

Fire & Rescue Service Headquarters Summergroves Way Kingston upon Hull HU4 7BB  
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<b>To:</b> Members of the Fire Authority	<b>Enquiries to:</b> Gareth Naidoo <b>Email:</b> <a href="mailto:committeemanager@humbersidefire.go.uk">committeemanager@humbersidefire.go.uk</a> <b>Tel. Direct:</b> (01482) 393206 <b>Date:</b> 22 April 2021
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Dear Member

I hereby give you notice that in accordance with The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020, a **REMOTE MEETING** of **HUMBERSIDE FIRE AUTHORITY** will be held on **FRIDAY, 30 APRIL 2021 at 10.30AM**.

**To access this remote meeting please visit <<https://zoom.us/join>> and then enter:**

**Meeting ID: 920 2461 8636**

**Passcode: 480294**

Or telephone 0203 481 5237 and use the above Meeting ID and Passcode

The business to be transacted is set out below.

Yours sincerely



**Mathew Buckley**  
**Monitoring Officer & Secretary to Fire Authority**

Enc.

## **A G E N D A**

<b>Business</b>	<b>Page Number</b>	<b>Lead</b>	<b>Primary Action Requested</b>
1. Apologies for absence	-	Monitoring Officer/ Secretary	To record
2. Declarations of Interest (Members and Officers)	-	Monitoring Officer/ Secretary	To declare and withdraw if pecuniary
3. Minutes of meetings of the Authority held on 12 and 26 March 2021	(pages 1 - 14)	Chairperson	To approve
4. Questions by Members	-	Monitoring Officer/ Secretary	To receive
5. Petitions and Deputations	-	Monitoring Officer/ Secretary	To receive
6. Communications	-	Chairperson and Monitoring Officer/ Secretary	To receive

Business	Page Number	Lead	Primary Action Requested
7. Draft Minutes of Governance, Audit and Scrutiny Committee - 12 April 2021	(pages 15 - 20)	Chairperson of Committee	To receive
8. Management Accounts 2020/21 Period ending 29 February 2021	(pages 21 - 23)	Executive Director of Corporate Services/ S.151 Officer	To receive
9. Internal Audit - Director of Audit Opinion and Annual Report (2020/21)	(pages 24 - 28)	TIAA	To receive
10. Draft Annual Governance Statement 2020/21	(pages 29 - 40)	Executive Director of Corporate Services/ S.151 Officer & Monitoring Officer/ Secretary	To approve
11. Performance Reporting 2021/22	(pages 41 - 48)	Director of Service Improvement	To receive
12. Safeguarding Arrangements	(pages 49 - 55)	Director of Service Delivery Support	To receive
13. Use of Delegated Powers under Fire Authority Constitution by Chief Fire Officer & Chief Executive 2020/21	(pages 56 - 57)	Chief Fire Officer/ Chief Executive & Monitoring Officer/Secretary	To receive
14. Call for Evidence - Remote Meetings	Verbal	Monitoring Officer/Secretary	To discuss
15. HMICFRS Update	Verbal	Director of Service Improvement	To receive
16. COVID-19 Update	Verbal	Chief Fire Officer/ Chief Executive	To receive

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**HUMBERSIDE FIRE AUTHORITY**

**12 MARCH 2021**

**PRESENT:**

**Members**

**Representing East Riding of Yorkshire Council:**

Councillors Chadwick, Davison, Fox, Green, Jefferson, Smith and West

**Representing Hull City Council:**

Councillors Chambers, Dad, Nicola, Randall and Singh

**Representing North East Lincolnshire Council:**

Councillors Barfield, James, Shepherd and Swinburn

**Representing North Lincolnshire Council:**

Councillors Briggs (*Chairperson*), Grant, Sherwood and Waltham MBE

**Officers of Humberside Fire & Rescue Service**

Chris Blacksell - Chief Fire Officer & Chief Executive, Phil Shillito - Deputy Chief Fire Officer/Executive Director Service Delivery, Kevin Wilson - Executive Director of Corporate Services/Section 151 Officer, Jason Kirby - Temporary Director of People and Development, Paul McCourt - Director of Service Delivery, Steve Topham - Director of Service Delivery Support, Niall McKiniry - Director of Service Improvement, Mathew Buckley - Monitoring Officer/Secretary and Gareth Naidoo - Committee Manager

**Also in attendance:**

**Independent Co-opted Members of the Governance, Audit and Scrutiny Committee**

Martin Allingham, Doug Chapman (presented Minute 24/21), James Doyle, Andrew Smith and Mandy Thomlinson were in attendance as observers.

**Internal Auditor**

Andrew McCulloch - Director of Audit (TIAA) (presented Minute 27/21)

**External Auditor**

Gavin Barker - Director - Public Services (Mazars) (presented Minute 28/21)

The meeting was held remotely via video conference (Zoom).

**18/21 APOLOGIES FOR ABSENCE** - Apologies for absence were submitted from Councillors Dennis and McMurray, and Keith Hunter - Police and Crime Commissioner for Humberside Police.

**19/21 DECLARATIONS OF INTEREST** - No declarations were made.

**20/21 MINUTES - Resolved** - That the minutes of the meeting of the Authority held on 12 February 2021 be received as a correct record.

**21/21 QUESTIONS BY MEMBERS** - There were no questions.

**22/21 PETITIONS AND DEPUTATIONS** - No petitions or requests for a deputation had been received under Rule 13, Part 4 of the Constitution.

**23/21 COMMUNICATIONS** - The following communication was reported:

- (i) **Prevention Protection Review** - A draft response to be Member Day on 26 March 2021.
- (ii) **Funding** - A letter had been received which provided further clarification on future funding arrangements.
- (iii) **NFCC & LGA** - joint national work - expenditure will continue into next year.

**24/21 DRAFT MINUTES OF GOVERNANCE, AUDIT AND SCRUTINY (GAS) COMMITTEE - 22 FEBRUARY 2021** - Doug Chapman, Chairperson of the Governance, Audit and Scrutiny Committee, presented the draft minutes of the meeting of the Committee held on 22 February 2021.

**Resolved** - That the draft minutes of the Governance, Audit and Scrutiny (GAS) Committee held on 22 February 2021 be received.

**25/21 COMPOSITION OF FIRE AUTHORITY** - The Secretary/Monitoring Officer submitted a verbal report updating on the composition of the Authority.

The composition of the HFA was set down by the Humberside Fire Services (Combination Scheme) Order 1995 (Part 9 of the Constitution). The Order provided that the Authority should not be more than 25 Members.

The Authority was currently composed of 22 Members were are appointed by East Riding of Yorkshire Council (8), Hull City Council (6), North Lincolnshire Council (4) and North East Lincolnshire Council (4). The number of nominations from each of the four constituent authorities was in proportion to the number of local government electors in each of the four constituent authorities' areas.

Following publication of each constituent authorities' electoral register, the number of local government electors in each of the four constituent authorities' areas had been ascertained to check whether the percentage of each constituent authority's electorate had affected the number of seats per local authority on the Fire Authority. As per the figures below, the number of seats per local authority remained unchanged:

Local Authority	Electorate	Percentage of overall electorate	Seats entitled per local Authority	Seats (rounded up)
East Riding of Yorkshire Council	268,053	38%	8.4	8
Hull City Council	188,864	26.8%	5.9	6
North Lincolnshire Council	130,196	18.5%	4.1	4
North East Lincolnshire Council	117,393	16.7%	3.7	4
<b>Totals</b>	<b>704,506</b>	<b>100%</b>	<b>22.0</b>	<b>22</b>

**Resolved** - That the update be noted and future updates only be reported to the Authority by exception as a result in any change in composition to the Authority and the Constitution amended accordingly.

**26/21 TREASURY MANAGEMENT AND CAPITAL EXPENDITURE PRUDENTIAL INDICATORS, TREASURY MANAGEMENT POLICY STATEMENT 2021/22 AND MINIMUM REVENUE PROVISION (MRP) FOR 2021/22** - The Executive Director of Corporate Services/S.151 Officer submitted a report that set out the Prudential Indicators for Treasury Management and

Capital and the Treasury Management Policy Statement proposed for adoption for the financial year 2021/22.

The Authority's Constitution required that the Policy Statement must be approved by the full Fire Authority and this responsibility could not be delegated.

This report also outlined the recommended policy to be adopted in respect of creating the Minimum Revenue Provision (MRP) for 2021/22, in line with the statutory requirements set out in The Local Authorities (Capital Finance and Accounting) (England) (Amendment) Regulations 2008.

The suggested strategy for 2021/22 in respect of the following aspects of the treasury management function was based upon the S.151 Officer's views on interest rates, supplemented with leading market forecasts provided by the Authority's treasury management advisors and support from the treasury management team within Hull City Council. The strategy covered:

- limits in force which will limit the treasury risk and activities of the Authority;
- the Treasury Management and Prudential Indicators;
- the current treasury position;
- prospects for interest rates;
- the borrowing requirement and strategy;
- policy on borrowing in advance of need;
- debt rescheduling;
- the investment strategy;
- creditworthiness policy;
- the MRP strategy;
- policy on use of external service providers

**Resolved** - That the Treasury Management Strategy Statement for 2021/22 onwards as set out at Appendix 1 of the report be approved.

**27/21 INTERNAL AUDIT PLAN 2021/22** - The Audit Plan for 2021/22 had been informed by consideration of the key issues and risks facing the service following discussion with senior management and internal audit's understanding of risk more widely affecting Fire Authorities and Fire and Rescue Services. The resultant plan would ensure that coverage for the year was focussed on the key audit risks, and would enable a robust annual Head of Internal Audit Opinion to be provided.

This year would continue to be another challenging year for Fire Authorities and Fire and Rescue Services, in terms of funding, balancing budgets, service delivery and dealing with the ongoing impact of the COVID-19 pandemic. Internal Audit had identified a number of key areas which require consideration when planning internal audit coverage:

- COVID-19: The impact of the pandemic would carry through into 2021/22, continuing the pressure on fire and rescue service resources and the knock-on effect of carried-forward leave and sickness absences.
- Transition out of the EU: Whilst the UK and the EU had reached agreement on trade, there would be continued uncertainties around staffing and supply chains. EU, EEA or Swiss citizens would need to apply to continue living in the UK, and those arriving from January 2021 might need to apply for a visa. The recognition of professional qualifications also needed to be addressed.
- Cyber-crime: A continuing theme and fire and rescue services needed to take steps to assure themselves over the robustness of their overall arrangements. Cyber-crime continued to increase in complexity and scale with fraudulent activity seeing a significant increase during the Covid-19 pandemic.

**Resolved** - That Internal Audit Plan 2021/22 be approved.

**28/21 EXTERNAL AUDIT STRATEGY MEMORANDUM 2021/22** - The External Audit Strategy Memorandum for Humberside Fire Authority for the year ending 31 March 2021 set out the external audit approach and highlighted significant audit risks and areas of key judgements.

