



SOUTH YORKSHIRE  
**FIRE & RESCUE  
AUTHORITY**

Sarah Norman, *Clerk*  
Neil Copley, *Treasurer*

Town Hall  
Church Street  
Barnsley  
South Yorkshire  
S70 2TA

[www.barnsley.gov.uk/syfra](http://www.barnsley.gov.uk/syfra)

## **NOTICE OF AUDIT & GOVERNANCE COMMITTEE MEETING**

You are hereby summoned to a meeting of the South Yorkshire Fire and Rescue Authority Audit and Governance Committee to be held in the Council Chamber, Town Hall, Church Street, Barnsley, S70 2TA, at 11.30 am or at the later conclusion of the Fire and Rescue Authority meeting on Monday 20 November 2023 for the purpose of transacting the business set out in the agenda.

**Sarah Norman**  
Clerk

This Matter is being dealt with by: Charlotte Smallman

Tel: 01226 787327

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### **WEBCASTING NOTICE**

This meeting may be filmed for live or subsequent broadcast via the Authority's web site. At the start of the meeting the Chair will confirm if all or part of the meeting is being filmed.

You should be aware that the Authority is a Data Controller under the Data Protection Act. Data collected during this webcast will be retained in accordance with the Authority's published policy.

Therefore by entering the meeting room, you are consenting to being filmed and to the possible use of those images and sound recordings for webcasting and/or training purposes.

## **Contact Details**

For further information please contact:

<p>Daisy Thorpe Joint Authorities Governance Unit Town Hall Church Street Barnsley South Yorkshire S70 2TA</p> <p>Tel: 01226 787327 <a href="mailto:daisythorpe@barnsley.gov.uk">daisythorpe@barnsley.gov.uk</a></p>	<p>Charlotte Smallman Joint Authorities Governance Unit Town Hall Church Street Barnsley South Yorkshire S70 2TA</p> <p>Tel: 01226 775259 <a href="mailto:charlottesmallman2@barnsley.gov.uk">charlottesmallman2@barnsley.gov.uk</a></p>
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## **Terms of Reference of the Audit and Governance Committee (Delegated Powers)**

### **Audit**

*The Audit and Governance Committee shall comprise of 6 elected Members of the Authority – including 2 Minority Party Members and, ideally those Members who do not sit on the Performance and Scrutiny Board. It will also include up to 3 independent members and will exclude the Chair and Vice-Chair of the Authority.*

The Committee will meet six times per year including:

- **May** - to review the internal control & governance issues prior to the drafting of the Authority's Annual Governance Statement. This is achieved via the Audit and Governance Committee's work programme through the receipt of Internal Audit progress reports, Risk Management reports etc.
- **July** – to approve the Authority's Annual Governance Statement prior to it being signed off by the Chair of the Authority & Statement of Accounts prior to it signed off by the Chair of Audit and Governance Committee.
- **September** – to receive and consider the external Auditor's Annual Governance report.
- **November / January** – to consider and approve planned progress reports on items related to the Committee's functions.

### ***Audit Activity***

To consider the following internal audit reports:

- Annual plan and strategy and performance measures;
- Progress reports (actual against the plan) including summaries of the results of individual audits, internal control issues arising, and action plans implementation (including external audit action plans);
- Annual report on internal audit activity and performance achievements and the opinion on the Authority's internal control arrangements.
- To consider the external auditor's governance report and annual audit letter and other significant reports.
- To commission work from internal and external audit.

### ***Regulatory Framework***

- To review and receive assurance on the effectiveness of the Authority's Constitution in respect of:-
  - Contract standing orders and procedures;
  - Financial regulations and procedures;
  - Codes of conduct and behaviour.
- To monitor the effective development and operation of risk management.
- To approve the Authority's anti-fraud and anti-corruption strategy and "whistle-blowing" policy, and to monitor the arrangements for those and the complaints process.
- To oversee the production of, and approve, the Authority's Annual Governance Statement.
- To consider the Authority's arrangements for corporate governance and agreeing necessary actions to ensure compliance with best practice.

## ***Accounts***

- To approve the annual Statement of Accounts focussing on:-
  - The suitability of, and any changes in, accounting policies;
  - Major judgmental issues, e.g. provisions.
  
- To receive and agree the response to the external auditor's report to those charged with governance on issues arising from the audit of the accounts, focussing on significant adjustments and material weaknesses in internal control reported by the external auditor.

## ***Treasury Management***

- To scrutinise and make recommendations to the Authority on the Treasury Management Strategy and policies, and to monitor the implementation of policies and practices.

# **SOUTH YORKSHIRE FIRE AND RESCUE AUTHORITY**

## **AUDIT AND GOVERNANCE COMMITTEE**

**MONDAY 20 NOVEMBER 2023**

**TIME AND VENUE:- 11.30 AM OR AT THE LATER CONCLUSION OF THE FIRE AND RESCUE AUTHORITY IN THE COUNCIL CHAMBER, TOWN HALL, CHURCH STREET, BARNSELY, S70 2TA**

### **Agenda      Reports attached unless stated otherwise**

	<b>Item</b>	<b>Page</b>
1	Apologies	
2	Announcements	
3	Urgent items	
4	Items to be Considered in the Absence of the Public and Press  To identify items where resolutions may be moved to exclude the public and press. (For items marked * the public and press may be excluded from the meeting).	
5	Declarations of interest by individual Members in relation to any item of business on the agenda	
6	Reports by Members	
7	To receive any questions or communications from the public, or communications submitted by the Chair or the Clerk and to pass such resolutions thereon as the Standing Orders permit and as may be deemed expedient	
8	Minutes of the Audit and Governance Committee meeting held on 11 September 2023	7 - 16
9	Audit and Governance Committee Work Programme	17 - 22
10	Internal Audit Progress Update Report	23 - 34
11	Quarter 2 Treasury Management Report 2023/24	35 - 48

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12	Information Governance Updates	49 - 64
13	Compliments and Complaints Monitoring Report	65 - 76
14	External Audit Verbal Update for the Year Ended 31 March 2022	Verbal Report
15	Exclusion of the Public and Press	
*16	Member only session with External / Internal Audit ( <b>Exemption Paragraph 3</b> )	Verbal Report

## SOUTH YORKSHIRE FIRE AND RESCUE AUTHORITY

### AUDIT AND GOVERNANCE COMMITTEE

**11 SEPTEMBER 2023**

PRESENT: Councillor S Sansome (Chair)  
Councillors: S Alston, S Ayriss and D Hutchinson

A Dyson, C Pilkington and J Taylor  
(Independent Members of the Audit & Governance Committee)

S Ghuman, H Impey, S Loach, A Shirt and D Thorpe (Barnsley MBC)

DCFO T Carlin and L Haigh  
(South Yorkshire Fire & Rescue)

A Mullen  
(Internal Audit – RSM UK Risk Assurance Services)

Apologies for absence were received from: Councillor B Johnson,  
Councillor T Damms, C Smallman, P Hewitson and E Eruero

1 APOLOGIES

Apologies for absence were noted as above.

2 ANNOUNCEMENTS

Councillor Sansome reported that he had been invited to attend the next meeting of the Yorkshire and Humber Regional Audit Committee. If Members wished him to raise any points at the meeting on their behalf, they were asked to forward these onto Councillor Sansome.

An update would be provided at the next meeting to explain the role and remit of the Committee and how it could benefit this Committee.

3 URGENT ITEMS

None.

4 ITEMS TO BE CONSIDERED IN THE ABSENCE OF THE PUBLIC AND PRESS

RESOLVED – That agenda item 16 entitled ‘Member only session with External / Internal Audit’ be considered in the absence of the public and press.

5 DECLARATIONS OF INTEREST BY INDIVIDUAL MEMBERS IN RELATION TO ANY ITEM OF BUSINESS ON THE AGENDA

None.

6 REPORTS BY MEMBERS

None.

7 TO RECEIVE ANY QUESTIONS OR COMMUNICATIONS FROM THE PUBLIC, OR COMMUNICATIONS SUBMITTED BY THE CHAIR OR THE CLERK AND TO PASS SUCH RESOLUTIONS THEREON AS THE STANDING ORDERS PERMIT AND AS MAY BE DEEMED EXPEDIENT

None.

8 MINUTES OF THE AUDIT AND GOVERNANCE COMMITTEE MEETING HELD ON 24 JULY 2023

Councillor Sansome reported that he had not received any proposals from Members in relation to amending the start time/dates of future Committee meetings. If Members wish to submit any proposals, they were asked to forward these to Councillor Sansome, which could then be considered at a future meeting.

RESOLVED – That the minutes of the Audit and Governance Committee held on 24 July 2023 be agreed and signed by the Chair as a correct record.

9 QUARTERLY FRA/SYFR CORPORATE RISK REPORT

DCFO Carlin presented the Quarterly FRA / SYFR Corporate Risk Report, together with a progress update on the management of risk for the current period.

The following key points were noted:

- During March 2023, an Internal Audit was undertaken focusing on a Corporate Risk deep dive for Risk 8 IT Infrastructure Resilience, Risk 36 Industrial Relations and Risk 38 Financial uncertainty for the Service. The audit had resulted in an assessment of reasonable assurance. A medium action had also been agreed and had been considered in more detail during the Annual Review of Risk (2022/23) report.
- A 'source of assurance' exercise had been undertaken, creating a sources of assurance supporting document to the corporate risk management process.
- A sources of assurance column had also been added to the corporate risk register to show the evidence which had been identified and collated during the process.
- In July 2023, the CRMP Board had approved the purchase of a Risk System funded via the Digital Transformation Programme. It was anticipated that the system would be operational by the middle of 2024.
- There were currently two red corporate risks rated as high priority on the Risk Register. These were Risk 37 Embedding sustainability and Risk 38 Financial Uncertainty for the Service.
- Risk FRA05 Fire Control System, mitigating action 2 was recommended for closure. The overall risk would remain open at a corporate level, but close mitigating action 2.
- No new risks had been added to the Corporate Risk Register during the period.



In response to a question from A Dyson, DCFO Carlin explained how risks were identified and considered by the Local Resilience Forum (LRF) and the planning undertaken by the Service in response to the risks identified.

Councillor Sansome asked if the date and time of the next Risk Management training session could be circulated to Members. DCFO Carlin acknowledged the request.

In response to a question from Councillor Sansome, DCFO Carlin provided the Committee with an update on the current position in relation to the Fire Reform White Paper. It was confirmed that any risks arising would be presented to the Committee.

Councillor Sansome asked if the Manchester Arena Inquiry risk was now at a level which the Service were comfortable with.

DCFO Carlin explained that, in relation to operational response, the Service had actioned all of the learning points from the Manchester Arena Inquiry.

In relation to Risk 38 Financial Uncertainty, S Loach reported that the Authority were closely monitoring interest rates, inflation and other cost pressures. A key area of concern from a risk perspective, was in relation to the uncertainty around future funding levels. Currently, the Government were only providing a one-year finance settlement, which caused a significant risk to financial sustainability and caused uncertainty. The Authority would continue to lobby Government.

RESOLVED – That Members:-

- i) Noted the current position with respect to the overall risk management approach for corporate risks.
- ii) Considered and commented on the progress being made with the management and mitigation of corporate risks.
- iii) Approved the proposed closure of corporate risks.
- iv) Noted that the Committee would be provided with the date and time of the next Risk Management training session.

## 10 Q1 TREASURY MANAGEMENT REPORT

A report of the Treasurer was presented to provide Members with a review of the treasury management activities carried out on behalf of South Yorkshire Fire and Rescue during the first quarter of 2023/24, in accordance with statutory guidance.

The report also provided Members with details on:

- The agreed Treasury Management Strategy for 2023/24;
- An economic summary for the year to date;
- An update on the Authority's borrowing and investment activities; and
- The Authority's Prudential and Treasury /.

The following key points were noted:

- During the quarter, the UK Bank Rate had increased from 4.25% to 5.00% and in turn rates had increased for borrowing and investments.
- Economic forecasters were currently predicting another rate rise, possibly at 5.50%.
- £2.0M of new short-term borrowing had been undertaken during the period to cover short term cash flow.
- An external borrowing requirement of up to £29.1M would be required by the end of 2025/26.
- In light of the current climate and rising interest rates, the Treasurer had recommended to defer £7.5M of the borrowing requirement in 2023/24.
- There had been a net decrease in investment balances of £2.5M during the period, primarily owing to the Firefighters Pension Grant received in July 2023.
- The Authority's Capital Financing budget was anticipated to underspend in the region of £0.5M as at quarter 1.
- A Finance Member Learning and Development session was scheduled for 3 October 2023 and would include an overview of Treasury Management.

Councillor Ayris suggested that it may be beneficial for the Authority to undertake a benchmarking exercise to compare the borrowing levels set by other Fire and Rescue Authorities (FRAs).

S Loach acknowledged the request and agreed to include a table in the Quarter 2 Treasury Management report, which would allow Members to compare the borrowing levels set by other FRAs.

C Pilkington said that it would be useful for Members to receive information from the LGA or from other sources to understand how some of the local authorities had got into financial difficulties.

S Loach replied that he would share a document with Members setting out further information around the local authorities which had already issued a Section 114 Notice or had highlighted significant cost pressures and risks. Assurances were provided that the Authority were monitoring this situation very closely.

A Dyson suggested that it would be useful to include information in future Treasury Management reports in relation to the performance monitoring undertaken by the Authority's Treasury Management Advisor.

H Impey replied that the Authority's external Treasury Management Advisor 'Link Group', did issue daily emails regarding investments and borrowing etc. Weekly updates were also issued on credit ratings of counterparties etc. It was agreed that further information would be circulated to Members.

RESOLVED – That Members noted:-

- i) The latest expectations for interest rates.

- ii) The activities undertaken during the year to support the Authority's borrowing and investment strategies.
- iii) The Authority's Prudential and Treasury Indicators.
- iv) Noted that a table would be included in the Quarter 2 Treasury Management report setting out the borrowing levels set by other Fire and Rescue Authorities (FRAs).
- v) Noted that a document would be shared with Members setting out further information in relation to the local authorities which had already issued a Section 114 Notice or had highlighted significant cost pressures and risks.
- vi) Noted that H Impey had agreed to provide Members with further information in relation to the performance monitoring information received from the Authority's Treasury Management Advisor.

11 FINAL ANNUAL GOVERNANCE STATEMENT 2022-2023 & FINAL GOVERNANCE STATEMENT PLAN 2023-2024

S Ghuman presented a report informing Members that it was a statutory requirement for the Authority to annually review its systems of governance and internal control, and to publish an Annual Governance Statement (AGS) with its Statement of Accounts.

The final Annual Governance Statement (AGS) for 2022-23 and the final Governance Improvement Plan (GIP) for 2023-24 were attached to the report for Members' consideration and approval.

The draft AGS and GIP documents had both been considered by the Audit and Governance Committee on 24 July 2023 and no material amendments or comments had been received.

