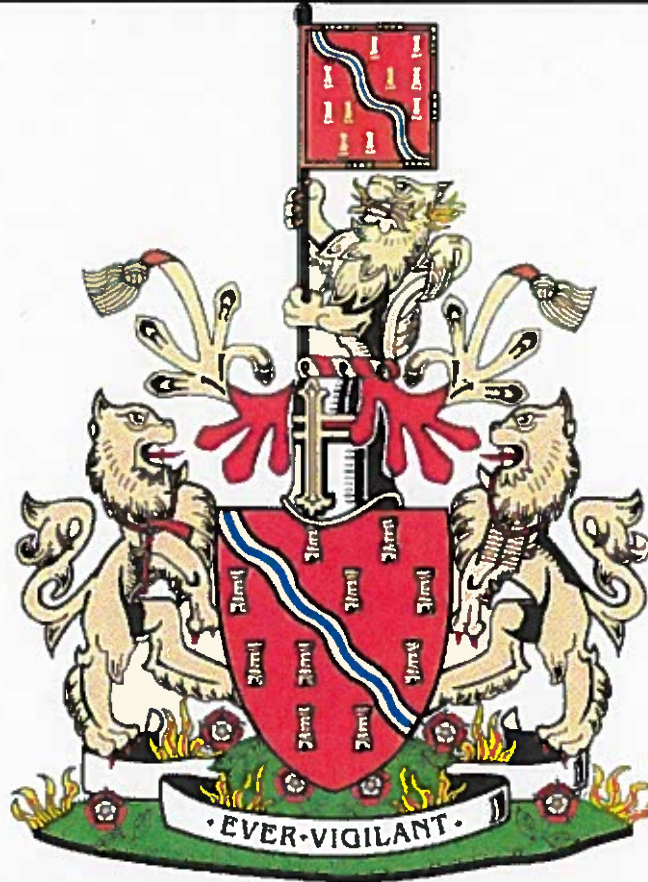


ANNUAL GOVERNANCE (ASSURANCE)



STATEMENT FOR THE PERIOD 1ST APRIL 2016 TO 7TH MAY 2017

Greater Manchester Fire and Rescue Authority is committed to the highest standards of corporate governance as outlined in this Annual Governance (Assurance) Statement.

Governance is about how bodies ensure that they do the right things, in the right way, for the right people in a timely, inclusive, open, honest and accountable manner. It comprises the systems and processes, and culture and values, by which bodies are directed and controlled and through which they account to, engage with and, where appropriate, lead their communities.

A key aspect of governance is the requirement to put into place *“effective risk management systems, including systems of internal control”*.

This Annual Governance (Assurance) Statement supports the Authority's Statement of Accounts and outlines how it manages its affairs to deliver high quality services and ensure that public money is effectively spent.

Annual Governance (Assurance) Statement for the period 1st April 2016 to 7th May 2017

1. Introduction/Background to the Annual Governance (Assurance) Statement

The Fire and Rescue Authority ceased to exist on 7th May 2017, after this time the Greater Manchester Fire and Rescue Service falls under the jurisdiction of the Greater Manchester Combined Authority and the newly elected Greater Manchester Mayor. As a result, the 2016/2017 Statement of Accounts cover the period from 1st April 2016 – 7th May 2017 as does the supporting Annual Governance (Assurance) Statement.

The preparation of the Annual Governance (Assurance) Statement to support the Annual Statement of Accounts is a statutory and best practice requirement for fire authorities. Its purpose is to demonstrate and evidence that there is a continuous review of the effectiveness of the Authority's internal control, performance, risk management, and operational systems. This allows an assurance on their effectiveness to be provided so that users of the accounts can be satisfied that proper arrangements are in place to govern spending, safeguard assets and maximise operational effectiveness. The process also enables the production of a corporate action plan to address any identified weaknesses.

An initial draft of the Annual Governance (Assurance) Statement was approved by the Greater Manchester Fire and Rescue Authority at its Audit, Scrutiny, and Standards Committee on 27th April 2017 and certified by the Authority Chairman and County Fire Officer and Chief Executive as at that date.

An updated version which included additional items identified in the interim period was presented to the GMCA Audit Committee on 27th July 2017 for consideration.

This final version covers the period to the approval of the audited Statement of Accounts and has been updated to include additional information regarding the Mayor's independent inquiry into the response to Manchester Arena incident. It has been approved by the Audit Committee on 20th September 2017.

CIPFA have confirmed that "proper practice" in relation to internal control is as detailed in the *Delivering Good Governance in Local Government* (CIPFA/SOLACE updated 2016) and this has statutory backing.

In addition to the above statutory requirement the Fire and Rescue National Framework for England 2012 (and Addendum) introduced an additional requirement for all English Fire and Rescue Authorities to produce an annual statement of assurance on financial, governance, and operational matters. Traditionally the structure of the Authority's Annual Governance statement already embraced assurance on operational and prevention and protection activities. From 2013/2014 additional assurances have been included outlining how the Authority meets the expectations within its Integrated Risk Management Plan and also how it plans for and supports national resilience. These assurances have been further developed this year to ensure full compliance with current legislation and guidance.

A description of the key elements of the Authority's assurance and internal control environment is detailed at Appendix 2.

2. Vision Values (Purpose) and Aims

Following extensive consultation involving staff, partners, and members of the public a revised Corporate and Integrated Risk Management Plan 2016 – 2020 was approved by the Authority on 23rd June 2016.

The Corporate and Integrated Risk Management Plan reflects the requirements of the Authority's Efficiency Plan to deliver the further financial cuts of £14.79m by 2020 and specifically the requirement to deliver 78% of these savings by 2018.

The Corporate and Integrated Risk Management Plan enhances the Authority's core purpose to "*save, protect and improve the lives of the people in Greater Manchester*". The Plan details six strategic aims to support the achievement of this purpose, viz.: - save, protect, prevent, public value, people, and principles. The Corporate and Integrated Risk Management Plan is underpinned by the Service's values of respect, honesty, inclusive, excellence, and professionalism.

The Corporate and Integrated Risk Management Plan addresses a range of purposes, viz.:-

- fulfils statutory duty to provide an Integrated Risk Management Plan
- considers new emerging corporate threats and opportunities and the radical new approaches being developed and utilised to continue to deliver the Authority's purpose and aims
- explains how the Authority engages with communities and stakeholders
- provides detail of the Authority's development goals and how they will be delivered

The Authority's values (purpose) and aims continue to reflect legislative, national, regional, and local priorities. The Corporate and Integrated Risk Management Plan is supported by transparent corporate goals with integration of the statutory Integrated Risk Management Plan, and associated plans including Directorate and Departmental plans.

3. Scope of Responsibility

The Authority's governance framework comprises the systems and processes, the culture and values, by which the Authority was directed and controlled and its activities through which it accounts to, engages with, and supports its community. It enables the Authority to monitor the achievement of its core purpose and strategic aims and to consider whether these aims have led to the delivery of appropriate, cost effective services.

The Authority, through its elected Members and officers, was responsible for ensuring that its business is conducted in accordance with the law and proper standards, that public money is safeguarded and properly accounted for, and used economically, efficiently, and effectively. In discharging this accountability, members and senior officers are responsible for putting in place proper arrangements for the governance of the Authority's affairs and the stewardship of the resources at its disposal.

To this end the Authority approved and adopted a Code of Corporate Governance, which is consistent with the principles and reflects the requirements of the CIPFA/SOLACE Framework *Delivering Good Governance in Local Government (2016)*. Copies of the policy documents are available on our website.

This statement explains how the Authority complied with the CIPFA/SOLACE Framework (2016), identifying areas in which our governance arrangements can be strengthened. This statement also meets the requirements of regulation 6 of the Accounts and Audit (England) Regulations 2015 in relation to the approval by Members of *"an annual governance statement, prepared in accordance with proper practices in relation to internal control"*.

The Authority committed to fulfilling its responsibilities in accordance with the highest standards of good governance, underpinned by the ethical behaviour of officers and Members.

The Authority also committed to fulfilling the high level government expectations and associated priorities within the Fire and Rescue National Framework 2012 (and Addendum) and this statement details how the Authority has complied with this additional but related framework.

The governance (assurance) framework has been in place for the period 1st April 2016 to 7th May 2017 and up to the date of the approval of the audited Statement of Accounts.

4. Purpose of the System of Internal Control

The Authority set the overall strategy and policy and put in place a well-defined organisational structure, with clearly understood lines of responsibility and delegation of authority to help ensure that strategies and policies are effectively implemented and adhered to.

The Corporate Leadership Team is ultimately responsible to the Authority for the system of internal control and reviewing its effectiveness. Any system of internal control can only provide reasonable assurance and not absolute assurance that all significant risks will be mitigated. The key issue is that risks, their potential for occurring and possible impact are identified. A conscious decision can then be made on how to prioritise and deal with those risks.

The system, therefore, is designed to effectively manage, rather than eliminate, the risks that are attached to the fulfilment of the Authority's core purpose to *"save, protect and improve the lives of the people in Greater Manchester"*. The fundamental internal drivers supporting the Authority's strategic aims are - prevent, protect, save, public value, people, and principles.

5. The Assurance Framework and Internal Control Environment

The Authority's system of internal control (see Appendix 2) was based on ongoing management and review processes introduced to minimise the impact of risks to the

achievement of the Authority's purpose, aims and goals. This system of internal control was in operation in respect of the period 1st April 2016 – 7th May 2017 and up to the date of approval of the annual report and accounts.

The Authority's internal control environment is fundamental to the operation of the assurance framework and is designed to manage risk to acceptable levels. It is not possible to eliminate all levels of risk of failure in respect of Authority aims and actions and accordingly can only provide reasonable but not absolute assurance of effectiveness.

In summary the Authority's Internal Control Environment includes:-

- A high level core purpose supported by associated strategic aims and values embedded in the service planning, delivery, risk management, and performance management frameworks.
- A Monitoring Officer responsible for ensuring the legality of Authority actions and supporting the Standards Committee.
- A Standards Committee (merged with Audit and Scrutiny from the 2012 municipal year) to promote and maintain high standards of conduct by the Members of the Authority.
- A hierarchical management structure governed by a Corporate Leadership Team responsible for overseeing the running of the fire service supported by a senior management Leadership Team responsible for the day to day management of their respective directorates. The above groups are supported by Group Managers who are responsible for the delivery of all fire service activities to the people of their individual geographical Area.
- The provision of a robust and credible Operational Assurance function to assist in achieving the aims identified within the Corporate Plan and seeks to ensure that :-
 - a) the service delivery elements of the organisation are working effectively to fulfil the detailed requirements of the Corporate Plan
 - b) the service has a safe, well-trained and competent workforce
- The provision of a Prevention and Protection training and audit function within the Area Prevention and Protection Teams with an embedded assurance function.
- A comprehensive budget setting and monitoring framework with clearly defined guidelines and responsibilities with frequent reporting of performance to the Policy, Resources, and Performance committee.
- Financial Procedures which set out the arrangements for managing all financial transactions and ensuring they are promptly and properly accounted for.
- Ongoing external assessment through the European Foundation for Quality Management (EFQM) Excellence Framework (awarded 5* status in 2015 re-assessment) & LGA/CFO led Peer Challenge programme to provide independent scrutiny & challenge.

- A Corporate Plan Governance Policy & Procedure which outlines the governance arrangements for meeting groups and committees to ensure that these groups remain fit for purpose and support the achievement of our purpose and aims.
- Support for and ability to call on Local, Regional and National Resilience Arrangements.
- Mapping of service areas and related Assurance Activities by the Leadership Team and the production of an Annual Assurance Statement for each service area highlighting, by exception, areas for development.
- The development of a Review of Significant Events (RoSE) policy and procedure to learn from all identified issues and risks.
- An Internal Audit function that consistently meets all professional standards (as assessed by the Authority's external auditor) supports the Authority in the achievement of its improvement agenda and has responsibility for the continual review of major financial controls and the wider internal control environment.
- A local Code of Corporate Governance that is reassessed twice annually by Internal Audit with compliance and progress reporting to the Corporate Leadership Team and the Audit, Scrutiny and Standards Committee.
- A Risk Management Policy and Procedure, framework and Corporate Risk Register approved and frequently monitored by the Audit, Scrutiny and Standards Committee and Authority.
- Published Anti-Fraud and Corruption Strategy, Whistleblowing Policy, and Fraud Prosecution Policy to ensure correct reporting and investigation of suspected fraudulent activities.
- A comprehensive performance management framework with clearly defined performance management targets, that measures financial and other performance data linked to the Authority's service delivery goals.
- A draft ICT Strategy contains our technology related plans to support delivery of the IRMP and the Corporate Plan. The Strategy is being updated to meet the changing requirements of the organisation, and will use digital technology and appropriate mobile devices to drive efficiencies across the organisation.
- Personal Performance Review Programme dovetailed with well publicised human resources policies, associated procedures, induction processes, and Codes of Conduct designed to ensure that staff are appropriately skilled to deliver the Authority's aims and goals and conduct themselves in a proper manner.
- An Audit, Scrutiny and Standards Committee (including independent non-elected Membership) to complement the existing Committee responsibilities and oversee the work of the Internal and External Audit functions and provide independent assurance of the effectiveness of:-

a) The corporate governance arrangements of the Authority.

b) The Authority's risk management framework, the associated control environment, and the anti-fraud and corruption arrangements.

- Regular Briefings for Members of the Authority on all significant financial, operational, and strategic decisions.
- A Responsible Financial Officer supported by statute, to ensure the effective administration of the financial affairs of the Authority.