Following the risk assessment approach set out in section 3 of the memorandum, external audit had identified relevant risks to the audit of financial statements. The risks identified were categorised as significant, enhanced or standard. The summary risk assessment highlighted those risks which were deemed to be significant and other enhanced risks in respect of the Authority. These were:

- Management override of controls
- Net defined benefit liability valuation
- Valuation of property, plant and equipment

The revised Code of Audit Practice was likely to lead to additional audit work to support the new value for money conclusion and the changes in reporting requirements. It was currently unclear exactly what impact this would have on the work required and fees. Consequently this was not reflected in any impact in the proposed fee and would update management, the Governance, Audit and Scrutiny Committee and the Authority as the position became clearer.

**Resolved** - That the External Audit Strategy Memorandum 2021/22 be received.

**29/21 SERVICE PERFORMANCE AND RISK - QUARTER 3 (OCTOBER - DECEMBER 2020)** - The Director of Service Improvement submitted the Quarter 3 (October - December 2020) Service Performance and Risk report.

Performance was very good and generally were well below the upper threshold limits. Incidents have been lower than usual since the pandemic began in 2020. From April 2020 to January 2021, primary fires are down by 19 per cent and secondary fires were down by 18 per cent. This had meant the rate of accidental and deliberate fires was below expected thresholds. Special service incidents had not reduced at the same rate as providing more support to other agencies, for example to gain entry to dwellings for the Ambulance Service. While still lower than last year, and within threshold limits, the Service had seen an increase in the number of false alarms in non-domestic premises. It was believed this to be driven by closed or empty businesses or those where the responsible person was not on site and therefore the call challenge had not always been possible.

Performance Indicator	Quarter 3 Total Number	Upper Threshold (UCL3)	October		November		December	
			Monthly Total	Threshold Performance	Monthly Total	Threshold Performance	Monthly Total	Threshold Performance
SPI 2.2 Total Deliberate Fires	91	50	39	11	30	20	22	18
SPI 2.3 Accidental Dwelling Fires	83	39	29	10	27	12	29	10
LPI 2.3c Other Accidental Fires	22	17	6	11	9	8	7	10
SPI 2.4 Deliberate Secondary Fires	374	219	132	87	166	53	76	146
SPI 2.5b False Alarms Non- Domestic	301	116	111	5	97	19	92	24

Indicator	Descriptor	Total	Aspirational Targets
SPI 1	Fatalities from fire	1	0
SPI 1.1	Total Casualties	7	0

Response Performance	
First Engine Response	10% Better than target of 90%
Second Engine Response	10.52% Better than target of 80%

Whilst response time figures were extremely welcome it was noted that the figures should be treated with caution as circumstances surrounding Covid-19 had positively impacted response times and would not be sustainable post-pandemic.

Members took assurance from the Service's proactive approach to performance and risk management.

**Resolved** - That the report be received.

### **30/21 OPERATIONAL ASSURANCE - QUARTER 3 REPORT (OCTOBER - DECEMBER 2020) -**

The Director of Service Improvement submitted the Quarter 3 (October - December 2020) report on Operational Assurance (OA).

Each assessment undertaken was broken down into three key areas: safety critical (SCC), areas of concern (AOC) and exceptional practice (EP). Safety critical reporting reduced from 3 to 1 when compared with the same quarter from the previous year. Area of concern reporting increased by 29 per cent (26 to 37). Exceptional practice returns fell with a 60 per cent reduction in reporting (114 to 45).

In this quarter the OA team carried out tactical debriefs for the A15 LGV fire which involved Ammonium Persulphate, the Haltemprice Crematorium fire and the protracted Energy Works incident. Reports had already been produced for the A15 and Haltemprice incidents and the recommendations would be discussed at the next Change Team meeting. The report for the Energy Works incident was currently being formulated. Once the report had been produced it would be shared with waste fire tactical advisors as there was national interest regarding this particular site and the innovative systems it used to produce energy.

The Service also received the accident report from the tragic event in Mid and West Wales FRS that resulted in the fatality of a firefighter. The OA team had been working in coordination with the training section and the health and safety team to ensure that the Service learned the necessary lessons from this incident.

This quarter also saw the launch of a new thematic review. This review focused on the appropriate use of PPE and Covid-19 control measures during incidents and exercises. The review took place between 12 November 2020 and 28 February 2021. Once completed a full report would be compiled along with recommendations for improvement and any good practices that have been identified.

In this quarter the OA team chaired the second Change Team Meeting. This was very well attended and equally well received once again. Discussed at this meeting were both National Operational Learning (NOL) and Joint Organisational Learning (JOL) action notes, debrief recommendations and learning from operational assurance assessments. These were allocated to individuals with a timescale for completion by the section heads that were present.

Members took assurance from the Service's proactive management of Operational Assurance

**Resolved** - That the report be received.

**31/21 HEALTH, SAFETY & ENVIRONMENTAL REPORT - QUARTER 3 (OCTOBER - DECEMBER 2020)** - The Director of Service Improvement submitted the Quarter 3 (October - December 2020) report on Health, Safety and Environment.

During this reporting period, the Service adapted to the regularly changing government restrictions due to the global Covid-19 pandemic. This changed the delivery of Service-wide activities in all sections. During this quarter, it had led to an increase in reported health and safety events. There were 22 accidents recorded (Figs 1 & 2) that resulted in personal injury compared to 13 for the same period last year. This was an increase of just over 69 per cent. Most of this increase was due to the requirements to report Covid-19 workplace transmissions in line with the latest advice from the Health and Safety Executive (HSE).

The number of accidents reported was slightly above the three-year rolling average of 20 for quarter three. It was an increase from the number of reported injuries or ill-health for quarter two last year but still in line with the previous three-year average (Fig 3). However, this should be taken in the context of having to report Covid-19 workplace transmissions and the Service operating in an exceptional environment where the delivery of Service functions had adapted in response to the Covid-19 pandemic.

All the accidents this quarter were sustained by operational crews both Full time or On-Call firefighters and Flexi Duty System Officers. This was representative of employees and the more hazardous nature of the activities carried out by operational staff. It also reflected the nature of the Covid-19 restrictions as most non-operational staff were working from home or had limited duties. Operational staff still delivered essential work and operational training during the Covid-19 restrictions.

Accidents relating to Routine Activities made up the highest number of total injuries reported (11). This is a 175 per cent increase in the number reported during the same quarter last year (4). Training activity accidents had also increased by 133 per cent in comparison to the same period the previous year. Injuries arising from Special Services activities had increased but not significantly. There had been a reduction in accidents relating to physical training activities, Fire and Road Traffic Collisions (RTC) compared to the previous year.

This quarter near miss reporting (35) was similar to the same period last year (37). The amount reported this quarter exceeded the reports received through the previous two quarters. This was a positive indicator of a proactive and responsible safety culture and how the Health, Safety and Environment team had worked to encourage reporting. Even though the Service had been working in new and flexible ways due to Covid-19 restrictions, it was positive to see staff were still reporting both accidents and near misses.

Members took assurance from the Service's proactive management of Health and Safety.

**Resolved** - That the report be received.

**32/21 ABSENCE MANAGEMENT - QUARTER 3 REPORT (OCTOBER - DECEMBER 2020)** - The Temporary Director of People and Development submitted a report that provided an update to Members with regard to absence management for the period 1 October 2020 to 31 December 2020. In keeping with the previous approach, absence remained a key area of focus for the Service.

During this period three staff groups were significantly below target and one area of focus slightly above target due to long term absence in that area. In quarter 3 of 2020/21, there continued to be a significant decrease overall, and in each contract group of sickness absence. In total there have been 2191.24 fewer days of absence compared to the same period in 2019/20, which was only 63.27 per cent of the absence experienced in the same period last year.



	Sum of Days Lost	Establishment	Average Duty Days Lost per person	2020/21 annual target per person	YTD (annual divided by 12 x current month number)
Control	202.00	29.21	7.35	8.70	6.52
Fire Staff	711.55	174.29	3.99	10.00	7.50
On Call	796.65	348	2.28	7.00	5.25
Full Time	2066.00	443.5	4.65	7.00	5.25
<b>total</b>	<b>3776.20</b>	995	<b>3.79</b>		

	Quarter 3 2018/19	Quarter 3 2019/20	Quarter 3 2020/21	Target attendance
Full time	96.06%	95.46%	96.62%	95%
Control	95.86%	89.42%	94.65%	95%
Fire Staff	96.52%	94.79%	97.96%	97%

As a comparison of absence in the same period last year with this year it was clear to see that in quarter 3 of 20/21 there had been a sustained and significant decrease in sickness absence in each contract group across the year. In total there had been 2191.24 fewer days absence compared to the same period in 2019/20, which is 63.27 per cent of the total absence days at this point in 2019/20.

The pandemic appeared to have had a significant and positive impact upon the overall absence rates. The Service had completed three rounds of individual staff impact assessments and these had all indicated that many staff had enjoyed working at home and enjoyed a better work-life balance as a result; it was reasonable to assume that this might have had a positive impact on staff health. As the Service returned to a blended approach of home and office working, the absence percentage would continue to be measured and over time the Service would be able to assess whether this was a lasting positive impact.

Members took assurance that absence was being managed fairly, consistently, and appropriately in the Service and necessary follow-up actions were taken to address short and long-term absence issues.

**Resolved** - That the report be received.

**33/21 PAY POLICY STATEMENT 2021/22** - The Temporary Director of People and Development submitted a report that provided a proposed Pay Policy Statement for the Fire Authority for 2021/22, as required by the Localism Act 2011.

The Act introduced senior staff pay transparency into local authorities with a requirement that authorities prepare a Pay Policy Statement for each financial year. A statement for the Fire Authority was first produced for 2012/13). The Authority agreed at that time that the Pay Policy Statement should be reviewed annually by officers and that any proposed amendments would be brought before the full Authority for consideration.

The proposed statement for 2021/22 reflected the pay details for the current Strategic Leadership Team (SLT) posts. Any subsequent amendments to the SLT structure approved by the Authority would require an updated Pay Policy Statement to be brought back to the Authority for re-consideration.

**Resolved** - (a) That the draft Pay Policy Statement for 2021/22 as set out at Appendix 1 of the report be approved;

(b) that the Chief Fire Officer & Chief Executive be authorised to make factual adjustments to the Policy during the course of 2021/22, for example, in reflection of the impact of any pay awards arising for different employment groups during the year, and

(c) that any other proposed amendments to the Policy during 2021/22 be brought before the full Authority for consideration.

**34/21 CUSTOMER SERVICE EXCELLENCE STANDARD 2021** - The Director of Service Improvement submitted the Standard has been successfully retained for a further year.

Members were aware that the Customer Service Excellence Standard (CSE), originally achieved in 2009, was re-certified on an annual basis subject to passing a compliance audit. The Standard covered a three-year period, with 2021 being a Year 1 renewal involving a 2-day re-certification assessment.

