

Station Management Framework Review Assignment Report 2022/23 (Final)

Cheshire Fire and Rescue Service

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Appendix A: Assurance Definitions and Risk Classifications

Public Sector Internal Audit Standards

Our work was completed in accordance with Public Sector Internal Audit Standards and conforms with the International Standards for the Professional Practice of Internal Audit

Report Distribution

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Acknowledgement and Further Information

MIAA would like to thank all staff for their co-operation and assistance in completing this review. This report has been prepared as commissioned by the organisation, and is for your sole use. If you have any queries regarding this review please contact the Audit Manager. To discuss any other issues then please contact the Director. MIAA would be grateful if you could complete a short survey using the link below to provide us with valuable feedback to support us in continuing to provide the best service to you.

https://www.surveymonkey.com/r/MIAA_Client_Feedback_Survey

1 Executive Summary

1.1 Objective

At the request of Management, we agreed that an audit of the Station Management Framework would be conducted instead of a review of the blue light collaboration, which was under internal review. MIAA last conducted an audit against the framework back in 2018/19 and the organisation has changed considerably since then.

The Station Management and Audit Framework is an overarching framework that sets out a clear view of the plans, strategies and policies required to provide an efficient safe and effective Service Delivery Department. The Station Management and Audit Framework provides a reference document to assist in managing performance and provides the tools required to develop an effective performance management culture.

The Framework requires relevant managers working the Wholetime Duty System (WDS), Day Crewing Duty System (DCS), Nucleus Duty System (NDS), and On Call Firefighter Duty System (OCS) to undertake audits of compliance against the specified standards on a periodic basis to ensure the stations are operating in accordance with the Framework. Therefore, it places a requirement on all staff to take responsibility for adhering to the specified standards and aims to embed a culture of rigour into all areas of station and performance management.

1.2 Opinion

Substantial Assurance	There is a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently.
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1.3 Key Findings

Overall, we found near-full compliance with the Station Management Framework (SMF) requirements which were tested as part of the review. The SMF is well embedded at a Station level with Station Managers ensuring rigorous checks are completed on a daily, weekly and monthly basis and ensuring the Officer in Charge (OIC) maintains these standards through day and night shifts. However, our review found that peer-reviews (SMF reviews which are taken by other stations) were inconsistent with different formats used, and only some requiring Station Managers sign off.

Our review found full compliance with a sample of SMF standards. We completed on-site walkthroughs of the checks that are taken on a daily basis and found no issues with all standards met at the time of the review.

The following provides a summary of the key themes.

Sub Objective	Key Themes
Roles & Responsibilities	<p>Areas of good practice:</p> <ul style="list-style-type: none"> • The Station Management Framework (SMF) clearly demonstrates all of the key roles and responsibilities across the Fire Service. The SMF clearly states that the responsibilities for ensuring compliance with the Framework sits with all staff within the stations, from firefighters completing routine tasks, with oversight by Crew and Watch Managers, through to the Station Manager. • Responsibility for the yearly review of the SMF and its implementation sits with the Head of Service Delivery. The SMF was last reviewed in May 2021 with a next review due date of May 2024. • The standards were made visible on notice boards, and in folders in all four stations and were available to all staff. Discussions with Firefighters, Staff and Station Managers confirmed that the SMF and its supporting standards are well embedded at each station. • The SMF daily, weekly and monthly checks which are completed as part of the SMF sign off sheets were made available for review at all of the four stations chosen for testing. All sign off sheets were held within the main part of the station and accessible for all staff. Both 'day' and 'night' checks were adjacent to each other, and our review of the most recent 3 months confirmed that there was appropriate sign off and full completion of the sign off sheets with no missing information or signatures.
Compliance to Station Management Framework Requirements	<p>Areas of good practice:</p> <ul style="list-style-type: none"> • As part of the review, we tested compliance with the overarching requirements of the SMF, which included completion of quarterly audits, the review and sign off process at a station level, the escalation of any issues identified and completion of required local activities. (See Appendix A for evaluation). • At each of the four stations, quarterly SMF audits were completed in a timely manner and included a review of the previous audit's action plan where applicable. The form

Sub Objective	Key Themes
	<p>within Appendix J of the SMF relevant to Chester, Warrington and Widnes (Wholetime) was completed appropriately and Appendix K was used to complete for Nantwich (On-call). All stations evidenced their previous 3 quarterly audits, and no issues were identified.</p> <ul style="list-style-type: none"> Both day shift and night shift SMF Sign off sheets were clearly visible and accessible. Our review of the most recent 3 months confirmed that all four stations evidenced full sign off and evidenced a fully complete monthly SMF sign off sheet with appropriate approval from the Station Manager. These were all completed in a timely manner. All four stations evidenced that they carry out programmed training aligned to the Station Training Forecast. Watch Managers are responsible for completing the monthly qualitative and quantitative checks and this was evidenced. <p>Areas for improvement:</p> <ul style="list-style-type: none"> All 3 Wholetime stations (Chester, Warrington and Widnes) evidenced completed monthly peer review of other wholetime station watches. However, from our review it was identified that there were inconsistencies in the completion of these reviews. 1 station used a form within an excel spreadsheet, and 2 stations were using a table within a word document. It was noted that the excel spreadsheet required Station Manager comments and sign off, however the table within word did not require Station Manager approval. Our review also highlighted that the peer review template which should be used to complete the review, (stated as Appendix C within the contents of the SMF), is not included at the back of the SMF and this may be resulting in the lack of consistency. However, it was noted that the appendices C- I are available via another document outside of the policy within the corporate documents system. (Medium Risk)
Compliance with Station Management Framework Standards	<ul style="list-style-type: none"> A sample of 15 'Standards' within the Station Management Framework were selected and records were reviewed to ensure that the specific checks have been carried out. (See Appendix B for evaluation). Our review found full compliance with the standards at each of the four stations including:

Sub Objective	Key Themes
	<ul style="list-style-type: none"> - Full completion and sign off regarding Appliance A and B routines; - Review of the Appliance Defect Book with no issues identified; - Review of the Appliance Logbook with no issues identified; - Review of the Breathing Apparatus Equipment Record Book with no issues identified.; - All Breathing Apparatus Boards were in the stowage position and had been cleaned; - Nominal Roll Boards were on the appliances and had the names of the riders stated which matched the staff watch board; - Defibrillators were present on all appliances and had the 'green tick' visible at the top of the device which states the device is fully charged and ready for use; - Review of the Handover book with no issues identified; - Review of the Incident Logbook with no issues identified; - Notice Boards were neat and tidy and displaying up to date information; - PPE records were signed off on the Equipment Testing Module on PDR Pro; - Toughbook, CCTV, Sat Nav, Breathing Apparatus and Pack Set Radios were all present on the appliance and checks had been signed off on the SMF sign off sheet.

1.4 Recommendation Summary

The table below summarises the prioritisation of recommendations in respect of this review.

Critical	High	Medium	Low	Total
0	0	1	0	1

Appendix A - Compliance to SMF Requirements

Key

✓ - Fully Compliant

N/A - Test not completed / Test unable to be completed

SMF Requirement	Warrington	Widnes	Nantwich (On call Station)	Chester
<u>Audit</u> Station Managers will carry out quarterly audits to ensure that the system is being operated robustly and that associated records are maintained in a legible and accurate manner.	✓	✓	✓	✓
These audits will focus on matters found on the day of the audit, including reviewing the previous quarter's activity.	✓	✓	✓	✓
These audits will be recorded using the form in Appendix J or in the case of On Call stations the forms in Appendix K will be used.	✓	✓	✓	✓

SMF Requirement	Warrington	Widnes	Nantwich (On call Station)	Chester
<u>Sign off</u> The SMF is based on a 'sign-off sheet' system. These sheets will be displayed on a notice board adjacent to the SMF standards on each station (both sets displayed).	✓	✓	✓	✓
<u>2-2-4 duty stations</u> will complete the sheet on a twice daily basis i.e. day and night watch.	✓	✓	N/A	✓
<u>Day duty</u> stations will complete the sign of sheet once in each 24 hour period.	✓	✓	N/A	✓
<u>On-Call duty</u> stations complete a sign off sheet upon return from each operational incident. In addition the weekly sign off sheet will be completed at the end of the designated drill session.	N/A	N/A	✓	N/A
At the end of each month Watch managers on <u>all duty systems</u> will complete the monthly sign off sheet this will be checked by the Station Manager.	✓	✓	✓	✓
<u>Watch Manager and Crew Manager Responsibilities</u> Crew and Watch Managers are responsible for ensuring that the sheet is signed off at the end of each shift.	✓	✓	✓	✓

