

# AND RESCUE AUTHORITY

#### **Grenfell Action Plans**

Internal audit report 3.23/24

FINAL

#### 12 February 2024

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## 1. EXECUTIVE SUMMARY

#### Why we completed this audit

We have carried out a review of the action plan developed by the North Yorkshire Fire and Rescue Service to address the gaps identified against the recommendations from the Grenfell Tower Inquiry and the monitoring of the action plan. The initial Grenfell Tower Inquiry: Phase 1 Report was published in October 2019 and provided recommendations and steps required to improve fire safety, including the responses of fire and rescue services to major disasters, such as, fires in high rise residential buildings. There are 26 high rise residential buildings identified across the North Yorkshire region.

The Tall Buildings Working Group (previously the Grenfell Tower Working Group) was set up by the Service to facilitate discussions between different departments with responsibility for implementing the proposed actions identified by the Service in a gap analysis exercise undertaken against the Grenfell Tower Inquiry recommendations. The Tall Buildings Working Group is collectively responsible for considering the recommendations from the Phase 1 Report, and the actions required to implement them within the Service. The Group's initial purpose was to provide oversight and co-ordination for the activities to implement these actions, and now are responsible for embedding the recommendations within policy, procedure and practices for high rise residential buildings.

The Group meet monthly to review and agree actions and also to discuss progress against the recommendations from the Phase 1 Report. A return is submitted to the National Fire Chiefs Council regularly to provide an update on progress against the recommendations, this information is then submitted by the National Fire Chiefs Council to the Home Office.

The Service received four grants to assist with their response to the recommendations raised as part of the Grenfell Tower Inquiry: the protection uplift grant, building risk review grant, infrastructure grant and the accreditation grant. We noted that the building risk review grant has been fully drawn, and the accreditation grant has not yet been used, as the Service awaits formal guidance on what the grant is to be used to fund. Spending against the protection uplift grant is also reported to the Home Office on a quarterly basis via the submission of the Protection Reporting Template to ensure that Services are held to account for their spending against grants.

#### Conclusion

Our review has identified that the Service has robust processes in place to manage the actions developed to address gaps identified against the recommendations from the Grenfell Tower Inquiry: Phase 1 Report. Tall Buildings Working Group meetings are held regularly and ongoing actions discussed and required updates provided. Additionally, the Service reports to the National Fire Chiefs Council on the progress against each recommendation; this information is used to inform the Home Office. As part of our review, we have agreed **one medium and two low priority** management actions.

#### Internal audit opinion:

Taking account of the issues identified, the North Yorkshire Police, Fire and Crime Commissioner, Fire and Rescue Authority can take **substantial assurance** that the controls upon which the organisation relies to manage this area are suitably designed, consistently applied and effective.



#### **Key findings**

#### We identified the following exception resulting in one medium priority management action being agreed:



Progress against the action plan is initially discussed during the Tall Buildings Working Group where actions are monitored and is also reported to the Tactical Leadership Team and to the Senior Leadership Team by exception. We however noted that there has not been any regular reporting provided to the Commissioner to give an update on the progress made against the recommendations from the Grenfell Tower Inquiry: Phase 1 Report. We have seen examples of regular reporting, for example, on a quarterly basis, to the Commissioner at other Fire and Rescue Services.

If reports are not provided to the Commissioner, there is a risk that there will not be sufficient oversight within the governance structure. **(Medium)** 

For details of the low priority management actions, please see section two of this report.

#### As part of our review, we identified that the following controls are suitably designed, consistently applied and operating effectively:



The Service undertook a gap analysis against the initial recommendations from the Grenfell Tower Inquiry: Phase 1 Report and used the gaps identified to inform an action plan. Actions are assigned owners, and priorities and updates are provided during the monthly meetings. Progress against the initial recommendations is also reported to the National Fire Chiefs Council.



Actions within the plan are combined and closed as appropriate to prevent work being duplicated across the Service. As many of the actions in the plan are specific to fires in tall buildings, the risk of duplication of work across the service is low. The Tall Buildings Working Group is attended by key stakeholders from the organisation to ensure a coordinated approach is adopted between department operations and any actions identified within the action plan.



Key information is communicated throughout the Service using update bulletins. Bulletins were regularly used during the initial stages of the action programme; however, updates have become less frequent as the gaps have been closed and actions fully implemented. Information is also reported externally to the National Fire Chiefs Council to report on progress against the recommendations in the action plan, to the Home Office regarding spend, and also to the public through information published on the website.



Actions determined to close the gaps identified during the initial gap analysis are monitored during the monthly Tall Buildings Working Group meetings and updates are recorded in the decision and action log. Any relevant changes in legislation and additional required resources are provided by the National Fire Chiefs Council to key contacts at the Service who are responsible for ensuring this information is communicated to the Tall Buildings Working Group and used to inform any updates to actions as required.



The Service received four Grenfell related grants: the uplift grant, building risk review grant, infrastructure grant and accreditation grant. We confirmed that the accreditation grant has not yet been drawn against, and the building risk review grant was fully used against the salary of a member of staff. Spending against the uplift grant and infrastructure grant is monitored during monthly budget meetings, attended by the relevant budget holder and the Management Accountant. The Service is accountable to the Home Office for spend against the grants and reports are provided and scrutinised.