As in previous years, renewal focussed on five criteria:

1. Customer Insight
2. The Culture of the Organisation
3. Information and Access
4. Delivery
5. Timeliness and Quality of Service

The Customer Service Audit took place on 18 & 19 January 2021; the Service was the first organisation to take part in a second remote assessment due to the COVID pandemic. The assessment was undertaken in two stages; the first was a review of our self-assessment submission. This review enabled the assessor to gain an understanding of how the organisation had met the requirements of the Customer Service Excellence standard. The next stage was to review the actual service, delivered remotely. This was conducted through reviewing practice as well as speaking to staff, partners and customers. This included following customer journeys through processes and how these aligned with customer insight.

It was pleasing to report that the Standard had been successfully retained for a further year. Nine areas of notable Good Practice were identified, and the three areas of Compliance Plus, assessed as exceptional/exemplar good practice, still stood, with additional recognition for the Service's response throughout the pandemic. No partial or Non-Compliance issues were identified.

The Director recorded his thanks to the Corporate Assurance team for their work in helping to retain the Standard. Members acknowledged the retention of the Standard and took assurance of the Service's ongoing commitment to Customer Service Excellence.

**Resolved** - That the report be received and the Authority thank everyone involved in retaining the Standard.

**35/21 BUSINESS PLANNING/REPORTING FRAMEWORK 2021/22** - The Director of Service Improvement submitted the Business Planning Framework 2021/22 for the Authority's approval.

Members were aware that a Business Planning/ Reporting Framework was prepared annually, by the Corporate Assurance Team and Committee Manager, to provide Officers and Committee Manager with a report planning tool, for Fire Authority and its committee meetings.

The draft Framework for 2021/22 was attached at Appendix 1 for consideration by Members. A series of changes were proposed to the timing and frequency of some cyclical reports, recommended by Strategic Leadership Team (SLT) for approval by Members.

**Resolved** - That the Business Planning Framework 2021/22 be approved.

**36/21 HFA SHORTLIST OF SCRUTINY TOPICS FOR GAS COMMITTEE CONSIDERATION** - This report summarised the scrutiny topics, proposed by the Strategic Leadership Team, for the Governance, Audit and Scrutiny Committee's (GAS) Scrutiny Programme 2021/22. The GAS Committee will programme six scrutiny items for completion during 2021/22.

A long list of ten topics were included at Appendix 1 to the report for consideration by the Authority and the GAS Committee. The Strategic Leadership Team (SLT) had shortlisted six of the topics as their recommendations:

- **Control Room Training and Development**  
Evaluation of training and development for Control Room staff competence, including the implementation of recommendations arising from the Grenfell inquiry.
- **Training and Development of non-operational Roles**  
Evaluation of the development and application of the Core Skills Framework.
- **Promotion within Uniformed Roles**  
Evaluation of how promotion processes are applied.
- **Anti-Bullying Campaign**  
Evaluation of the anti-bullying campaign and on-going effectiveness.
- **Workforce Monitoring and Planning**  
Evaluation of systems in place for workforce monitoring and the management of workforce planning.
- **Leadership Development**  
Evaluation of how the leadership and talent management frameworks have been developed and applied

All SLT recommended topics had been derived from ongoing work in response to the HMICFRS Inspection Report and any duplication of the Internal Audit Plan 2021/22 had also been avoided.

**Resolved** - (a) That the shortlist of six topics recommended by the Strategic Leadership Team (SLT) be submitted to the Governance, Audit and Scrutiny (GAS) Committee for consideration when determining their topics for scrutiny in 2021/22;

(b) That a future Member Day take place to consider how best Members can engage with the scrutiny element of the Authority.

**37/21 REASONABLE WORST CASE PLANNING SCENARIOS & INCIDENT COMMAND REVIEW (2020)** - The Director of Service Delivery submitted a report that set out the revised approach to Reasonable Worst Case Scenario (RWCS) risk planning. This work supported the Incident Risk Management Plan (IRMP) and Strategic Plan development for 2021 and beyond.

The RWCS planning document had been produced to ensure that the Service's emergency response capability was proportionate and able to deal with reasonable worst-case fires and other emergency risks in Humberside. The report provided information regarding the need for robust planning concepts upon which an Incident Command Review can be founded.

The Operational Efficiency Programme (completed circa 2017) had been successful in maintaining the right number of appliances, stations and crewing to meet the Authority's set attendance standards (based on current financial assumptions).

The Incident Command Review (2020) had identified resilience pinch points at strategic and tactical levels of the FDS duty system designs. It had also identified a number of wider recommendations to further improve the effectiveness of incident command provision. In particular:

- Strategic Incident Command provision required the addition of a sixth Strategic Commander onto the establishment.
- Tactical Incident Command provision will benefit from the addition of recall functionality of x1 additional Officer to perform NILO, Incident Command and interim TCG support.

Members endorsed an additional Strategic Commander being permanently added to the strategic command rota. Members were assured that work was underway within the Service Delivery Directorate to develop additional resilience in the tactical command rota and meet the recommendations contained in the Incident Command Review (2020).

**Resolved** - That Members endorse an additional Strategic Commander being permanently added to the strategic command rota.

**38/21 STRATEGIC LEADERSHIP TEAM STRUCTURE** - The Chief Fire Officer and Chief Executive submitted a report setting out a number of options for restructuring the Strategic Leadership Team (SLT).

As per Minute 37/ Members endorsed an increase in the number of permanent operational roles (i.e., Incident Commander) on the Strategic Leadership Team (SLT). There had also been a review at SLT of the role of Director of People and Organisational Development following the departure of the previous post holder. The post has been previously supported by West Yorkshire Fire and Rescue Service with a secondment, on a 0.5 Full-Time Equivalent (FTE) basis. Given the importance of how the Service valued and supported its staff it was felt that it was important that the Service invested appropriately in that area.

The report brought forward recommendations regarding both the operational Incident Command cover and the strategic arrangements for Human Resource (HR) matters. Some of those recommendations could be resolved within Officer's delegated authority, but some options required Authority decisions on structure and appointment, and so the report sought approval by the Authority for the recommended future structure in its entirety. With the approval of the recommended option, it was expected that the new roles would be by Member appointment, supported by the Chief Fire Officer as an advisor.

**Resolved** - That, subject to stakeholder consultation, Option 2 for a new Strategic Leadership Team (SLT) structure, as set out at Appendix 1 of these Minutes, be approved.

**39/21 REMOTE MEETING CONTINGENCY PLANNING** - The Monitoring Officer/ Secretary submitted a report outlining a contingency plan in the event that The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020 were not extended beyond 7 May 2021.

The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020 expired on 7 May 2021.

The authority had to plan a contingency in the event that the Regulations were not extended, there was not a declaration that such meetings were lawful or there was a gap between the expiry of the regulations and new legislation coming into force.

Members considered the following contingency options in the event that the ability to hold remote meetings was not extended beyond 7 May 2021:

- (a) to delegate all decision making powers of the authority to the Chief Fire Officer and Chief Executive such delegations to be exercised taking into account recommendations made by Members at a remote meeting convened for that purpose
- (b) for in person meetings to be held with a bare quorum of Members in attendance to be agreed by the group secretaries.

**Resolved** - That all decision making powers of the authority be delegated to the Chief Fire Officer and Chief Executive, in consultation with the Chair of the Authority, such delegations to be exercised taking into account recommendations made by Members at a remote meeting convened for that purpose.

**40/21 HMICFRS UPDATE** - The Director of Service Improvement provided the Authority with a verbal update in relation to Her Majesty's Inspectorate of Constabulary and Fire and Rescue Service's (HMICFRS).

**Resolved** - That the update be noted.

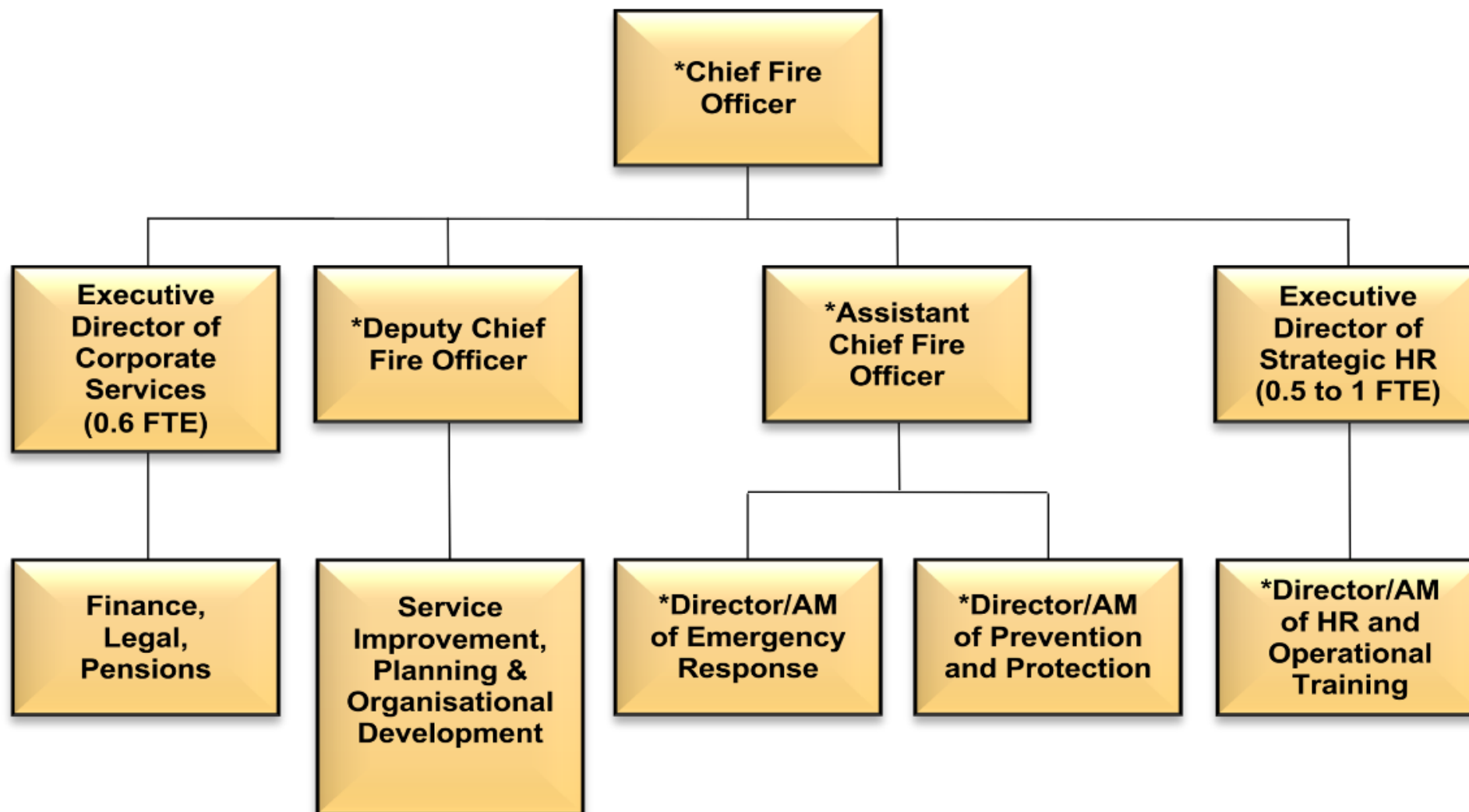
**41/21 COVID-19 UPDATE** - The Chief Fire Officer/Chief Executive provided a verbal update on the Service's response to and future plans relating to Covid-19.