SMF Requirement	Warrington	Widnes	Nantwich (On call Station)	Chester
<p><u>WM Peer reviews</u> for wholetime duty stations</p> <p>Crew and Watch Managers (<u>Whole-time and Nucleus only</u>) are responsible for conducting monthly peer review of other watches (three subject areas to be nominated by the Station Manager noting areas of previous monthly reviews).</p>	✓	✓	N/A	✓
<p>A monthly Peer Review report (Appendix C) is to be completed after sampling three areas of performance, against the standards (Appendix L) contained within the framework. This should include areas requiring further attention and subsequent timescale set to monitor progress, this should also include areas of positive practices and opportunities to share 'best practice'.</p>	✓	✓	✓	✓
<p><u>Planning</u></p> <p>All watches will use an appropriate planning tool (such as Microsoft Outlook) to keep an accurate record of all planned activities.</p>	✓	✓	✓	✓

SMF Requirement	Warrington	Widnes	Nantwich (On call Station)	Chester
<u>Station Training Plan</u> All Station based operational personnel will carry out programmed training to include the delivery of themed practical, technical and theoretical based knowledge and skills.	✓	✓	✓	✓
On-Call Managers must work closely with their Station Manager to identify opportunities for community safety events.	N/A	N/A	✓	N/A
<u>Protection Work</u> Activities will be undertaken to support the Community Fire Protection department in enforcing the Regulatory Reform (Fire Safety) Order 2005, and reducing the number of fires in non-domestic premises through a structured programme of themed audits, feedback and dissemination of operational information through the Gen 12 Consultation Form for Operational Crews or Fire Safety staff process.	✓	✓	✓	✓

Appendix B - Sample Testing of SMF Standards

SMF Standard	Warrington	Widnes	Nantwich	Chester
Appliance A & B Routines	✓	✓	✓	✓
Appliance Inventory – Full Check	✓	✓	✓	✓
Appliance defect/missing equipment	✓	✓	✓	✓
Appliance log book	✓	✓	✓	✓
Vehicle damage report	✓	✓	✓	✓
MDT, Toughbook, CCTV and Sat Nav	✓	✓	✓	✓
BA Sets	✓	✓	✓	✓
BA board and tabard	✓	✓	✓	✓
Nominal roll board	✓	✓	✓	✓
Pack set radios	✓	✓	✓	✓
Resuscitator/Defibrillator	✓	✓	✓	✓
Hand over book	✓	✓	✓	✓
Incident logbook	✓	✓	✓	✓
Notice Board	✓	✓	✓	✓
PPE and uniform check	✓	✓	✓	✓

2. Engagement Objectives and Scope (Terms of Reference)

2.1 Objective

The overall objective was to provide assurance on the effectiveness of the controls and processes in place at a local level for compliance with the Station Management and Audit Framework. The review considered the following sub-objectives:

- Roles and responsibilities for applying the SMF have been clearly defined and are operating as intended;
- All required standards are in place, visible and known by staff;
- Sample test that required checks (daily/monthly/quarterly) have been completed;
- Duty system specific activities are clearly documented;
- Completed activities are visible at tested stations;
- Relevant information / documents from SMF activity are retained and stored appropriately.
- All relevant incident information is recorded in the Station Handover Book;
- Any actions that are identified through the SMF and audit process are completed and reported; and
- Updates and assurance on compliance with the SMF are reported within an appropriate governance framework.

2.2 Scope

The scope of the review was restricted to the following sites as agreed with Senior Management Team.

- Warrington
- Widnes
- Nantwich
- Chester

2.3 Approach

The audit was conducted at the above stations. Where necessary other supplementary work was conducted remotely. Whilst working remotely, we ensured that regular contact was maintained throughout the audit process to feedback on progress and matters arising.

Following completion of the audit fieldwork, a draft report was produced; your responses to these recommendations and a timetable for any actions to be carried out was agreed and incorporated into the final report, along with the names of staff who will be responsible for their implementation. The final report was approved by the Senior Management Team. The conclusion of all final reports is reported to the Audit Committee.

2 Detailed Findings and Recommendations

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

Watch Manager Peer Reviews

Risk Rating: Medium

Control design/ Operating effectiveness

Key Finding – All 3 Wholetime stations (Chester, Warrington and Widnes) evidenced completed monthly peer review of other wholetime station watches. However, from our review it was identified that there was inconsistencies in the completion of these reviews. 1 station used a form within a excel spreadsheet, and 2 station were using a table within a word document. It was noted that the excel spreadsheet required Station Manager comments and sign off, however the table within word did not state any need for Station Manager approval.

Our review also highlighted that the peer review template which should be used to complete the review, (stated as Appendix C within the contents of the SMF), is not included at the back of the SMF and this may be resulting in the lack of consistency. However, it was noted that the appendices C- I are available via another document outside of the policy within the corporate documents system.

Specific Risk – Inconsistent application of the Station Management Framework requirements and may result in inconsistencies across stations.

Recommendation – We recommend that all appendices which are stated at the front of the SMF document are included and made available to all relevant staff. The service should also ensure that stations are not using different formats and that all appendices are being used consistently across the Service.

Management Response - Upon the consideration of your recommendation we have reviewed the peer review audit templates, across all Fire Stations and there does appear to be an inconsistency in templates being used. Chester is currently using the correct template as per the Station Management Framework Policy (Appendix C as attached). Warrington and Widnes are using an older version as per your findings. To rectify this inconsistency with immediate effect, this will be added to the agenda for the next Station Manager's monthly meeting, where a standardisation activity will take place with all Station Managers. This will then be cascaded down to Crew and Watch Managers across all Fire Stations prior to the 2023-24 Q1 audit taking place.

Station Management Framework Sign-Off Sheets (Appendix C – I) sits alongside the main policy and this is as a result of a major review of the policy and standards in 2018 and feedback from staff. At the time of the review, it was felt that Excel was a better format for these documents and not Word, this is why they now sit outside the main policy. However, we will add a link into the main body of the policy as an action to ensure that this is made clear.

Responsible Officer – Group Manager – Cheshire East Service Delivery Manager

Implementation Date – 31st July 2023

Follow-up

A follow-up exercise will be undertaken during 23/24 to evaluate progress made in respect of issues raised. This will include obtaining documentary evidence to demonstrate that actions agreed as part of this review have been implemented.

Appendix A: Assurance Definitions and Risk Classifications

Level of Assurance	Description
High	There is a strong system of internal control which has been effectively designed to meet the system objectives, and that controls are consistently applied in all areas reviewed.
Substantial	There is a good system of internal control designed to meet the system objectives, and that controls are generally being applied consistently.
Moderate	There is an adequate system of internal control, however, in some areas weaknesses in design and/or inconsistent application of controls puts the achievement of some aspects of the system objectives at risk.
Limited	There is a compromised system of internal control as weaknesses in the design and/or inconsistent application of controls puts the achievement of the system objectives at risk.
No	There is an inadequate system of internal control as weaknesses in control, and/or consistent non-compliance with controls could/has resulted in failure to achieve the system objectives.

Risk Rating	Assessment Rationale
Critical	Control weakness that could have a significant impact upon, not only the system, function or process objectives but also the achievement of the organisation's objectives in relation to: <ul style="list-style-type: none"> the efficient and effective use of resources the safeguarding of assets the preparation of reliable financial and operational information compliance with laws and regulations.
High	Control weakness that has or could have a significant impact upon the achievement of key system, function or process objectives. This weakness, whilst high impact for the system, function or process does not have a significant impact on the achievement of the overall organisation objectives.
Medium	Control weakness that: <ul style="list-style-type: none"> has a low impact on the achievement of the key system, function or process objectives; has exposed the system, function or process to a key risk, however the likelihood of this risk occurring is low.
Low	Control weakness that does not impact upon the achievement of key system, function or process objectives; however implementation of the recommendation would improve overall control.

Limitations

The matters raised in this report are only those which came to our attention during our internal audit work and are not necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required. Whilst every care has been taken to ensure that the information in this report is as accurate as possible, based on the information provided and documentation reviewed, no complete guarantee or warranty can be given with regards to the advice and information contained herein. Our work does not provide absolute assurance that material errors, loss or fraud do not exist.

Responsibility for a sound system of internal controls and the prevention and detection of fraud and other irregularities rests with management and work performed by internal audit should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify all circumstances of fraud or irregularity. Effective and timely implementation of our recommendations by management is important for the maintenance of a reliable internal control system.

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