



BEDFORDSHIRE FIRE & RESCUE AUTHORITY

Use of Risk Information

FINAL

Internal audit report: 2.18/19

18 September 2018

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Responses received	18 September 2018		
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1 EXECUTIVE SUMMARY

1.1 Background

We have undertaken a review as part of the approved internal audit plan for 2018/19 of the use of risk information. This focussed on reviewing how the Service identifies, collects, uses and reports on risk information received to ensure this is promptly available to the officers on duty to ensure they are aware of any risks when attending an incident to maintain both their safety and ensure the incident is addressed appropriately.

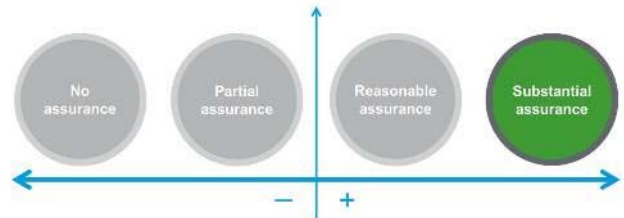
The collation and display of site specific risk information (SSRI) for use by operational personnel is managed by the Response Support Manager and the Response Support Technician. The SSRI is owned by the Station Commander of the fire station in whose ground the premises are located. Risk information is available to operational personnel via Mobile Data Terminals (MDT) fitted to rescue pumps and also electronically to service control.

1.2 Conclusion

We found a well-designed and applied control framework in place for the collection, management and reporting of site-specific risk information.

Internal audit opinion:

Taking account of the issues identified, the board can take substantial assurance that the controls upon which the organisation relies to manage the identified area are suitably designed, consistently applied and operating effectively.



1.3 Key findings

The key findings from this review are as follows:

Service Order for Site Specific Risk Information (SSRI)

Bedfordshire Fire and Rescue Service has a Service Order in place for site specific risk information. This sets out the processes to be followed in the collection, use and review of site specific risk information. Whilst the processing of this information is undertaken currently, the Service Order is in draft and has not been made available to all relevant staff via the Authority's intranet. There is a risk of key processes not being carried out effectively if the Service Order has not been communicated to all relevant staff. **(Medium)**

Completion of SSRI forms

During routine or specific Fire Safety inspections, an initial assessment of risk will be conducted by operational personnel and/or Fire Safety Inspecting Officers using a blank SSRI Alert Form. If the SSRI Alert completed by FSI/Os identifies 4 or more specific hazards then the form must be forwarded to the Response Support Team. On receipt, RST will produce an SSRI inspection folder and forward it to the relevant fire station requesting a full SSRI inspection to be undertaken by operational personnel. Station Commanders will review and sign the completed SSRI to provide subjective quality assurance checks ensuring all detail is correct, comprehensive, relevant and legible before passing it to the Response Support Team.

The Response Support Technician will then export the SSRI information to the Mobile Data Terminals. A final sign off will be undertaken by Station Commanders to confirm that the information has been appropriately uploaded to MDTs and is functional. We confirmed for a sample of ten sites that the authorisation process had been complied with.

Ongoing review of SSRI information

Premises will be re-inspected based on the risk categorisation. The designated re-inspection frequency for each category of site is:

- Special risk - yearly
- Very High Risk - 2 yearly
- High risk 3 yearly
- High Rise Risk - 5 yearly

We confirmed for our sample of ten sites that eight had reviews in line with their defined review frequency and the two SSRIs due for review were being undertaken at the time of audit.

Special Risk Sites

For all risk sites categorised as Special Risk, the Station Commander must ensure a Site Specific Risk Plan is created. SSRPs are reviewed on an annual basis and we confirmed for a sample of three special risk sites that this had been complied with.

Low Risk Sites

Hazard information for low risk category sites is covered by Premises Type Risk information (PTRI). These provide details of common risks found in certain premises. The Service Order for SSRI lists 28 PTRI templates for premises such as schools, car repair garages, shops and hotels documenting the most common risks and hazards. PTRIs are accessible via MDTs and the intranet.

Mobile Data Terminals (MDT)

On the MDT, a colour coded symbol denoting the site risk category is placed at the geographical location:

- Special - Red Square
- Very High Risk - Red triangle
- High risk - Orange Triangle
- High rise - Orange square with Ladder symbol

We confirmed for our sample that these were placed at each geographical location appropriately. We confirmed risk information is available to operational personnel via Mobile Data Terminals fitted to rescue pumps and also available electronically to service control.

Monitoring of outstanding SSRI reviews

As part of the monthly report to the Operational Delivery Team, the number of outstanding SSRI reviews are reported and a reminder for operational personnel to complete all outstanding reviews is given. We confirmed this had taken place for a sample of three months (December 2017, February 2018 and June 2018).