Local case rate per 100,000 population were decreasing across the Humber Sub-Region. To date 84 staff had tested positive with Covid-19, peaking in November when 90 staff were absent due to Covid-19 related incidents. To date 141 staff had now been vaccinated.

Staff were commended for continuing to deliver statutory services whilst diversifying their roles.

**Resolved** - That all staff be thanked for their hard work on behalf of the communities during the Covid-19 period.

## Revised Strategic Leadership Team Structure (SLT)



\*Operational posts

**HUMBERSIDE FIRE AUTHORITY**

**EXTRAORDINARY MEETING**

**26 MARCH 2021**

**PRESENT:**

**Members**

**Representing East Riding of Yorkshire Council:**

Councillors Chadwick, Davison, Dennis, Fox, Green, Jefferson, Smith and West

**Representing Hull City Council:**

Councillors Chambers, Dad, Nicola, Randall and Singh

**Representing North East Lincolnshire Council:**

Councillors Barfield, Shepherd and Swinburn

**Representing North Lincolnshire Council:**

Councillors Briggs (*Chairperson*), Grant and Sherwood

**Office of the Police and Crime Commissioner for Humberside**

Keith Hunter - Police and Crime Commissioner for Humberside Police

**Officers of Humberside Fire & Rescue Service**

Kevin Wilson - Executive Director of Corporate Services/Section 151 Officer, Niall McKiniry - Director of Service Improvement, Mathew Buckley - Monitoring Officer/Secretary and Gareth Naidoo - Committee Manager

**Internal Audit**

Andrew Townsend

**Also in attendance:**

**Independent Co-opted Members of the Governance, Audit and Scrutiny Committee**

Martin Allingham, Doug Chapman, James Doyle, Pam Jackson, Mandy Thomlinson and Clive Vertigans were in attendance as observers.

The meeting was held remotely via video conference (Zoom).

**42/21 APOLOGIES FOR ABSENCE** - Apologies for absence were submitted from Councillors James, McMurray, Waltham and Keith Hunter - Police and Crime Commissioner for Humberside Police.

**43/21 DECLARATIONS OF INTEREST** - No declarations were made.

**44/21 EXCLUSION OF THE PRESS/PUBLIC - Resolved** - That the press and public be excluded from the meeting for consideration of the following item on the grounds that it involves the likely

disclosure of exempt information as defined in paragraph 1 of Part 1 of Schedule 12A of the Local Government Act 1972.

In making its decision the Authority confirmed that having regard to all the circumstances it was satisfied that the public interest in maintaining the exemption outweighed the public interest in disclosing the information.

**45/21 INVESTIGATION REPORT INTO WHISTLEBLOWING ALLEGATION** - Internal Audit (TIAA) submitted an investigation report following whistleblowing allegations.

**Resolved** - (a) That the full investigation report be published on the Authority's website following the meeting of the Governance, Audit and Scrutiny Committee on 12 April 2021;

(b) that officers progress the recommendations of the investigation report with immediate effect.



**HUMBERSIDE FIRE AUTHORITY**  
**GOVERNANCE, AUDIT AND SCRUTINY COMMITTEE**

**12 APRIL 2021**

**PRESENT:** Independent Co-opted Members Mr D Chapman (Chairperson), Mr J Doyle, Mrs P Jackson, Mr A Smith and Mrs M Thomlinson.

Councillors Briggs, Davison and Green attended as observers.

Phil Shillito - Deputy Chief Fire Officer & Executive Director Service Delivery, Paul McCourt - Director of Service Delivery, Niall McKiniry - Director of Service Improvement, Steve Topham - Director of Service Support, Simon Rhodes - Head of Corporate Assurance, Martyn Ransom - Head of Finance, Jason Kirby - Temporary Head of People and Development, Ruth Gilmour - Head of Human Resources, Sam O'Connor - Head of Organisational Development, Mathew Buckley - Monitoring Officer/Secretary, Sam Campbell - Committee Manager, Andrew Townsend - Internal Audit (TIAA), Andy McCulloch - Internal Audit (TIAA) and Ross Woodley - External Audit (Mazars) were also present.

The meeting was held remotely via video-conference (Zoom). The meeting commenced at 10.00 a.m.

**PROCEDURAL**

**28/21 APOLOGIES FOR ABSENCE** - There were no apologies for absence.

**29/21 DECLARATIONS OF INTEREST** - There were no declarations of interest.

**30/21 MINUTES - *Resolved*** - That the minutes of the meeting of the Committee held on 22 February 2021 be confirmed as a correct record.

**31/21 MATTERS ARISING FROM THE MINUTES, OTHER THAN ON THE AGENDA** - There were no matters arising.

**GOVERNANCE**

**32/21 UPDATE: MATTERS ARISING/FEEDBACK FROM FIRE AUTHORITY** - The Monitoring Officer/Secretary provided feedback on items considered by the Fire Authority at its meetings of 26 March 2021.

***Resolved*** - That the update be received.

**Audit**

**33/21 EXTERNAL AUDIT UPDATE** - Ross Woodley (Mazars) submitted the draft External Audit Strategy Memorandum for 2020/21.

No changes had been made to the audit plan considered at the Committee's previous meeting (Minute 21/21 refers) and the timelines had since been agreed, with most of the audit due to be completed by early July 2022. The Pension Fund Account would be audited earlier than it had been in the previous year, potentially by August 2022.

***Resolved*** - That the update be received.

**34/21 INTERNAL AUDIT ANNUAL REPORT 2020/21** - Andy McCulloch (TIAA) submitted the Internal Audit Annual Report 2020/21.

Three of the individual audit reports were yet to be finalised and the final version of the Internal Audit Annual Report would be submitted to the Fire Authority at its meeting due to be held on 30 April 2021. While Covid-19 had significantly impacted the Service during 2020/21, the impact on the internal audit process had been minimal. Of the 10 audits conducted during the year, three had concluded with 'substantial assurance' and seven with 'reasonable assurance' judgments. The majority of the recommendations related to policy and adherence to policy and none of the audits had yielded a 'category 1' recommendation.

**Resolved -** That the report be received.

## **FINANCE AND PERFORMANCE**

### **35/21 MANAGEMENT ACCOUNTS FOR THE PERIOD ENDING 28 FEBRUARY 2021 -**

The Head of Finance submitted the management accounts for the period ending 28 February 2021.

The management accounts were the final ones that would be received by the Committee during the 2020/21 financial year. The accounts projected a £440,000 underspend. The Service had underspent in some areas as a result of Covid-19 and provision had been made for priorities predicted for 2021/22. There had been some slippage in the Capital Programme. The Service's reserves have increased from £10.9m to around £13m which will reduce as a result of the priorities addressed during 2021/22. A Member queried why the Service had continued to invest money for such low returns and the Head of Finance explained that there were limits on the amounts that the Service could hold in its bank current accounts at any one time and that investments had been made to avoid extra charges and minimise risk by ensuring that the Authority's cash balances are held across a number of different counterparties.

**Resolved -** That the management accounts for the period ending 28 February 2021 be received.

### **36/21 CIPFA FINANCIAL MANAGEMENT CODE RISK ASSESSMENT UPDATE -** The Head of Finance submitted the CIPFA Financial Management Code risk assessment.

The CIPFA Code of Practice had been circulated to the Committee prior to the meeting. The Service's associated risk assessment showed that it was already broadly compliant with the Code. It would need to be fully compliant by 2022, but only three points on the risk assessment remained to be addressed.

**Resolved -** That the update be received.

### **37/21 DRAFT ANNUAL GOVERNANCE STATEMENT 2020/21 -** The Director of Service Improvement submitted a report summarising the draft Annual Governance Statement 2020/21.

An updated version of the draft Annual Governance Statement, which took into account recently published CIPFA guidance, had been circulated to the Committee prior to the meeting. The updated version would be received by the Fire Authority at its meeting due to be held on 30 April 2021. The Annual Governance Statement was linked to the Service's corporate risk management processes and an internal audit of governance had been undertaken during 2020/21. A Member highlighted the need for the Statement to be updated in the light of the Committee's recently-reduced membership. A Member queried whether the Committee would be offered some form of annual appraisal by the Fire Authority.

**Resolved -** (a) That the report be received;

(b) that the draft Annual Governance Statement be updated to incorporate recent changes to the Committee's membership, and

(c) that the Chair of the HFA and the Monitoring Officer consider an appraisal process for the GAS Committee.

**38/21 HMICFRS INSPECTION UPDATE** - The Director of Service Improvement provided the Committee with a verbal update in relation to Her Majesty's Inspectorate of Constabulary and Fire and Rescue Service's (HMICFRS).

A Member Day had been held in order to discuss the contents of the Inspectorate's annual State of Fire and Rescue Report. No new recommendations had been made, but the six recommendations made in the previous year's report had yet to be actioned by the Government. The Service had been preparing for its next inspection, which would take place in September 2021 at the earliest.

**Resolved** - That the update be received.

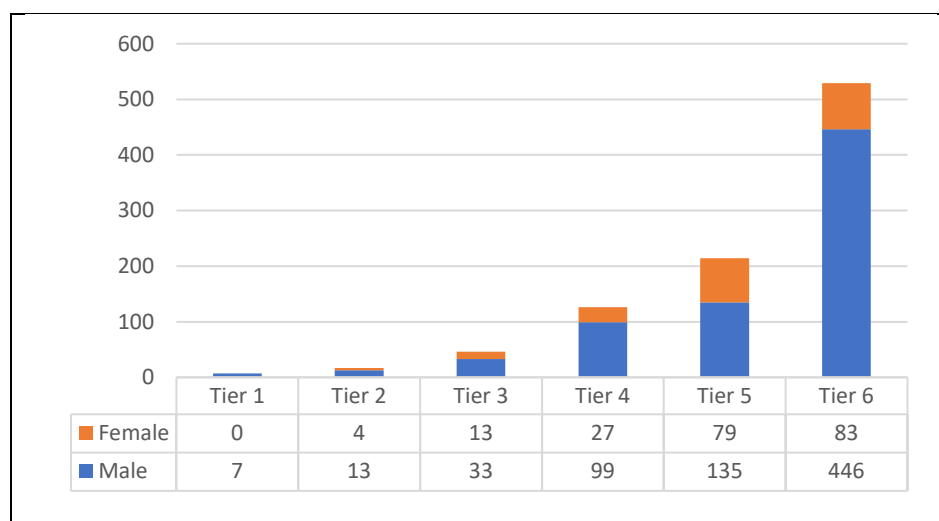
### **SCRUTINY PROGRAMME**

**39/21 DIVERSITY AND RECRUITMENT - PROGRESS AND PLANS** - The Temporary Director of People and Development submitted a report on diversity and recruitment in response to the Committee's scope.

