statement of Assurance and Annual Report	Fire Authority	Risk management policy	Departmental annual plans	Risk Management and Assurance Database	Governance Committee
	Protocol for Member Officer a relations	Governance Committee	Capital Policy and capital programme	Budget management protocols	Job descriptions and profiles	Internal Audit role	Transparency code
	Data Protection pages on the website	Pay policy statement	Strategic Community Safety Plan and Integrated Risk Management Plan	External audits and accreditations	Leadership Bond	External Audit role	
	Standing orders	Member allowances scheme	Corporate Risk Profile	Programme Management Office	Organisational Development Strategy	Annual audit plan	
	Financial regulations	Community engagement and focus groups	Business continuity management arrangements	Joint Consultative Committee	HR Committee	Annual Audit Letter	
	Whistle blowing policy and arrangements	Equality impact assessments		Pensions Board	Staff network groups	Information Asset policy and register	
	Member induction and development programme	Consultation arrangements		Reserves Policy	Staff engagement sessions	Privacy notice / policy	
	Anti-Fraud Strategy	Partnership register and agreements		Performance reporting	Employee surveys	Value for money framework	

Evidence of good governance (Key documents, processes and monitoring)	Anti-fraud and corruption policy	Fire Authority and other Committees are public meetings		Pension Board	Health and safety inspections and audits	HMICFRS inspection and reports	
	Anti-Bribery policy	Environmental Task Group		Corporate policies and procedures	Freedom of information scheme	Health and safety policy	
	Statutory officer roles	Equality Committee			Local Code of Corporate Governance	Senior Information Risk Owner role	
	Complaints and appreciations policy	Estates plan and access audits				Health Safety and Welfare Committee	
	Delegation scheme and decision records	Transparency Code				Business continuity management arrangements	
	Protocol on Member / employee relationships					Procurement codes of practice	
	Governance Committee					ICT Acceptable Use Policy	
	Procurement codes of practice					Information Security Policy	
	ICT Acceptable Use Policy					Information sharing protocols	
	Information Security Policy						
	Information sharing protocols						