



MINUTES OF THE MEETING OF THE RISK MANAGEMENT BOARD held on Tuesday, 15 March 2022 at Meeting Room 1 - Fire Service HQ, Winsford, Cheshire at 10.00 am

PRESENT:

Members:

Councillor Stef Nelson
Councillor Stuart Parker

Auditor:

Anne-Marie Harrop, Mersey Internal Audit Agency

Officers:

Alex Waller (Chair), Deputy Chief Fire Officer
Andrew Leadbetter, Director of Governance and Commissioning
Steve Barnes, Head of Operational Policy and Assurance
Lee Shears, Head of Prevention and Protection
Louise Willis, Planning, Performance and Risk Manager
Chris Astall, Planning, Performance and Risk Officer
Joanne Cartledge, Planning, Performance and Risk Officer
Tony McCourt, Station Manager
Emilie Salkeld, Governance Officer

1 APOLOGIES

Apologies were received from:

Wendy Bebbington, Head of Finance
Neil McElroy, Group Manager
Tony O'Dwyer, Group Manager

2 NOTES FROM THE PREVIOUS MEETING

The notes from the previous meeting on 12th October 2021 were presented to the Risk Management Board and the following comments and actions were noted:-

The Chair queried the timescale of retirees as quoted in the previous minutes. The Governance Officer was to clarify the timescales with the Director of Transformation.

The Head of Prevention and Protection provided a brief update on the commitment to install sprinklers by housing providers. He advised that 17 high rise buildings from a total of 21 across Cheshire East, Cheshire West and Chester, Halton and Warrington have committed to retrofitting sprinklers. One more high rise building in Warrington was in the planning phase for the fitting sprinklers. Members praised the progress that the Protection team had made to secure the commitment by housing

providers to fit sprinklers.

The Chair confirmed that the Heads of Department had revised the wording around risk 2033 – Covid-19 and the Assistant Chief Fire Officer had updated the overarching risk mitigation. A Member queried whether consideration was given to a new variant discovered in China. The Chair explained that the Service's guidance was in line with Government advice and the Service had taken a risk adverse approach throughout.

The Head of Operational Policy and Assurance confirmed that a new risk had been entered on the departmental risk register to reflect the lack of capacity for driver training and assessment.

The Head of Prevention and Protection advised that the number of staff leaving the Protection department had been added to the departmental risk register. The current risk needed to be refined, mitigation documented and include a threshold to ensure there is enough competence within the team.

It was confirmed that risk 1008 – McCloud/Sergeant Judgement – Pension Case, had been given further detail to mitigate each element held within the risk.

3 REVIEW OF STRATEGIC RISK REGISTER

The Planning, Performance and Risk team introduced the risk register and provided an update for each risk. The following observations were made: -

806 – ESCMP

It was noted that there had not been any confirmation from the Home Office on the detailed costs and funding arrangements for the programme. Therefore, the lack of detail meant that the risk could not be reduced.

The Head of Operational Policy and Assurance advised that the regional post had been removed. This meant that the feedback and communication between the North West and the Home Office was less clear.

376 – Fire in Iconic Heritage Building

The team advised that the risk was previously red and had been reduced to amber but there were no plans to reduce the risk further.

A Member queried whether the Service had considered historic buildings outside of Chester and requested that an update be brought to the next Risk Management Board meeting. The Head of Prevention and Protection advised that the Heritage Officer conducted his work across Cheshire.

The Heritage Officer was working with the Operational Policy and Assurance team on the large-scale operational exercise taking place on 9th May which would test the Service's capabilities if a fire broke out along the Chester Rows. Members were

invited to the event.

ACTION:

- [1] the Head of Prevention and Protection to produce a summary of the work of the Heritage Officer concerned with the heritage buildings across Cheshire be submitted to the next Risk Management Board meeting on 11th October 2022.**

2046 – Funding Uncertainty

The Planning, Performance and Risk Manager advised that the Service Management Team and the Fire Authority were aware of the financial situation.

995 – Fire Pensions – Increase in employers contributions to firefighter pensions and 1008 – McCloud/ Sergeant Judgement – Pension Case

The Board was assured that the all the financial risks relating to the two risks were covered in the strategic risk register.

2035 – Blue Light Collaboration

The Chair explained that following the recommendations from internal audit, the Joint Service Management Board (JSMB) had been established. The JSMB met quarterly to analyse performance against departmental plans. The Deputy Chief Fire Officer and Deputy Chief Constable jointly chaired the JSMB.

The Director of Governance and Commissioning advised that outstanding issues would be considered by the Blue Light Executive Board and progressed in the next few months.

2033 – Covid-19

The Planning, Performance and Risk Manager advised that some activities were not operating at full capacity, so the risk score remained at an amber level. The Chair requested that the risk be challenged as most departmental activity was now operating business as it would have pre-Covid.

2051 – External Audit Market

The risk was recommended for closure by the Head of Finance as an agreement had been made through the PSAA and the work was underway.

ACTION: That

- [2] Risk 2051 – External Audit Market be closed from the strategic risk register.**

4 OPERATIONAL AND CORPORATE SERVICES RISK MAP

The Planning, Performance and Risk team introduced the report which presented a high-level overview of the Service's organisational risk profile concentrating on the 'red' risks.

The Head of Prevention and Protection advised that a new risk had been created for the Prevention department to reflect the shortfall of fire protectors which could affect operations. He advised that risk was being mitigated by managing the number of safe and well visits due to be completed daily to catch up on the number of missed appointments due to Covid-19. The Prevention team had considered sourcing smoke detectors from another supplier. However, due to a component shortage, the cost of other smoke protectors was more expensive.

