ESSEX FIRE AUTHORITY

Workforce Planning

FINAL

Internal Audit Report: 2.15/16

22 February 2016



CONTENTS

1 Executive summary			2
2 Action plan			5
3 Detailed findings			9
			19
APPENDIX B: FURTHER	R INFORMATION		21
For further information co	ontact		22
Debrief held	17 September 2015	Internal Audit team	Daniel Harris - Head of Internal Audit
Draft report issued Revised Draft report issued	13 October 2015 26 January 2016		Suzanne Lane - Senior Manager Alan Grisley - Assistant Manager Sean Little – Senior Auditor Navjeet Bhandal – Senior Auditor
Responses received	22 February 2016		Navjeet Bhahdar – Gerilor Additor
Final report issued	22 February 2016	Client sponsor	Lindsey Stafford-Scott- Director of HR and Organisational Development
		Distribution	Lindsey Stafford-Scott- Director of HR and Organisational Development Lindsay Shankland- Deputy Director of HR Mike Clayton- Director of Finance and Treasurer Glenn McGuinness- Deputy Director of Finance

As a practising member firm of the Institute of Chartered Accountants in England and Wales (ICAEW), we are subject to its ethical and other professional requirements which are detailed at http://www.icaew.com/en/members/regulations-standards-and-guidance.

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. Recommendations for improvements should be assessed by you for their full impact before they are implemented. 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. Therefore, the most that the internal audit service can provide is reasonable assurance that there are no major weaknesses in the risk management, governance and control processes reviewed within this assignment. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

This report is supplied on the understanding that it is solely for the use of the persons to whom it is addressed and for the purposes set out herein. Our work has been undertaken solely to prepare this report and state those matters that we have agreed to state to them. 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 Risk Assurance Services LLP for any purpose or in any context. Any party other than the Board which obtains access to this report or a copy and chooses to rely on this report (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM 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 our Client 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.

We have no responsibility to update this report for events and circumstances occurring after the date of this report.

1 EXECUTIVE SUMMARY

1.1 Background

Essex County Fire and Rescue Service implemented a Workforce Planning Project, as part of the Workforce Transformation Programme, in 2014/15 which aimed to introduce workforce planning processes to effectively manage the workforce. The Service has an objective, which states they will ensure their people are involved, engaged and empowered to deliver excellence. As identified in the Service Risk Register, the Service has identified a risk that they will be unable to innovate and deliver safe and effective services to their communities; if they do not have motivated and engaged people with the right skills and competencies.

The purpose of this review was to assess the planning process for workforce management and agree actions to ensure key processes had been established, this was originally planned as an assurance review, however management requested this to be advisory as workforce planning was in an early stage of development. Therefore this report has not provided a formal assurance opinion, but has identified control improvements to be implemented by the Human Resources and Finance departments.

This advisory review assessed the following areas: workforce strategy and plans; financial planning; skills gap, retirement and vacancy analysis; vacancy authorisation process; succession planning and pools; risk management processes; and governance arrangements.

The audit field work was undertaken in September 2015 which coincided with the findings reported as a result of an external cultural review. Therefore some of the findings from our review overlap with issues uncovered during the cultural review. Furthermore, we obtained additional information in January 2016 prior to the finalisation of this review which we have incorporated into our report.

1.2 Conclusion

Our review identified that a process had been commenced by the Service to identify a workforce planning framework, this is being monitored by the Workforce Planning Group. Compliance testing could not however be fully carried out as the workforce planning implementation was still in its early stages as implementation of Programme 2020 and the actions agreed from the Culture Review have taken precedence. We confirmed the following elements of the workforce planning framework had not yet been implemented:

- · Workforce plans for each department;
- Skills gap analyses;
- Vacancy analysis;
- · Succession planning for key risk roles; and
- Effective risk management.

We assessed the methodology for workforce analysis, governance structure and risk management arrangements in place, and identified significant gaps) in these areas, detailed in the findings below. Whilst we noted that the significant gaps were in part due to the Authority being in the early stages of implementing changes, improving the controls in each of these areas, will help the Service improve overall workforce management and Service performance; however there is a long way to go before the new arrangements will be fully operational and expected benefits realised.

1.3 Key findings

The key findings from this review are as follows:

- A review of the financial planning, alongside testing of the process for the authorisation of vacancies demonstrated robust controls were in place;
- The Service did not have a documented implementation plan for Workforce Planning activity; with key tasks/ programmes, implementation dates or deliverables in place. Without this plan in place, there is a risk the Workforce Planning activity will not be delivered to the required quality or within the expected timeframes. Through discussions with the Deputy Director of Finance in January 2016 we were informed that the workforce plan had been put on hold due to the outcome of the culture review and the implementation of the initiative entitled 'Programme 2020'; which aimed to align the service workforce to the service requirements of Essex, using a risk-focussed model. The findings of the culture review which were reported in September 2015 has led to the Authority agreeing to implement 35 recommendations. Some of the actions agreed feed into the Workforce Programme, therefore these actions are being focussed upon rather than creating a separate Workforce Programme. The DDoF advised us that it was unlikely that a Workforce Plan would be created until June 2016. (Medium);
- We reviewed the Departmental Strategy for Human Resources, and noted objectives had been set for reductions in both agency (temporary staffing) and overtime expenditure. Discussion with the Deputy Directors of HR and Finance confirmed that performance against workforce objectives within departmental strategies had not yet been reviewed, therefore evidence could not be provided to show the trends from the start of the financial year. Without evidence, we could not conclude if the Service had achieved these objectives. We have agreed an action with the Deputy Director of Finance (Medium);
- Whilst a process had been identified for the monitoring of early retirement, using pension data; key details of the process had not been identified. The operational lead for this process had not been selected and the process had not been rolled out to all staff, such as retained firefighters. (Medium)
- We noted that a robust methodology for implementing skills gap analyses had not been documented. Without the
 process being identified and documented, there is a risk that the objective of each analysis will not be achieved or
 inconsistent analyses will take place. We have agreed a management action with the Deputy Director of HR
 (Medium);
- We noted that the risk management processes for Human Resources and workforce were not sufficient. Mitigating controls, risk scoring and routine updates were not documented on the HR Risk Register we reviewed, raising concern that a formal risk management approach was not undertaken and is not being followed. Where risk management is not undertaken, there is a risk that key HR and workforce risks will not be identified and managed. We have not made any additional management actions, but would refer management to the actions agreed within our Risk Management audit (9.14/15). We would remind management that our risk management audit has been qualified for the previous two financial years;
- A review of the reports and minutes of the Workforce Planning Group, Strategic Delivery Board and Strategic Management Board noted that no performance measures relating to workforce were being reported at the time of the audit. However, in December 2015 a new Corporate HR report was introduced. We noted that although sickness absence, short term sick, attendance management and other case management (such as grievances) were reported there were no agreed performance measures to compare them against. We were advised by the Deputy Director of Finance that appropriate performance measures were being considered so that consistent performance reporting and benchmarking can be carried out. There is a risk that whilst performance is being reported that if there are no comparatives against previous figures and current targets that performance measuring will not be effective.

1.4 Additional information to support our conclusion

Risk	Control Compliance		Agreed actions			
	design*	with controls*	Low	Medium	High	
If we do not have motivated and engaged people with the right skills and competencies there is a risk that we will be unable to innovate and deliver safe and effective services to our communities.	3 (11)	4 (4)	2	4	0	
Total			2	4	0	

^{*} Displays the number of controls not adequately designed or complied with. The number in brackets represents the total number of controls reviewed in this area.

2 ACTION PLAN

The table below sets out the actions agreed by management to address the findings, as follows:

Ref	Findings summary	Priority	Action for Management	Implementation date	Owner responsible
			d engaged people with the r		
1.1	plan had not been drafted for the workforce tasks/ initiatives due to be	Medium	The Deputy Director of HR will document a formal implementation plan for workforce planning, detailing the following:	July 2016	Lindsay Shankland- Deputy Director of HR
	undertaken in 2015/16.		 Initiatives to be rolled out across the Service; 		
			 Responsible managers; 		
			 Start and end dates; 		
			 Key deliverables; and 		
			 Reporting arrangements. 		
1.2	Trend analysis had not been undertaken on	Medium	The Deputy Director of Finance will liaise with the Deputy Director of HR,	September 2016	Glenn McGuinness- Deputy Director of Finance
	agency or overtime spend to monitor achievement of objectives within		and identify the reporting arrangements for temporary staffing and overtime.		Lindsay Shankland- Deputy Director of HR
	the HR Departmental Strategy.		Any adverse trends will be reported to the Workforce Planning Group and Strategic Management Board.		

Ref	Findings summary	Priority	Action for Management	Implementation date	Owner responsible
1.3	Whilst a process had been identified for the monitoring of early retirement, using pension data; key details of the process had not	Medium	The HR Subject Matter Advisor will liaise with the Head of HR and ensure the following actions are completed for the high level retirement analysis:	July 2016	Jenny Dines- Head of HR
	been identified. The operational lead for this		 The Service operational lead for predictions process will be identified; 		
	process had not been selected and the process had not been rolled out to	en selected and e process had not en rolled out to staff, such as ained The prediction p will be completed retained firefight The frequency o	 The prediction process will be completed for retained firefighters; 		
	all staff, such as retained firefighters.		•		
			 The reporting lines for the statistics will be identified; and 		
			 The impact on succession planning will be considered. 		

Ref	Findings summary	Priority	Action for Management	Implementation date	Owner responsible
1.4	A skills gap analysis had not been undertaken at Essex County Fire and Rescue Service.	Medium	A skills gap analysis methodology will be drafted by the Operational Training Manager and Learning and Development Manager; and formally approved	October 2016	Moira Bruin- Operational Training Manager Claire Budgen- Learning and Development Manager
	Further investigation identified a methodology for		through the Workforce Planning Group. This will include the following:		
	this process was yet to be established.		 Who will be responsible for implementing the skills gap analysis; 		
	Furthermore, we noted through discussions with the Deputy Director		 What are the key objectives of the analysis; 		
	of Finance (HR) that a Skills Gap Analysis would be carried out as part of the Programme		 Does the service have current job specifications for all roles; 		
	2020 analysis and Workforce Planning exercise.		 What template/ steps will be used in the analysis process; 		
			 How frequent will the analysis be implemented; 		
			 How will staff be approached/ involved in the process; 		
		 How will analysis data be collated; How will training and recruitment be impacted/ prioritised following skills gap analysis; and 			
			recruitment be impacted/ prioritised following skills gap		
			 How will results be reported. 		

Ref	Findings summary	Priority	Action for Management	Implementation date	Owner responsible
1.5	The Terms of Reference for the Workforce Planning Group did not detail the responsibility for workforce risk management, or review of the HR	Low	Following a review of the Risk Management process, the Deputy Director of HR will update the Terms of Reference of the Workforce Planning Group.	March 2016	Lindsay Shankland- Deputy Director of HR
	Risk Register.		A requirement to review and monitor relevant workforce risks will be included.		
1.7	Robust key performance measures around	Low	Suitable key performance indicators will be created and included in the	October 2016	Lindsay Shankland- Deputy Director of HR
	workforce measures had not been identified for monitoring the efficiency of	vacancy and other workforce measures had not been identified for monitoring the efficiency of performance reports, for reporting purposes to the Strategic Delivery Board and the Strategic Management Board.			Glenn McGuinness- Deputy Director of Finance
	workforce management.				Tracey King- Performance Manager

3 DETAILED FINDINGS

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 audit testing undertaken.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
	If we do not have motive and effective services to			le with the right skills and competencies ther	e is a risk tl	hat we will be unable to innovate and deliver
1.1	Essex County Fire and Rescue Service has a high level Service Strategy in place which identifies the strategic	No	N/a	We were provided with the Service Strategy, and noted this provided the following: • Purpose; • Achievements to date;	Medium	The Deputy Director of HR will document a formal implementation plan for workforce planning, detailing the following: • Initiatives to be rolled out across the Service;
	objectives for the service. The strategy identifies two clear service			 Vision and steps to achieving this; and Service Objectives. We noted two of the objectives directly related		Responsible managers;Start and end dates;Key deliverables; and
	objectives related to workforce: • We will use our resources flexibly, efficiently and			to workforce. Through discussions with the Deputy Director of Human Resources (HR) that a workforce plan had not yet to be drafted, however it was due to commence in July 2016.		Reporting arrangements.
	effectively, reducing the cost of the Service to match the funding available.			We requested an implementation plan, showing when key processes were going to be rolled out. However, the Deputy Director of HR informed us that this had not yet been documented.		
	 We will ensure our people are involved, engaged and empowered to deliver excellence. 			Without a documented implementation plan, there is a risk to the Service that the elements of the Workforce Programme will not be established to the required quality or within the expected timeframe.		
	Programme 2020 is an initiative of the service,			Through discussions with the Deputy Director		

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
	and the vision is, as follows: Leading the way to a Safer Essex; in 2020 the organisation will be service led, community focussed, values driven and financially sustainable. A workforce planning strategy was yet to be developed; however the Service did not have a clear workforce planning timetable or implementation planning timetable demonstrating how the processes would be rolled out.			of Finance in January 2016 we were informed that the workforce plan had been put on hold due to the outcome of the culture review and the implementation of the initiative entitled 'Programme 2020'; which aimed to align the service workforce to the service requirements of Essex, using a risk-focussed model. The findings of the culture review which was reported in November has led to the Authority agreeing to implement 35 recommendations. Some of the actions agreed feed into the Workforce Programme, therefore these actions are being focussed upon rather than creating a separate Workforce Programme. The DDoF advised us that it was unlikely that a Workforce Plan would be created until July 2016. Whilst we have noted the reasons behind why the Authority do not currently have a Workforce Programme in place we have agreed a management action to ensure that one is created once the actions from the culture review and 'Programme 2020' have been implemented.		
1.2	At the time of the audit, the Service was	Yes	No	We selected three divisions:	Medium	The Deputy Director of Finance will liaise with the Deputy Director of HR, and identify the
	operating under the Department Strategies			Human Resources;Finance; and		reporting arrangements for temporary staffing and overtime.
	approved in 2014.			East Area Command.		Any adverse trends will be reported to the
	The Departmental Strategies were			We reviewed the Department Strategies and		Workforce Planning Group and Strategic

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
	produced in 2014 as part of the annual business planning process for 2015.			confirmed the standard template was utilised in each instance. This provided information on current achievements, visions, department objectives and an action plan.		Management Board.
	Each had been reviewed through the Strategic Management Board.			We confirmed workforce was clearly identified in each department strategy. We identified actions and success measures for each of the three department strategies selected.		
				Human Resources		
				Objective one was the completion of the SAP (Systems, Applications and Products) Development programme. We confirmed an update was provided as of September 2015, demonstrating the progress made with the SAP Programme.		
				Objective two was the development of the Workforce Planning Group. As discussed in paragraph nine of this report below.		
				Objectives three and four related to a reduction in agency and overtime spending. At the time of the review, evidence could not be provided to demonstrate a reduction. Where a review is not completed, there is a risk of overspend in both agency and overtime costs.		
				Finance		
				One of the objectives of Finance was to develop further management information on firefighter headcount, to support changes in crewing and headcount reductions.		
				We confirmed through review of reporting provided by the Deputy Director of Finance that headcount data was reported to both the		

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
				Strategic Delivery and Strategic Management Boards. This is documented in paragraph's ten and eleven below. East Area Command We confirmed this department identified the ongoing requirement to manage workforce and succession planning. However, this could		
				not be tested at the time of the audit, as succession planning and identification of pools had been put on hold centrally, due to the Service's cultural review.		
1.3	Research on natural wastage was implemented by the HR Subject Matter Advisor, and a prediction spreadsheet was used to collate pension stats and earliest leave dates for whole-time firefighters. This allowed a chart to be produced which showed a prediction of whole time workforce, should staff retire. This also included a second line for turnover. An analysis of retirement is	Yes	No	Through discussion with the HR Subject Matter Advisor and review of the subsequent report, we noted a high level analysis had been established for retirement of whole time fire fighters. We noted that head count for whole time firefighters had been forecasted, with prediction attrition through retirement and turnover. A third row was documented for actual headcount. We noted this process had been completed for whole time firefighters up to July 2015 with no subsequent updates, but was yet to be rolled out for retained firefighters. Without a clear process in place, there is a risk that forecasting will not achieve its objective. We identified the remaining actions to complete this process.	Medium	 The HR Subject Matter Advisor will liaise with the Head of HR and ensure the following actions are completed for the high level retirement analysis: The Service operational lead for predictions process will be identified; The prediction process will be completed for retainer firefighters; The frequency of updates will be communicated; The reporting lines for the statistics will be identified; and The impact on succession planning will be considered.
	implemented by HR, to support the succession planning and pool processes.			We confirmed a separate analysis had been implemented, on an individual basis; to identify eligibility for early retirement. This covered ranks SDO to Station Officer.		

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
	The succession planning process has been put on hold			However, as the Service was in the process of consulting with trade unions, this had not yet been utilised.		
	following the culture review.			We were provided with a retirement analysis spreadsheet, which demonstrated HR has		
	The process for identifying key risk roles within the Service will commence following			actively been reviewing the age and length of service of staff. In line with this, the succession process has been developed to ensure a pool is established for key risk roles.		
	the completion of workforce plans.			At the time of the audit, further succession planning or critical role identification had not been put into practice.		
1.4	At the time of the audit, skills gap analyses had not been undertaken.	No	N/a	We confirmed through discussion with the Deputy Director of HR, that skills gap analyses had not yet been undertaken.	Medium	A skills gap analysis methodology will be drafted by the Operational Training Manager and Learning and Development Manager, and
	As part of the annual planning process,			We requested any methodology or planning documents in place for the skills gap analysis.		formally approved through the Workforce Planning Group.
	managers are responsible for			We were informed that this was yet to be drafted.		This will include the following:
	identifying gaps in skills and knowledge within			Where a robust methodology is not identified for assessing the skills of the workforce, there		 Who will be responsible for implementing the skills gap analysis;
	their teams and the risks that this may have			is a risk that the competencies required for		What are the key objectives of the analysis;
	on service delivery. Upon identification,	roles will not be reviewed appropriately resulting in operational risks.	rvice delivery. rvice delivery. resulting in operational risks.		 Does the service have current job specifications for all roles; 	
	skills and knowledge development required is highlighted in the submitted workforce plans for submission to			Additionally, where skills gaps are not identified, this will adversely affect the training programme in place.		 What template/ steps will be used in the analysis process;
				Furthermore, we noted through discussions with the Deputy Director of Finance that a		 How frequent will the analysis be implemented;
	the Learning and Development Manager for inclusion in the			Skills Gap Analysis would be carried out as part of the Programme 2020 analysis and		 How will staff be approached/ involved in the process;
	Learning and			Workforce Planning exercise.		How will analysis data be collated;

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
	Development Annual Plan.					 How will training and recruitment be impacted/ prioritised following skills gap analysis; and
						How will results be reported.
1.5	At the time of the audit, the service had not established a robust	No	N/a	We reviewed the HR Risk Register and Service Risk Registers, and noted these had captured workforce risks.	N/a	Please refer to our Risk Management audit (9.14/15)
	process for risk management. Discussion with the Corporate Risk and			However, controls had not been documented and residual risk scoring had not been utilised. The registers did not have a field to allow managers to provide updates on risks.		
	Business Continuity Manager indicated that following the risk management audit in July 2015, a comprehensive review	Continuity Discussion with the Corporate Risk Business Continuity Manager noted meetings had been arranged with le for September 2015 to address con the risk registers	Discussion with the Corporate Risk and Business Continuity Manager noted that meetings had been arranged with leads in HR for September 2015 to address concerns with the risk registers.			
	of risk management was in the process.			A risk register was not provided for East or West Area Command. Discussions with the Corporate Risk and Business Continuity		
	The service has a HR Risk Register which identifies nine risks.			Manager indicated these were not in place. Where workforce risks are not adequately		
	Each have been given a rating, and assigned a risk owner. Each risk has a brief description,	documented and managed, there is both operational, through loss of service, and financial risks, through overspending, to the				
	trigger and impact. Risk SSHR0007 details a failure for the Service to undertake effective workforce planning. This has been assigned			We agreed key management actions to improve the risk management process within our Risk Management audit report, finalised in July 2015. Management will recall that the risk management reviews of 2013/14 and 2014/15 concluded a qualified opinion in both years, with significant weaknesses in the ongoing		

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
	to the Deputy Director of HR.		documentation to demonstrate that key risks were in fact being managed and mitigated effectively.			
	Residual scoring, controls and assurances alongside commentary were not documented within the register.			We have not made any additional actions in this report and have a planned risk management review in Q4 2015/16, but reinforce that the management actions agreed in the 2014/15 risk management audit need to be applied consistently across the service, including Human Resources.		
1.6	The Workforce Planning Group is charged to provide governance over the establishment to ensure financial efficiency and enable the service to make changes to the establishment to meet organisational and operational requirements.		No	The Workforce Planning Group Terms of Reference was reviewed, and it was found to document the key roles and aims of the Group, which includes:	Low	Following a review of the Risk Management process, the Deputy Director of HR will update the Terms of Reference of the Workforce Planning Group.
				 Provision of strategic guidance over the establishment control process. 		A requirement to review and monitor relevant workforce risks will be included.
				 Receive, review and approve/reject business cases for recruitment. 		
				 To ensure budgets are in place to financially cover approved business cases. 		
	This includes: • Ensuring staffing levels and budgeted posts are agreed and set through an effective budget setting process agreed with Finance.			 However, this does not include responsibilities in relation to workforce risk management or review of the Risk Register. 		
				We also confirmed from a review of minutes for the current financial year that the group was fulfilling its role and responsibilities.		
	 Identifying, 					

Ref	Control	Adequate control design	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
		(yes/no)	(yes/iio)			
	challenging and approving workforce amendments via contract changes or vacancies.					
	 Supporting future workforce planning and service development. 					
	 Identifying skills gaps. 					
	 Supporting and addressing workforce related issues. 					
	The Workforce Planning Group has a Terms of Reference which outlines the logistics of the group and key responsibilities.					
1.7	The Strategic Delivery Board is responsible for financial oversight, and monitoring workforce	Yes	No	The Strategic Delivery Board draft Terms of Reference was reviewed, and it was found to document:	Low	Suitable key performance indicators will be created and included in the performance reports, for reporting purposes to the Strategic Delivery Board and the Strategic Management Board.
	spend on a monthly basis.			 Key responsibilities of individual members and the Board as a whole; 		
	The Board is made up of management and		Membership; and			
				Chair responsibilities.		

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
	budget holders. Their objectives			A standardised monthly agenda is in place; for which there are specific reports provided and		
	include:			presented by members of the Board.		
	 Providing overall governance for strategic service delivery; 			 Performance reports documenting performance against agreed key performance indicators. Workforce key 		
	 Driving progress against key performance indicators. 			performance indicators. Workforce key performance indicators are established which refer to ensuring the workforce are involved, engaged, and empowered to deliver excellence.		
	 Ensuring expenditure is managed within 			 Programme 2020 reports which include a focus on the retention, development, and support of the workforce. 		
	approved budgets.Identifying corporate risks and opportunities taking			 Financial reports; which provide financial analysis and commentary on employment costs, staffing numbers, and ancillary items. 		
	appropriate measures.			It was noted that the Performance Reports circulated do not report on vacancies to assess workforce requirements at a strategic		
	The Strategic Delivery Board has a Draft			level.		
	Terms of Reference which, at the time of the audit, was due to be approved by the Strategic Management Board.			However, in December 2015 a new Corporate HR report was introduced. We noted that although sickness absence, short term sick, attendance management and other case management (such as grievances) were reported there were no agreed performance		
	Meetings of the Strategic Delivery Board are held monthly, with retention of meeting minutes, agendas, and			measures to compare them against We were advised by the Deputy Director of Finance that appropriate performance measures were being considered so that consistent performance reporting and benchmarking can be carried out. There is a risk that whilst		

	Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Management action
_		supporting reports recorded on the server.			performance is being reported that if there are no comparatives against previous figures and current targets that performance measuring will not be effective.		

APPENDIX A: SCOPE

Scope of the review

To evaluate the adequacy of risk management and control within the system and the extent to which controls have been applied, with a view to providing an opinion. The scope was planned to provide assurance on the controls and mitigations in place relating to the following Risks:

Objective of the area under review	Risks relevant to the scope of the review	Risk Source
We will ensure our people are involved, engaged and empowered to deliver excellence.	If we do not have motivated and engaged people with the right skills and competencies there is a risk that we will be unable to innovate and deliver safe and effective services to our communities.	Risk Register

When planning the audit, the following areas for consideration and limitations were agreed:

Areas for consideration:

The following areas will be considered as part of the review:

- Workforce planning, short and long term, to ensure that future requirements of the Strategic Plan can be met:
- Policies exist which detail the approach to workforce planning, and have been appropriately approved.
- Workforce plans have been developed, reported to the relevant decision-making groups, and approved at an appropriate level, which address the organisation's objectives and key priorities.
- Assumptions used in the development of workforce plans are reviewed for reasonableness and updated on a sufficiently regular basis.
- Whether reconciliations performed between workforce plans, financial plans and existing establishment and whether existing plans are consistent with agreed upon budgets for the organisation.
- Whether the organisation has a dedicated forum which is tasked with regularly reviewing the organisation's
 workforce, to plan the workforce and monitor its utilisation and achievement of established targets including use of
 overtime, and whether this is at an appropriately defined level.
- Future recruitment and training requirements including timescales have been mapped and used to inform the workforce planning cycle.
- Whether the organisation is considering the level of retained fire-fighters, and how they can be utilised to assist in the delivery of workforce targets.
- Whether the organisation has undertaken a skill gap analysis. The use of secondments and review of existing skills to fill posts by the organisation.
- The analysis of trends relating to leave/retirement ages, and whether the organisation has utilised this information to aid workforce plans.

Limitations to the scope of the audit assignment:

The following limitations applied to the scope of our work:

- Testing was undertaken on a sample basis only;
- Testing was limited to the evidence available at the time of the audit;

- We did not provide an opinion as to whether the correct level of staff has been established to deliver organisational objectives;
- We did not provide an opinion as to whether the most efficient levels of staffing had been established or were being worked towards;
- We did not review shift patterns or duty planning;
- We did not provide assurance that staffing were adequate to mitigate risks; and
- Our work did not provide absolute assurance that material errors, loss or fraud do not exist.

APPENDIX B: FURTHER INFORMATION

Persons interviewed during the audit assignment:

- Lindsay Shankland- Deputy Director of Human Resources;
- Glenn McGuinness- Deputy Director of Finance;
- Mark Dyer- Workforce Programme Manager;
- Stephanie Crawford- HR and OD Systems Programme Support Officer;
- Clare Reading- HR Subject Matter Advisor;
- · Kirsty Bates- HR Assistant;
- Rebecca Twins- Personal Assistant to ACFO, Safer/ Resilient Communities and Finance Director & Treasurer; and
- Sarah Firth- Personal Assistant to Director of Human Resources and Organisational Development.

Documentation reviewed during the audit assignment:

- Service Strategy, 2015/16;
- Programme 2020 Business Case, 2015;
- Human Resources Departmental Strategy, 2015/16;
- Finance Departmental Strategy, 2015/16;
- East Area Command Departmental Strategy, 2015/16;
- SAP Development Programme Summary, April 2015;
- SAP Development Programme Update, September 2015;
- Redundancy prevention initiatives (Flexible retirement), 2015/16;
- Financial Plan, 2015/16;
- Meeting minutes of the Essex Fire Authority, February 2015;
- Financial Update, August 2015;
- Meeting minutes of the Policy and Strategy Committee, June 2015;
- On-call/ Retained Engagement Plan, September 20152015/16;
- Workforce Planning Policy, 2015/16;
- Succession Planning Policy, 2015/16;
- Succession Plan Critical Role Risk Process, 2015/16;
- Succession Pool Policy, 2015/16;
- Vacancy business cases, 2014-16;
- Exit questionnaire spreadsheet, September 2015;
- High Level Retirement and Early Retirement Analysis, July 2015;
- Individual Retirement Analysis, 2015/16;
- Human Resources Risk Register, September 2015;
- Service Risk Register, September 2015;
- Workforce Planning Group Terms of Reference, Reports and Meeting Minutes, 2015/16;
- Strategic Delivery Board Terms of Reference, Reports and Meeting Minutes, 2015/16; and

Strategic Management Board Agendas, Reports and Meeting Minutes, 2015/16

FOR FURTHER INFORMATION CONTACT

Alan Grisley

alan.grisley@rsmuk.com

07528 970123

Suzanne Lane

suzanne.lane@rsmuk.com

07720 508148

rsmuk.com

The UK group of companies and LLPs trading as RSM is a member of the RSM network. RSM is the trading name used by the members of the RSM network. Each member of the RSM network is an independent accounting and consulting firm each of which practises in its own right. The RSM network is not itself a separate legal entity of any description in any jurisdiction. The RSM network is administered by RSM International Limited, a company registered in England and Wales (company number 4040598) whose registered office is at 11 Old Jewry, London EC2R 8DU. The brand and trademark RSM and other intellectual property rights used by members of the network are owned by RSM International Association, an association governed by article 60 et seq of the Civil Code of Switzerland whose seat is in Zug.

RSM UK Consulting LLP, RSM Corporate Finance LLP, RSM Restructuring Advisory LLP, RSM Risk Assurance Services LLP, RSM Tax and Advisory Services LLP, RSM UK Audit LLP, RSM Employer Services Limited and RSM UK Tax and Accounting Limited are not authorised under the Financial Services and Markets Act 2000 but we are able in certain circumstances to offer a limited range of investment services because we are members of the Institute of Chartered Accountants in England and Wales. We can provide these investment services if they are an incidental part of the professional services we have been engaged to provide. Baker Tilly Creditor Services LLP is authorised and regulated by the Financial Conduct Authority for credit-related regulated activities. RSM & Co (UK) Limited is authorised and regulated by the Financial Conduct Authority to conduct a range of investment business activities. Whilst every effort has been made to ensure accuracy, information contained in this communication may not be comprehensive and recipients should not act upon it without seeking professional advice.