

Partnership Initiation

1. Please state the name of the proposed Partner and the Partner ID number (from CPS):

Click here to enter text.

2. Which strategic objective will the partnership support?

Develop the organisation:

- Ensure our workforce is competent & able to deliver our vision
- Inform & involve communities & staff in developing services & policies which are open, transparent & accountable
- Deliver value for money services, maximising community safety & minimising impact on the environment.

Protect local communities:

- Identify the people & property most at risk from fire
- Deliver campaigns & projects to reduce antisocial behaviour & increase awareness of fire and road safety
- Ensure fire safety legislation is implemented effectively.

Respond to emergencies

- Ensure plans & resources are in place to provide a flexible, efficient & resilient response to emergency incidents
- Use intelligence & data to match resources to risk & demand
- Ensure the safety of our people by providing them with the right equipment, training and skills.

3. Which of the Service Core Values does the partnership support (tick as many as apply)?

Aiming for excellence: Constantly seeking ways to improve what we do & the way we do it.

Developing & respecting our people: Valuing our people & developing their diverse range of talents, learning from all that we do.

Delivering our promise: Acting with integrity & taking personal responsibility for making the right thing happen.

Putting customers first: Ensure that our people & communities are at the heart of all that we do, striving to meet their differing needs & expectations.

Promoting equality & diversity: Embracing diversity & finding ways to improve our services & the safety & prospects for individuals & communities.

Working Together: Working in partnerships with others for the future of Cheshire & its citizens.

4. How will the partnership support the strategic objectives you have identified?

Click here to enter text.

5. Which geographical area will this partnership be in (tick all that apply):

- Cheshire West and Chester
- Cheshire East
- Halton
- Warrington
- Pan-Cheshire

6. What are the expected outcomes of the partnership? How will they be measured? (Please also record on CPS action tab)

7. What strengths and benefits will this partnership bring to the organisation?

Click here to enter text.

8. Are there any potential risks or weaknesses you can identify from entering into this partnership (please complete CPS Partnership risk tab)?

Click here to enter text.

9. Are there any gaps in current/future service provision that the partnership could support?

Click here to enter text.

10. Are there any potential threats which might face this partnership?

Click here to enter text.

11. How will this partnership promote the Service' commitment to promoting equality and diversity?

Click here to enter text.

12. What actions will you take to address the risks/weaknesses/threats identified above? (Please utilise this question to inform management of risk in the CPS risk tab).

Click here to enter text.

13. What role will the Service play in the partnership (please tick one):

- Lead** – Will co-ordinate partnership activities.

- Influence** – the Service has a key and influential role to play within the partnership and will be integral to its delivery.
- Follower** – the Service holds a less prominent role within the partnership and its involvement is based more around sharing information rather than directing or leading the partnerships activity.
- Exit** – There is no added value or benefit to the Service being in the partnership therefore the Service will not be entering into it.

14. What type of partnership is this (please tick all that apply)?

- Statutory:** Formal partnership where there is a legal duty for the Service to be involved. Requirement for co-operation between local partners to agree and deliver national or local priorities set down in statute e.g. Crime and Disorder reduction partnerships as defined in section 17 of the Crime and Disorder act 1998 or where national and local funding is directed towards achieving shared priorities and outcomes.
- Strategic:** Involves a formal agreement between two or more parties that have agreed to share finance, skills, information and/or other resources in the pursuit of common goals and to ensure resources are better allocated. The Service is clear on its role and responsibilities (formal governance arrangements in place). Co-operation is dependent on member organisations working together voluntarily (non-statutory).
- Joint Delivery:** Services are delivered jointly with other organisations. Additional capacity or efficiencies are achieved through partnership working. Responsibilities are documented in MOUS and/or service level agreements.
- Collaboration:** A voluntary arrangement providing a forum for cross agency discussion and information sharing. The Service has no direct powers or specific responsibilities to achieve outcomes.

15. What are the proposed resources and governance arrangements (i.e. people, finance and frequency of meetings and risks)?

Click here to enter text.

16. Is a MOU, partnership agreement, data sharing agreement, contract or hiring agreement required? If yes, please indicate which document(s) is required and consult with the legal department and/or Partnership Co-ordinator.