A station based audit programme is in place and issues identified as part of the Grenfell Tower Inquiry recommendations that have become business as usual are monitored as part of this ongoing programme. Where gaps in knowledge are identified during the regular audits and it is identified that staff do not have the required level of understanding or awareness, this is communicated through the regular bulletins.



Progress against the recommendations from the Grenfell Tower Inquiry are reported as part of the monthly Tall Buildings Working Group meetings, attended by key participants including the Director of Capabilities, Head of Prevention and Protection, Head of Response and Resilience, Head of Service Delivery Training, Station Manager Control and the Head of Assurance. Information is also reported during the Operational Effectiveness Board, and any key issues are raised to the Senior Leadership Team by the Director of Capabilities by exception.

### 2. DETAILED FINDINGS AND ACTIONS

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.

Area: Grenfell Action Plans			
Control	Actions arising from the gap analysis undertaken by the Service are RAG (red, amber, green) rated and documented on an action plan.	Assessment:	
	Actions are identified are assigned deadlines, RAG ratings and clear owners.	Design	✓
	Progress against actions is monitored as part of the monthly Tall Buildings Working Group meetings and reported to the National Fire Chiefs Council.	Compliance	×

# Findings / Implications

We evidenced a copy of the Service's current action plan used to document actions and the updates discussed during the monthly Tall Buildings Working Group meetings. There are six live actions recorded in the action log and 12 actions recorded as closed in the past 12 months. Status updates from previous meetings are recorded in the action and decision log, as well as any rationale for closing actions. The document also includes the Terms of Reference for the Tall Buildings Working Group, stating the initial purpose was to provide oversight and co-ordinate the activities stemming from the Phase 1 Report, and the Tall Buildings Working Group are now tasked with embedding these recommendations and guidance across the Service. Through inspection of the Terms of Reference, we confirmed that the Group is responsible for reviewing and ensuring compliance against the action plan.

The action log includes columns to record the date, action, any notes, the priority, target completion date, action owner, and whether the action is open or closed. We confirmed that all six open actions had an owner recorded documented through initials of the person responsible, an implementation date and a priority. We did however note during our testing that the accountability for actions has changed as individuals within the Service have moved roles, and the action plan has not been updated to reflect this.

If action owners are not appropriately updated, there is a risk that accountability for actions could be lost. We note that the role the action was assigned to however had not changed and the accountability was inherited with the role; as the action owners are aware of this responsibility as evidenced by the updates provided, therefore we have raised this as a low priority action.

The six actions recorded comprise of one high, three medium and two low priority actions. Actions are discussed during the Tall Buildings Working Group and assigned implementation dates and priorities as appropriate. The implementation dates in two instances fell in November 2022, one in November 2023 and the remaining three instances in December 2023. The two actions identified that were due to be implemented by November 2022 are both medium priority actions, and we queried why the implementation dates had not been revised and note although the Group is working to different deadlines, this has not been formally documented and noted that this should have been updated to allow for effective action tracking. If implementation dates are not revised, approved and documented in a timely manner, there is a risk that accountability for implementing actions and the audit trail may be lost.

The Tall Building Working Group meetings are not minuted, rather key information is recorded in the decision and action log spreadsheet. There are however agendas for the Tall Buildings Working Group and we evidenced agendas for February, July and September 2023; we noted that the February agenda was used as a standing agenda until July 2023. We confirmed in each instance that review of actions was included as an agenda item.

Progress against the Grenfell Tower Inquiry recommendations is also reported to the National Fire Chiefs Council by the Director of Capabilities through completion of the Grenfell Tower Inquiry recommendations progress tracker. This information is then reported to the Home Office to provide confirmation regarding the progress in addressing the recommendations by Services.

Area: Grenfell Action Plans				
Management Action 1	The Service will ensure that, where required, implementation dates and owners are updated.  The Service will assign the actions to a role rather than an individual and will confirm that all current owners are up to date.	Responsible Owner: Director of Capabilities	<b>Date:</b> 31 December 2023	Priority: Low

# Area: Grenfell Action Plans Control Actions recorded in the action plan are only closed once completed and supported by sufficient, appropriate evidence. Design Compliance ×

# Findings / Implications

When actions are completed, they are discussed as part of the Tall Buildings Working Group and closure agreed during the meeting with the Director of Capabilities who chairs these meetings.

From inspection of the Tall Buildings Working Group decision and action log, we identified 10 actions closed in the previous 12 months.