The report and its appendices addressed the seven points raised by the Committee. The most recent version of the Service's Workforce Plan had been appended to the report and was in the process of being reviewed following a recent internal audit activity. The report also provided an update in relation to a previous scrutiny item focussed on training, promotion and development (Minute 62/19 refers).

The Service had used a headcount figure of 939, accounting for people holding multiple posts and excluding casual and zero-hour contracts. Overall, the Service employed significantly more men than women (733 and 206). Within the Service, most roles people were employed as either full time (437) or on-call (254) firefighters. Among firefighters, 93.6 percent (647) were male and 6.4 percent were female. The proportion of men in these roles meant that the 78 percent of the Service's employees were male. Among control room and support staff, however, 65 percent were female. The report split the job roles in the Service into six tiers, with tier 1 being the most senior, summarised as follows:

<b><u>Graph 7 - HFRS Gender Split by Tier</u></b>
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The most populated age-group across the Service was 38-48 years of age and 70 percent of the Service's staff members were over the age of 38. The Service had, in accordance with relevant guidance and the Office for National Statistics, been using the term 'black and minority ethnic' (BAME) in relation to its employees' ethnicities. Since the report had been published, new guidance had been issued which suggested that BAME be replaced with the term 'ethnic minorities'. Of the Service's 939 employees, 888 had identified themselves as non-BAME, 34 had not declared their ethnicity and 17 had identified themselves as BAME. 850 employees had identified as non-disabled, 68 had not declared whether they had a disability and 21 had identified themselves as disabled. 843 employees had identified themselves as heterosexual, 76 had not declared their sexuality and 20 had identified themselves as LGBT+. 484 employees had identified themselves as Christian, 358 had indicated that they did not consider themselves part of a religion, 69 had not declared whether or not they considered themselves part of a religion, four indicated that they were Buddhist, one indicated that they were Muslim and 23 indicated that they were part of a religion other than Christianity, Islam or Buddhism.

The above compared to a local demographic summarised as follows:

**Table 1 - HFRS Diversity Profile Compared to the Humber Area**

Unitary Authority	Population	Gender		Ethnicity	
		Male	Female	White	BAME
Hull	259,778	50.5%	49.5%	89.7%	10.3%
East Riding of Yorkshire	341,173	51%	49%	96.1%	3.9%
North East Lincolnshire	159,821	51%	49%	97.4%	2.6%
North Lincolnshire	170,786	49.3%	50.7%	96.5%	3.5%
Humber Area	931,558	50.5%	49.5%	94.6%	5.4%
HFRS Profile	939	78.1%	21.9%	94.6%*	1.8%*

\*3.6% of staff did not declare their ethnicity

While the Service's ageing workforce was of concern, it acknowledged that this represented an opportunity for the workforce to diversify as it replaced retiring employees. The data from the 2021 Census would help the Service to understand its demographics in relation to those of the communities it served. The Service had resolved to open all of its promotional processes to external applicants in future, providing further opportunities to work towards a workforce that reflected the surrounding demographics.

The Service had undertaken some 'positive action' initiatives in the past, but had not yet adopted a strategy or plan. Most recently, the Service had undertaken a campaign (linked with the National Fire Chiefs Council) to increase diversity among on-call firefighters. The Service was in the process of developing a Positive Action Strategy and Framework.

The Committee raised the following points:

- **Positive Action** - The report cited anecdotal evidence of misunderstanding of positive action among staff members and a Member queried whether it might have been confused with positive discrimination. The Service would need to ensure that its employees understood the concept of positive action and that it did not equate to lowering standards for the sake of diversity.
- **Non-disclosure** - The report had summarised the Service's demographics in relation to protected characteristics and some employees had opted not to disclose in response to some categories. The Committee was keen for the Service to understand the reasons why employees had chosen not to disclose these details.
- **Recruitment** - A member highlighted that the Service had recruited 11 female firefighters since 2017 and asked what the Service had done and intended to do to ensure that the male-to-female ratio began to equalise. Prior to 2017, the Service had not recruited any firefighters since 2007, meaning that the ratio had not been balanced for 10 years. The Service was part of a regional recruitment campaign (the East Yorkshire campaign) which aimed to advertise the benefits of living and working in the region to professionals from a variety of backgrounds. The Service was due to recruit in October 2021 for April 2022 training courses. The Positive Action Strategy and Framework would be applied across the whole Service and would aim to develop and promote a more diverse workforce in the long-term. In addition, the Service was looking into direct access recruitment processes (like those undertaken by Humberside Police in recent years) to potentially recruit people from outside of the organisation into more senior roles.
- **Internal Audit** - TIAA had conducted an audit of workforce planning (appendix 2 to the report) and the Service was in the process of addressing its recommendations. The Committee was keen to ensure that the Service was able to measure and evidence any claims about its workforce and it was agreed that a key aim of the next staff attitude survey would be to establish a baseline in relation to organisational culture. The Committee also asked whether the data presented in the report could be compared to other fire and rescue services to provide further context.
- **Exit Interviews** - The Service currently conducted electronic exit interviews, which could be easily ignored. The Committee agreed that the Service should consider restoring this function to HR in order that exit interviews might be conducted in person, or at least in a more direct manner to improve the response rate so that the Service might understand why employees had resigned.

**Resolved** - (a) That the Service's future Positive Action Strategy and Framework be applied consistently;

(b) that the Service ensure that its employees fully understand its Positive Action Strategy and Framework;

(c) that the Service gather improved data in order to understand the makeup of its workforce in comparison to local demographics and other fire and rescue services;

(d) that the Service improve its exit interview process to understand why employees leave the Service, and

(e) that the Committee be updated about to the Service's progress in relation to the revision of its workforce plan and the recommendations of the associated internal audit report.

**40/21 GAS COMMITTEE SCRUTINY PROGRAMME 2020/21** - The Committee Manager submitted a report summarising the Committee's Scrutiny Programme 2020/21.

**Resolved** - that a workshop be held prior to the Committee's AGM, due to be held on 14 June 2021, to consider items for the 2021/22 Scrutiny Programme.

**41/21 ANY OTHER BUSINESS** - There was no other business.

**42/21 EXCLUSION OF THE PRESS/PUBLIC - Resolved** - That the press and public be excluded from the meeting for consideration of the following item on the grounds that it involves the likely disclosure of exempt information as defined in paragraph 1 of Part 1 of Schedule 12A of the Local Government Act 1972.

In making its decision the Committee confirmed that having regard to all the circumstances it was satisfied that the public interest in maintaining the exemption outweighed the public interest in disclosing the information.

**43/21 INVESTIGATION REPORT** - Internal Audit (TIAA) submitted an investigation report following whistleblowing allegations.

**Resolved** - That the report be received.

Humberside Fire Authority  
30 April 2021

Report by the  
Executive Director of Corporate  
Services/S.151 Officer

## MANAGEMENT ACCOUNTS 2020/21 – BASED ON PERIOD ENDING 28 FEBRUARY 2021

### SUMMARY

1. This report highlights the current financial position based on information to 28 February 2021.
2. The end of year projections are set out below for the revenue budget, the capital programme and the pensions account.

### RECOMMENDATIONS

3. That Members take assurance from this report and the Authority's financial position for the period ending 28 February 2021.

### PERIOD ENDING 28 FEBRUARY 2021

4. The summary estimated outturn position for the current financial year based on information to 28 February 2021 is as follows:-

CATEGORY	2020/21 OUTTURN PROJECTION
HFA	
Revenue Budget	£444k underspend
Capital Programme	£3.155m expenditure against the £6.752m allocation
Pensions Account	£11.157m deficit

5. In arriving at the estimated outturn position for the revenue budget (an underspend of £444k) some important provisions have been made for revenue projects that will require funding to be carried forward into 2021/22. Specifically these are:-
  - £150k to meet the costs of the Uniform Replacement Project which will now be delivered in 2021/22;
  - £150k to meet the costs of the replacement of our boat capability and associated vehicles and equipment;
  - £400k to partially meet the Authority's likely contribution to the infrastructure replacement costs in 2021/22 for the East Coast and Hertfordshire Control Room Consortium (EHCRC) partnership;
  - £100k of the grant funding issued by the Home Office to be carried forward to meet costs associated with the Grenfell Project and Protection initiatives.

This is the final set of Management Accounts for the 2020/21 financial year and work is now underway on producing our outturn position and Annual Accounts for the 2020/21 financial year.

## COVID-19 UPDATE – FINANCIAL IMPLICATIONS

6. The Service has been responding to the COVID-19 crisis and costs have been incurred on staffing, Personal Protective Equipment (PPE) and also IT equipment to support agile working. Limited costs were incurred before the close of the 2019/20 financial year (£9k).
7. Further costs have been incurred in the 2020/21 financial year as the Service's response to the crisis has intensified and therefore the full grant has been spent or committed by 31 March 2021.
8. Further details on all of these areas are available electronically alongside the agenda papers on the Fire Authority's website at [www.humbersidefire.gov.uk/fire-authority](http://www.humbersidefire.gov.uk/fire-authority).

## STRATEGIC PLAN COMPATIBILITY

9. The production of robust, timely and detailed information in relation to the Authority's financial position contributes to the Strategic Plan objective of a 'Stronger Organisation'. The information specifically underpins good governance and good financial management.

## FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

10. Sound financial management contributes to the achievement of the Authority's objectives.

## LEGAL IMPLICATIONS

11. No direct issues arising.

## EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS

12. No direct issues arising.

## CORPORATE RISK MANAGEMENT IMPLICATIONS

13. The monthly Management Accounts help to ensure that the Authority meets its legal and regulatory requirements.

## HEALTH AND SAFETY IMPLICATIONS

14. No direct issues arising.

## COMMUNICATION ACTIONS ARISING

15. No direct issues arising.

## DETAILS OF CONSULTATION AND/OR COLLABORATION

16. No direct issues arising.

## BACKGROUND PAPERS AVAILABLE FOR ACCESS

17. Working papers for 2020/21 Budget Monitoring.

## RECOMMENDATIONS RESTATED

18. That Members take assurance from this report and the Authority's financial position for the period ending 28 February 2021.



Officer Contact: Kevin Wilson ☎ 01482 567183  
Executive Director of Corporate Services/S.151 Officer

Humberside Fire & Rescue Service  
Summergroves Way  
Kingston upon Hull

KW  
21 April 2021



## Humberside Fire & Rescue

### Internal Audit Annual Report

2020/21

April 2021

# Internal Audit Annual Report

## Introduction

This is the 2020/21 Annual Report by TIAA on the internal control environment at Humberside Fire & Rescue Service. The annual internal audit report summarises the outcomes of the reviews we have carried out on the organisation's framework of governance, risk management and control. This report is designed to assist Humberside Fire Authority in making its annual governance statement.

## Limitations on our opinion arising from Covid-19

The impact of COVID-19 on all public sector services has been significant including changes to ways of working, reprioritising services, redeploying staff and stretching capacity; the impact has been present throughout the whole of 2020/21 in varying degrees.

For internal audit, it has raised the question of whether they have been able to undertake sufficient internal audit work to gain assurance during 2020/21. This is a key consideration to fulfil the requirement of the Public Sector Internal Audit Standards (PSIAS) for the Head of Internal Audit (HIA) when issuing their annual opinion on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control. This opinion is in turn one of the sources of assurance that the organisation relies on for its Annual Governance Statement. Factors that need to be taken in to account in reaching a conclusion include:

- Has any reduction in coverage compared to what was planned resulted in insufficient assurance work?
- Have any limitations in the scope of individual assignments resulted in it only being possible to place partial assurance on the outcome?
- Have changes in ways of working led to gaps in the governance, risk management and control arrangements?

TIAA understands the considerable challenges and the difficult decisions that organisations are having to deal with, however, the professional and regulatory expectations on public bodies to ensure that their internal audit arrangements conform with PSIAS have not changed. In this difficult situation, heads of internal audit will need to consider whether they can still issue the annual opinion or whether there will need to be a limitation of scope.

A limitation of scope arises where the HIA is unable to draw on sufficient assurance to issue a complete annual opinion in accordance with the professional standards. This is an issue not only for the HIA but also for the leadership team and the audit committee who normally rely on that opinion. It may also have wider consequences for stakeholder assessments of the organisation.

## What this means for Humberside Fire & Rescue

There has been minimal or no impact on the delivery of the internal audit work for 2020/21 as a result of the COVID-19 pandemic. Whilst there was an impact on delivery of the work in the early part of the year during the initial lockdown, we are able to deliver the planned work by year-end. There have been no changes to the planned work as a result of COVID-19; any changes to the plan were based on purely on business/operational need.

### HEAD OF INTERNAL AUDIT'S ANNUAL OPINION

**TIAA is satisfied that, for the areas reviewed during the year, Humberside Fire & Rescue has reasonable and effective risk management, control and governance processes in place.**

**This opinion is based solely on the matters that came to the attention of TIAA during the course of the internal audit reviews carried out during the year and is not an opinion on all elements of the risk management, control and governance processes or the ongoing financial viability or your ability to meet financial obligations which must be obtained by the Service from its various sources of assurance.**

## Internal Audit Planned Coverage and Output

The 2020/21 Annual Audit Plan approved by the Governance, Audit and Scrutiny Committee was for 66 days of internal audit coverage in the year.

During the year there was one change to the Audit Plan. The Assurance Review of Risk Management Business Continuity Staff Shortages was replaced by an Assurance Review of Strategic Risk Mitigation at the request of HFRS management. This change was approved by the Governance, Audit and Scrutiny Committee.

The planned work that has been carried out against the plan is set out at Annex A.

TIAA was requested to undertake two investigations towards the end of the year, both of which were ongoing at the time this report was issued. These do not form part of the internal audit plan and do not impact on the HOI Annual Opinion.

## Assurance

TIAA carried out 10 reviews, which were designed to ascertain the extent to which the internal controls in the system are adequate to ensure that activities and procedures are operating to achieve the Service's objectives. For each assurance review an assessment of the combined effectiveness of the controls in mitigating the key control risks was provided. Details of these are provided in Annex A and a summary is set out below.

Assurance Assessments	Number of Reviews	Previous Year
Substantial Assurance	3	1
Reasonable Assurance	7	5
Limited Assurance	0	1
No Assurance	0	0

The areas on which the assurance assessments have been provided can only provide reasonable and not absolute assurance against misstatement or loss and their effectiveness is reduced if the internal audit recommendations made during the year have not been fully implemented.

We made the following total number of recommendations on our audit work carried out in 2020/21. The numbers in brackets relate to 2019/20 recommendations

Urgent	Important	Routine
0 (1)	14 (20)	16 (11)

## Audit Summary

**Control weaknesses:** There were no areas reviewed by internal audit where it was assessed that the effectiveness of some of the internal control arrangements provided 'limited' or 'no assurance'.

**Recommendations Made:** We have analysed our findings/recommendations by risk area and these are summarised below.

Risk Area	Urgent	Important	Routine
Directed			
Governance Framework	-	6	5
Risk Mitigation	-	-	-
Compliance	-	6	9
Delivery			
Performance Monitoring	-	2	1
Financial Constraint	-	-	-
Resilience	-	-	1

**Operational Effectiveness Opportunities:** One of the roles of internal audit is to add value and during the financial year we provided advice on opportunities to enhance the operational effectiveness of the areas reviewed and the number of these opportunities is summarised below.

Operational
1

## Independence and Objectivity of Internal Audit

There were no limitations or restrictions placed on the internal audit service which impaired either the independence or objectivity of the service provided.

## Performance and Quality Assurance

The following Performance Targets were used to measure the performance of internal audit in delivering the Annual Plan.

Performance Measure	Target	Attained
Completion of Planned Audits	100%	100%
Audits Completed in Time Allocation	100%	100%
Final report issued within 10 working days of receipt of responses	95%	100%
Compliance with Public Sector Internal Audit Standards	100%	100%

Ongoing quality assurance work was carried out throughout the year and we continue to comply with ISO 9001:2015 standards. An independent external review was carried out of our compliance of the Public Sector Internal Audit Standards (PSIAS) in 2017 and in particular to meet the requirement of an independent 5 year review, the outcome confirmed full compliance with all the standards. Our work also complies with the IIA-UK Professional Standards.

## Release of Report

The table below sets out the history of this Annual Report.

Date Draft Report issued:	31 <sup>st</sup> March 2021
Date Final Report issued:	16 <sup>th</sup> April 2021

## Annexes

### Annex A

#### Actual against planned Internal Audit Work 2019/20

System	Type	Planned Days	Actual Days	Assurance Assessment	Comments
Business Safety	Assurance	6	6	Reasonable	Final report issued
Key Financial Controls	Assurance	9	9	Substantial	Final report issued
Workforce Planning	Assurance	6	6	Reasonable	Final report issued
Arson Prevention	Assurance	4	4	Substantial	Final report issued
ICT Cyber Security	Assurance	4	4	Reasonable	Final report issued
Health and Safety	Assurance	6	6	Reasonable	Final report issued
HR – Absence Management	Assurance	6	6	Reasonable	Final report issued
Performance Management	Assurance	4	4	Substantial	Final report issued
National Operational Guidance	Assurance	6	6	Reasonable	Final report issued
Risk Management Business Continuity Staff Shortages	Assurance	4	0	-	Replaced by Strategic Risk Mitigation
Strategic Risk Mitigation	Assurance	0	4	Reasonable	Final report issued
Follow Up	Follow Up	3	3	N/A	Final report issued
Annual Planning for 2020/21	Management	2	2	N/A	Annual Plan issued
Annual Report for 2020/21	Management	1	1	N/A	Annual Report issued
Management, Planning & Joint Audit Committee Reporting / Support	Management	5	5	N/A	N/A
<b>Total Days</b>		<b>66</b>	<b>66</b>		





**Humberside Fire Authority  
30 April 2021**

**Report by the Executive Director of  
Corporate Services/S.151 Officer  
and Monitoring Officer/Secretary**

## **DRAFT ANNUAL GOVERNANCE STATEMENT 2020/21**

### **SUMMARY**

1. The CIPFA/SOLACE good governance framework brought together a number of governance principles and requirements, including replacing the previous Statement of Internal Control with a new Annual Governance Statement (AGS) from 2007/08.
2. The AGS takes account of CIPFA Bulletin 06 issued 11 February 2021 providing guidance relevant for the annual review of the system of internal control and publication of the Annual Governance Statement (AGS). This guidance concerns the impact of the continuing Covid-19 pandemic on governance in local government bodies and the requirements of the Delivering Good Governance in Local Government Framework 2016 CIPFA and Solace (the Framework). It also takes into account the introduction of the CIPFA Financial Management Code 2019 (FM Code) during 2020/21.
3. This paper sets out a draft AGS in respect to 2020/21 (Appendix 1). Given the content of the Statement, it is felt desirable that the Authority should specifically review the AGS separate from the Annual Accounts, although the AGS will form part of the Annual Accounts once approved in June 2021.
4. It is also desirable that the Authority receive this report in advance of the draft Annual Accounts at the June 2021 meeting.
5. This report was considered by the Governance, Audit and Scrutiny Committee at the meeting held 12 April 2021.

### **RECOMMENDATIONS**

6. The Authority is asked to approve the Annual Governance Statement for 2020/21 as set out at Appendix 1.

### **THE ANNUAL GOVERNANCE STATEMENT – A REFRESHER**

7. Regulation 4 of the Accounts and Audit Regulations 2003 required the Humberside Fire Authority to conduct an annual review of the effectiveness of its system of internal control and publish a Statement of Internal Control (SIC) up until 2006/07.
8. From 1 April 2007 the SIC was replaced by the AGS. Guidance was issued by the CIPFA Finance Advisory Network in respect to the production of the AGS. In addition, guidance has also been set out in the CIPFA/SOLACE good governance framework.
9. The six key principles of good governance as laid down in the 2007 framework have been reviewed within the 2016 framework and re-issued as seven key principles:

- (i) Behaving with integrity, demonstrating strong commitment to ethical values. And respecting the rule of law.
  - (ii) Ensuring openness and comprehensive stakeholder engagement.
  - (iii) Defining outcomes in terms of sustainable economic, social, and environmental benefits.
  - (iv) Determining the interventions necessary to optimise the achievement of the intended outcomes.
  - (v) Developing the entity's capacity, including the capability of its leadership and the individuals within it.
  - (vi) Managing risks and performance through robust internal control and strong public financial management.
  - (vii) Implementing good practices in transparency, reporting, and audit to deliver effective accountability.
10. The Authority's governance framework comprises the systems and processes, culture and values, by which the HFA is directed and controlled. The framework demonstrates how the HFA accounts to, engages with and leads within the community. It enables the HFA to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost effective services.
11. The Constitution of the Authority, published on the Humberside Fire and Rescue Service Website, includes:
- Committee Membership and Terms of Reference;
  - Scheme of Delegation to Officers;
  - Financial Procedure Rules;
  - Contract Procedure Rules;
  - Members' Code of Conduct;
  - Officer/Employees' Code of Conduct;
  - Protocol for Member and Officer Relationships;
  - Code of Corporate Governance.
12. In essence the AGS is the formal Statement (signed by the Chairperson of the Humberside Fire Authority, the Chief Fire Officer and Chief Executive and the Statutory Officers) that recognises, records and publishes the governance arrangements of the Humberside Fire Authority in line with that new framework. The AGS is much broader than the SIC, although the overall assurance process remains. The AGS must reflect the governance framework.
13. The assurances in respect to the AGS derive from the following:
- a. Internal Audit;
  - b. S.151 Officer;
  - c. Secretary/Monitoring Officer;
  - d. Strategic Leadership;
  - e. Members;

- f. External Audit – through assessment;
  - g. Third parties, including partnership arrangements.
14. There is no model AGS, but rather the Guidance sets out best practice in developing an AGS.
  15. The production of the AGS dovetails strongly with corporate risk management and the Annual Audit Report from Internal Audit.
  16. Attached at Appendix 1 is the draft AGS. This is in draft form at present and will be concluded in readiness for the approval of the Annual Accounts (Audited) in July 2020.

#### STRATEGIC PLAN COMPATIBILITY

17. This report underpins good governance arrangements, which is an enabler of the current Strategic Plan.

#### FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

18. None arising directly.

#### LEGAL IMPLICATIONS

19. This report and attachments ensures that the Fire Authority complies with regulation 4(2) of the Accounts and Audit Regulations 2003 as amended 2006 and 2011.

#### EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS

20. Assurances are provided regarding adoption and maintenance of Public Sector Equality Duty (PSED) requirements.

#### CORPORATE RISK MANAGEMENT IMPLICATIONS

21. Corporate Risk and Opportunity Management is a key element of good governance action planning.

#### HEALTH AND SAFETY IMPLICATIONS

22. None arising directly.

#### COMMUNICATION ACTIONS ARISING

23. The approved Annual Governance Statement will be published on the Humberside Fire and Rescue Service Website.

#### DETAILS OF CONSULTATION AND/OR COLLABORATION

24. Consultation in producing the AGS has taken place with the Strategic Leadership Team and GAS.

## BACKGROUND PAPERS AVAILABLE FOR ACCESS

25. CIPFA/SOLACE – Delivering Good Governance in Local Government – Framework and Guidance Note for English Authorities.

## RECOMMENDATIONS RESTATED

26. The Authority is asked to approve the Annual Governance Statement for 2020/21.

**K WILSON**  
**M BUCKLEY**

Officer Contact: Simon Rhodes ☎ 01482 567479  
Head of Corporate Assurance

Mathew Buckley ☎ 01482 567174  
Monitoring Officer/Secretary

Humberside Fire & Rescue Service  
Summergroves Way  
Kingston upon Hull

SR  
12 April 2021

**Humberside Fire Authority**

**ANNUAL GOVERNANCE STATEMENT 2020/21**

**Scope of Responsibility**

1. The Humberside Fire Authority (HFA) is responsible for ensuring that its business is conducted in accordance with the law and proper standards and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. The HFA also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.
2. In discharging this overall responsibility, the HFA is responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, which includes arrangements for the management of risk.
3. The HFA has approved and adopted a code of corporate governance applicable to Members, which is consistent with the principles of the Chartered Institute of Public Finance and Accountancy/Society of Local Authority Chief Executives (CIPFA/SOLACE) Delivering Good Governance in Local Government Framework 2016 Edition. A copy of the code can be obtained from the Secretary to the Fire Authority.
4. The HFA has approved and adopted a set of Principles of Good Conduct for employees.
5. This statement explains how the HFA has complied with the code and also meets the requirements of regulation 4(3) of the Accounts and Audit (England) Regulations 2011 in relation to the publication of an Annual Governance Statement.

**The purpose of the governance framework**

6. The governance framework comprises the systems and processes, culture and values, by which the HFA is directed and controlled. The framework demonstrates how the HFA accounts to, engages with and leads within the community. It enables the HFA to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost effective services.
7. The system of internal control is a significant part of the governance framework and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable and not absolute assurance of effectiveness.
8. The system of internal control is based on an on-going process designed to identify and prioritise the risks to the achievement of the HFA's policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.
9. The governance framework has been in place at the HFA for the year ended 31 March 2021 and up to the date of approval of the Annual Performance Report and Statement of Accounts.

## **The Governance Framework 2020/21**

10. The key elements of the HFA's governance framework included:
- a) The Constitution of the Authority which includes:
    - Committee Membership and Terms of Reference;
    - Scheme of Delegation to Officers;
    - Financial Procedure Rules;
    - Contract Procedure Rules;
    - Members' Code of Conduct;
    - Employees' Code of Conduct;
    - Protocol for Member and Officer relationships;
    - Code of Corporate Governance.
  - b) The Governance, Audit and Scrutiny (GAS) Committee, as well as the HFA itself, received regular reports on the Service's performance arrangements.
  - c) An approved Corporate Risk/Opportunity Management Policy.
  - d) An approved 'Local Code of Corporate Governance' in accordance with the CIPFA/SOLACE Framework for Corporate Governance.
  - e) The designation of the Chief Fire Officer as Chief Executive responsible to the HFA for all aspects of operational management.
  - f) The designation of the Executive Director Corporate Services as S.151 Officer (Local Government Act 1972) in accordance with Section 112 of the Local Government Finance Act 1988 and conforming with the governance requirements of the CIPFA Statement on the role of the Chief Financial Officer in Local Government (2010).
  - g) The designation of the Secretary as Monitoring Officer with the requirement to report to the full HFA if it is considered that any proposal, decision or omission would give rise to unlawfulness or maladministration.
  - h) The Strategic Leadership Team (SLT) have considered a strategic overview of the HFA control environment including the response to external audit, performance management, strategic planning and scrutiny of Risk and Opportunity Management.
  - i) The production of quarterly Management Accounts which are distributed to all Members of SLT and are considered at the GAS Committee meetings and the HFA.
  - j) The Service and Finance Planning process.
  - k) In accordance with the Service Business Planning Framework the Strategic Plan and Integrated Risk Management Plan (IRMP) for 2018/21 ensure a three-year plan, linked to financial planning.
  - l) The Strategic Plan 2018/21 includes strategic objectives and Directorate responsibilities. Strategic Plan 2021/24 was approved by HFA in December 2020 following consultation.

- m) The IRMP 2018/21 takes account of the requirements of the 2018 Fire and Rescue National Framework for England, providing a detailed assessment of the risks facing our communities and personnel and the measures taken to mitigate those risks. IRMP refresh for 2021/24 was approved by HFA in December 2020 following consultation.
- n) Current Anti-Fraud and Corruption, Anti-Bribery and Anti-Money Laundering Policies. We publish these and other such Policies, associated data and information on the HFRS Website under Data Transparency, please follow this [Link](#).
- o) Subscription to the services of whistleblowing charity Protect. Staff are informed of this service via updates in wage slips as well as via the Whistleblowing Policy which is published on the external website.
- p) A Fire and Police Transformation Board has been established to develop a number of collaborative workstreams. These have been categorised under the main headings as follows:
  - Organisation;
  - Delivery of Service;
  - Estates;
  - Futurist.

Directors have been allocated lead HFRS responsibility for specific workstreams.
- q) A Service Improvement Plan has been developed to ensure that improvement areas across the Service are documented, evidenced and regularly reviewed.
- r) Member and Officer Development Programmes. During 2020/21 Officers undertook a facilitated supportive leadership development programme. Access to the T2Hub of Management and Leadership Self Development resources, Continual Professional Development through Leadership Forum Guest Speakers and Directors completing the Executive Leadership Programme.
- s) 8 scheduled Member Days to support Member development and awareness conducted as remote sessions during Covid-19 restrictions.
- t) An approved Treasury Management Policy and Prudential Indicators.
- u) An approved HFA Performance and Risk Framework supported by the Performance and Risk Framework Policy and incorporating, amongst others, the following guidance notes:
  - Performance Measurement;
  - Corporate Reporting of Performance;
  - Project and Programme Management;
  - Organisational Risk and Opportunity Management.
- v) A Protective Marking Scheme (based upon the Her Majesty's Government Security Framework).
- w) Implementation of a Public Sector Equality Duty (PSED) action plan to implement its priorities. Actions within this plan has been fully integrated within the LGA FRSEF Self-assessment/action planning process and Priorities were consulted upon during 2020.

- x) Aligned service delivery with our Local Authorities (Hull, East Riding, North Lincolnshire and North East Lincolnshire) through District management teams, is helping partnership work and assists us to be closer and more accountable to local communities.
- y) Retention of the Customer Service Excellence Award, conducted in February each year.
- z) Annual Performance and Quarterly Performance Reports to HFA are published on our Website.
- aa) A Pension Board, as required under The Firefighters' Pension Scheme (Amendment) (Governance) Regulations 2015, was formed in 2015 to oversee compliance in the operation of the Firefighters' Pension Scheme (FPS). The Pension Board met twice during 2020/21 and also had a training input session.
- bb) The Deputy Chief Fire Officer chairs a Joint Consultative Committee attended by all Representative Bodies to discuss any matters relating to staff terms and conditions.
- cc) Member Champions continue to support functional areas and are invited to attend local District performance meetings and to meet with Directors.
- dd) Consultation on our Council Tax Precept for 2020/21 drew a significant number of responses from our community (2572). This allowed Fire Authority Members to make an informed decision on this matter.
- ee) In line with legislative requirements HFRS published its Gender Pay Gap Report by the end of March 2021.

### **Review of Effectiveness**

- 11. The HFA has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of effectiveness is informed by the work of the executive managers within the Authority who have responsibility for the development and maintenance of the governance environment, the head of internal audit's annual report, and also by comments made by the external auditors and other review agencies and inspectorates.
- 12. HFA reviews the effectiveness of the GAS Committee and receives an Annual Report at the HFA Annual General Meeting. A review of the size and role of the GAS Committee was conducted at the HFA Meeting 7 December 2020, membership was reduced from seven to five (upon the completion of terms of office). The HFA Constitution was amended to reflect changes.
- 13. The GAS Committee has continued its scrutiny programme during 2020/21, including the scrutiny of the Effectiveness of the Protection Risk-Based Targeting Strategy, Development and Delivery Plans to Support the Health and Wellbeing of Staff, Safety Protection - Engagement with the Commercial/Business Community and Diversity and Recruitment - Progress and Plans.
- 14. The induction and training of new Members during 2020/21 has further enabled Members to discharge the functions of the HFA.



15. During the 2020/21 financial year, the HFA and Committees met as follows:
- \* HFA 9 occasions;
  - \* GAS Committee 7 occasions;
  - \* Pension Board 2 occasions.
  