- Yes
- No

17. Are any of the following documents required in support of this partnership:

- Risk Assessment
- Equality Impact Assessment
- Financial Impact Assessment
- Environment Impact Assessment

- Business Case
- *Memorandum of Understanding (Template available in appendices)
- Service Level Agreement
- Project Initiation Document (PID)
- Licence to use premises
- Hiring Agreement
- Data Sharing Agreement (data protection/sharing checklist available in appendices)
- *Partnership Agreement (Template available in appendices)
- Contract of employment
- PAG Report
- Fire Authority Report
- Not Applicable
- Other, please state:

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18. How often do you intend to review this partnership (must be at least annually)?

Click here to enter text.

Submitted by:	Date:
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Please save this to the partnership toolkit folder located on the global drive, under your department and reference the partnership number (generated by CPS) in your file name.

Partnership Review

1. Please state the name of the Partner and the partner ID number:

Click here to enter text.

2. Which geographical area is the partnership in (tick all that apply):

- Cheshire West and Chester
- Cheshire East
- Halton
- Warrington
- Pan-Cheshire

3. Are the initial outcomes from the partnership being achieved? If so, how is this being measured? If not, how could this be improved? (please update CPS action tab).

4. What are the strengths and benefits of the partnership? What is the partnership good at, what makes it special? How has it promoted equality and diversity?

Click here to enter text.

4. Are there any potential weaknesses you can identify in the partnership? Are there any improvements that could be made? Does anything stop the partnership performing at its best?

Click here to enter text.

5. Are there any existing gaps in current/future service provision the partnership could support? What is changing in the outside world that might create new opportunities in the future?

Click here to enter text.

6. Are there any potential threats which might face this partnership? What obstacles does the partnership face?

Click here to enter text.

7. What actions will you take to address the weaknesses/threats identified above? (please utilise this question to inform management of risk in the CPS partnership risk tab).

- 8. Are the risks identified at the beginning of the partnership still present? Have any new risks been identified? (If so please record under CPS partnership risk tab).**

Click here to enter text.

- 9. What role does the Service currently play in the partnership (please select one):**

- Lead** – Will co-ordinate partnership activities.
- Influencer** – the Service has a key and influential role to play within the partnership and will be integral to its delivery.
- Follower** – the Service holds a less prominent role within the partnership and its involvement is based more around sharing information rather than directing or leading the partnerships activity.
- Exit** – On reflection, from the answers given above, there is no added value or benefit to the Service being in the partnership therefore the Service will end the partnership (please complete evaluation form).

- 10. What are the current resources and governance arrangements (i.e. people, finance and frequency of meetings and risks)? Are these likely to change?**

Click here to enter text.

- 11. Is there a joint MOU, partnership agreement, data sharing agreement, contract or hiring agreement in place? If so does this need updating?**

- Yes
 No

- 12. When will you next review this partnership?**

Click here to enter text.

Please attach any reports/case studies/outputs/outcomes reported from the partnership so far.

Submitted by:

Date:

Partnership Evaluation & Closedown

1. Please state the name of the partner and partnership ID:

Click here to enter text.

2. Which geographical area is the partnership in (tick all that apply):

- Cheshire West and Chester
- Cheshire East
- Halton
- Warrington
- Pan-Cheshire

3. Has the partnership been terminated or is there an upcoming date for termination?

Click here to enter text.

4. Have you notified/been notified by the partner that the partnership will cease?

- Yes
- No

5. Why has the partnership come to an end?

Click here to enter text.

6. Did the partnership meet the strategic objectives and core values originally set out?

Click here to enter text.

7. What were the main achievements of the partnership?

Click here to enter text.

8. Did the partnership benefit the local community and promote equality and diversity? Is there any evidence to support this?

Click here to enter text.

9. If the partnership was to happen again do you have any recommendations for improvement?

Click here to enter text.

10. Does a MOU, contract or partnership agreement support the partnership? If so are there any conditions mentioned within this that might impact termination? If so please check your documentation and complete termination in line with the terms mentioned within this.

Yes

No

Please attach any closing reports/case studies/outputs/outcomes reported from the partnership to this document.

Submitted by:

Date: