For Publication   **Bedfordshire Fire and Rescue Authority**
Human Resources Policy and Challenge Group
15 March 2016
Item No. 7

REPORT AUTHOR: **ASSISTANT CHIEF OFFICER (HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT)**

SUBJECT: **AUDIT AND GOVERNANCE ACTION PLANS MONITORING REPORT**

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Background Papers:

- Action Plans contained in Internal and External Audit Reports
- Action Plan contained in the Annual Governance Statement 2013/14
- Minutes of the Audit Committee dated 5 April 2012

Implications (tick ✓):

LEGAL			FINANCIAL	✓
HUMAN RESOURCES			EQUALITY IMPACT	
ENVIRONMENTAL			POLICY	✓
CORPORATE RISK	Known	✓	OTHER (please specify)	
	New		CORE BRIEF	

Any implications affecting this report are noted at the end of the report.

PURPOSE:

To report on progress made to date against current action plans arising from internal and external audit reports.

RECOMMENDATION:

That Members acknowledge progress made to date against the action plans and consider any issues arising.

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1.   Introduction

1.1   The Members of the Audit and Standards Committee previously endorsed that the Committee should receive monitoring reports at each of its meetings advising of progress against current action plans arising from internal and external audit reports, and the Authority's Annual Governance Statement.

1.2   In their meeting on 5 April 2012, Members of the Audit and Standards Committee agreed that progress on the action plans be reported to each meeting of the appropriate Policy and Challenge Group and action point owners report progress by exception to the Audit and Standards Committee. This is the second such report to the Human Resources Policy and Challenge Group for the year 2015/16.

2.   Monitoring Report of Actions Arising From Internal and External Audit Reports

2.1   The monitoring report of progress made to date against agreed actions arising from internal and external audit reports is attached as Appendix A.

2.2   The monitoring report covers, in order, the following:

- Outstanding actions from internal and external audit reports, including those reports received during 2014/15 and those from previous years, which have a proposal to extend the original completion date. There are no requests to extend the original completion date.

- Outstanding actions from internal and external audit reports, including those reports received during 2014/15 and those from previous years, which are on target to meet the original or agreed revised completion date.

- Completed actions which are subject to a subsequent or follow up audit. These will remain on the report until this audit is complete and the action validated.

- Completed actions that are of a Low risk and do not require a follow-up audit. These will be removed from the report once they have been reported as completed to the Policy and Challenge Group.

- Any actions that have been superseded by new actions. (Actions are removed from the report once they have been reported as superseded to the Policy and Challenge Group.)

2.3   There are no requests to extend the original completion date.

3.   Monitoring Report of Actions Arising from the Authority's Annual Governance Statement

3.1   The monitoring report covers the actions within the 2014/15 Annual Governance Statement (if applicable) which was formally adopted by Members of the Audit and Standards Committee, on behalf of the Authority, at their meeting on 25 June 2015, as part of the 2014/15 Statement of Accounts.

4.   Organisational Risk Implications

4.1   The actions identified within internal and external audit reports and the Annual Governance Statement represent important improvements to the Authority's current systems and arrangements. As such, they constitute important measures whereby the Authority's overall management of organisational risk can be enhanced.

4.2   In addition, ensuring effective external and internal audit arrangements and the publication of an Annual Governance Statement are legal requirements for the Authority and the processes of implementation, monitoring and reporting of improvement actions arising therefore constitute an important element of the Authority's governance arrangements.

**ZOE EVANS
ASSISTANT CHIEF OFFICER
(HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT)**

Monitoring Report of Actions Arising from Audit Reports
(incorporating any actions outstanding at 31 March 2015 from earlier reports)

<div align="right">APPENDIX A</div>

URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
TRDEV 1 15/16	**RSM** Nov 15: Final Report (15/16)	Training and Development (Ops)

Head of Human Resources | Low | **New** The Head of Training and Development will ensure that the overdue Volume 9 policies and procedures are reviewed and updated where necessary in the timeliest manner. | V09 01-04 Attainment and Maintenance of Competence in Operational Roles has been reviewed and updated. An FSE 234 has been completed and the policy will be reviewed again in 18 months.

V09 01-03 Technical Examinations for Operational and Control Roles has been reviewed and updated. An FSE 234 has been completed and the policy will be reviewed again in 12 months. Procedures are in place to ensure timely Volume 9 policy review. Position will be monitored. | **Original** Jun-16 | Completed – No follow up audit required |
| TRDEV 2 15/16 | **RSM** Nov 15: Final Report (15/16) | Training and Development (Ops)

Head of Human Resources | **High** | **New** The Head of Operations, with the aid of the Training and Development Team, will develop a strategy and action plan to engage assessors and increase the quality and volume of assessments undertaken on PDRPro with regards to both competence completion and the achievement of training outcomes. Regular audits will be undertaken to provide assurance that assessments and verifications are taking place to ensure PDRPro clearly demonstrates competence and the achievement of training outcomes. | Borough Commander North has met with Development team to develop a strategy to engage assessors and increase the quality and volume of PDR assessments. Planned action is as follows: A member of the Development team will carry out a presentation to Station Commanders on assessment and verification of PDRpro and the findings of the audit of Training and Development. Station commanders will hold station management meetings attended by a Development Team Representative who will give a presentation on assessment and verification of PDR pro – Target for completion 31st March. Following these presentations Station Commanders will produce | **Original** Dec-15 (Plan) Mar-16 (compliance) Jun-16 (audit) | In Progress |

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					development plans for all Watch Commanders not carrying out regular PDR pro assessment. This will take place over a 3 month period starting from 01st April 2016. Additional work will take place to ensure supervisory managers attendance at standardisation meetings in line with service policy and quarterly audits of assessment and verification practice.		
TRDEV 4 15/16	**RSM** Nov 15: Final Report (15/16)	Training and Development (Ops) Head of Human Resources	Low	**New** The Quality Support and Training Administrator will update the Review/Amendment Log to capture the minimum next course review date.	All course design registers have been updated to include a review/amendment log. The review dates for each course is agreed as part of the course verification process and is also recorded on the FSRT 19c design verification checklist.	**Original** Jun-16	Completed – No follow up required
TRDEV 5 15/16	**RSM** Nov 15: Final Report (15/16)	Training and Development (Ops) Head of Human Resources	Low	**New** The Health and Safety Advisor and the Course Delivery Manager will work together and put in place a consistent plan to ensure that all service critical training delivered locally is assessed at regular intervals.	A localised programme of audit is in place for regular assessment of delivery of safety critical training. This takes place as active monitoring and assessment of Station based instructor safety critical training.	**Original** Jun-16	Completed – No follow up required

Monitoring Report of Actions Arising from Audit Reports
(incorporating any actions outstanding at 31 March 2015 from earlier reports)

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URN	Auditing Body & Source	Audit Area and Responsible Manager	Priority	Agreed Action	Progress Report to Date	Timing For Completion	Status ('Not Started', 'In Progress' or 'Completed')
TRDEV 6A 14/15	**RSM** Nov 15: Final Report (15/16)	Training and Development (Ops) Head of Human Resources	Low	**New** The Executive Director that leads on Governance will review and develop the terms of references for the teams to ensure that they clearly identify their roles and responsibilities and, their reporting requirements.	A review of the Terms of Reference will be requested by HTD within February 2016 to ensure that they provide the assurance of roles and responsibilities.	**Original** Jun-16	In Progress
TRDEV 6B 15/16	**RSM** Nov 15: Final Report (15/16)	Training and Development (Ops) Head of Human Resources	Medium	**New** The service will continue discussions with PDRPro to develop the ability to run reports which can provide assurance that assessments and verifications are being undertaken.	Discussion has taken place regarding reports and this requires software development and associated costs. Awaiting final details from PDRpro. Assurance that assessment and verification is being undertaken will be included in monthly returns to Station Commanders.	**Original** March 2016 (compliance) June 2016 (audit)	Completed – To be confirmed by follow up audit
TRDEV 6C 15/16	**RSM** Nov 15: Final Report (15/16)	Training and Development (Ops) Head of Human Resources	Low	**New** When calculating the compliance statistics, the Admin Assistant will use the weighted average calculation method.	The Development Centre Administrator is now aware and will in future use the weighted average calculation method when compiling annual and six monthly PDRpro management reports on compliance.	**Original** Mar-16 (compliance) Jun-16 (audit)	Completed – No follow up required