Updates for each of the GIP areas for improvement for April to June 2023 (Quarter 1) were also included in the report.

A Dyson suggested that it may be beneficial to include a statement in the Consultation, Engagement and Service User Feedback section of the AGS, to set out that the Service supports users of all means, different languages and disabilities etc.

S Ghuman agreed to consider the suggestion for potential inclusion in the AGS.

RESOLVED – That Members:-

- i) Considered and approved the Annual Governance Statement (AGS) for 2022-23.
- ii) Considered and approved the Governance Improvement Plan (GIP) for 2023-24.

- iii) Noted that consideration would be given to the potential inclusion of a statement in the Consultation, Engagement and Service User Feedback section of the AGS, to set out that the Service supports users of all means, different languages and disabilities etc.

## 12 AUDIT AND GOVERNANCE COMMITTEE WORK PROGRAMME

Members considered the 2022/23 Audit and Governance Committee Work Programme and were reminded that they could nominate topics for consideration at future meetings.

Members were informed that two additional items, the final AGS and GIP and a verbal update from the External Auditor on the Audit for the year ending 31 March 2022, had been added to the agenda for today's meeting.

RESOLVED – That Members:-

- i) Considered and agreed the updated Work Programme.
- ii) Considered and agreed to nominate topics for future meetings.

## 13 INTERNAL AUDIT PROGRESS REPORT

A report was presented to provide the Committee with an update on progress against the Internal Audit Plan for 2023/24, approved by the Committee on 13 March 2023. The report also summarised the results of Internal Audit's work to date.

Members noted the following key messages:

- Audit dates for the 2023/24 Internal Audit Plan had been agreed with management and scoping meeting dates had also been agreed.
- One report had been issued as final since the last meeting in relation to Wellbeing Occupational Health and Absence Management.
- The audit of Wellbeing Occupational Health and Absence Management had resulted in a reasonable assurance opinion being provided with six medium and four low priority management actions being agreed. Further details were provided in Section 2 of the report and noted by Members.
- Since the last meeting, one briefing had been issued in relation to Emergency Services News Briefing – August 2023. Details of this briefing were included at Appendix B to the report.

In response to Members' questions around the audit of Wellbeing Occupational Health and Absence Management, DCFO Carlin confirmed that a return to work discussion took place with all employees who had been absent from work for any period of time. Assurances were also provided that a structured return to work process was in place. Furthermore, line managers had received training and guidance around the areas which they need to cover at the return to work meeting and also to ascertain if further support was required from the Service.

Members' attention was drawn to Appendix A of the report, which provided a status update for each Internal Audit as set out in the Internal Audit Plan for 2023/24.

It was confirmed that no changes had been made to the Internal Audit Plan since the last Audit and Governance Committee meeting held on 24 July 2023.

Members' noted the Key Performance Indicators (KPIs) detailed in Appendix C to the report.

RESOLVED – That Members:-

- i) Considered and received the report.
- ii) Approved the updates to the Internal Audit Plan.

14 EXTERNAL AUDIT VERBAL UPDATE

On behalf of the External Auditor, D Thorpe reported that Deloitte would be attending the November meeting to present its ISA 260 report. At this point, it was anticipated that the 2021/22 audit would be concluded, and the 2022/23 audit would have commenced.

RESOLVED – That Members noted the verbal update.

15 ANY OTHER BUSINESS

S Loach informed Members that the Authority had received a consultation from Public Sector Audit Appointments (PSAA) inviting authorities to submit their views on PSAA's proposals for setting the fee scale for external audit providers for 2023/24. It was highlighted that external audit fees for 2023/24 would rise by 151%.

Confirmation was received that the Authority would be responding to the consultation. Furthermore, officers would strive to ensure that the Authority continues to receive value for money with regards to its external audit fees.

RESOLVED – That the update be noted.

16 EXCLUSION OF THE PUBLIC AND PRESS

RESOLVED – That under Section 100(A) of the Local Government Act 1972, the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in paragraph 3 of Part 1 of Schedule 12A of the Act and the public interest not to disclose information outweighs the public interest in disclosing it.

17 MEMBER ONLY SESSION WITH EXTERNAL / INTERNAL AUDIT

At the conclusion of the meeting a Member only session was held with Internal Audit.

Actions Table

<b>No.</b>	<b>Action</b>	<b>Timescale</b>	<b>Officer(s)</b>	<b>Status / Update</b>
9.	That the Committee be provided with the date and time of the next Risk Management training session.	In due course.	DCFO Carlin / D Thorpe	<p><u>Update 21.09.23</u> An introduction to Risk Management is scheduled for 9/10/23 and 7/12/23 provided by SYFR.</p> <p>A Risk Management Training Session is also booked for 15 December 2023 with RSM.</p> <p><b>ACTION DISCHARGED</b></p>
10. (1)	That a table be included in the Quarter 2 Treasury Management report setting out the borrowing levels set by other Fire and Rescue Authorities (FRAs),	To be included in the Quarter 2 Treasury Management report.	S Loach / H Impey	<p><u>Update 19.10.23</u> Table included as part of the Quarter 2 Treasury Management Performance report.</p> <p><b>ACTION DISCHARGED</b></p>
10. (2)	That a document be shared with Members setting out further information in relation to the local authorities which had already issued a Section 114 Notice or had highlighted significant cost pressures and risks.	In due course.	S Loach	<p><u>Update 19.10.23</u> Document circulated via email to Members.</p> <p><b>ACTION DISCHARGED</b></p>
10. (3)	That Members be provided with further information in relation to the performance monitoring	In due course.	H Impey	<p><u>Update 19.10.23</u> Document circulated via email to Members.</p> <p><b>ACTION</b></p>

	information received from the Authority's Treasury Management Advisor.			<b>DISCHARGED</b>
11.	Noted that consideration would be given to the potential inclusion of a statement in the Consultation, Engagement and Service User Feedback section of the AGS, to set out that the Service supports users of all means, different languages and disabilities etc.		S Ghuman / D Thorpe	<p><u>Update 21.09.23</u> This will be considered in the drafting of next year's Annual Governance Statement.</p> <p><b>ACTION DISCHARGED</b></p>

CHAIR

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## **SOUTH YORKSHIRE FIRE & RESCUE AUTHORITY**

Meeting	<b>AUDIT AND GOVERNANCE COMMITTEE</b>
Meeting Date	<b>20 NOVEMBER 2023</b>
Report of	<b>CLERK TO THE AUTHORITY</b>
Report Sponsor(s)	<b>MONITORING OFFICER</b>
Subject	<b>AUDIT AND GOVERNANCE COMMITTEE WORK PROGRAMME</b>

### **EXECUTIVE SUMMARY**

The Work Programme attached is based on the Committee's Terms of Reference and provides a structured approach to the work required to enable Members to fulfil the Committee's responsibilities in its main areas of business i.e. overseeing internal and external audit activity; the Authority's regulatory framework for internal control; and the Authority's accounts. It also provides for the regular review of the Committee's working arrangements.

### **RECOMMENDATIONS**

Members are recommended to:-

- a) Consider and agree the updated Work Programme attached.
- b) Consider and nominate topics for future meetings.

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### **CONTENTS**

Main Report  
Appendix A – Audit & Governance Committee Work Programme

## BACKGROUND

1. The updated Work Programme, attached at Appendix A, shows the annual programme of work and is organised into five sections. The first covers the Committee's working arrangements, the other four relate to the Committee's governance responsibilities.
2. There have been changes to the Work Programme since the last meeting of the Committee, as detailed below:-
  - The ISA 260 2021/22 and Statement of Accounts 2021/22 will now be presented at the January Committee meeting.
  - External Audit will provide a verbal update on the Audit for the year ending 31 March 2022.

## CONTRIBUTION TO OUR ASPIRATIONS

- Be a great place to work-** we will create the right culture, values and behaviours to make this a brilliant place to work that is inclusive for all
- Put people first-** we will spend money carefully, use our resources wisely and collaborate with others to provide the best deal to the communities we serve
- Strive to be the best in everything we do-** we will work with others, make the most of technology and develop leaders to become the very best at what we can be

## CONTRIBUTION TO SERVICE IMPROVEMENT

- [HMICFRS Inspection Framework e.g. Diagnostic area and/ or diagnostic questions](#)
- [SYFR Inspection report Areas for Improvement \(AFIs\)](#)
- [Fit for the Future Improvement Objectives](#)
- [Professional Standards for Fire & Rescue Services in England](#)
- [SYFR Service Plan 2023-24 Priorities](#)
- [SYFR Community Risk Management Plan 2021-24](#)

The report relates to the procedural / governance arrangements of the Authority. Whilst not linked to the above specifically, the effective governance arrangements of the Authority supports service improvement.

## OPPORTUNITIES FOR COLLABORATION

- Yes
- No

If you have ticked 'Yes' please provide brief details in the box below and include the third party/parties it would involve:

## CORPORATE RISK ASSESSMENT AND BUSINESS CONTINUITY IMPLICATIONS

3. An effective Audit Committee function challenges and promotes sound internal control arrangements.

## EQUALITY ANALYSIS COMPLETED

Yes

If you have ticked 'Yes' please complete the below comment boxes providing details as follows:

Summary of any Adverse Impacts Identified:	Key Mitigating Actions Proposed and Agreed:

No

N/A

If you have ticked 'No' or 'N/A' please complete the comments box below providing details of why an EA is not required/is outstanding:

This report does not relate to the introduction of a new policy, strategy or procedure.

## HEALTH AND SAFETY RISK ASSESSMENT COMPLETED

Yes

No

N/A

If you have ticked 'No' or 'N/A' please complete the comments box below providing details of why a Health and Safety Risk Assessment is not required/is outstanding:

The nature of the report does not necessitate a Health and Safety Risk Assessment.

## SCHEME OF DELEGATION

4. Under the South Yorkshire Fire and Rescue Authority [Scheme of Delegation](#) a decision \*is required / \*has been approved at Service level.

Delegated Power  Yes  
 No

If yes, please complete the comments box indicating under which delegated power.

This report is not submitted under delegated powers. It relates to the procedural / governance arrangements of the Authority.

## IMPLICATIONS

5. Consider whether this report has any of the following implications and if so, address them below:., Diversity, Financial, Asset Management, Environmental and Sustainability, Fleet, Communications, ICT, Health and Safety, Data Protection, Collaboration, Legal and Industrial Relations implications have been considered in compiling this report.

**List of background documents**

Report Author:	Name:	Daisy Thorpe, Council Governance Officer
	e-mail:	<a href="mailto:Daisythorpe@barnsley.gov.uk">Daisythorpe@barnsley.gov.uk</a>
	Tel no:	01226 787327

**SOUTH YORKSHIRE FIRE AND RESCUE AUTHORITY - AUDIT AND GOVERNANCE COMMITTEE WORK PROGRAMME**

Terms of Reference Area	11.09.23	20.11.23	15.01.24	11.03.24	20.05.24	22.07.24	16.09.24	25.11.24	Report coordinated by SYJA / BMBC / SYFR (Officer)
<b>Committee Arrangements:</b>									
Committee Work Programme	X	X	X	X	X	X	X	X	BMBC JAGU (D Thorpe)
Future Cycle of Audit & Governance Committee Meetings						X			BMBC JAGU (D Thorpe)
Committee's Annual Report						X			BMBC JAGU (D Thorpe)
Audit and Governance Committee's Self-Assessment Exercise				X					BMBC JAGU (D Thorpe)
<b>Internal Audit:</b>									
Reports Issued / Progress Report / Outstanding Recommendations	X	X	X	X	X	X	X	X	Internal Audit (RSM UK Risk Assurance Services LLP)
Internal Audit Strategy / Internal Audit Plan			X	X					Internal Audit (RSM UK Risk Assurance Services LLP)
Annual Internal Audit Report					X				Internal Audit (RSM UK Risk Assurance Services LLP)
<b>External Audit:</b>									
External Audit Planning Report					X				External Audit (Deloitte)
Auditor's Annual Report 2021/22			X						External Audit (Deloitte)
Verbal Update on the External Audit for the year ended 31 March 2022		X					X		
Report to those charged with Governance 2021/22 (ISA 260)			X						External Audit (Deloitte)
Audit Opinion (included in the Audited Statement of Accounts) (Date of report submission TBC)									External Audit (Deloitte)
<b>Governance and Internal Control Framework:</b>									
Annual Governance Statement (Draft to July meeting, Final to September meeting)	X					X	X		BMBC JAGU (D Thorpe) & SYFR (T Wiles)
Governance Improvement Plan (Draft to July meeting, Final to September meeting)	X			X		X	X		BMBC JAGU (D Thorpe) & SYFR (T Wiles)
Approve the Annual Governance Statement and Governance Improvement Plan	X						X		BMBC JAGU (D Thorpe) & SYFR (T Wiles)
Treasury Management Strategy & Policy Statement			X						BMBC Finance (N Copley)
Q1 Treasury Management Report (New)	X						X		BMBC Finance (N Copley)
Q2 Treasury Management Report (New)		X						X	BMBC Finance (N Copley)
Q3 Treasury Management Report (New)				X		X			BMBC Finance (N Copley)
Treasury Management Annual Report						X			BMBC Finance (N Copley)
Information Governance Updates Report (incl FOI & GDPR)		X		X				X	SYFR (E Durdey & T Wiles)
Quarterly FRA / SYFR Corporate Risk Report	X		X		X		X		SYFR (K Storer)
Compliments and Complaints Monitoring Report		X		X				X	SYFR (T Wiles)
<b>Accounts:</b>									
Approve the audited Statement of Accounts 2021/22			X						BMBC Finance (N Copley)
Receive draft unaudited Statement of Accounts 2023/24						X			BMBC Finance (N Copley)
Approve the audited Statement of Accounts 2022/23									BMBC Finance (N Copley)
TBC = To be confirmed									

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## **SOUTH YORKSHIRE FIRE & RESCUE AUTHORITY**

Meeting	<b>AUDIT AND GOVERNANCE COMMITTEE</b>
Meeting Date	<b>20 NOVEMBER 2023</b>
Report of	<b>INTERNAL AUDIT (RSM UK RISK ASSURANCE SERVICES LLP)</b>
Report Sponsor(s)	<b>CLERK TO THE AUTHORITY</b>
Subject	<b>INTERNAL AUDIT PROGRESS REPORT</b>

### **EXECUTIVE SUMMARY**

Following the approval of the Internal Audit Plan for 2023/24 at the Audit and Governance Meeting of the 13<sup>th</sup> March 2023, this report contains the Internal Audit Progress report for review.

This paper provides an update on progress against that plan and summarises the results of our work to date.

### **RECOMMENDATION(S)**

- Consider and receive the report.
- Approve the updates to the Internal Audit Plan.

---

### **CONTENTS**

Main Report

## BACKGROUND

### Key Messages

1. Audit dates for the 2023/24 Internal Audit Plan have been agreed with management and scoping meeting dates have also been agreed.
2. No reports have been issued as final since the last meeting which is in line with our planned timings outlined in Appendix A.
3. Planning for the 2024/25 Internal Audit Plan has commenced with management and the draft Internal Audit Plan will be presented at the January 2024 Audit and Governance meeting.

### Appendix A - Progress against the internal audit plan 2023/24

4. This appendix provides a status for each internal audit. The target date per Audit and Governance Committee is stated and, once audits have been completed, the actual Audit and Governance Committee meeting at which the report is presented will be recorded, along with the number and priority of management actions agreed and the assurance conclusion reached.

### Appendix B – Other matters

5. No changes have been made to the Internal Audit Plan since the last Audit and Governance Meeting.

### Appendix C - Key performance indicators (KPIs)

6. The key performance indicators detailed are for information only and will be monitored and reported against throughout the year.

### CONTRIBUTION TO OUR ASPIRATIONS (tick all that apply)

- Be a great place to work-** we will create the right culture, values and behaviours to make this a brilliant place to work that is inclusive for all
- Put people first-** we will spend money carefully, use our resources wisely and collaborate with others to provide the best deal to the communities we serve
- Strive to be the best in everything we do-** we will work with others, make the most of technology and develop leaders to become the very best at what we can be

### CONTRIBUTION TO SERVICE IMPROVEMENT

(tick all that apply to your report and add supporting information for each in the box below)

- [HMICFRS Inspection Framework e.g. Diagnostic area and/ or diagnostic questions](#)
- [SYFR Inspection report Areas for Improvement \(AFIs\)](#)
- [Fit for the Future Improvement Objectives](#)
- [Professional Standards for Fire & Rescue Services in England](#)
- [SYFR Service Plan 2023-24 Priorities](#)



[SYFR Community Risk Management Plan 2021-24](#)

**OPPORTUNITIES FOR COLLABORATION** (tick relevant box)

Yes  
 No

If you have ticked 'Yes' please provide brief details in the box below and include the third party/parties it would involve:

**CORPORATE RISK ASSESSMENT AND BUSINESS CONTINUITY IMPLICATIONS** (add information relevant to your report)

7.

**EQUALITY ANALYSIS COMPLETED** (tick relevant box)

Yes

If you have ticked 'Yes' please complete the below comment boxes providing details as follows:

Summary of any Adverse Impacts Identified:	Key Mitigating Actions Proposed and Agreed:

No  
 N/A

If you have ticked 'No' or 'N/A' please complete the comments box below providing details of why an EA is not required/is outstanding:

**HEALTH AND SAFETY RISK ASSESSMENT COMPLETED** (tick relevant box)

Yes  
 No  
 N/A

If you have ticked 'No' or 'N/A' please complete the comments box below providing details of why a Health and Safety Risk Assessment is not required/is outstanding:

**SCHEME OF DELEGATION**

8. Under the South Yorkshire Fire and Rescue Authority [Scheme of Delegation](#) a decision \*is required / \*has been approved at Service level.

Delegated Power  Yes  
 No

If yes, please complete the comments box indicating under which delegated power.

Example A: Asset Management A1: Property Management
---

**IMPLICATIONS**

9. Consider whether this report has any of the following implications and if so, address them below: Diversity, Financial, Asset Management, Environmental and Sustainability, Fleet, Communications, ICT, Health and Safety, Data Protection, Collaboration, Legal and Industrial Relations implications have been considered in compiling this report.

<b>List of background documents</b>		
Report Author:	Name:	Rob Barnett, Partner, RSM
	e-mail:	Robert.barnett@rsmuk.com
	Tel no:	0113 285 5000

# SOUTH YORKSHIRE FIRE AND RESCUE

## Internal Audit Progress Report

20 November 2023

This report is solely for the use of the persons to whom it is addressed.  
To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party.





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	Appendix B: Other matters .....	5
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# 1 Key messages

The Internal Audit Plan for 2023/24 was approved by the Audit and Governance Committee at the 13 March 2023 meeting. We will work closely with management to deliver an internal audit programme which remains flexible and agile to ensure it meets your needs in the current circumstances.



Audit dates for the 2023/24 Internal Audit Plan have been agreed with management and scoping meeting dates have also been agreed.



No reports have been issued as final since the last meeting which is in line with our planned timings outlined in Appendix A.



Planning for the 2024/25 Internal Audit Plan has commenced with management and the draft Internal Audit Plan will be presented at the January 2024 Audit and Governance meeting.

## Appendix A: Progress against the internal audit plan 2023/24

Assignment	Status / Opinion issued	Actions agreed				Target Audit and Governance Committee (as per revised IA plan)	Actual Audit and Governance Committee
		L	M	H	N/A		
<b>Wellbeing, Occupational Health and Absence Management</b>	Final Report Issued / Reasonable Assurance	4	6	0	0	September 2023	September 2023
<b>Follow Up</b>	Fieldwork underway					January 2024	
<b>Contract Management – IT Department</b>	Fieldwork underway					January 2024	
<b>Community Risk Management Plan</b>	Fieldwork agreed to commence 22 November 2023					January 2024	
<b>Commercial Premises Inspections</b>	Fieldwork agreed to commence 11 December 2023					March 2024	
<b>Sustainability/Environmental, Social and Governance (ESG)</b>	Fieldwork agreed to commence 15 January 2024					March 2024	
<b>Core Financial Systems</b>	Fieldwork agreed to commence 15 January 2024					March 2024	
<b>Incident Ground Welfare Provision</b>	Fieldwork agreed to commence 12 February 2024					May 2024	
<b>Stocks and Stores Departmental Review</b>	Fieldwork agreed to commence 4 March 2024					May 2024	



## Appendix B: Other matters

### Changes to the audit plan

Our approach to working with you is to respond to your changing assurance needs. By employing an 'agile' or a 'flexible' approach to our service delivery, we are able to change the focus of audits / audit delivery.

There have been no changes to the internal audit plan since the last Audit and Governance meeting.

### Quality assurance and continual improvement

To ensure that RSM remains compliant with the IIA standards and the financial services recommendations for Internal Audit we have a dedicated internal Quality Assurance Team who undertake a programme of reviews to ensure the quality of our audit assignments. This is applicable to all Heads of Internal Audit, where a sample of their clients will be reviewed. Any findings from these reviews being used to inform the training needs of our audit teams.

The Quality Assurance Team is made up of; the Head of the Quality Assurance Department (FCA qualified) and an Associate Director (FCCA qualified), with support from other team members across the department.

This is in addition to any feedback we receive from our post assignment surveys, client feedback, appraisal processes and training needs assessments.

### Post assignment surveys

We are committed to delivering an excellent client experience every time we work with you. Your feedback helps us to improve the quality of the service we deliver to you. Currently, following the completion of each product we deliver we attach a brief survey for the client lead to complete. The results of these surveys will be shared at each Audit and Governance meeting.

## Appendix C: Key performance indicators 2023/24 (KPIs)

Delivery			Quality		
	Target	Actual		Target	Actual
Audits commenced in line with agreed timescales	Yes	Yes	Conformance with PSIAS and IIA Standards	Yes	Yes
Draft reports issued within 10 days of debrief meeting	10 days	10 working days	Liaison with external audit to allow, where appropriate and required, the external auditor to place reliance on the work of internal audit	Yes	-
Final report issued within 3 days of management response	3 days	1 working day	Response time for all general enquiries for assistance	2 working days	2 working days (average)
			Response for emergencies and potential fraud	1 working day	n/a





## For more information contact

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### rsmuk.com

The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Actions for improvements should be assessed by you for their full impact. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

Our report is prepared solely for the confidential use of **South Yorkshire Fire and Rescue** and solely for the purposes set out herein. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights from RSM UK Risk Assurance Services LLP for any purpose or in any context. Any third party which obtains access to this report or a copy and chooses to rely on it (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

This report is released to you on the basis that it shall not be copied, referred to or disclosed, in whole or in part (save as otherwise permitted by agreed written terms), without our prior written consent.

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## SOUTH YORKSHIRE FIRE & RESCUE AUTHORITY

Meeting	<b>AUDIT AND GOVERNANCE COMMITTEE</b>
Meeting date	<b>20<sup>th</sup> NOVEMBER 2023</b>
Report of	<b>THE TREASURER</b>
Report Sponsor(s)	<b>NEIL COPLEY, TREASURER</b>
Subject	<b>QUARTER 2 TREASURY MANAGEMENT REPORT 2023/24</b>

### SUMMARY

This document reviews the treasury management activities carried out on behalf of South Yorkshire Fire & Rescue during the second quarter of 2023/24, in accordance with statutory guidance.

In broad terms it covers the following:

- The agreed Treasury Management Strategy for 2023/24;
- An economic summary for the year to date;
- An update on the Authority's borrowing and investment activities, and
- The Authority's Prudential and Treasury Indicators.

The Authority is committed to the principles of achieving value for money in treasury management, acknowledging that effective treasury management will provide support towards the achievement of its business and service objectives.

### RECOMMENDATIONS

It is recommended that Members note:

- **The latest expectations for interest rates (pages 2-3);**
- **The activities undertaken during the year to support the Authority's borrowing and investment strategies (pages 3-6), and**
- **The Authority's Prudential and Treasury Indicators (Appendix 1).**

### THE AGREED STRATEGY FOR 2023/24

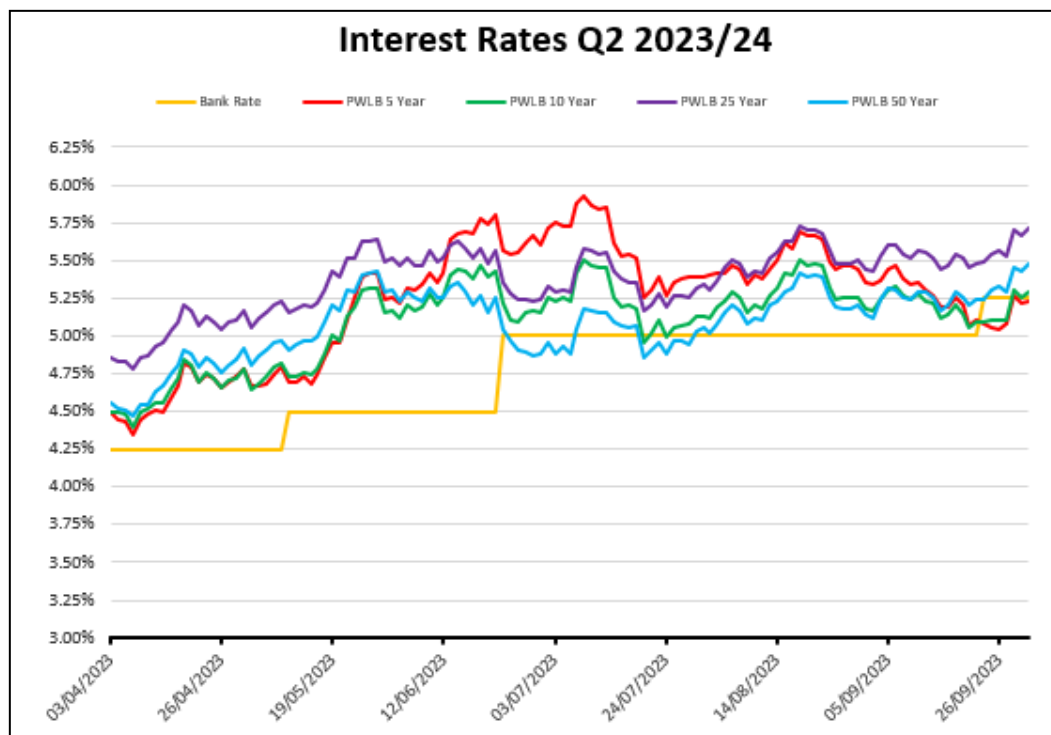
1. The Treasury Management Strategy identifies the key risks associated with the Authority's borrowing and investment activities and sets out how those risks will be managed.
2. The current borrowing strategy is to maintain a minimum proportion of fixed-rate borrowing to limit the Authority's exposure to interest rate risk whilst managing an appropriate level of internal borrowing to keep financing costs low.
3. The current investment strategy seeks to minimise credit risk and maintain a suitable balance of liquid funds to ensure that sufficient cash is available when needed. As such the pursuit of higher investment returns is a secondary objective.

## ECONOMIC SUMMARY

### Highlights:

- The UK Bank Rate increased from 5.00% to 5.25% during the quarter;
- An upward trend in PWLB borrowing rates over the first half of 2023/24;
- A slight reduction in the Consumer Price Index (CPI) inflation in the UK to 6.7% in August 2023.

4. The UK economy is experiencing renewed signs of stress. While the worries about a UK recession have largely gone away, high interest rates and continued uncertainty are affecting investor confidence. Inflation remains high at 6.7%, supported mainly by strong pay growth, and this could see inflation returning to its 2% target only by the latter part of 2024, especially if businesses continue to pass on higher costs to rebuild margins.
5. Interest rates are a key driver of the Authority's treasury management activities and as such are closely monitored by officers. As illustrated in the graph below, PWLB rates were on a rising trend during the first half of 2023.



6. Interest rate forecasts are received from the Authority's Treasury Management Advisers, Link Group. For comparison purposes, the Authority reviews forecasts published by other leading economists (Capital Economics) in addition to those provided by Link. The UK Base Rate and PWLB 50 Year Certainty Rate forecasts are shown below, and these are closely monitored in order to mitigate the risk of movements which could adversely impact on the Authority's finances.

Latest Interest Rate Projections (provided by Link Group & Capital Economics as at 25.09.23)

	Latest	Sep-23	Mar-24	Sep-24	Mar-25	Sep-25	Mar-26
UK Base Rate ~ Link Group	5.25%	5.25%	5.25%	5.00%	4.00%	3.00%	2.75%
UK Base Rate ~ Capital Economics	5.25%	5.25%	5.25%	5.25%	4.75%	3.75%	-
PWLB Certainty 50 Years ~ Link Group	5.30%	5.20%	5.00%	4.70%	4.20%	3.90%	3.70%
PWLB Certainty 50 Years ~ Capital Economics	5.30%	5.00%	4.90%	4.70%	4.50%	4.30%	-

7. As shown above, the latest forecast (as at 25th September 2023) is that the Bank Rate has reached its peak of 5.25%, with a first rate cut to 5% in Q3 2024, to be followed by further rate cuts through 2024 and 2025. As there are so many variables at this time, caution must be exercised in respect of all interest rate forecasts.

## BORROWING ACTIVITY

### Highlights:

- No new borrowing was undertaken during the period;
- An external borrowing requirement of up to £19.5 Million by the end of 2025/26;
- Around £19.2 Million of this will need addressing through fixed-rate borrowing in order to meet the Authority's agreed exposure targets.

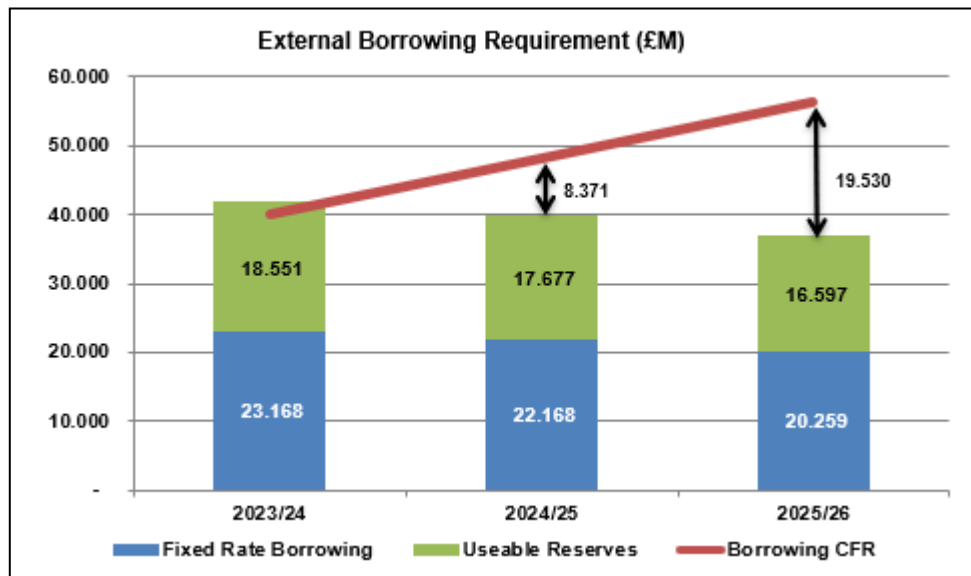
8. As outlined previously (see paragraph 2) the Authority's borrowing strategy is to limit its exposure to interest rate risk whilst maintaining an appropriate level of internal borrowing\* in order to reduce its financing costs.

\* Refers to the temporary use of internal cash resources (e.g. earmarked reserves or grants received in advance of expenditure) to support its borrowing requirement.

9. As shown in the table below, no new borrowing was undertaken during the period whilst the £2M short term borrowing taken during quarter 1 was repaid.

Source	Balance on 01/07/2023 (£M)	New Borrowing (£M)	Principal Repaid (£M)	Balance on 30/09/2023 (£M)	Net Increase / (Decrease) (£M)
Fixed Rate PWLB	23.168	-	-	23.168	-
Short-Term Borrowing	2.000	-	(2.000)	-	(2.000)
<b>Total External Borrowing</b>	<b>25.168</b>	<b>-</b>	<b>(2.000)</b>	<b>23.168</b>	<b>(2.000)</b>

10. The chart overleaf shows the Authority's projected borrowing requirement over the next two years and the cash available to support this from external borrowing and useable reserves. As shown, the Authority's underlying need to borrow is anticipated to be in the region of £19.5M by the end of 2025/26, and a breakdown is provided in the table below. This is currently the approved borrowing position and is prior to any additional requests to borrow in the forthcoming MTFP.



Projected external borrowing requirement 2023/24 - 2025/26	£M
Planned capital investment	26.487
Maturing loans / support from useable reserves	(5.292)
Amounts set aside to repay debt	(1.665)
<b>Total</b>	<b>19.530</b>

11. To limit the impact of rising interest rates, the Authority's existing commitment is to maintain its exposure to interest rate risk within 30% of its borrowing requirement. To deliver against this strategy, it is anticipated that the Authority may need to fix out in the region of £19.2M by the end of 2025/26. The remainder could be funded through temporary borrowing or internal cash resources:

	2023/24 (£M)	2024/25 (£M)	2025/26 (£M)
Fixed Rate Borrowing Requirement (Cumulative)	4.790	11.583	19.211
Temporary Borrowing Requirement (Cumulative)	-	-	0.319
<b>Total</b>	<b>4.790</b>	<b>11.583</b>	<b>19.530</b>

12. The need to adopt an agile approach to Treasury Management has never been as important following recent events within the economy, namely the continued increase in the UK Bank Rate and the rise in the cost of borrowing. In light of the current climate and rising interest rates, the Treasurer has recommended to defer the £4.8M borrowing requirement in 2023/24. Although the Authority has a continued commitment to maintaining the exposure rate target, fixing out borrowing with rates at current levels may not create best value. The recommended approach during this period is to utilise cash balances in lieu of long-term borrowing and, where necessary, taking on short-term debt to cover cash flow requirements.

13. The risk associated with this flexible strategy and deferring borrowing is minimal as a 1% rise in rates on the £4.8M requirement would see an impact of just £48K on the budget. Expectations are for rates to drop gradually over the next two years (see paragraph 7) and officers will monitor the position of capital plans alongside wider economic conditions to ensure borrowing is cost effective for the Authority.
14. Officers will continue to assess the following borrowing options:
- **Deferred loans** - these would allow the Authority to borrow from financial institutions such as banks at a fixed rate and draw down the cash up to two years in advance. Whilst they may no longer be cheaper than the PWLB, deferred loans help to protect the Authority from interest rate risk without the additional cost of carry and credit risk. Lenders tend to have a minimum size of £30M however officers will continue to explore any potential opportunities.
  - **Loans from other local authorities** - the Authority could look to secure an element of its borrowing requirement with some short or medium-term funds from other local authorities, which would help to spread refinancing risk typically at a cheaper rate than the PWLB.
  - **PWLB** - the latest forecasts (see paragraph 6) show a gradual decline in PWLB rates during the forecast period to March 2026. There is likely to be unpredictable volatility during this period as detailed in the economic summary section of the report and officers will continue to monitor PWLB closely to take advantage of the best possible rates. Any such borrowing would be carried out in small tranches to minimise the cost of carry and mitigate credit risk and assessed against alternate options available (e.g. deferred loans).
  - **Internal Borrowing** - while borrowing rates remain elevated, the Authority could continue with the temporary use of internal cash resources (e.g. earmarked reserves or grants received in advance of expenditure) in lieu of external borrowing. This is a temporary measure and should be considered in line with the reserves strategy and capital spend projections over the planning period.

## INVESTMENT ACTIVITY

### Highlights:

- A net increase in investment balances of £10.5M during the year to date;
- Security and liquidity remained the key priorities, with all new deposits placed in Money Market Funds, instant access accounts and short-term investments;
- Investment rates have improved during the first half of the year and are expected to remain elevated, in-line with forecasts for the UK Bank Rate to remain 'higher for longer'.

15. As outlined previously (see paragraph 3) the Authority's investment strategy is to ensure that its cash balances are invested prudently and are available when needed to meet its spending commitments.
16. To reflect this strategy a balance of investments were kept within secure Money Market Funds (MMFs) and instant access accounts throughout the quarter.
17. During quarter 2, the authority also invested some cash short-term in order to take advantage of enhanced investment rates. These were arranged to ensure a better return at a period when the authority was experiencing higher cash balances. All investments are arranged with organisations rated in line with the approved treasury strategy.
18. As shown in the table below, there was a net increase in investment balances of £10.5M during the period, primarily owing to Firefighters pension grant received in July. Further investment details are available on request:

Source	Balance on 01/07/2023 (£M)	New Investments (£M)	Redeemed Investments (£M)	Balance on 30/09/2023 (£M)	Net Increase / (Decrease) (£M)
MMFs / Instant Access Accounts	2.720	19.280	(18.750)	3.250	0.530
Short Term Investments	-	15.000	(5.000)	10.000	10.000
<b>Total Investments</b>	<b>2.720</b>	<b>34.280</b>	<b>(23.750)</b>	<b>13.250</b>	<b>10.530</b>

19. The key investment issues being managed by the Authority are as follows:
- **Local Authority Creditworthiness** – this is an ongoing issue particularly in light of the current economic crisis. Whilst there are no issues foreseen from a credit perspective (there are regulations in place to avoid local authorities going bankrupt), officers recognise the reputational risk associated with such investments and will take this into consideration when deciding where to invest the Authority's surplus cash. Local Authority's with a Section 114 Notice are not deemed to be a safe investment by the Authority and are therefore avoided.



## **PERFORMANCE MEASUREMENT / COMPLIANCE WITH PRUDENTIAL AND TREASURY LIMITS**

20. The Authority's Capital Financing budget is anticipated to underspend in the region of £0.5M as at quarter 2. This is due to the aforementioned delay of 2023/24 planned fixed-rate borrowing. Further updates on the budget position will be provided in subsequent quarterly monitoring reports.
21. Capital Financing costs are expected to rise over the medium term as the Authority takes on more external borrowing, however these costs have been provided for in the Authority's Medium Term Financial Plan.
22. The Authority has operated within the prudential and treasury indicators set out in the agreed strategy and in compliance with the Authority's Treasury Management Practices (see Appendix 1 for more details).

## **CONTRIBUTION TO SERVICE PRIORITIES**

23.  Community - Making people safer - working to prevent emergencies.  
 Operations - Responding to emergencies - effectively and safely.  
 People - Valuing people - those we serve and employ.  
 Finance and Resources - Maximising efficiency - making our resources go further.

## **CORPORATE RISK ASSESSMENT & BUSINESS CONTINUITY IMPLICATIONS**

24. Treasury management activities expose the Authority to several financial risks, in particular:
- credit risk - the possibility that other parties may fail to pay amounts due to the Authority
  - liquidity risk - the possibility that the Authority may not have sufficient cash available to meet its commitments to make payments
  - market risk - the possibility that financial loss might arise for the Authority as a result of changes in such measures as interest rates.
25. These are managed as part of the Treasury Management Policy, Strategy and Procedures.

## **EQUALITY ANALYSIS COMPLETED**

26.  Yes  
 No  
 N/A

This report does not relate to the introduction of a new policy, strategy or procedure.

## IMPLICATIONS

27. Industrial Relations, Financial, Legal, Asset Management, Environmental and Sustainability, Diversity, and Communications implications have been considered in compiling this report.

## BACKGROUND DOCUMENTS

<b>List of background documents</b>		
CIPFA Prudential Code		
CIPFA Treasury Management Code		
DLUHC Guidance on Local Authority Investments		
DLUHC Guidance on the Minimum Revenue Provision		
Information provided by Link Asset Services		
<b>Report author</b>	<b>Name</b>	Neil Copley, Treasurer
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	<b>Telephone</b>	01226 773237

## APPENDIX 1 - ACTUAL PRUDENTIAL AND TREASURY INDICATORS FOR 2023/24

### 1. Operational Boundary for External Debt

This is the limit beyond which external debt is not normally expected to exceed. This limit is set to match the Capital Financing Requirement as shown above:

Unlike the authorised limit breaches of the operational boundary (due to cash flow movements) are allowed during the year as long as they are not sustained over a period of time.

	2023/24 Limit (£M)	Quarter 2 Actual (£M)	Compliant?
Average Debt Compared to Operational Boundary	43.936	23.538	YES

### 2. Authorised Limit for External Debt

This represents a limit beyond which external debt is prohibited, and this limit needs to be set or revised by the full Authority. It reflects the level of external debt which, while not desired, could be afforded in the short term, but is not sustainable in the longer term. The Authorised Limit has been set at £4M above the Operational Boundary.

The Authorised Limit is the statutory limit under the Local Government Act 2003 and must not be exceeded during the year.

	2023/24 Limit (£M)	Quarter 2 Actual (£M)	Compliant?
Maximum Debt compared to Authorised Limit	47.936	25.168	YES

### 3. Maturity Structure of Fixed Rate Borrowing

These limits are set to reduce the Authority's exposure to large sums falling due for refinancing, and are required for upper and lower limits.

The majority of the Authority's debt is due to mature after 10 years or more.

	2023/24 Limit (%)	Quarter 2 Actual (%)	Compliant?
Less than 12 months	0-20	4	YES
12 months to 2 years	0-20	8	
2 years to 5 years	0-50	14	
5 years to 10 years	0-75	30	
10 years and above	25-100	44	

#### 4. Maximum Principal Sums Invested

This indicator sets an upper limit for the level of investment that may be fixed for a period greater than 365 days. This limit is set to contain exposure to credit and liquidity risk.

At present the Authority has no intentions to invest for periods of more than 365 days.

	<b>2023/24 Limit (£M)</b>	<b>Quarter 2 Actual (£M)</b>	<b>Compliant?</b>
Sums Invested > 365 days	0.000	0.000	YES

## APPENDIX 2 - LOAN PORTFOLIO AS AT 30/09/2023

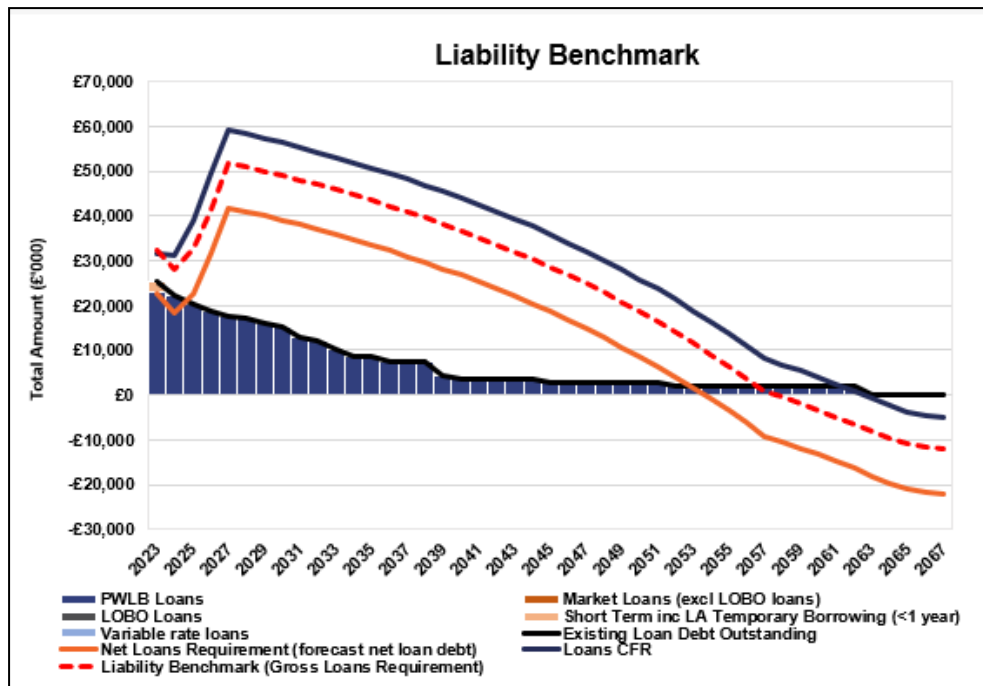
Summary as at 30/09/2023:

	<b>Balance (£M)</b>	<b>Average Rate (%)</b>
PWLB	23.168	4.01
<b>Total External Borrowing</b>	<b>23.168</b>	<b>4.01</b>

No new borrowing during the quarter.

## APPENDIX 3 – LIABILITY BENCHMARKING INDICATOR

1. A new prudential indicator for 2023/24 is the Liability Benchmark (LB) which has been developed by CIPFA to provide a longer-term view of a local authority's debt position. The Authority is required to estimate and measure the LB and report this to members within the quarterly treasury management updates. The LB is effectively the Net Borrowing Requirement of the Authority plus a liquidity allowance.



2. The graph above shows the Authority's Liability Benchmark at 2023/24 which includes the following four balances:
  - **Existing loan debt outstanding (blue stacked bars):** the Authority's existing loans that are still outstanding in future years.
  - **Loans CFR (blue line):** the loans CFR projected into the future based on approved prudential borrowing and planned MRP.
  - **Net loans requirement (orange line):** the Authority's gross loan debt less treasury management investments at the last financial year-end, projected into the future based on approved prudential borrowing, planned MRP and any other major cash flow forecasts.
  - **Liability benchmark (broken red line):** the net loans requirement plus a short-term liquidity allowance.

3. It should be noted that only approved prudential borrowing is included in the above calculations which covers the period to 2026/27. In practice this means that the Loans CFR will peak after four years, as is demonstrated in the graph above. This creates a slight anomaly in the model given that all other inputs are projected forward to 40 years+.
4. CIPFA recommends that the optimum position for external borrowing should be at the level of the LB (i.e. all balance sheet resources should be used to maximise internal borrowing). If the outputs show future periods where external loans are less than the LB, then this indicates a borrowing requirement, thus identifying where the Authority is exposed to interest rate, liquidity and refinancing risks. Conversely, where external loans exceed the LB then this will highlight an overborrowed position which will result in excess cash in the organisation requiring investment, thus exposing the Authority to credit and reinvestment risks and a potential cost of carry.
5. Members are also asked to note that the LB calculation does not include any targets for interest rate exposure and measures to mitigate the risk of rising borrowing costs. Further calculations are provided in the following borrowing strategy section which sets out the Authority's interest rate exposure targets and plans to create cost certainty.
6. Additional updates on the LB position will be provided throughout the year and included as part of the treasury management training sessions delivered to members.

## APPENDIX 4 – FIRE AUTHORITY BENCHMARKING DATA

	<b>South Yorks Fire &amp; Rescue Authority</b>	West Yorks Fire & Rescue Authority	Humberside Fire & Rescue Authority	Derbyshire Fire & Rescue Authority	Nottinghamshire Fire & Rescue Authority
	<b>31/03/2023</b>	<b>31/03/2023</b>	<b>28/02/2023</b>	<b>31/03/2023</b>	<b>31/03/2023</b>
	<b>£M</b>	<b>£M</b>	<b>£M</b>	<b>£M</b>	<b>£M</b>
<b>Balance Sheet:</b>					
CFR	<b>31,564</b>	41,326	19,987	7,461	30,533
External borrowing PWLB	<b>23,168</b>	43,937	18,169	6,615	32,948
Under/Over borrowed	<b>8,396</b>	- 2,611	1,818	846	- 2,415
Under/Over borrowing as a % of Underlying Borrowing Requirement	<b>27%</b>	-6%	9%	11%	-8%
Investments	<b>5,231</b>	46,112	10,500	9,300	10,000
Level of Reserves	<b>18,657</b>	41,071	14,811	15,691	10,572
<b>Prudential Indicators:</b>					
Capital spend	<b>3,166</b>	11,726	3,085	713	2,265
Ratio of financing costs to net revenue stream	<b>2.50%</b>	6.39%	2.81%	1.60%	4.65%
<b>Capital Programme:</b>					
Next two years forecast capital spend	<b>20,890</b>	65,210	10,437	6,779	12,049

1. The benchmarking data shows that in comparison to the other authorities, SYFRA are currently the highest under borrowed as a percentage of the underlying borrowing requirement. This indicates a good use of internal balances in lieu of expensive external borrowing.
2. The Authority also has the lowest level of investment balances as at 31 March 2023, which creates low credit and counterparty risk.
3. The ratio of financing costs to net revenue stream is lower than most others in the comparator group.



## **SOUTH YORKSHIRE FIRE & RESCUE AUTHORITY**

Meeting	<b>AUDIT AND GOVERNANCE COMMITTEE</b>
Meeting Date	<b>20 NOVEMBER 2023</b>
Report of	<b>CHIEF FIRE OFFICER AND CHIEF EXECUTIVE</b>
Report Sponsor(s)	<b>DEPUTY CHIEF FIRE OFFICER, DIRECTOR OF SERVICE DELIVERY</b>
Subject	<b>INFORMATION GOVERNANCE UPDATES (INC GDPR &amp; FOI)</b>

### **EXECUTIVE SUMMARY**

This report presents combined information on South Yorkshire Fire and Rescue's (SYFR) compliance with the Data Protection Act 2018, the UK General Data Protection Regulation (UK GDPR), and requests received under the Freedom of Information Act.

Following the government's open consultation in 2021, "Data: A New Direction", it has since published the "Data Protection and Digital Information Bill". This Bill outlines a number of ways in which the UK intend to amend existing UK data protection legislation very much focusing on an "evolution rather than revolution." The Bill has had its second reading and is currently in the "Reporting Stage" within the House of Commons. There are no further updates as yet.

As previously stated, whilst keeping an overview of this, we are remaining very much business as usual and SYFR's Data Protection Officer (DPO) will update the organisation as necessary in due course.

SYFR's DPO is committed to fostering a culture of good data protection in everyday life throughout stations and departments across the Service.

The DPO continues to work closely with ICT to ensure consistent messages and timely updates are shared service-wide via training sessions, articles in the bulletin and the various meetings the DPO presents data protection actions and updates at.

Since the last report, the SYFR DPO has completed face to face bi-annual training of those departments handling large volumes of personal data on a day to day basis. This covers departments such as OHU, People, Safeguarding, Payroll, Health and Safety, and Control etc.

Along with training high risk areas, this was also offered to any new starters, new recruits and personnel in any department to join a quarterly session put on by the DPO. In this year to date this training has covered 201 SYFR employees with one final session being run towards the end of the year.

Members are provided with information of requests processed under the Freedom of Information Act (FOIA) for the 6-month period 1 February to 31 July 2023. 74 requests for information were processed, which is a 25% increase from the previously reported 6 month figures (59 requests).

A summary of requests shows 54 complete responses, 9 partial responses, 5 refusal notices, 1 clarification (expired) and 4 fees notices (2 open, 2 expired) were issued. One request was withdrawn. No internal reviews were received and no complaints received from the Information Commissioner's Office.

471 questions have been processed, a 19% increase (previously 397) with the average number of the questions per request moving from 7 to 6. Of the 74 requests closed, 96% received a response within 20 working days which is a good progress increase from 91%.

The report also shows the amount of actual office hours spent processing each request (as opposed to the duration taken to reply to the request as defined by the FOIA). Over the last 6 months, processing time was a total of 275 hours with the average maintained at 4 hours to process each request, estimated at £100.00 in staff time per request (£25 per hour).

A broader analysis highlights trends of the type of information requested, where requests are received from, and which departments provided information, showing that the majority of requests were received from the general public (19), businesses (19) and the media (14).

Individual requests can involve more than one department and the Information and Governance (IG) team have worked with 12 different departments from an estimated 20 across the organisation to identify if information is held. The most requested subjects were: incidents (29), staff (15), procured contracts (9) and Business Safety (8); hence our Business Intelligence (27), People and Organisational Development (14) Business Safety (9) and ICT (8) teams were the busiest, locating and providing information to the IG team to process requests.

## **RECOMMENDATIONS**

Members are recommended to:

- a) Note the good data protection and compliance progress by the DPO working with the Senior Information Risk Owner (SIRO) and other officers across SYFR.
- b) Note the good work in training SYFR staff.
- c) Note the processing of incidents over the last 6 month period.
- d) Note the increased in Subject Access Requests and all responded to within 1 month.
- e) Note the increase number of FOI requests and percentage responded to within 20 working days.

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## **CONTENTS**

Main Report

Appendix A – Summary of FOI requests 1 February 2023 to 31 July 2023

## **BACKGROUND – UK General Data Protection Regulations (GDPR) and The Data Protection Act 2018 (DPA2018)**

1. UK GDPR is a defined set of data protection rules not only limiting what organisations can do with individuals' personal data but giving people far more access to, and control over, the information organisations are processing about them. UK GDPR is tailored to the UK by the Data Protection Act 2018. At the heart of UK data protection legislation are 7 key principles for organisations to adhere to. The Information Commissioner's Office (ICO) is the UK's independent body established to uphold information rights. SYFR are registered with the ICO as a Data Controller.

### **GDPR 6 MONTHS PROCESSING STATISTICS**

2. A Data Breach Incident Management policy, procedure and log are all in place.

During the period 1 February 2023 to 31 July 2023 there have been 14 recorded incidents, these are broken down as:

- X9 email incidents
- X1 documents saved to the wrong file
- X1 documents left unattended e.g. on photocopier
- X3 "other" e.g. verbal

There has been 5 near misses broken down as:

- X3 email incidents
- X2 missing paperwork incidents

None of the above required reporting to the Information Commissioner's Office.

3. The SYFR DPO works with the relevant departments to fully investigate all incidents, taking advice from the Information Commissioner's Office where necessary. A risk assessment is completed for all incidents and is signed off by the Senior Information Risk Owner (SIRO). Lessons learned are worked on for each incident to try and prevent any re-occurrences.
4. SYFR have processes in place to respond to disclosure of personal data requests under the Data Protection Act 2018 including Subject Access Requests (SARs). During the period 1 February 2023 to 31 July 2023 there have been 17 SARs.
5. SARs must be responded to within 1 calendar month; for the 17 responded to within this period, they took an average of 18 days per request. None exceeded the 1 calendar month timescale.
6. During this same period, there have been 18 Personal Data Disclosure requests. These requests come mainly from the Police and are managed via Control. Some also come via court orders, solicitors or legal teams within local authorities that are overseen by the DPO.
7. During this same time period there have been 18 video image requests.

## **ONGOING AREAS OF WORK**

8. Since the last report, the SYFR DPO has conducted face to face training sessions for 201 individuals. This represents an almost 350% increase from last quarter's 45. This is due to the bi-annual face to face training of high risk areas being rolled out this year as advised last quarter.
9. Training has covered SYFR high risk areas such as People, Payroll, OHU, Safeguarding etc. The sessions were then opened up to any new starters in these areas, new Firefighter recruits and existing employees who wanted a refresher. There is one more session to be run before the end of 2023.
10. Data Protection training for Fire Authority Members is also being booked in for the end of 2023.
11. As noted in item 4, the SYFR DPO has processed 17 Subject Access Requests, this represents a 113% increase on last quarter's 8 requests and a 240% increase from this quarter last year, being 5 requests. It is to be noted the increase of SARs having to be managed and the complex nature of these requests.
12. It is noted that all SYFR Privacy Notices are published online. SYFR have a register of these and all are checked periodically to ensure they are accurate, relevant and up to date.

## **FREEDOM OF INFORMATION ACT & ENVIRONMENTAL INFORMATION REGULATIONS**

13. The Freedom of Information Act 2000 and Environmental Information Regulations 2004 provides public access to information held by public authorities. Members of the public can request certain information, which we are obliged to provide subject to a number of exemptions and to have this communicated to them.

## **FOI / EIR PROCESSING**

14. During the 6-month period 1 February 2023 to 31 July 2023, under the FOIA there were 54 complete responses, 9 partial responses, 5 refusal notices, 1 clarification (expired) and 4 fees notices (2 expired, 2 open) processed. 1 request was withdrawn.

### FOI Definitions:

- Complete response – information held and provided in full or we don't hold it
  - Partial response – information held and some withheld using an exemption(s)
  - Refusal Notice – all information is in the public domain or all is being withheld supported with an exemption
  - Fees notice – it would take longer than 18 hours work to locate, retrieve the information requested
  - Clarification – where we are unable to interpret the request and require further information
15. Comparison figures alongside the previous 6-month period, show the following:
    - a 25% increase in the number of requests processed from 59 to 74
    - a 19% increase in the number of questions asked from 397 to 471
    - the average number of questions falling from 7 to 6 per request
    - a positive rise to 96% of requests responded to within 20 working days (from 91%)
    - a decrease in the average processing time from 13 to 11 working days.

16. The total number of actual office hours spent processing each request across all departments (as opposed to the duration taken to identify if we hold the information requested and retrieve it as defined by the FOIA), has increased from 198 to 275 hours, with the average processing time of 4 days per request remaining the same. At £25 per hour (as determined by the FOI Code of Practice) the average request processing cost in staff time is estimated at £100.00.
17. The Information Commissioner recommends the following FOI standard for responses and internal reviews to be issued with 20 working days, using the most recent quarter's data and recognising that the appropriate timescale should reflect current performance.
  - Good – 95% or more
  - Adequate – 90-95%
  - Unsatisfactory – less than 90%
18. For the 6 month reporting period required for this report, of the 74 responses provided, 71 achieved the 20 working days standard. This equates to 96% compared with 91% from the last reporting 6 month period. The IG team are progressing this response rate in a positive direction moving from 'adequate' to 'good'.
19. SYFR always endeavour to process FOIA requests as quickly as possible and regret delays in providing responses outside the 20 working day deadline. Applicants are informed when we experience delays and are provided an expected response date. 3 requests took 21, 25 and 29 days; these were due to the need for an additional day to absolutely ensure information was correct before release, a technical issue with data generation and a misunderstanding of where information was held.
20. A summary of all requests received, numbers of questions, processing times and exemptions is provided at Appendix A.

### **Partial responses**

21. 9 requests received partial responses, where some information was provided and some information exempt, usually as it is already available in the public domain e.g. on the Service, Authority or Government website. Examples of where applicants are mostly directed towards when the exemption is under Section 21 'information accessible by other means':
  - Gov.uk website - A series of Fire and Rescue Service datasets  
[www.gov.uk/government/statistical-data-sets/fire-statistics-data-tables](http://www.gov.uk/government/statistical-data-sets/fire-statistics-data-tables)
  - SYFR website – Contracts Register for all contracts over £5,000  
<http://www.syfire.gov.uk/transparency/contracts-register/>
  - SYFR website – Transparency Agenda for spending over £500  
[www.syfire.gov.uk/transparency/spending-over-500/](http://www.syfire.gov.uk/transparency/spending-over-500/)

### **Fees Notices and Clarification Requests**

22. 4 fees notices under Section 12 and 13 of the FOIA were issued, 2 have expired with no response received and 2 are currently open. SYFR contacted 1 applicant requesting clarification under Section 1(3) to assist us to search for information. The 20 working day response time will not start until a satisfactory reply is received. 2 fees notices were closed and the clarification request were closed as no further response was received within 3 months and 2 fees notices remains open, awaiting a response.

## Appeals / Internal Review Requests and Complaints to the Information Commissioner's Office

23. No Internal Review requests of a response provided by the Service were received.
24. No complaints have been received by the Information Commissioner's Office.

## Trends and Analysis

25. A broader analysis of requests is provided to Members, which includes trends of the type of information requested, generally where requests are received from and which departments have provided information to the IG team.
26. The majority of requests were received from the public (29), businesses (19), media (14), Government (6 – 5 local, 1 national) and universities (2), charities, representative bodies, partner agencies and other fire and rescue services (1 each).
27. Overall, 12 departments provided information to enable the Service to respond to requests. The main subjects shown below, indicate Business Intelligence (27), People and Culture (14), Business Safety (9) and ICT (10) teams have been the busiest, locating and providing information to the IG team to process requests.
  - Incident data - 29
  - Staff / organisation - 15
  - Supplier contracts (various) - 9
  - Business Fire Safety – 8
  - Finance 4
  - Fleet – 3
  - ICT and Operations – 2 each
  - EDI and Estates - 1 each

## FREEDOM OF INFORMATION / ENVIRONMENTAL INFORMATION TRAINING

28. The formation of an introduction to FOI/EIR training for the wider organisation is progressing. In May 2023, the Information and Governance Manager provided a presentation at the Service Middle Manager's meeting which included a summary of 2022/23 FOI processing statistics and trends. In August 2023 an additional joint GDPR / FOI Middle Managers presentation was delivered and in October 2023 an initial introduction to FOI training session was provided to Business Safety new starters. Further information will be provided in the next reporting period.

## CONTRIBUTION TO OUR ASPIRATIONS

- Be a great place to work-** we will create the right culture, values and behaviours to make this a brilliant place to work that is inclusive for all
- Put people first-** we will spend money carefully, use our resources wisely and collaborate with others to provide the best deal to the communities we serve
- Strive to be the best in everything we do-** we will work with others, make the most of technology and develop leaders to become the very best at what we can be

## CONTRIBUTION TO SERVICE IMPROVEMENT

- [HMICFRS Inspection Framework e.g. Diagnostic area and/ or diagnostic questions](#)
- [SYFR Inspection report Areas for Improvement \(AFIs\)](#)
- [Fit for the Future Improvement Objectives](#)
- [Professional Standards for Fire & Rescue Services in England](#)
- [SYFR Service Plan 2023-24 Priorities](#)
- [SYFR Community Risk Management Plan 2021-24](#)

Compliance with legislation contributes to efficiency and performance.

## OPPORTUNITIES FOR COLLABORATION

- Yes
- No

If you have ticked 'Yes' please provide brief details in the box below and include the third party/parties it would involve:

SYFR DPO engaged with the SY Joint Authority and Governance Unit and will again be delivery data protection training to Fire Authority Members towards the end of 2023.

## CORPORATE RISK ASSESSMENT AND BUSINESS CONTINUITY IMPLICATIONS

29. The biggest risk for SYFR under Data Protection legislation is enforcement action and/or monetary penalties that can be enforced by the Information Commissioner's Office (ICO) for non-compliance; a fine could be up to £17.5 million or 4% of annual global turnover – whichever is higher.
30. A data protection incident could also mean reputational damage for the organisation, a loss of trust and confidence, media scrutiny, complaints, legal action, and further far reaching problems for data subjects such as distress, embarrassment and in the worst case scenarios physical harm.
31. The increasing number and complexity of Subject Access Requests (SAR) can have a significant impact on departments called upon to pull together documentation for responses. SAR responses have a timeframe of "without undue delay and at the latest within one calendar month of receipt". Prioritising this work can often mean taking officers away from other tasks. Whilst this places a burden on the authority, we must ensure these timeframes are met to avoid potential enforcement action or fines by the ICO, reputational damage and/or a loss of trust by data subjects.
32. It is to be noted that the SYFR DPO role is a standalone role reporting in to SYFR Deputy Chief Fire Officer. SYFR have a mutual cost neutral service level agreement (SLA) for DPO support with Derbyshire FRS and Nottinghamshire FRS. In the event of absence/annual leave/bank holidays where a DPO is out of the office for more than 2 consecutive days, cover is provided through this agreement. This would also be called upon in any extraordinary business continuity circumstances. This

agreement is currently being reviewed to ensure it is still accurate, up to date and fit for purpose.

33. The number, depth and complexity of FOI requests can constitute a significant burden to the Service. Officers mindful of the 20 working day limit, which the legislation imposes, have to prioritise research and consider exemptions and responses that can take them away from other work. FOI responses are however, an opportunity to show the public we are open, honest and here to help and if managed well, to improve the public's perception of us.
34. The IG team ensure all requests are acknowledged and a response is provided. Each request has a minimum of 2 qualified FOI Officer processing for drafting and checking a response prior to release. Processing of requests has not been identified as an immediate risk critical function, nevertheless resilience for managing the process is part of the department's business continuity planning.

### EQUALITY ANALYSIS COMPLETED

Yes

If you have ticked 'Yes' please complete the below comment boxes providing details as follows:

Summary of any Adverse Impacts Identified:	Key Mitigating Actions Proposed and Agreed:
The FOIA requires requests for information to be made in writing. This is potentially discriminatory in that it places a statutory barrier in the way of those who have certain disabilities or who do not communicate easily in English, to access the service.	Information is included within the policy explaining should a phone call be received requesting information, FOI officers will establish if a reasonable adjustment can be offered i.e. to write the request down and send it to the requestor for signature. Within the existing statutory restrictions, this is the easiest "work around" available, and also complies with our duty to provide advice and assistance to those making requests under the Act.

No

N/A

If you have ticked 'No' or 'N/A' please complete the comments box below providing details of why an EA is not required/is outstanding:

### HEALTH AND SAFETY RISK ASSESSMENT COMPLETED

Yes

No

N/A

If you have ticked 'No' or 'N/A' please complete the comments box below providing details of why a Health and Safety Risk Assessment is not required/is outstanding:

The processes do not pose any health and safety risk which would fall outside normal business.

### SCHEME OF DELEGATION



35. Under the South Yorkshire Fire and Rescue Authority Scheme of Delegation a decision \*is required / \*has been approved at Service level.

Delegated Power  Yes  
 No

If yes, please complete the comments box indicating under which delegated power?

D: Legislation D11: FOIA 2000 Requests
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### IMPLICATIONS

36. Consider whether this report has any of the following implications and if so, address them below: Diversity, Financial, Asset Management, Environmental and Sustainability, Fleet, Communications, ICT, Health and Safety, Data Protection, Collaboration, Legal and Industrial Relations implications have been considered in compiling this report.

List of background documents		
Report Author:	Name:	Emily Durdey, Data Protection Officer Tracey Wiles, Information and Governance Manager
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Summary of FOI Requests from 1 February 2023 to 31 July 2023

Appendix A

Date Received	Ref No	Type of Request	No. of Questions	Status	Date Completed	Hours Spent	Comments
01/02/23	FOIA 2091	Most recent transparency data for over £500 spend.	1	Refusal Notice	08/03/23	1	Section 21 available on SYFR website
01/02/23	FOIA 2092	Corporate Communications department structure, salaries and job descriptions.	3	Complete Response	28/02/23	1.5	
02/02/23	FOIA 2093	Total days (uniformed & non-uniformed) lost due to psychological disorders Jan 2020 - Jan 2022.	1	Withdrawn	03/02/23	2	
02/02/23	FOIA 2094	Number of Wholetime Firefighters, with secondary employment, roles, hours or ineligible jobs.	4	Complete Response	02/03/23	4.5	
30/01/23	FOIA 2095	Inspection reports, fire strategy, fire risk assessments, and correspondence for a building.	5	Clarification expired	09/02/23	6.5	09/02/23 Clarification requested, no response within 2 months, request closed.
05/02/23	FOIA 2096	Number of churches damaged by fire since 2010.	1	Complete Response	28/02/23	2	
07/02/23	FOIA 2097	Cleaning, lifts, waste, laundry and food contract details.	40	Refusal Notice	28/02/23	1	Section 21 information available on SYFR website Contracts Register.
08/02/23	FOIA 2098	All documents provided for AFSA Conference 2022 including food and drink menus.	1	Refusal Notice	28/02/23	1.5	Section 21 information available on AFSA website.
09/02/23	FOIA 2099	Dates and times of fire incidents for a postcode for the past year.	1	Complete Response	28/02/23	2.5	
10/02/23	FOIA 2100	Anti-social behaviour incidents in a peatland location that could have resulted in wildfires.	1	Complete Response	28/02/23	9	
13/02/23	FOIA 2101	Number of staff suffering PTSD; days lost to sickness absence, due to mental health issues, due to anxiety, stress, PTSD and depression; ill health retirements due to mental health, staff accessing support 2018-2022.	9	Complete Response	10/03/23	4.5	
09/02/23	FOIA 2102	How and who to contact for incident information, time of call and caller name for a fire at a location.	3	Complete Response	09/03/23	1.5	

21/02/23	FOIA 2103	Emergency response motorcyclist risk assessments and clothing CE standard documents, e.g. garments, policy, procedure.	2	Complete Response	28/02/23	1	Information not held.
01/03/23	FOIA 2104	Current, former and female staff NDAs and payments for each year 2020 to 1 March 2023.	3	Complete Response	10/03/23	1	Information not held.
02/03/23	FOIA 2105	ICT and Procurement Strategy, ICT department, financial plans and organisational chart.	6	Partial Response	14/03/23	2.5	Some information Section 21 available on SYFR website and Section 40(2) Personal Information.
02/03/23	FOIA 2106	Number of hotel fire safety audits, unsatisfactory, enforcement, prohibition notices and prosecutions 2017/17-2022/23 to date.	5	Partial Response	10/03/23	2.5	Some information Section 21 available on Gov.uk and SYFR websites.
06/03/23	FOIA 2107	Number of arson attacks, involving rubbish chutes, rubbish, fly tipping in a location in the last 10 years.	4	Complete Response	10/03/23	4	
07/03/23	FOIA 2108	Number of callouts to SY football grounds including type and severity 2016/17 to date.	10	Complete Response	15/03/23	3.5	
09/03/23	FOIA 2109	Number of arson attacks in Walkley and Broomhill areas 2021 and 2022.	6	Complete Response	16/03/23	6	
10/03/23	FOIA 2110	Number of refuse vehicle, refuse and recycling centre fires 2020 to 2022.	3	Complete Response	16/03/23	5	
12/03/23	FOIA 2111	Number of home bariatric callouts, assisting other emergency services, gender, youngest and oldest ages 2013-2022.	5	Complete Response	06/04/23	13	
11/03/23	FOIA 2112	Number of callouts and visits to a specific premise Jan 2018 to December 2022	2	Partial Response	11/04/23	13	Some information Section 40 personal information.
14/03/23	FOIA 2113	Number of arson attacks in areas of Barnsley and the percentage caused by children or young adults March 2022 to date.	2	Complete Response	20/03/23	4	
15/03/23	FOIA 2114	Number of low, medium and high-rise residential buildings, deficiencies and/or enforcement notices for specific articles, copies, policy for evacuation of disabled people from multi-occupancy buildings.	5	Fees Notice expired	28/03/23	3	

16/03/23	FOIA 2115	Lighting, energy, carbon reduction, station wear/ uniform and recruitment framework contracts.	6	Complete Response	03/04/23	2	
20/03/23	FOIA 2116	Incidents involving disposable e-cigarettes / vapes during 2020, 2021, 2022.	1	Complete Response	11/04/23	5	
23/03/23	FOIA 2117	Current fleet vehicles make, model, year, type, role and year commissioned.	7	Complete Response	14/04/23	3.5	
22/09/23	FOIA 2118	Multifunctional devices/printer usage, types, contract dates, software and agreements.	16	Partial Response	03/04/23	6	Some information Section 21 available on SYFR website - Contracts Register
24/03/23	FOIA 2119	Purchase of ovens, toasters, microwaves, and number given to the public following a fire.	16	Complete Response	03/04/23	2	
24/03/23	FOIA 2120	Number of YAS requests for assist moving bariatric patients, specialist equipment and crew training over the last 2 years.	3	Complete Response	03/04/23	5	
30/03/23	FOIA 2121	Number of fires caused by faulty e-bike batteries, injuries and deaths 2020 to date.	3	Complete Response	12/04/23	8	
07/04/23	FOIA 2122	Cycle to work scheme, number % of staff involved, value of vouchers claimed, how SYFR encourage cycling at work, modes of transport used.	23	Complete response	26/04/23	2.5	
10/04/23	FOIA 2123	Third party dedicated, co-location and cloud hosting contracts.	10	Complete response	04/05/23	1	
11/04/23	FOIA 2124	Checks to appliance and information recorded following a no action required callout.	2	Complete response	28/04/23	1	
11/04/23	FOIA 2125	Body worn cameras use, depts, number purchased, maintenance, deployment and procurement process.	8	Complete response	20/04/23	2	
11/04/23	FOIA 2126	Deliberate fires in the Dearne Valley for specific postcodes and agricultural land 2019 - 2022.	4	Complete response	25/04/23	4	
12/04/23	FOIA 2127	Anti-social behaviour incidents in peatlands that could have resulted in wildfires for last 10 years.	1	Complete response	20/04/23	2	

17/04/23	FOIA 2128	Number of fire service dogs, role, breeds, staff working in dog unit, budget and do SYFR have a dog breeding unit.	7	Complete response	20/04/23	1	Information not held.
17/04/23	FOIA 2129	Server hardware, virtualisation licenses, storage area network maintenance / support contracts.	14	Complete response	21/04/23	1.5	
19/04/23	FOIA 2130	Number of firefighter deaths as a result of lithium battery fires, contact with vapour clouds, fires in recycling/scrapyard centre fires April 2022-2023.	3	Complete response	17/05/23	2	
04/05/23	FOIA 2131	Transparency data spending over £500 January to March 2023.	1	Complete response	17/05/23	1	
06/05/23	FOIA 2132	Number of fires caused by electrical heaters, deaths and ages of victims 01/01/20 - 30/04/23.	3	Complete response	22/05/23	3.5	
09/05/23	FOIA 2133	On-Call fire appliances availability, hours per month, by station, % and reasons for last 12 months.	5	Partial Response	01/06/23	10.5	Some information Section 12&13 fees notice.
10/05/23	FOIA 2134	Number of Alteration, Enforcement and Prohibition Notices served over the last 5 years.	3	Complete response	22/05/23	1	
12/05/23	FOIA 2135	Number of incidents involving heated hair products, heated beauty products and candles from 2021 to date.	3	Complete response	24/05/23	3.5	
11/05/23	FOIA 2136	Information about an appliance attending a woodland fire and action/checks made to the appliance once returned to the fire station.	2	Refusal Notice	07/06/23	3	Section 14 repeated request
15/05/23	FOIA 2137	Mobile phone contracts network provider, spending, connections, start/end, renewal dates.	12	Partial Response	23/05/23	1	Some information Section 21 available on SYFR website, Contracts Register.
14/05/23	FOIA 2138	Incidents at a specific address from 01/01/22 to date and reasons for SYFR call outs.	2	Complete response	31/05/23	1.5	
16/05/23	FOIA 2139	Firefighter pre-employment checks, criminal records policy, convictions, DBS checks, offences which bar an individual from being a FF.	6	Complete response	19/05/23	3	

05/06/23	FOIA 2140	Pride month events organised, sponsored and associated costs including merchandise.	4	Complete response	21/06/23	1	
08/06/23	FOIA 2141	Any / all information held on fire safety for a building.	19	Fees Notice expired	05/07/23	8	Some information provided
09/06/23	FOIA 2142	Travelling in non-operational and operational vehicles and PPE during the Covid pandemic.	12	Complete response	03/07/23	3.5	
12/06/23	FOIA 2143	CEO, HR Director, workforce productivity, performance and analytics and data roles.	4	Complete response	10/07/23	1.5	
12/06/23	FOIA 2144	Invoices not paid within 30 days for last 6 financial years including individual supplier details and processing dates.	13	Fee's Notice	21/07/23	3.5	Revised request received.
16/06/23	FOIA 2145	Number of reports of whistleblowing from 2020 to 2022 and number of serving firefighters.	4	Complete response	17/07/23	1.5	
21/06/23	FOIA 2146	Numbers of devices deployed e.g. PCs, laptops, phones, platform, ICT security procurement plans and costs.	34	Partial Response	14/07/23	2	Some information Section 21 available on SYFR website Contracts Register.
23/06/23	FOIA 2147	Number of fires caused by lithium batteries on e-bikes and e-scooters over the last 5 years	2	Complete response	10/07/23	10	
23/06/23	FOIA 2148	Number of animals/pets rescued over the last 5 years; type, date, location, times, crew.	6	Complete response	14/07/23	7	
30/06/23	FOIA 2149	Call recording, incident log and caller for a specific incident.	3	Complete response	14/07/23	1.5	
04/07/23	FOIA 2150	House fires or incidents caused by knock off phone chargers (2020 to date).	1	Complete response	14/07/23	2.5	05/07/23 Clarification requested and received.
06/07/23	FOIA 2151	Number of fires caused by EV batteries, vehicle type, cause, fire spread, injuries, batteries information June 2019 to June 2023.	8	Complete response	03/08/23	13	Some information not held.
06/07/23	FOIA 2152	Rates of pay and actual pay rates, reimbursement, compensation and documents for outstanding holiday pay rates for all ranks up to CFO, retired since and including 2020.	4	Partial response	03/08/23	4	Some information Section 12&13 fees notice.

07/07/23	FOIA 2153	Number of fires attended relating to solar / photovoltaic panels from 2010 to date.	1	Complete response	14/07/23	2	
10/07/23	FOIA 2154	Finance & HR payroll software contracts, number of users, value and dates.	19	Partial Response	04/08/23	3	Some information Section 21 available on SYFR Website Contracts Register
11/07/23	FOIA 2155	NDA's signed by current, former and female staff and amounts 2020-2022 and 01/01/23 - 01/03/23.	3	Complete response	14/07/23	1	
11/07/23	FOIA 2156	Historical fire incident data for a specific site (1900 to date).	7	Complete response	14/07/23	3	12/07/23 Clarification requested and received.
17/07/23	FOIA 2157	Fire safety, cladding and waking watch information for a building.	3	Complete response	11/08/23	2	
18/07/23	FOIA 2158	DIM training, body worn cameras, talogy, scanning, DM and website contracts.	8	Complete response	03/08/23	2	
18/07/23	FOIA 2159	Call signs and registration plates or all SYFR vehicles.	1	Refusal Notice	19/07/23	1	Section 24 National Security
20/07/23	FOIA 2160	Electronic plans, design & materials used for external walls of high rise buildings in South Yorks received in 2022 and 2023,	2	Fee's Notice	09/08/23	1.5	
21/07/23	FOIA 2161	Complaints from staff and public including sexual harassment and assault 2017/18 to date.	5	Complete response	18/08/23	15	
22/07/23	FOIA 2162	Number of operational staff from CFO to FF and Control Staff numbers by rank.	15	Complete response	09/08/23	1.5	
25/07/23	FOIA 2163	DBS Service Provider.	1	Complete response	03/08/23	1	
28/07/23	FOIA 2164	Number of wildfires, size, cause, date, location 2017-2023. Specialist equipment purchased, planned purchase in the last 5 years, annual cost by year from 2017.	8	Complete response	16/08/23	10	



<b>SOUTH YORKSHIRE FIRE &amp; RESCUE AUTHORITY</b>	
Meeting	<b>AUDIT &amp; GOVERNANCE COMMITTEE</b>
Meeting Date	<b>20 NOVEMBER 2023</b>
Report of	<b>CHIEF FIRE OFFICER &amp; CHIEF EXECUTIVE</b>
Report Sponsor(s)	<b>DEPUTY CHIEF FIRE OFFICER, DIRECTOR OF SERVICE DELIVERY</b>
Subject	<b>COMPLIMENTS AND COMPLAINTS MONITORING REPORT</b>

## **EXECUTIVE SUMMARY**

Members are provided with a summary of compliments and complaints received during the 6-month period 1 February 2023 to 31 July 2023.

Receiving compliments and recognising a job well done and taking the time to acknowledge someone's efforts, is one of the ways in which the Service is working towards 'Our Story' and aspirations to be a great place to work, to put people first and strive to be the best in everything we do.

The Service recorded 30 externally received compliments, a 58% decrease from the previous 6-month period (71). 14 compliments mention attendance and quality of work of staff, 11 related to visits and events attended by the Service, 3 for rescues of people or animals or assisting other services and 1 each for staff conduct and appearance and donations and charitable works.

Complaints received from the public are regrettable and give the Service the opportunity to review our work and how we can improve. Over the same period, the Service initially received 21 complaints from members of the public, of these 1 complaint was withdrawn, 2 complaints transferred to the People and Culture and 1 to Community Safety leaving 17 complaints to be processed. This is a 21% increase compared with the previous 6 monthly reporting period (14). 6 complaints were upheld, 1 partially upheld, 10 complaints not upheld. South Yorkshire Fire and Rescue Authority received no complaints.

Of the 17 complaints processed, 8 complaints were about operational incidents, 3 personnel, 2 vehicle/driving and 1 each for administration, Business Safety, Community Safety and miscellaneous. 9 complaints related to the Sheffield area (including HQ, Training and Development Centre), 2 each for Rotherham and Barnsley and Doncaster, 1 covered more than one area and 1 where no location could be assigned. We were able to provide 14 of the 17 complainants with a response within the 20 working day target with 3 taking 21, 25 and 37 days.

## **RECOMMENDATION(S)**

Members are recommended to:-

- a) Note the number of compliments received
- b) Note the increase in the number of complaints received and processed

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## **CONTENTS**

Main Report

## BACKGROUND

1. The Service's 'Our Story' includes our aspirations to be a great place to work, to put people first and strive to be the best in everything we do. Recognising a job well done and taking the time to acknowledge someone's efforts is a great way of bringing this to life and making the most of daily interactions and informal thanks. The Service publishes internal compliments and thanks from teams and individuals in the Bulletin weekly staff communication. Additionally in May 2023, the Service introduced a new internal Intranet landing/home page, which includes a 'Kudos' space where staff can internally show thanks to a colleague(s) for a job well done.
2. We receive many compliments and messages of thanks at the time the Service carries out its essential work supporting the communities of South Yorkshire. This could be at an emergency incident, completing a home safety check and fitting smoke alarms for our most vulnerable members of the community or circulating information on our social media platforms.
3. External compliments are received via our customer focused communication facilities: website online form, dedicated customer care email address and telephone number. These are acknowledged and passed to the individuals being thanked and wider to the Service via the Bulletin notifications. From February to July 2023, 30 external compliments were received via social media, emails, telephone and the SYFR website form and every compliment is assigned a category, a summary is provided below.

Category	Feb 22 – Jul 22	Aug 22 – Jan 23	Feb 23 – Jul 23
A: Conduct & Appearance of Staff	6	0	1
B: Efficiency (speed of attendance, work and manner)	56	61	14
C: Visits, Open Days and Events	9	7	11
D: Humane (rescue of people or animals or assisting other services)	4	3	2
E: Donations and Charitable Works	3	0	1
<b>Total</b>	<b>78</b>	<b>71</b>	<b>30</b>

4. The Service has also communicated 34 bulletin and 25 Kudos internal thanks, including thanks for providing support, training, individual pieces of work and congratulations on achievements.
5. A selection of external compliments and extracts of the kind words provided for the diverse work and support SYFR delivers to the communities of South Yorkshire is provided below.

### February 2023

Email thanks from multi agency partners for the Wildfire Exercise attendance at Hatfield Moor:  
*"This was a multiagency Wildfire exercise at Hatfield Moors that involved Humberside Fire Service, Natural England, Doncaster Council and the Environment Agency – thank you to all crews attended for their efforts"*

A voicemail received from a member of the public to say thank you to a crew who attended their address.

*"I just want to thank the fire service. I was unconscious in my flat for 24 hours. It was the fire service who were able to help my friends and climb in over the balcony to rescue me. They then got me to hospital. Please pass on my grateful thanks."*

**March 2023**

A phone call received from a member of the public for a ring removal assistance.

*"Thank you for attending our property and removing a wedding ring, please pass our thanks to the officer in attendance".*

Email thanks received from a member of the public for our assistance in gaining entry to their elderly parent's home.

*"Three officers came in response to a 999 call when I had been unable to get into my Dad's house. The key was inside the lock and there was no answer. The officer in charge was highly efficient, clear in his communication with me as to what needed to be done to gain entry. He was caring and respectful and very calming. It was evident that every decision made was with respect to my Dad's home, whilst at the same time being proactive to solving the problem. Fortunately, the outcome for my Dad was positive. I have had time to think about that night and realise what an incredible team you have. Each of the men were professional, polite and efficient. Both my Dad and I are so grateful to all of them. The Officer in charge is a true leader. He took charge and dealt with everything until he was satisfied that everything was safe and secure after the event for my Dad. He was also respectful, caring and reassuring to me. Thank you to this team and for everything you all do"*

**April 2023**

An email of thanks from a Team Leader at Yorkshire Ambulance Service for a crew.

*"I'd just like to say a massive thank you on behalf of my staff from Yorkshire Ambulance Service for the support we got from the Watch Manager and crews for our Investment Day. The staff really enjoyed interacting and it was great to see input from everyone present ..... it was great to see the interaction with lots of questions being asked from both sides. I'm sure this will give our crews the confidence to interact more when working on jobs together"*

A message of thanks from a member of the public following a chimney fire at their property.

*"I would like to thank the crews [x3] who attended an incident at a property at the weekend. When speaking to Fire Community Safety Officer earlier this week [the homeowner] said the firefighters who attended were so understanding and they could not thank them enough for their time, effort and kindness".*

**May 2023**

A message of thanks from Assistant Chief Constable SY Police to all staff involved.

*"I wanted to send you a quick note of thanks to express our gratitude for the first class support South Yorkshire Fire & Rescue once again offered in the efforts to find missing child". It is always acutely worrying when someone so young goes missing..... It is always enormously reassuring when we reach out and this quickly becomes a multi-agency joint effort". Thankfully as a result of our joint efforts the child was found and returned to the care and support they needed. Your continued support and the efforts of your team are always appreciated".*

An email of thanks from the District Nursing Team for a crew who assisted with a palliative patient.

*"They were AMAZING!! They lifted our patient safely into their bed, made him comfortable and then proceeded to complete a fire risk assessment and fit additional fire alarms. Other services declined our request for assistance but thanks to Green Watch our palliative patient remains in his home with his wife where he hopes to stay for the duration of his care. Not only were we grateful of their assistance to the District Nursing Team, the gentleman and his wife were truly appreciative too".*

**June 2023**

An email thanks from a parent and resident for the professionalism the crews shown during an incident attendance.

*"I would like to extend my gratitude to your Firefighters who attended an emergency to a tractor and trailer that had caught fire in a field. I have a son who is obsessed with fire engines and he saw your colleagues outside of our window re-filling their tanks after they had dealt with the emergency. Not only were your staff very dirty and tired but they made the absolute effort to acknowledge my son and wave to him. We eventually headed outside where he was starstruck seeing the fire engine (in real life) and the firefighters hard at work. When they*

*eventually had to leave they not only waved to my son but made a little a siren noise for him to hear as they drove off. My little boy was so happy. Not only did they attend an emergency but they also acknowledged a little fan on their route home. I would like to thank your colleagues for making a little persons day. Even when they were tired and hot and dirty”.*

A message of thanks received from a member of the public for a crew when they attended a road traffic collision.

*“We are grateful for the attendance and would like to make aware that a female Firefighter on scene stayed with the casualties and kept them calm until ambulance arrives”.*

A letter of thanks received from a resident affected by a grassland fire.

*“Just a brief note to say a huge and well deserved thank you to crews when they attended and dealt with the fire incident, very quickly and efficiently with two successive grassland fires at the rear of our and neighbours’ properties on the evening (of the incident date). We were very impressed with the speed of response from SYFR so once again, big thanks to all involved!”.*

### **July 2023**

An email of thanks from Independent Chair of Safeguarding Adults Board for YFR Safeguarding Officers when they attended a Safeguarding meeting in Rotherham.

*“I would like to send my personal thanks to you for all your contributions and support to the Rotherham Safeguarding Peer Review this week. Your insights together with the feedback from the review team will be vital as we draw up our improvement plan together.”*

A message of thanks from a member of a public for our attendance at a LGBT Pinknic event held in Sheffield City Centre.

*"I would just like to say thank you to one of your staff - unfortunately I don't know their name. I went to Sheffield Pinknic last Saturday and all the firefighters who attended were so nice and helpful, but one person in particular was absolutely wonderful. This person made my day and made me feel so much better about everything."*

A message of thanks received from a volunteer who has gone on to achieve employment:

*"My time spent volunteering with South Yorkshire Fire Service has been incredibly rewarding, and I have gained valuable experience and developed new skills during my tenure here. I am grateful for the support, guidance, and camaraderie I have received from the entire team. I genuinely appreciate the friendships I have made, the experiences I have had, and the growth I have achieved during my time as a volunteer at South Yorkshire Fire Service. It has been an honour to work alongside such passionate individuals dedicated to making a positive impact. I would like to take this opportunity to express my heartfelt thanks to all members of the team for their collaboration and encouragement. I will cherish the memories and the valuable lessons I have learned during my time here."*

## **SERVICE COMPLAINTS**

6. The Service Complaints Policy provides a structured way for the public to express a comment, concern or a complaint and for these to be processed consistently. Similar to compliments, complaints can be received at the point of service delivery, via the customer care email address and telephone number, the SYFR website online form or via social media.
7. A complaint is defined as any expression of dissatisfaction about any service provided by SYFR that requires a full investigation followed by a form of response.
8. There are 4 stages of resolution under the Complaints:
  - Stage 1 – Complaint resolved at the point of service delivery
  - Stage 2 – Complaint resolved by the Customer Care Team or Investigating Officer
  - Stage 3 – Complaint resolved by the Chief Fire Officer
  - Stage 4 – Complaint resolved by the Local Government and Social Care Ombudsman

9. Where someone expresses a concern, a worry or wishes to express a comment which does not initially appear to fall within the definition of a complaint, the Service will contact the person to clarify whether or not they are seeking to make a complaint, what their expectations are, how we can put things right or if no further action is required. If these are resolved at first point of contact/delivery, they are recorded under Stage 1 of the Complaints policy. If not, the Information and Governance Team (Customer Care) work with Investigating Officers to look in the concern with an aim to provide positive and acceptable responses.
10. The Service initially received 21 complaints from members of the public, of these 1 complaint was withdrawn, 2 complaints transferred to the People and Culture and 1 to Community Safety leaving 17 complaints to be processed. The Authority received no complaints within this reporting period.
11. A summary of the various channels through which complaints have reached the Service during the 6 month period 1 February 2023 to 31 July 2023. Earlier 6 month reporting periods are provided for comparison.

Category	Feb 22 – Jul 22	Aug 22 – Jan 23	Feb 23 – Jul 23
Customer Care Line	1	2	2
Other telephone	9	6	4
Customer Care e-mail	3	2	6
Other e-mail	2	1	1
Letter	1	0	0
Website online form	4	3	3
Social Media	1	0	0
In Person	0	0	1
<b>Total</b>	<b>21</b>	<b>14</b>	<b>17</b>

12. Every complaint is assigned to a category

Category	Feb 22 – Jul 22	Aug 22 – Jan 23	Feb 23 – Jul 23
Personnel	9	2	3
Vehicle/Traffic	2	4	2
Operational	3	5	8
Admin	0	1	1
Community Safety	3	0	1
Business Safety	0	0	1
Miscellaneous	3	1	1
Not SYFR	1	1	0
<b>Total</b>	<b>21</b>	<b>14</b>	<b>17</b>

13. Below is a summary of complaints received by District.

District	Feb 22 – Jul 22	Aug 22 – Jan 23	Feb 23 – Jul 23
Barnsley	3	1	2
Doncaster	5	2	2
Rotherham	5	1	2
Sheffield	5	8	9
Various (more than 1 area)	0	0	1
Not known	2	1	1
Not SYFR	1	1	0
<b>Total</b>	<b>21</b>	<b>14</b>	<b>17</b>

## SUMMARY OF COMPLAINTS RECEIVED

14. When a complaint is received the Information and Governance team may ask the complainant how they wish to progress their complaint, informally (Stage 1) or formally (Stage 2). 6 complaints were processed at Stage 1 and 11 at Stage 2.
15. Sometimes complainants explain they do not wish to receive a response to their concerns, nevertheless they are reassured that SYFR will review their concerns. For all others, a response is provided to the person explaining the outcome of our findings.
16. We endeavour to provide an initial acknowledgement within 3 working days and a full response within 20 working days. Of the 17 complaints, 12 received an acknowledgement within 3 working days, 1 was delayed taking 12 days and 1 complaint was anonymous. 1 complaint received a full response within the 3 days and 2 took longer than initially thought, 7 and 12 days to provide a full response.
17. 14 of the 17 complaints met the 20 working day response with 3 complaints taking 21, 25 and 37 working days to complete.
18. 6 complaints were upheld, 10 complaints not upheld and 1 complaint partially upheld; a summary of the 17 complaints received and processed is provided below.

<b>Nature of complaint received from members of the public and outcome</b>
<i>Complainant reported inappropriate comments from a member of staff to a member of their family following a collision with a SYFR vehicle.</i>
Resolved at Stage 1. No evidence was found to support the complaint and the crew had followed procedures and collected insurance information. The crew were reminded of `Our Story` and members of the public may have hidden disabilities. The complaint was not upheld.
<i>Complainant was unhappy with the time taken to provide some information since their retirement from the Service.</i>
Resolved at Stage 2. The Investigating Officer identified that the complainant had received information on their retirement and this was provided again. The complaint was not upheld.
<i>Complainant unhappy with visits carried out by Community Safety and Business Safety to their privately rented property after reporting a lack of fire alarm testing.</i>
Resolved at Stage 2. The Investigating Officer found that Officers had followed correct procedures when carrying out inspections to the property. The complainant was consistently supported by the Information and Governance Team, whilst the investigation was ongoing. The complaint was not upheld.
<i>Complainant reported the driving of a fire appliance round a corner, straddling both sides of a weight restricted road without sirens or lights with dash cam footage.</i>
Resolved at Stage 2. The complainant was unable to provide footage. The Investigating Officer visited the road which covered 3 villages and was unable to identify a SYFR vehicle travelling in the vicinity. Due to lack of evidence the complaint was not upheld.
<i>Complainant unhappy that a member of SYFR staff had provided a statement to be used in litigation for building safety issues.</i>
Resolved at Stage 2. The Investigating Officer found that this was a private matter and the member of staff had stated their role and work location within a statement. The staff member formally withdrew their statement from a court record and an apology was sent to the complainant. The complaint was upheld.

<i>Complainant unhappy they had been asked to leave their flat when the fire alarm was sounding, why had they been made to complete a form and they felt humiliated.</i>
Resolved at Stage 2. The complainant was called and an explanation provided. When crews arrived the complainant's apartment was indicated on the AFA panel so they were asked to evacuate to enable staff to investigate. The form was a post incident standard procedure to ensure people are informed along with a home fire safety check. Reassurances were provided that at no point was their reputation tarnished as it was found that 2 buildings were having multiple AFA panel actuations and all apartments visited in similar circumstances would be offered a home safety check. The complaint was not upheld.
<i>Complainant unhappy with conversation conducted outside their home between staff members and a partner agency following a home safety check at their property.</i>
Resolved at Stage 2. The Investigating Officer found that a professional discussion had taken place outside the property, which included details of the visit and future work and this should have been undertaken in a confidential and private setting. An apology was provided to the complainant and the complaint was upheld.
<i>Complainant unhappy with manner of crew previously visiting their business and relayed whilst a second visit was taking place with a different member of staff.</i>
Resolved at Stage 1. The complainant received an apology telephone call from the Station Manager and guidance was provided to the crew. The complaint was upheld.
<i>Complainant unhappy with questions and comments made by staff when carrying out a safe and well visit to their home.</i>
Resolved at Stage 2. The Investigating Officer found evidence to support the complainant's concerns. Information was passed to People Services for further investigation under internal processes. An apology was provided to the complainant and the complaint upheld.
<i>Complainant unhappy with complaints department and Investigating Officer in relation to information they had been provided for their previous complaint and it was inaccurate.</i>
Resolved at Stage 2. The Investigating Officer was able to identify additional details from a complex set of information and that there was no malicious intent from all staff involved. The information was provided in full to the complainant and the complaint partially upheld.
<i>Complainant unhappy a crew had broken a security gate to gain access to a site where a fire had been reported.</i>
Resolved at Stage 1. The complainant was called and provided with an explanation of the actions of the crew entering the location to locate any risk to life or property. The complaint was not upheld.
<i>Complainant unhappy with the flying of the PRIDE flag at a fire station.</i>
Resolved at Stage 1. An explanation of the government flag flying information was provided to the complainant with a link to this information. The complaint was not upheld.
<i>Complainant reported the driving of a vehicle on a specific road.</i>
Resolved at Stage 2. The Investigating Officer identified a SYFR vehicle in the location and attempted to gather more information from the complainant. Due to no response received and lack of evidence, the complaint was not upheld.
<i>Complainant unhappy with behaviour and comments by staff members at an incident.</i>
Resolved at Stage 2. The Investigating Officer found the crew had conversations with residents around `controlled burning` in relation to the garden fire, which included laughter which could have been misinterpreted. An explanation of comments, laughter and context of this was provided to the complainant. The complaint was not upheld.
<i>Complainant unhappy with how a crew had gained access to an apartment block and the external access door being held open.</i>
Resolved at Stage 1. The complainant was called and provided with an explanation and reassurance that the security issue raised would be passed to crews for if they may visit the site in the future. The complaint was upheld.

*Complainant unhappy with how crews dealt with a local flooding incident which they believed contributed to their own property being flooded by pumping from a property into the drains and that SYFR had refused to pump their property.*

Resolved at Stage 2. The Investigating Officer identified Control received 340 emergency calls in the hour with 10 flood related incidents attended due to electrics, life risk or water rescue. Information provided to Control by the complainant was flood water in a back garden and correct prioritisation of resources had been applied. It was identified that no water had been pumped from a property in to the drains and the crew unblocked the outside drains allowing water to flow away. Therefore all staff had followed procedures correctly. The complaint was not upheld.

*Complainant unhappy in receiving a `sorry we missed you` cards twice with no attempt to knock on their door whilst they were in their property.*

Resolved at Stage 2. The Investigating Officer found that a crew were in the area posting cards to properties in the location of a recent fire but they had run out of the correct type of card to encourage community safety engagement. An apology was provided to the complainant with a reassurance that organisation and delivery of a new style leaflet for fire stations was progressing. The complaint was upheld.

### **APPEALS TO THE CHIEF FIRE OFFICER (STAGE 3) / LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN (STAGE 4)**

19. One appeal was received by the Chief Fire Officer at Stage 3 of the complaints process. The complainant continued to express their dissatisfaction with the visits carried out to their rented private property by Business Fire Safety Officers and the Stage 2 complainant Investigation Officer. The Chief Fire Officer met with all staff involved and reviewed all information available. The Stage 3 complaint was not upheld and response sent to the complainant.
20. The Stage 3 appeal then progressed to a Stage 4 appeal to the Local Government and Social Care Ombudsman with the complainant citing similar concerns. Information was provided to the Ombudsman and the Service was notified of the following decision which is also published on the LGO website <https://www.lgo.org.uk/decisions/other-categories/other/23-002-830#point1>

*We will not investigate Mr X's complaint. The Fire Service investigated Mr X's concerns. Its' decision to resolve the identified issues without taking formal enforcement action or prosecution is one it is entitled to make. Without evidence of fault in the decision-making process, we cannot criticise the way the Service has decided to resolve Mr X's concerns.*

### **HMICFRS**

21. Complaint statistical data is provided by the Information and Governance Manager as part of the His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) data and information collection.

### **CONTRIBUTION TO OUR ASPIRATIONS**

- Be a great place to work-** we will create the right culture, values and behaviours to make this a brilliant place to work that is inclusive for all
- Put people first-** we will spend money carefully, use our resources wisely and collaborate with others to provide the best deal to the communities we serve
- Strive to be the best in everything we do-** we will work with others, make the most of technology and develop leaders to become the very best at what we can be



**CONTRIBUTION TO SERVICE IMPROVEMENT**

- [HMICFRS Inspection Framework e.g. Diagnostic area and/ or diagnostic questions](#)
- [SYFR Inspection report Areas for Improvement \(AFIs\)](#)
- [Fit for the Future Improvement Objectives](#)
- [Professional Standards for Fire & Rescue Services in England](#)
- [SYFR Service Plan 2023-24 Priorities](#)
- [SYFR Community Risk Management Plan 2021-24](#)

Complaint statistics are provided as part of the HMICFRS data and information collection. Compliance with internal complaint deadlines contribute towards efficiency and areas for service improvement may be identified.

**OPPORTUNITIES FOR COLLABORATION**

- Yes
- No

If you have ticked 'Yes' please provide brief details in the box below and include the third party/parties it would involve:

**CORPORATE RISK ASSESSMENT AND BUSINESS CONTINUITY IMPLICATIONS**

22. To investigate complaints and identify areas of improvement is an essential part of the Authority's overall performance and corporate governance arrangements. Reviews of performance via complaints that we received and process, provides the means through which to take remedial action where required and in doing so reduces the overall risk of failing to meet objectives and targets.

**EQUALITY IMPACT ASSESSMENT COMPLETED**

- Yes

If you have ticked 'Yes' please complete the below comment boxes providing details as follows:

Summary of any Adverse Impacts Identified:	Key Mitigating Actions Proposed and Agreed:
No potential negatives identified as there are different ways for members of the public to make complaints i.e. telephone, in person, email, on line form, translation sourced if required.	

- No
- N/A

If you have ticked 'No' or 'N/A' please complete the comments box below providing details of why an EqlA is not required/is outstanding:

**HEALTH AND SAFETY RISK ASSESSMENT COMPLETED**

- Yes
- No
- N/A

If you have ticked 'No' or 'N/A' please complete the comments box below providing details of why a Health and Safety Risk Assessment is not required/is outstanding:

A brief anonymised summary of each complaint received is forwarded to the Health and Safety Manager to assess whether further involvement is required due to the nature of the complaint; for example it may be identified within a complaint investigation that a risk assessment may be required or amendment needed.

## SCHEME OF DELEGATION

23. Under the South Yorkshire Fire and Rescue Authority [Scheme of Delegation](#) a decision \*is required / \*has been approved at Service level.

Delegated Power                Yes  
       No

If yes, please complete the comments box indicating under which delegated power.

## IMPLICATIONS

24. Consider whether this report has any of the following implications and if so, address them below:., Diversity, Financial, Asset Management, Environmental and Sustainability, Fleet, Communications, ICT, Health and Safety, Data Protection, Collaboration, Legal and Industrial Relations implications have been considered in compiling this report.

### Legal Implications

25. Some complaints may relate to damage to property (vehicles/buildings/land) and therefore are actually insurance claims on the Authority's public liability insurance. The process used by the Information and Governance team when processing these, ensures they are alert to potential legal implications and claims and will not admit liability where this may lead to legal proceedings against the Authority. An immediate admission of liability is not permitted under our present insurance cover.
26. Complaints can if dissatisfied always refer the matter to the Local Government and Social Care Ombudsman (LGO) or if the LGO declines to adjudicate, on for judicial review of either the complaint process or the activity complained of. This may evaluate the validity and strength of the complaint and decide whether there is a likelihood of success or sufficient public interest in taking the matter further.

## Diversity Implications

27. SYFR has a responsibility, under the Equality Act 2010, to deal fairly with complaints from service users and members of the community under the nine protected characteristics. Equality and diversity implications have been considered as part of the review of the Complaints Policy and the Information and Governance Team will offer assistance and reasonable adjustments to help complainants when required.

<b>List of background documents</b>		
Compliment and complaint working files		
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