As the Fire and Rescue Authority, the Authority had a Service Level Agreement with Wigan MBC and its Director – Resources and Contracts (Deputy Chief Executive) was designated Treasurer by the Authority as the responsible officer under Section 73 of the Local Government Act 1985 and Part VII of the Local Government Finance Act 1988 for the proper administration of its financial affairs. The Director of Corporate Support (DCS) has delegated responsibilities in relation to the financial administration and stewardship of the Authority. The DCS is a member of the Corporate Leadership Team and reports to the County Fire Officer. The distinctive roles reflect the position of the Treasurer as accountable to the Authority and its Members, and the DCS role in reporting directly to the CEO and to CLT.

It is considered that this approach does meet best practice as determined by CIPFA guidance in that the Chief Finance Officer is a key member of the Authority in ensuring accountability and developing financial strategy, with delegated authority to the Director of Corporate Services to resource, implement and monitor financial strategy via CLT and the Authority. The Chief Finance Officer has direct and independent access to the CEO and the Leader of the Authority on all financial and governance related matters.

6. Review of Effectiveness

The Authority has a statutory responsibility to conduct, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of effectiveness is informed by the work of Committees and management with responsibility for the development and maintenance of the governance environment, the Chief Internal Auditor's Annual Report, Operational Assurance Annual Report, Protection Services Annual Report and also work completed by external inspectorates.

6.1 Internal Control

The effectiveness of the Authority's system of internal control is demonstrated by a range of independent procedures and protocols, including:-

- Corporate Leadership Team procedures and associated management action
- Financial Procedures and Financial Management reporting
- Performance Management reporting
- Committee reporting
- Monitoring Officer
- Standards Committee
- Codes of Conduct
- Managers Assurance Statements and Corporate Assurance Mapping

- Operational Assurance
- Protection Services Assurance
- Internal Audit
- EFQM Excellence Model/Peer Challenge
- National Resilience
- Risk Management

In order to help maintain consistent and appropriate standards of governance across the Authority, and to enhance the process for the compilation of the Annual Governance (Assurance) Statement, Corporate Managers' Assurance Statements have again been completed by all members of the Leadership Team.

The Assurance Statement is a self assessment to assist managers to annually review the quality of the governance arrangements around the service areas for which they are responsible. The completed statements have identified several areas at an operational level where further action is required to improve governance within the Authority. Appropriate action to address the issues has been agreed.

Collectively, these form the basis of the Authority's governance arrangements and are further validated by independent assessments from various external agencies.

The Authority was led at officer level by the County Fire Officer and Chief Executive with the support of six senior managers with departmental or operational responsibilities who collectively form the Corporate Leadership Team, with the Corporate Leadership Team supported by a senior management Leadership Team responsible for the day to day management of their respective directorates.

The Corporate Leadership Team, in conjunction with Members, is responsible for the development of the Authority's core purpose to *"save, protect and improve the lives of the people in Greater Manchester"* as supported by six strategic aims to deliver this purpose, viz.:- save, protect, prevent, public value, people, and principles.

Key goals are consistently evidenced within planning documents including the Draft Corporate and Integrated Risk Management Plan, and associated plans including Directorate and Departmental Plans.

The success of the Authority's management and internal control arrangements is demonstrated in the key messages within the current (2015/2016) Annual Audit Letter (Audit, Scrutiny, and Standards Committee 1st December 2016, Authority 8th December 2016) and associated Audit Findings Report (Audit, Scrutiny, and Standards Committee 28th July 2016) viz.:-

- *"The Authority's accounts show a strong financial position going forward."*
- *"The Authority has a track record of delivering financial performance in line with budget. The savings programme has been successful over the past three years and plans are in place to enable the Chief Fire Officer to deliver services in line with the IRMP."*
- *"The Authority has demonstrated that it supports service wide transformation and has already achieved significant savings."*

- *“The Authority’s IRMP is well considered, with a clear understanding of the strategic direction and the overarching requirements.”*
- *“The Authority continues to respond effectively to meeting the challenges of on-going reductions in central government funding. The Chief Fire Officer has maintained a focus on maintaining operational performance.”*
- *“The Authority has strong partnership arrangements. The Authority is keen to work in partnership wherever possible.”*
- *“The Authority has proper arrangements to work with other parties to deliver its strategic priorities for devolution.”*

6.2 Internal Audit

The Authority’s governance arrangements were supported by the continuous review work performed by the Internal Audit and Operational Assurance sections.

The Internal Audit remit is under continual review to reflect and support the legislative requirements of the Section 73 (Local Government Act 1985) Officer, the required professional standards, the revisions to the responsibilities of external audit, and the key priorities of the Authority. The detailed remit of Internal Audit was revised as necessary through the Audit, Scrutiny and Standards Committee who approved all Internal Audit Plans and received reports on Internal Audit Activities (1st December 2016, 27th April 2017). The latter report is contained within the Internal Audit Annual Report for the Section which, in accord with the Accounts and Audit Regulations, provides an annual review of the Service and demonstrates that a high quality and effective Internal Audit service is provided.

The remit of Internal Audit is not restricted to financial systems and associated controls. A significant proportion of the Annual Audit Plan is focused on providing assurance that operational and strategic risks are effectively managed to ensure the Authority’s core purpose is achieved and quality services provided.

Internal Audit continues to review appropriate management and reporting arrangements to provide assurances that the Authority’s approach to corporate governance and internal control is both adequate and effective in practice.

The County Fire Officer and Chief Executive and the Treasurer have been given the responsibility for overseeing the implementation and monitoring of the operation of the Local Code of Corporate Governance, reviewing the operation of the local code in practice, and reporting annually to the Audit, Scrutiny and Standards Committee on compliance with the local code and any changes that may be necessary to maintain it and ensure its effectiveness in practice.

In addition, on the Treasurer’s behalf, Internal Audit conducts a twice yearly independent review to provide assurance on the adequacy and effectiveness of the Code in practice and the extent of management compliance with it. The outcome of each review is reported to Members with the most recent review being reported under separate cover to the Audit, Scrutiny and Standards Committee on 27th April 2017.

Good working relations exist between Internal Audit and Senior Management. All Internal Audit reports were issued to the Deputy County Fire Officer and all recommendations are appropriately monitored by a quarterly working group meeting to ensure that Internal Audit recommendations to improve control procedures are agreed and implemented promptly.

The External Auditor has completed reviews of Internal Audit work and although formal reports have not been issued to confirm that professional standards are maintained, they have continued to review and utilise Internal Audit work to inform their assessment of the control environment and feed into their VFM conclusion. This provides implicit confirmation that the Internal Audit work meets all the required standards.

One measure of the effectiveness of an internal audit service is its compliance with relevant standards and practices. The Public Sector Internal Audit Standards set basic principles for carrying out internal audit work in the public sector and provide a basis for the evaluation of internal audit performance and improvement planning. As part of its review of effectiveness, the Internal Audit Section has completed a self assessment against the key elements of the PSIAS and concluded that there is a high degree of compliance. There are some enhancements required to current processes and documentation to further strengthen this compliance and these will be undertaken as part of the Quality Assurance Improvement Plan (QAIP) which is itself a component of the new standards. In addition, and to support the achievement of the QAIP, a process has been put in place whereby peer reviews will be conducted by other audit teams across AGMA.

As reported to the Audit, Scrutiny and Standards Committee on 27th April 2017, the Internal Audit assurance opinion on the Authority's overall control environment is based on the reviews completed (and Management actions taken) as part of the Internal Audit Plan in respect of 2016 - 2017. Significant reviews covered key systems implementation, core financial systems, and a continuing assessment of key issues and corporate governance measures. In all these areas the Authority has shown good progress in implementing agreed action plans.

On the basis of the above, assurance can be gained that the Authority is committed not only to properly managing its affairs but is also striving to improve in all governance related aspects of its functions. This is particularly evident in the key areas of risk management, performance management, service planning, and corporate governance. **In conclusion it is the opinion of the Treasurer that the Authority operates an effective overall internal control environment.**

6.3 Assurance of Operations

The National Framework outlines the requirement of Fire and Rescue Authorities to provide assurance on operational matters. It does not prescribe how this assurance is provided, stating that operational matters are best determined locally by Fire and Rescue Authorities working in partnership with communities, local citizens, businesses, civil society organisations and others.

Fire and Rescue Authorities function within a clearly defined statutory and policy framework. The key legislative documents defining these responsibilities are:-

- The Fire and Rescue Services Act 2004
- The Civil Contingencies Act 2004
- The Regulatory Reform (Fire Safety) Order 2005
- The Fire and Rescue Services (Emergencies) (England) Order 2007
- The Localism Act 2011
- The Fire and Rescue National Framework for England

The purpose of this section is to provide assurance that our service is delivered in line with our statutory responsibilities and in consideration of our Integrated Risk Management Plans and local strategies including cross-border, multi authority and national arrangements.

6.3.1 Integrated Risk Management Plan (IRMP)

Integrated risk management is supported by the use of risk modelling, this is a process by which data is used to assess the likelihood of fire and rescue related incidents within Greater Manchester. The information is then used to identify geographic areas at higher risk where a combination of prevention, protection and response activities would have the greatest impact.

We update the risk modelling on an annual basis and use the outcomes to direct and prioritise our prevention, protection and response activities whilst having the capacity to deal with large scale, unpredictable events through resilience planning in partnership with other emergency services.

Draft Corporate Plan and Integrated Risk Management Plan 2016-2020

External and internal consultation is an essential part of the development of the Integrated Risk Management Plan (IRMP) and for every IRMP, the Service uses stakeholder analysis to develop a proportionate consultation plan. This analysis ensures that potential stakeholders are consulted, involved and informed of the proposals to ensure their input is incorporated within the final plan.

Between February and May 2016, we carried out an extensive consultation exercise on the draft Corporate and IRMP 2016-20. This consultation introduced our plans to manage government cuts to our budget of nearly £15 million over the next four years. During the consultation, we spoke to a range of different people, in a range of different ways, and this Plan reflects the feedback from this consultation as well as fulfilling the requirements of the Fire and Rescue National Framework.

A copy of the Greater Manchester Fire and Rescue Authority Corporate and Integrated Risk Management Plan 2016-20 document can be found via the link below:

http://www.manchesterfire.gov.uk/about_us/policies_and_publications/corporate-plan-2015-18

Corporate Risk Management

Corporate risk management is a wide process, used to identify all the significant opportunities and threats that might affect our ability to meet our purpose and aims. A range of threat and opportunity risks are continuously being identified, assessed and managed through a range of mitigating actions. The Corporate Risk Register is utilised to capture information relating to these risks, the register is presented to Committee on a quarterly basis and is publically available via our website.

The Risk Management framework demonstrates that risk management arrangements are robust and embedded within the service planning and decision making processes of the Authority. Regular risk management reports are presented to the Audit, Scrutiny and Standards Committee outlining key risks (and their relevant movements).

Risk Management System

The Risk & Intelligence Manager confirmed that the Corporate and Directorate Risk Registers are now managed through one central point, the Risk & Planning Portal which provides alignment of risk to other corporate systems. Ongoing training on the system is provided for all staff with risk management responsibilities; this is supported by an on-line training package, available to all staff via the portal.

Risk registers at a cluster and team level are managed through spreadsheets on a SharePoint platform.

Review of Significant Events (RoSE)

Following the Oldham Street Incident in 2013 a system was created to record internal and external significant events at a local, regional, national and international level to implement learning from identified issues and risks. A supporting policy and procedure has been approved by the Leadership Team and guidance and on-line training has been developed.

A total of 19 significant event sites have been created of which 2 have been subsequently closed with the recommendations implemented. Within the 19 sites created a total of 129 recommendations have been captured under 10 themed areas including health & safety, welfare and training.

Each RoSE site is sponsored by a member of the Leadership Team and has an individual site owner; individual recommendations are allocated to a specific owner for consideration and implementation. Examples of events currently captured include the Buncefield Fire, the Atherstone on Stour Incident and the Child Sexual Exploitation cases in Rotherham and Rochdale.

6.3.2 Operational Assurance

To assist in achieving the aims identified within the Corporate Plan 2016/20, the Service is committed to providing a robust and credible Operational Assurance (OA) Plan that includes constructive involvement and communication between support and development departments, Area Management Teams and their respective representatives and which seeks to ensure:

- The service delivery elements of the organisation are effectively working to achieve the aims and delivery goals set out within the Corporate Plan.
- The Service has a safe, well-trained and competent workforce to meet the demands placed upon them.

The following paragraphs provide detail on the actions and outcomes relating to delivery of the OA Plan 2016/2017.

1. Operational Incident Reports – Active monitoring of operational activity provides assurance that emergency incidents are being dealt with safely and in a highly effective manner. In this reporting period the OA Team completed 162 operational incident reports.

2. Operational Incident Presentations – Whilst undertaking active incident monitoring, the OA Team capture photographic examples of good practice and improvement opportunities. These images are compiled into succinct presentations and made available to all staff to inform service improvement. During the reporting period four new presentations were placed on Big Red. Feedback has revealed these have been extremely well received. The popularity of the 'presentations' site continues with 1968 visits recorded during 2016/17.

3. Following the introduction of the Active Monitoring System in April 2015, the previous Watch Training Reports, Evening Work Routines and Station Standards Reports have been combined into one complete Assurance Audit Standard report. Each year the Area Management Team is required to complete one Area Standards Inspection per Watch per annum and they have achieved 78% of the Standards Inspection target by completing 118 AMS reports out of an annual target of 151 reports during the 2016/7 period to date. (16/3/17). This is an improvement of 10% on the same period last year.

4. Corporate Exercise Reports - Provide assurance that the required range of training exercises is being undertaken in accordance with the Corporate Exercises Policy and Guidance Document. During 2016/7 OA Officers attended 14 exercises and provided a detailed report for each. This is a 75% increase on the previous year.

5. Thematic Reviews – A Thematic Review involves detailed research and analysis of a subject, in order to provide the Leadership Team with an informed report for due consideration. The Thematic Reviews are determined through a risk based approach and can also be demand led. The team have completed two reviews in this period covering the training, introduction and use of the recently introduced Ultra High Pressure Cold Cutting System and a review of the services three Command Units looking at the appliances, training, support and operational use.

6 Debriefing Operational Activities – Reviewing workplace activity is an effective means of improving performance. During 2016/7, 929 debriefs of operational incidents and training activities were completed along with a further 11 Strategic Debriefs, with any good practice or any learning opportunities being progressed via the AMS.

7. The introduction of the AMS saw the removal of the previous emerging themes register as it provides a high level dashboard where it is possible to see emerging themes and to drill down to see individual items and make comparisons between different Stations and Areas.

8. Progressing Resolution of Issues – Any unresolved issues or those that may have Brigade wide implications are progressed through a number of forums including the Operational Procedures and Equipment Forum (OPEF), Training Reference Holders

meetings (TRH) and as a standing item at all Operational Risk Control Group (ORCG) meetings, where representatives from the key support departments work to find resolution overseen by the statutory Joint Health and Safety Committee.

Those risks which the ORCG are unable to resolve are placed on the appropriate Corporate or Directorate risk register and communicated to the Risk Management Advisory Group (RMAG), Leadership Team and Members (Audit Scrutiny & Standards Committee).

9. Active Monitoring System (AMS) - The AMS was launched on the 1st April 2015 and the maintenance, cleansing and monitoring of this system is an ongoing workload for the Team. On the basis of this, assurance can be gained that the Authority has robust active and reactive operational monitoring processes in place which identify, record and progress resolution of operational areas for improvement. In addition this year, we have continued to refine those processes to further improve cross departmental working and the subsequent effectiveness of dealing with the issues identified through monitoring. The AMS is now being utilised by eight other Departments who have entered 218 monitoring reports.

6.3.3 Prevention & Protection Services Assurance

The Community Safety Training and Development Team provides support, guidance and reports on the Protection and Prevention Assurance activities in line with the P&P Assurance Plan. The Prevention and Protection Assurance Plan was implemented on 1st October 2016.

The plan has seen an approach whereby audits have been based on principles of continuous improvement and learning by experience, evidenced through performance standards. All of the audits undertaken and their outcomes are then captured within the Active Monitoring System (AMS), with Individual Learning Points (ILP) being captured to create actions to improve performance. The Prevention and Protection Assurance activities will develop during 2017/18 to work more closely with Performance Management including standards, indicators and targets focused on outcomes.

The current plan covers areas including; Operational Intelligence System, Area Protection Inspections, Fire Safety Regulators, Safe and Well, Youth Engagement and Petroleum activities.

The audits which have taken place so far have provided strong evidence to improve performance. One area of the plan covering Operational Intelligence System records has seen 97 audits completed on records. This has seen 73% of these records requiring improvement with Individual Learning Points being created. This will raise performance standards and inevitably improve Fire Fighter safety.

Not all areas of the plan have been actioned and more work to enhance clearer audit forms and processes are currently being worked on, based on the review findings following the implementation of the first Prevention and Protection Assurance plan. This is in the area of Youth Engagement and Safe and Well audits. The Safe and Well audits will be refined for 2017/18 as part of the Safe and Well Focus Improvement Group.

6.3.4 National Resilience

The support provided by GMFRS for National Resilience is comprehensive and widespread, and includes the provision of specialist teams and equipment such as:-

- Detection, Identification and Monitoring equipment, used to identify chemical substances and hazards
- Incident Response Unit
- High Volume Pumps
- Rescue boats
- Tactical Advisors with specialist knowledge of flooding's, water rescues, etc.
- National Inter Agency Liaison Officers
- Search and Rescue canine capability
- Marauding Terrorist Firearms Attack (MTFA) capability

In the last year GMFRS completed a self-assessment regarding the implementation of the Initial Operational Response (IOR) capability to support CBRN(e) and undertaken significant multi-agency training and exercising of the MTFA capability. GMFRS is considered amongst peers to be a leading light in the provision of this capability which was supported by the outcomes of an external audit in Q4 2015/16.

In July 2016 GMFRS and other multi-agency partners took part in Exercise Triton 2. This was a major flooding type exercise which required national mutual aid. This exercise tested fully Command and Control at Strategic, Tactical and Operational levels but also the National Capabilities Advisory Framework (NCAF) arrangements that would be required in the event of a significant incident of national implications.

6.3.5 Business Continuity Management

Business Continuity Management (BCM) is an integral part of our corporate risk management process. In relation to BCM processes and procedures, fire and rescue authorities have to satisfy the requirements of both the Civil Contingencies Act 2004 and Fire & Rescue Services Act 2004.

We are legally required to 'write and maintain plans for the purpose of ensuring, so far as reasonably practicable, that if an emergency occurs the Authority is able to continue its functions'. This is achieved through a Business Continuity Management Group which comprises of representatives from all areas of the organisation.

Whenever necessary, due to an emerging situation (such as a flu pandemic) affecting the availability of fire fighters, we systematically reduce the numbers of fire engines available, crewing only those fire engines that continue to provide the optimum risk based fire cover. This process of degradation continues down to a BCM minimum of 21 fire engines to meet our published performance standards in such circumstances.

We have strengthened our Business Continuity Management arrangements over recent years through the implementation of delivery goal DV24 and continue to review and develop our Business Continuity arrangements to ensure we remain well placed to deal with disruption to our service, which has resulted in the following improvements:

- Protective Security Arrangements
- Bunkered fuel supplies
- ICT resilience plan
- Recall to duty Policy
- County Guard arrangements
- BCM Cloud Portal

GMFRS BCM arrangements were subject to a review by Internal Audit in 2016. A fundamental review of BCM is also underway to ensure resilience arrangements accurately portray the changes to the organisation that were necessary due to significant budget cuts and also to prepare for movement to the new Combined Authority.

6.3.6 Mutual Arrangements

GMFRS holds formal, mutual agreements for reinforcements with all its surrounding fire and rescue authority areas (Lancashire, Cheshire, Merseyside, West Yorkshire and Derbyshire). In addition, resources from within the North West Fire Control (NWFC) consortium will respond in accordance with any new NWFC statement of operations.

In addition, to the agreements with the surrounding fire and rescue authorities we have an agreement with Manchester Airport to provide initial operational response at the airport.

6.3.7 Firefighter Fitness

In 2014 the Department for Communities and Local Government introduced an addendum to the Fire and Rescue National Framework for England, the addendum introduced a number of requirements in respect to firefighter fitness.

During 2012/2013 the Authority launched a research programme with Salford University to identify the health needs of its staff. This is part of the Authority's Health and Wellbeing Strategy designed to ensure that its employees are fit and healthy, to drive down accidents and sickness and to ensure that the Authority is in the best possible shape to deliver the most efficient service to the people of Greater Manchester.