The Planning, Performance and Risk team advised that the HR Business Partner had provided an overview of organisational staffing levels after publication of the Risk Management Board agenda. The Board considered the most effective ways to report staffing levels. The Chair explained that operational staffing is reported quarterly to consider skills gaps and recruitment. The Head of Prevention and Protection explained that the Prevention department was undergoing a review following a shortfall of safety advocates.

The Chair noted the red risks which fell under Transformation. He requested that the Planning, Performance and Risk team rephrase the risk descriptions to accurately reflect the issues associated with the McCloud/Sergeant judgement.

The Planning, Performance and Risk Manager informed the Board that the risk score for Cybersecurity could increase as a result of the Russian invasion of Ukraine. The Director of Governance and Commissioning advised that he was in regular contact with the IT department to with a view to mitigate the risk wherever possible. An exercise was recently conducted on weak passwords and further consideration was being given to the business continuity plans for working without IT.

RESOLVED: That

[1] the Organisational and Corporate Services Risk Map be noted.

ACTION: That

[1] the Planning, Performance and Risk team rephrase the Transformation risk; and

[2] an update on the risks relating to Smoke Detectors and Cyber Security be submitted to the next meeting of the Risk Management Board.

5 RISKS BELOW THE THRESHOLD REPORT

The Planning, Performance and Risk team presented the report which highlighted the corporate risks that fell below the corporate risk threshold but which had the potential to escalate. The following observations were made: -

616 – Failure to maintain up to date operational risk information (SSRI)

The Head of Operational Policy and Assurance clarified the risk related mostly to being unable to attend business premises rather than being a problem with resource availability. He provided an update on the number of outstanding SSRIs completed and the Board agreed that the risk scoring should be reviewed to reflect the small number of outstanding visits.

853 – On Call Availability – Failure to maintain On Call availability

The Chair advised that there had been some issues with retention and significant recruitment activity was still being resolved. He stated that the Integrated Risk Management Plan includes a review of fire cover which would consider the future of the on call arrangements.

2053 – Consistent use of M365 and Risk Management Tools

The Director of Governance and Commissioning explained that the risk related to the way Microsoft 365 was to be deployed. It was hoped that support provided to the Project Manager by Information Compliance colleagues would help to mitigate the risk. He believed the Service was taking the correct measured approach to the implementation of Microsoft 365.

A query was raised about the reporting mechanism for the risk relating to firefighter pensions and whether it sat specifically on the Pension Board risk register. It was agreed that the risks should continue to be considered at the pension board but would sit of the strategic risk register to ensure there is awareness on the matters.

RESOLVED: That

[1] the Risks Below the Threshold report be noted.

6 ANNUAL RISK MANAGEMENT REPORT

The Planning, Performance and Risk team introduced the report which demonstrated the responsibilities and activities of the Risk Management Board throughout 2021-22. The report contained information on the Risk Management Process, Deep Dive reporting and Risk Management training. It was intended for submission to the next Performance and Overview Committee meeting.

The Board welcomed the report and the Chair thanked the Planning, Performance and Risk team for its work.

RESOLVED: That

[1] the Annual Risk Management Report be submitted to the next Performance and Overview Committee meeting.

7 RISK REGISTER DEEP DIVE: PRINCE'S TRUST

The Head of Prevention and Protection introduced the report which updated the Board on the issue of funding for the Prince's Trust programmes. He explained that the programmes had seen a reduction in income as fewer young people were being recruited and there was an overspend on the budget.

A Member queried whether there were any areas that frequently recruited less the necessary number of team members. The Head of Prevention and Protection advised there was no common geographic pattern of recruitment and that programme retention had been an issue in previous years.

The Head of Prevention and Protection advised that reviews were conducted if a team was run with less than the necessary participants.

RESOLVED: That

[1] the Risk Register Deep Dive: Prince's Trust be noted.

8 ANNUAL REVIEW OF CRISIS MANAGEMENT PLAN

The Head of Operational Policy and Assurance introduced the report which detailed the revised Crisis Management Plan. He advised that recent amendments included an update on the storage of flash drives and updated contact details.

The Board queried whether the Joint Services Heads of Department had oversight of the Crisis Management Plan. The Station Manager advised that the Joint Services Heads of Department were consulted during the revision and anyone with Resilience Direct had the ability to access the plan. A question was posed about the Joint Services Heads of Department being included during the crisis management exercise.

RESOLVED: That

[1] the Annual Review of the Crisis Management Plan be noted.

9 POST COVID-19 REVIEW

The Head of Operational Policy and Assurance informed the Board that a review of the Service's response to the Coronavirus Pandemic was scheduled to take place during Autumn 2021. However, due to the new variant and imposed restrictions, the review was postponed. It was intended that the review would begin at the end of April 2022 focusing on chosen themes. The Board was advised that a report would be available at the next meeting.

RESOLVED: That

[1] A report on the Post Covid-19 Review be submitted to the next meeting of the Risk Management Board.

10 TERMS OF REFERENCE - RISK MANAGEMENT BOARD 2022-23

The Terms of Reference for the Risk Management Board 2022-23 were presented to the Board for approval. The Board noted the document and no amendments were required.

RESOLVED: That

[1] the Terms of Reference – Risk Management Board 2022-23 be approved.

11 DRAFT WORK PROGRAMME 2022-23

The Board discussed the proposed work programme for 2022-23. It was agreed that the work programme would be amended to include additional items as discussed during the meeting.

RESOLVED: That

[1] subject to the addition of the items highlighted during the meeting, the Work Programme 2022-23 be approved.