We have also agreed two 'low' priority management actions which are detailed in section two below.

1.4 Additional information to support our conclusion

The following table highlights the number and categories of management actions made. The detailed findings section lists the specific actions agreed with management to implement.

Area	Control design not effective*		Non Compliance with controls*		Agreed actions		
	Low	Medium	High	Low	Medium	High	
Use of Risk Information	2	(8)	1	(8)	2	1	0

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

2 DETAILED FINDINGS

Categorisation of internal audit findings

Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible regulatory scrutiny/reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, regulatory scrutiny, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
1	<p>Bedfordshire Fire and Rescue Service has a Service Order in place for Site Specific Risk Information.</p> <p>This sets out the processes to be followed in the collection, use and review of site specific risk information.</p> <p>Whilst the processing of this information is undertaken currently, the Service Order is in draft</p>	No	NA	<p>We confirmed through review of the Site Specific Risk Information Service Order that it provided comprehensive detail on the collection, use and display of risk information. This included the process for the completion of SSRI Alert forms and their authorisation by Station Commanders.</p> <p>We noted through discussion with the Response Support Manager that whilst the processes documented within the Service Order were being carried out, the Service Order was in draft format and had not been</p>	Medium	The Service Order for Site Specific Risk Information will be signed by the Chief Fire Officer, uploaded to the organisation's intranet and communicated to all relevant staff.	October 2018	Response Support Manager

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
	and has not been made available to all relevant staff via the Authority's intranet.			<p>uploaded to the intranet to ensure it is available to all relevant staff.</p> <p>There is a risk of key processes not being carried out effectively if the Service Order has not been communicated to all relevant staff.</p>				
2	<p>For all risk sites categorised as Special Risk, the Station Commander must ensure a SSRP is created.</p> <p>Where a SSRP is created, it will be considered for a table-top exercise to validate it. SSRPs are reviewed on an annual basis. The completion of validation exercises is not formally evidenced.</p>	No	NA	<p>We noted that SSRPs did not formally evidence that plans had been validated via table top exercises as set out in the relevant Service Order.</p> <p>There is a risk of plans not being appropriate if evidence is not retained to demonstrate that plans have been validated.</p>	Low	The completion of validation exercises for Site Specific Risk Plans for Special Risk sites will be recorded.	December 2018	Response Support Manager
3	<p>Hazard information for low risk category sites is covered by Premises Type Risk information (PTRI). These provide details of common risks found in certain premises.</p> <p>The Service Order for SSRI lists 28 PTRI templates for premises such as schools, car</p>	Yes	No	<p>We selected a sample of three PTRIs and confirmed that they provided details of common hazards and risks experienced.</p> <p>We noted that whilst one of the three was in date, the remaining two were two years past their review date.</p>	Low	<p>The frequency of review of PTRIs will be considered and revised to an appropriate time period.</p> <p>PTRIs will be updated before the new review timeframe if new information is received</p>	December 2018	Response Support Manager

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management	Implementation date	Responsible owner
	<p>repair garages, shops and hotels.</p> <p>All PTRIs are reviewed annually. PTRI documents are available on appliance MDTs.</p>			<p>There is a risk of information being out of date and inaccurate if it is not regularly reviewed.</p> <p>We were informed through discussion with the Response Support Manager that whilst PTRIs were due for annual review, in practice the generic risk information held for these low/medium risk sites would not change that frequently.</p> <p>We have therefore agreed an action relating to the revision of review timeframes for PTRIs.</p>		through operational learning.		

APPENDIX A: SCOPE

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

Scope of the review

The scope was planned to provide assurance on the controls and mitigations in place relating to the following areas:

Objectives of the area under review

To provide assurance over the systems for the collation, use and reporting of risk information

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

Areas for consideration:

To review how the Service identifies, collects, uses and reports on risk information received to ensure this is promptly available to the officers on duty to ensure they are aware of any risks when attending an incident to maintain both their safety and ensure the incident is addressed appropriately. This will also consider how this information is built into operational plans, for example, if it is identified that fireworks are at a property, how do attending fire fighters know this information to adopt a suitable approach to the situation.

Limitations to the scope of the audit assignment:

- This review will not provide assurance that all risk information has been provided
- This review will not comment on the appropriateness of the action taken as a result of the information provided.
- All testing will be compliance based sample testing only; and
- Our work will not provide any guarantee against material errors, loss or fraud or provide an absolute assurance that material error, loss or fraud does not exist.

APPENDIX B: FURTHER INFORMATION

Persons interviewed during the audit:

- Gary Jeffery - Service Operational Commander
- John Belcher - Response Support Manager
- Heather Shoosmith - Response Support Technician

FOR FURTHER INFORMATION CONTACT

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