In 2014/2015 116 watch-based fitness champions were trained to deliver role specific fitness training to all operational staff and a new KPI introduced linked to Delivery Goal DL14 *"Maintain a high performing, engaged and healthy workforce"*.

On 14th October 2016 after four years of research, the CFOA Fire-Fit Steering Group, in association with the University of Bath and with the support of a number of Fire and Rescue Services introduced guidance relating to the Fire-ground Fitness Test.

The Fire-ground Fitness Test, (FFT) has been designed as a role relevant fitness test with the time standard derived from a large sample of firefighters completing the test at maximal performance and undergoing a VO2 max test to correlate with their FFT time.

Our proposal is that a date is set for the introduction of testing which gives sufficient time to allow firefighters to practice the test and also establish support systems for those personnel who do not meet the standard.

On Friday 9th December 2016, we had our first "Task & Finish" meeting at the Training & Development Centre. In total six colleagues attended the meeting where a number of points relating to the fitness test were discussed. Following this meeting, an email was sent to all 152 of our watch based fitness champions, the email contained details of the test including links to supportive documents and videos provided by CFOA and the Fire-Fit Steering Group.

To support the introduction of the Fire-ground Fitness Test an Exercise Physiologist has recently been recruited and will commence in April 2017.

6.4 External Assurance

6.4.1 External Audit (Grant Thornton)

In November 2015 the National Audit Office issued guidance to External Auditors by way of one single criterion for External Auditors to utilise when assessing a body's Value for Money conclusion, viz.:-

"In all significant respects, the audited body had proper arrangements to ensure it took properly informed decisions and deployed resources to achieve planned and sustainable outcomes for taxpayers and local people."

Although the above criterion is assessed greater emphasis is now placed on financial resilience and in particular the impact of:-

- a) the reduction in staff numbers as part of the financial savings programme
- b) opportunities for further service delivery efficiencies
- c) the operational challenges from the Greater Manchester Agreement, the Devolution to the Greater Manchester Combined Authority and the transition to a directly elected Mayor.
- d) progress with the medium term financial strategy

The Conclusion reported against the criteria (Audit Findings Report, July 2016) was:-

"We concluded that the Authority had proper arrangements in all significant aspects to ensure it delivered value for money in its use of resources."

The above conclusion being supported by risk-based work focussing on the robustness of the Authority's arrangements relating to financial governance, strategic financial planning and financial control.

Appropriate External Audit reports were presented to the Audit, Scrutiny and Standards Committee/Authority meetings during 2016/2017 as follows:-

- External Audit Fee Letter – 2016/2017 (28th April 2016)
- External Audit Plan – Year Ended 31st March 2016 (16th June 2016)

- Audit Committee Update – Year Ended 31st March 2016 (16th June 2016)
- Audit Findings Report – Year Ended 31st March 2016 (28th July 2016)
- Audit Committee Progress Report and Update (29th September 2016)
- Annual Audit Letter – Year Ended 31st March 2016 (1st December 2016 and 8th December 2016 (Authority))
- External Audit Progress Report and Technical Update (2nd March 2017)

The opinions within the above reports continue the trends from previous years' and again commented positively on the Authority's internal control and performance frameworks as outlined below: -

Audit Findings Report (28th July 2016)

Financial Statements

"The draft accounts were prepared to a good standard and were supported by comprehensive working papers."

Value for Money

"The Authority has maintained its strong record in the delivery of its savings plan and budgets."

"The Authority effectively managed financial performance during the year. Pressure areas were identified and actively monitored."

"The Authority has made significant progress in developing its IRMP and approach to performance monitoring."

"The Authority is committed to exploring new and innovative ways of working."

"The Authority is leading the way in developing "Safe and Well Visits" and exploring opportunities for collaboration and developing services with other blue light services. Significant benefits have already been achieved."

Controls

"Our work has not identified any control weaknesses."

Annual Audit Letter (1st December 2016)

Key Messages:-

"The financial statements submitted for audit were of good quality, delivered by an effective closedown process and supported by good working papers"

"The Authority's accounts show a strong financial position going forward."

"The Authority has demonstrated that it supports service wide transformation and has already achieved significant savings."

6.4.2 European Foundation for Quality Management and Peer Challenge Outcomes

European Foundation for Quality Management

Following the abolishment of the Comprehensive Area Assessment (CAA), in 2012 Members of the Audit, Scrutiny and Standards Committee agreed to adopt the EFQM Excellence framework to provide external scrutiny.

Since the adoption of this framework we have undertaken a number of assessments and were successful in improving on our three star rating awarded in 2012, by achieving a five star rating in 2015, being the first and only FRS to be awarded the maximum five stars.

In addition to this we have been recognised in a number of other areas, in 2013 our approach to learning and development led to a North of England Excellence Award and in 2014 we won the 2014 British Quality Foundation Achievement (BQF) Award for Leadership. In 2015 we also won the 2015 BQF Achievement Award for Sustainable Future by demonstrating how much sustainability is at the heart of our organisation's mission to protect and improve the lives of the people we serve, and in 2016 we won the BQF Achievement Award Innovation recognising the advances we have made in training and assessing firefighters using a virtual environment.

We continue to monitor our commitment to service improvements against our Service Excellence Development Goal (DV29) and all progress relating to the potential areas for improvement will be monitored against this development goal.

Each assessment identified strengths and areas we could improve and following our last re-assessment a total of 53 potential areas for improvement were identified. These were reviewed by Corporate Leadership Team (CLT) and Leadership Team (LT) to group common improvement themes together and used to inform directorate priorities and activities.

7. Significant Partnership Assurances

The Statement of Recommended Practice (SORP) 2006 places an additional responsibility on Authorities in that their Statement on Internal Control should

embrace controls over group activities where an Authority undertakes significant activities through a group. The "proper practices" guidance has extended this responsibility to controls over partnerships considered by the Authority to be significant i.e. have a detrimental effect on the Authority if the partnership failed.

At this time the Authority is satisfied that it does not need to formally review assurance arrangements in its significant partnerships due to them either being public sector bodies with their own reported assurance/governance arrangements or the Authority's financial commitment not being significant enough to justify such an assurance.

8 Significant Internal Control Issues

No significant internal control issues have been identified during the year.

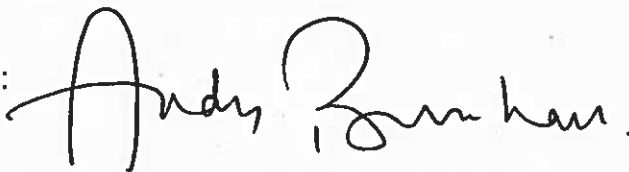
The recent review by Internal Audit re-assessed each component of the Local Code, and concluded:-

*"Greater Manchester Fire & Rescue Authority's position against their revised Local Code of Corporate Governance is considered to be strong; therefore the Internal Audit assurance opinion is **satisfactory**. Given the continuing pressures the Authority has experienced and continues to go through, due to the budget cuts and the transfer to the Greater Manchester Combined Authority, this is a significant achievement. Appropriate action is in place to ensure full compliance against the Local Code."*

A summary of progress and further agreed action is included at Appendix 1. It also highlights some sensitive areas within the public arena that the Authority is addressing and which provide practical illustrations of the Authority's continued commitment to effective governance.

On the basis of the opinions of the senior officers as detailed above, we are satisfied that the Authority's internal control, corporate governance, and operational assurance arrangements are adequate and are operating effectively. We are satisfied that the enhancements identified will further improve our governance and internal control arrangements. We will assess their implementation and the effectiveness of dealing with the issues outlined as part of the formal risk management process.

Signed by:



Andy Burnham, Mayor of Greater Manchester

Eamonn Boylan, GMCA Chief Executive



On behalf of Members and Senior Officers of Greater Manchester Fire and Rescue Authority

Date: 29.09.17

Corporate Governance Annual Statement of Assurance

Areas where improvement work is ongoing include:-

4.1 Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law:

Recruitment system

The new collaborative applicant tracking system (ATS) was implemented and went live in December 2016. The on-boarding app is scheduled for phase 2 and will be implemented in 2017. Within the ATS there is the functionality to provide candidates with online offer paperwork and this includes the relevant organisational policies.

New starter induction

New starter documentation has been refreshed as part of the implementation of the new ATS including on-line references and offer documentations (terms and conditions), but there is further work to be completed in 2017 (see above). A new formal induction is in the process of being designed.

Employees' declaration of interests

Work is ongoing evaluating options to record employees' declaration of interests, including electronic solutions. This is part of a bigger piece of work which will now be concluded once staff have transferred over to the Combined Authority.

Review of Corporate Governance policies

The annual review of Corporate Governance policies has not been carried out this year due to the pending move into the Combined Authority (GMCA). There is a review of policies ongoing to identify the GMCA policies in place, how they apply to GM Fire and identify any gaps.

Complaints lessons learnt

At present there is no formal process in place to capture lessons learned in relation to complaints; however this is currently being considered as part of the policy review and development of the Requests Portal as to how shared learnings can be utilised to inform change and improve behaviours. This work is ongoing with the scope broadened to including the requirements of GMCA. The completion date is the end of quarter 3 2017/2018.

Recruitment policy

A new recruitment policy has been drafted and will be shared with management for approval.

4.2 Ensuring openness and comprehensive stakeholder engagement:

Publication of officer decisions

Work is currently being undertaken to review which decisions are published by other Fire authorities, Manchester City Council and the Combined Authority to identify

which officers' decision are to be published and ensure that appropriate arrangements are in place prior to the transfer to GMCA.

Staff survey

Due to other priorities, the arrangements for the staff survey are still being reviewed but imminent activity will include –

- Meeting between People Directorate and Communications and Engagement Directorate to discuss moving forward
- A paper to Leadership Team (LT) which discusses the organisational use of surveys (type, frequency, style etc) – this has been written but put on hold until after the transition to the GMCA.
- A clear plan about the use of surveys in the future to ensure that there is a consistent approach where the findings are useful and relevant

Partnership portal

A new partnership portal is being developed. This will be linked to the Corporate Document Centre.

The portal concept has been designed but is currently on hold due to limitations of ICT team. It is to be tabled again for a potential development stage from July 2017.

Inclusivity strategy

The Inclusivity Strategy 2012-2015 is in the process of being updated and a new/revised policy will be in place in 2017.

4.3 Defining outcomes in terms of sustainable economic, social, and environmental benefits:

There are no specific areas under development to report for this principle.

4.4 Determining the interventions necessary to optimise the achievement of the intended outcomes:

There are no specific areas under development to report for this principle.

4.5 Developing the entity's capacity, including the capability of its leadership and the individuals within it:

Partnership service offer

A Partnership Service Offer document is currently being developed which sets out the partnership activities and programmes (including use of facilities) to raise awareness amongst staff and partners. This has been drafted and is awaiting sign off to be delivered during 2017/2018.

Talent and Succession policy

A Talent and Succession Policy has been drafted and presented to Leadership Team, to the Inclusivity Strategy Group, to Watch officers for feedback via the Watch Officer Forum and to the relevant Career Management meetings for comment. The final version is hoped to be signed off following March 2017 formal Leadership Team.

Health and Wellbeing strategy

The Health and Wellbeing strategy is scheduled for review by the end of Q2 2017. This will be structured in response to guidance from CLT, following a reporting paper presented in March. This report captures the services, trends and recommendations from the HWB team, after the 12 months of activity, and will set the direction of services for the next three years - 2017 to 2020.

4.6 Managing risks and performance through robust internal control and strong public financial management:

CIPFA Code of Practice on Managing the Risk of Fraud and Corruption

A review against the CIPFA Code of Practice on Managing the Risk of Fraud and Corruption is outstanding. This needs to be completed in 2017/2018 by Management or Internal Audit.

Information Security policies

A decision has been made to deliver the Information Security Policy as suite of individual, specific policies. With this in mind each of the policies which contribute to the overall Information Security Policy are being rewritten. Each policy must also reflect the transition to the GMCA and will require circulation to a wider audience therefore the work involved will stretch into Q2 of 2017/18.

Data Protection Training

Mandatory e-learning data protection training is to be rolled out for all staff.

Data Management policy

Work was planned to develop an organisational policy setting out corporate expectations and ensuring application of guidance procedures, legislative requirements and data transparency.

However, an organisational policy which references data management should reflect the transition to GMCA and as such will need to take into account the requirements of a wider group of stakeholders. It would therefore seem prudent to place this activity on hold until the transition is complete. This is to be completed by end of Q3 of 2017/18.

4.7 Implementing good practices in transparency, reporting, and audit to deliver effective accountability:

There are no specific areas under development to report for this principle.

Significant Internal Control Issues

There were no significant control issues identified during the financial year.

Other Significant Issues

A range of governance and operational issues, involving the Authority, some attracting significant public interest have occurred during the financial year. All the issues have been recognised as major risks to the Authority and are/will be included in the Corporate Risk Register or directorate registers which outline the mitigating actions along with providing a high level mechanism to monitor the effectiveness of the actions being taken.

A précis of the issues with the remedial action taken/scheduled is detailed below, viz.:-

Operational Issues

Oldham Street Incident

Following the tragic incident in July 2013 at Pauls Hair World, Oldham Street, Manchester that claimed the life of Firefighter Stephen Hunt, the 'Operation Cranbrook Support team', have continued to support the investigation process which resulted in the Coronial Inquest being held in April and May 2016. The medical cause of death was found to be heat exhaustion and hypoxia.

The GMFRS Fatal Accident Report in to the Oldham Street incident was released (in redacted form) in November 2016. To ensure all the Coroner's recommendations were enacted to prevent a reoccurrence, a Task and Finish Group has been established focusing specifically on;

- Incident Command
- Handovers and Briefings
- Breathing apparatus
- Incident ground
- Radio communications
- Future fire-fighting
- Recording decisions
- Thermal imaging camera (TIC)
- Firefighter physiology

The work of this group is due to conclude in April 2017 although some of the longer term projects such as Firefighter physiology will extend beyond this.