We selected a sample of five and in each instance requested support to confirm that the action had been appropriately closed:

- in three instances, we were provided with sufficient, appropriate information to confirm that the action had been closed, no issues noted;
- in one instance, we noted that the action had been closed as an update was given on joint protection and prevention activities in high rise residential buildings. We discussed the action with the Station Manager (Protection) who explained that the action is partially ongoing, as the re-inspections are to take place every three years. We note this is part of business as usual and the action for an update to be given was correctly closed, with the update recorded in the decision and action log. We were also provided with a revised copy of the decision and action log (December 2023) showing updates from the November 2023 meeting and note that this includes an action regarding collaborative working between the Protection and Prevention Teams for inspection of high rise residential buildings in 2024. We are satisfied the original action was correctly closed and the additional area raised regarding the ongoing inspections is appropriately reflected in the decision and action log. No issues were noted; and
- in one instance, we noted the action had been closed as it was merged with another which is an open action in the plan; however, had not explicitly been included. The action closed had been a request to find training venues and it was incorporated into an action stating an exercise brief to be developed for approval to test evacuation strategies. We discussed this instance with the Station Manager, Operational Training who explained that the Service is going to schedule training when they have received equipment. It is implied by the training that the venues will need to be identified; however, it is not explicit. We note that the Station Manager, Operational Training who is responsible for the action is aware of the requirement, however if it is not clearly incorporated there is a risk that audit trail and accountability for delivering the work may be lost.

We do however note that the Service also reports regularly to the National Fire Chiefs Council against the recommendations, therefore any gaps would be identified. As such, we have agreed this as a low priority action.

•	The Service will ensure that where actions are marked as	Responsible Owner:	Date:	Priority:
Action 2	closed due to being merged with other actions that this is clearly documented in the action plan.	Director of Capabilities	31 December 2023	Low

#### **Area: Grenfell Action Plans** Progress against the action plan is reported throughout different committees (e.g. the Health and Safety **Control Assessment:** Sub-Committee, Technical Rescue Working Group, Equipment Analytics Team) before being fed up to the Health and Safety Group and Tall Buildings Working Group. Design Information is then fed up to the Tactical Leadership. Information is reported to the Senior Leadership Team by exception as required. Compliance Through discussions with the Director of Capabilities, we noted most reporting against the action plan takes place during the Tall Buildings Findings / Working Group meetings. The Group participants include but not limited to the Director of Capabilities, the Head of Prevention and **Implications** Protection, the Head of Response and Resilience, Head of Service Delivery Training, NOG Implementation Manager, Station Manager Control, and the Head of Assurance. These meetings are not minuted; however, through inspection of the agendas provided with noted that in the July and September 2023 agendas, progress against the Grenfell Tower Inquiry: Phase 1 Report recommendations was specifically referenced. We also noted that some information related to the action plans is reported through the Health and Safety Sub-Committee, for example, the operational note regarding fires in tall buildings was reported in February 2023. The Tall Buildings Working Group reports into the Tactical Leadership Team quarterly. Again, these meetings are not minuted, however there is an action and decision log used as a record of the meetings and we noted that updates on actions would be recorded. We were provided with a copy of an agenda and noted that Grenfell is included as an agenda item in July 2023. Any points raised in the Tall Buildings Working Group are also reported to the Senior Leadership Team by the Director of Capabilities by exception. We evidenced a copy of the Building Safety Regulator briefing report provided to the Senior Leadership Team in January 2023. The report was provided to give an update on the proposal for the Building Safety Regulatory implementation during 2023 for a shared Fire Safety Inspector to carry out work on behalf of the Health and Safety Executive, and that one shared inspector has been allocated between the Service and Humberside Fire and Rescue and hosted by the Service. No report has yet been provided directly to the Commissioner to provide a status update on the progress against the action plan. The Director of Capabilities intends to provide a report once actions are substantially completed and have been embedded within the Service and assurance provided We note that other Services report on a quarterly basis to ensure the Commissioner is kept up to date with progress against the recommendations. We do however acknowledge that there are likely to be a larger proportion of high rise residential buildings at the other Services reviewed, despite this, as we have not been able to evidence a progress report issued to the Commissioner, we have raised this as a medium priority action. If reports are not provided to the Commissioner, there is a risk that there will not be sufficient oversight within the governance structure. The Director of Capabilities will produce a report for the Responsible Owner: **Priority:** Management Date: Commissioner providing an update on the implementation of the Action 3 Director of Capabilities 30 September Medium actions against the original recommendations from the Grenfell 2024

Tower Inquiry: Phase 1 Report.

# APPENDIX A: CATEGORISATION OF FINDINGS

Categoris	Categorisation of internal audit findings				
Priority	Definition				
Low	There is scope for enhancing control or improving efficiency and quality.				
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible reputational damage, negative publicity in local or regional media.				
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.				

The following table highlights the number and categories of management actions made as a result of this audit.

Area	Control	Non	Agreed actions		
	design not effective*	Compliance with controls*	Low	Medium	High
Grenfell Action Plans	0 (9)	3 (9)	2	1	0
Total			2	1	0

<sup>\*</sup> Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

Debrief held Draft report issued Responses received	13 November 2023 17 November 2023 12 February 2024	Internal audit Contacts	Daniel Harris, Head of Internal Audit Philip Church, Associate Director Hollie Adams, Assistant Manager Grace Kunzler, Lead Auditor
Final report issued	12 February 2024	Client sponsor	Deputy Chief Fire Officer Director of Capabilities
		Distribution	Deputy Chief Fire Officer Director of Capabilities

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