In March 2017 six Firefighter were awarded the Chiefs Award for Commendation for their actions at the Oldham Street incident in 2013. A further seven Firefighters and Officers will be recognised for their actions in April 2017.

Industrial Action – County Guard

The Fire and Rescue Authority needs to respond to what is reasonably foreseeable when making its business continuity contingency arrangements. County Guard is

Greater Manchester Fire and Rescue Authority's business continuity plan for industrial action. The County Guard Plan provides a framework for recruiting and training a workforce of Resilience Crews (RC) and Emergency Fire Crew Drivers (EFCD).

We have not needed to implement the County Guard product during 2016/2017 but have maintained a residual crew of RCs and EFCDs. Given the potential for future industrial action we have implemented a plan to retain crew numbers to the requirement of 125 through re-training existing staff and recruiting new RCs.

The retained element is supported by a tested business plan whereby we are able to recruit and train a further cohort of RCs and EFCDs in the event of declaration of industrial action or other major business interruption.

Several issues involving staff have been reported in the media, as outlined below, viz.:-

Employees

October 2016 – "Fireman is sacked after post-traumatic stress disorder leaves him unable to perform front-line duties"

December 2016 – "Firefighters hit out at policy change after colleagues were threatened with knife by suicidal man"

February 2017 – "Fire chiefs pledge to tackle mental health"

Economic Downturn/Financial and Service Delivery Issues

A range of articles (some positive) have been reported in the media stemming from the continuing economic/fiscal downturn, the impact of Government actions particularly in respect of funding, and the Authority budget position. The articles generally concerned the ongoing impact of the Government funding cuts and the effect on Authority finances, jobs and service provision. Key articles included:-

June 2016 – "Plans to cut the number of firefighters"

June 2016 – "Lives at risk as budget cuts hit Fire Service"

July 2016 – "Fire aid firefighters coming to the RESCUE"

July 2016 – "Combined 999 Hub gets the green light"

September 2016 – "Every firefighter in Greater Manchester could be sacked and made to reapply for their jobs over shift dispute"

November 2016 – "Fire Crews' medical aid hailed"

March 2017 – "CPR fire crew praised"

The Authority's consistent response is that it has prepared promptly for the financial downturn and addressed all issues in a structured way with the ongoing intention of continuing to protect and improve the quality of life of people within Greater Manchester and to adequately safeguard its officers. This action as part of the Authority's financial planning and management processes has been consistently endorsed by the External Auditor (Grant Thornton), viz.:-

"Greater Manchester Fire and Rescue Authority has demonstrated that it supports service wide transformation and has already achieved significant savings following reductions in central government funding of approximately £28m over the Comprehensive Spending Review period (2011/2012-2015/2016)."

The Authority's governance and risk management arrangements enable it to deal openly and effectively with situations such as those highlighted above. The nature of the organisation means that there will always be difficult situations to deal with, but its internal control and operational governance mechanisms ensure that actions are taken appropriately and promptly, and it is openly accountable for those actions. This is a major strength of the Authority and a significant factor in its continuing improvement journey.

Manchester Arena Terror Attack

A range of articles have been reported in the media relating to GMFRS' response to the Manchester Arena Terror Attack. It is reported that there was a delay in committing FRS resources to the incident. The key headlines included:-

[HELD BACK Firefighters' furious claims they were 'STOPPED' from helping at Manchester Arena attack until 90 minutes after blast](#)

[Read more: http://metro.co.uk/2017/05/25/firefighters-shame-as-they-were-stopped-from-going-to-manchester-arena-bombing-6660656/#ixzz4j5c41v8i](http://metro.co.uk/2017/05/25/firefighters-shame-as-they-were-stopped-from-going-to-manchester-arena-bombing-6660656/#ixzz4j5c41v8i)

[May 2017 \(Huffington Post\) - Manchester Bombing Firefighter Tells Of 'Guilt, Shame And Anger' Over Delayed Deployment](#)

[June 2017 \(Manchester Evening News\) - Specialist terror response fire crews were not used on night of Manchester bomb attack](#)

In response to the coverage the Mayor of Greater Manchester has committed to undertaking an independent review of the event and how our resources were utilised. Lord Bob Kerslake was appointed as chair of the review by the Mayor of Greater Manchester Andy Burnham in July and will lead a panel looking at how prepared the city was and its response. Four further experts have also been appointed to the panel, which is expected to publish its initial findings in January 2018, with a final report and any recommendations expected a few months later in April.

https://www.greatermanchester-ca.gov.uk/news/article/184/those_affected_at_the_heart_of_independent_review_into_arena_attack

<http://www.manchestereveningnews.co.uk/news/inquiry-manchester-arena-bombing-give-13558882>

Grenfell Tower Fire

A range of articles have been reported in the media relating to Greater Manchester's response to the Grenfell Tower Fire. The mayor of Greater Manchester has asked Greater Manchester Fire and Rescue Service to give 'reassurance and advice' to residents living in all high-rise accommodation, and a Task Force has been up by the Mayor, headed by Mayor of Salford, and comprising of the fire service, councils and landlords.

The key headlines included:-

<http://www.manchestereveningnews.co.uk/news/greater-manchester-news/high-rise-flats-checked-precaution-13185251>

<http://www.manchestereveningnews.co.uk/news/greater-manchester-news/new-task-force-review-fire-13214943>

ASSURANCE FRAMEWORK

Appendix B

ANNUAL GOVERNANCE (ASSURANCE) STATEMENT

ANNUAL GOVERNANCE (ASSURANCE) STATEMENT approved by Audit, Scrutiny and Standards Committee, signed by County Fire Officer and Chief Executive and Chairman (published with the Statement of Accounts).

INTERNAL CONTROL FRAMEWORK

- Terms of Reference and Delegation of Powers to Committees
- Standing Orders and Financial Regulations
- Local Code of Corporate Governance
- Statutory Officers
- Role of CFO
- MTFS/Budget Setting and Control Framework
- Performance Plan and Fire and Rescue Performance Framework.
- Annual budget and budgetary control.
- Risk Management Strategy and Framework.
- Anti Fraud and Corruption Policy and Framework.
- Codes of Conduct (Members/Officers).
- Whistle blowing policy.

Independent reviews by CLT and the Audit, Scrutiny and Standards Committee to examine draft AGS and supporting evidence and recommend approval via Authority.

IA Team with responsibility for reviewing controls, drafting AGS, evaluating assurances and supporting evidence.

Annual review of the effectiveness of the system of Internal Audit (Audit, Scrutiny and Standards Committee)

Risk Management Advisory Group

- Monitors residual risk and management
- Monitors risk profiles
- Considers risk relating to new projects and initiatives
- Receives risk monitoring reports

Authority Service Planning, BCM, and Risk Management Frameworks.