  - \* The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020 came into force on 4<sup>th</sup> April 2020. Subsequently all meetings of the Authority and Committees were held remotely.
16. Members of the Pension Board receive reports against a number of key workstreams designed to ensure that the Board operates in compliance with the Pension Regulator's Code of Practice for Pension Boards, this encompasses three broad areas Governance, Administration and Communication.
17. The review of the effectiveness of the system of internal control is informed by:
- a. The work of Senior Officers;
  - b. The work of Internal Audit;
  - c. Corporate Risk and Opportunity Management;
  - d. Performance information;
  - e. The Authority's External Auditor, in their Annual Governance Report, Annual Audit Letter and other reports.
18. Internal Audit has undertaken a number of reviews during 2020/21. The following areas were covered:
- Health & Safety
  - Business Safety
  - Performance Management
  - Arson Prevention
  - Workforce Planning
  - Key Financial Controls
  - ICT Cyber Security
  - HR - Absence Management
  - National Operational Guidance (NOG)
- In response to the Covid-19 pandemic reviews were conducted remotely.
19. A full self-assessment has been undertaken against the criteria contained within the CIPFA Financial Management Code. The self-assessment shows the Authority to be almost fully compliant with only two areas of partial compliance that will be developed in 2021/22. These are the further development of objective measures to assess the risks to financial sustainability and the embedding of our option appraisal methodology. These two areas are included in the Action Plan for further work in 2021/22. Full compliance against the code is mandatory from 1 April 2022 with the coming year as a transition towards that compliance.
20. The overall Head of Internal Audit opinion for the period 1 April 2020 to 31 March 2021 provides Reasonable Assurance.
21. The effectiveness of the governance framework is considered throughout the year by SLT, the GAS Committee and HFA. Much of this is discharged through internal reports such as the quarterly Management Accounts and the quarterly Performance Reports

as well as the work of Internal and External Audit. Any significant issues are captured via the risk management system and considered by the Fire Authority where appropriate.

22. A comprehensive Assurance Map for the Service has been developed to help inform the work of SLT, the GAS Committee and Internal Audit.
23. We have been advised on the implications of the result of the review of the effectiveness of the governance framework by SLT and the GAS Committee, and that the arrangements continue to be regarded as fit for purpose in accordance with the governance framework.

#### **Significant Governance Issues 2020/21**

24. Members are assured that the Service has appropriate arrangements in place should use of the powers under the Regulation of Investigatory Powers Act (RIPA) 2000 be necessary. There was no use of RIPA or requests for covert surveillance during 2020/21.
25. In February 2016 HMG published the Policing and Crime Bill to improve the efficiency and effectiveness of police forces. The Bill received Royal Assent in January 2017 and the Act now places a statutory duty upon Fire and Rescue, Police and Ambulance services to collaborate. The Act also enables Police and Crime Commissioners (PCC) to take responsibility for fire and rescue services, where a Business Case is formed and there is local public support. We continue to proactively identify collaborative opportunities with the Police and Ambulance services, and other bodies. This has included:
  - A joint Emergency Service Fleet Management workshop with the Police.
  - A joint Estates (Operational and Strategic) function with Humberside Police.
  - Provision of a medical First Responder scheme in partnership with Yorkshire Ambulance (YAS), East Midlands Ambulance Service (EMAS).
  - A Falls Response Team with City Health Care Partnership (CHCP), NHS Hull Clinical Commissioning Group (CCG) and Hull City Council.
  - An agreement with Yorkshire Ambulance Service (YAS) for them to provide Service wide Clinical Governance.
  - Memorandums of Understanding with Humberside Police and Ambulance Trusts to support response activities including:
    - Searching for Missing Persons
    - Fire Investigation
    - Forced Entry for Medical Rescues
    - Drone
    - Bariatric
  - An Integrated Health Centre incorporating a Full-Time fire station, in partnership with Hull CCG.
  - A Fire and Police Transformation Board continues to commission and review collaboration opportunities, including shared estate at appropriate locations.
  - HFRS, Humberside Police, East Midlands Ambulance Service, Yorkshire Ambulance Service meet on a quarterly basis to discuss collaborative opportunities.
  - Shared provision of Health and Safety function.
  - HFRS providing Financial Management support to Humberside PCC.
  - 'Don't Cross the Line' campaign to support stopping attacks on Emergency Service Workers.
26. Following the first inspection of Effectiveness, Efficiency and People, by HMICFRS in November 2018, steps have been taken to react to inspection outcomes and prepare

the Service for inspection taking place in 2021/22. This includes development of a Service Improvement Plan, performance monitoring through a Strategic Leadership Team performance meeting held monthly and re-alignment of Director portfolios to incorporate a Director of Service Improvement.

27. Two Whistleblowing complaints were received by the Monitoring Officer during 2020/21 and were dealt with in accordance with the Whistleblowing Policy. An action plan has been developed to address discrepancies in the requirements for officer declarations of business interests, compared to the requirements placed on Members. The HFA Constitution will be reviewed and amended accordingly.

### **Action Plan**

28. Strategic Risk and Opportunity Register

The action points outlined below are included within our Strategic Risk and Opportunity Register and Action Plan, progress will be monitored throughout 2021/22.

- Incorporation of the Humberside PCC onto the HFA, including any arising changes to governance arrangements and mechanism for PCC to produce Business Case to take over governance of Fire and Rescue.
- Impact of EU Exit. (Complete)
- Continued Scenario Planning to mitigate the effect of any further reductions or challenges on finances.
- Impact of firefighter pension remedy implementation.
- Cyber Security threats.
- HMICFRS arising issues.
- Emergency Services Network.
- Grenfell Inquiry Outcomes.
- LGPS Exit Pay Cap.
- Covid Staff Shortages.
- Environmental Sustainability.

29. COVID-19 Pandemic.

Influenza Management Business Continuity Plans implemented enabling a very good level of Service to be maintained. This includes Influenza Management Team (IMT) and Business Interruption Management Team (BIMT) Meetings. A separate Covid-19 Risk Register has been produced. Widespread support is being provided to NHS partners and Local Authorities co-ordinated via the Local Resilience Forum. HMICFRS conducted a themed inspection of the HFA and Service response to Covid-19 resulting in a positive assessment of the decisions taken, actions implemented and contributions made by staff.

30. CIPFA Financial Management Code

Further development of objective measures to assess the risks to financial sustainability and embedding of our option appraisal methodology will be developed during 2021/22.

### **Conclusions**

31. This Annual Governance Statement for 2020/21 provides Members with a high level of assurance for the Authority's governance arrangements.

**Signed**

.....  
**Chair of the Authority**

.....  
**Chief Fire Officer & Chief Executive**

.....  
**S.151 Officer**

.....  
**Secretary & Monitoring Officer**

**Humberside Fire Authority**  
**30 April 2021**

**Report by the Director of Service  
Improvement**

## **PERFORMANCE REPORTING 2021/22**

### **SUMMARY**

1. This paper provides information regarding the reporting of Service Level performance for the period 2021/22.
2. Performance against all of our Strategic Objectives will be monitored and retrospectively reported to Humberside Fire Authority (HFA) on a bi-annual basis.

### **RECOMMENDATIONS**

3. That Members endorse the approach for reporting performance during 2021/22.

### **BI-ANNUAL PERFORMANCE REPORTING**

4. Members approved a transition from quarterly performance reporting to bi-annual at the HFA Meeting March 2021. As detailed in the Business Planning Framework period April - September will be reported in October, period October – March will be reported in June after the HFA AGM (from 2022 onwards as 2020/21 performance reports will include the period to 31 March 2021). Report 2 will show cumulative performance over the full 12-month period. This negates the need for a separate Annual Performance Report, which will be replaced with an interactive end of year summary, in a similar manner to how Siren is produced and circulated electronically to Members.
5. Cyclical performance reporting will be supplemented by exception reporting of relevant trends/incidents or events to Members at HFA or Member Days. Members will also continue to benefit from Local Authority focussed performance reporting and Q&A, at meetings held by District Managers and during Member Champion discussions with Directors.
6. This change is intended to make cyclical performance reporting more meaningful for Members, as performance will be reported over a longer period enabling Service level performance trends and the impact of safety interventions to be demonstrated.
7. Biannual performance reporting will include the following:
  - a. Performance and Risk
  - b. Occupational Health and Wellbeing/Health Safety and Environment
  - c. Operational Assurance
  - d. Absence Management
  - e. Workforce Planning

### **RELATIONSHIP TO THE STRATEGIC PLAN 2021-24**

8. As a reminder to Members the Strategic Plan 2021/24 (included at Appendix A) was approved by Members 7 December 2020, the plan includes the following elements that provide the

focus for Director workstreams and the basis of performance reporting during 2021/22, namely:

Four perspectives, used as focus areas for developing our objectives:

- a) What our public and business communities expect us to do well.
- b) What we must do well to deliver effective and efficient services, taking account of community expectations.
- c) What we must do well to efficiently and effectively manage the Service through financial and corporate governance.
- d) What we must do well to ensure we value and support the people we employ.

Outcome based Objective Statements describing how we will do it:

Written as short statements that define what we must do to achieve our mission, with the following rules applied:

- Our outcome-based objectives are what we focus on for the duration of the Plan - aiming for consistent improvement.
  - They are Actionable and Achievable – avoiding focusing on something we can't affect or control.
  - They are Measurable and Accountable – supported by quantitative and qualitative performance measures and clear Director level accountability.
9. Each Strategic Plan Objective Outcome has been aligned to performance management, including Directorate accountability and quantitative or qualitative performance measures. Significant development of Performance Dashboards now enables Officers to have a live meaningful insight into Service and Local level performance. Members will receive updates on the delivery of key outcomes via the cyclical Performance Reports and by exception at meetings and Member Days.
  10. Members will also be aware that our Strategic Objectives are only achievable through an efficient governance framework.

MANAGEMENT AND REPORTING OF LOCAL LEVEL PERFORMANCE

11. It is mutually beneficial and of particular relevance for Members to engage with District Management teams within their Local Authority Areas. Members have a standing invitation to attend District Performance Meetings, where they can gain a perspective of local issues and contribute their knowledge and experience to support planning and engagement activities. Dates for future meetings will be circulated to Members by District Administration Officers.
12. Likewise, engagement between Directors and Member Champions, for each functional support and delivery area, provides good opportunities to contribute to planning and delivery activities.
13. Performance at a functional level will be reported by exception to the monthly Strategic Leadership Team Performance Meeting. This includes Programme Management, Risk and Opportunity Register updates, HMICFRS planning and preparation, Audit and Scrutiny progress and other arising key performance issues. Any significant issues raised will be reported to HFA and GAS.
14. National comparators and trends will be reported to provide greater context, where data is available and relevant.

## STRATEGIC PLAN COMPATIBILITY

15. This paper supports the delivery of the Strategic Plan 2021/24 and will support Members in HFA decision making and in their capacity as Member Champions, to positively influence fire and rescue related matters in their home Authorities.

## FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

16. Analysis of performance over time contributes towards efficiency review activity.

## LEGAL IMPLICATIONS

17. None directly arising.

## EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS

18. Performance against our Public Sector Equality Duty Objectives, approved by Members following consultation in December 2020, will be incorporated into cyclical reports. This will also be an area of interest to Member Champions.

## CORPORATE RISK MANAGEMENT IMPLICATIONS

19. Reporting and scrutiny of Service performance provides an assurance that arising risks are being mitigated.

## HEALTH AND SAFETY IMPLICATIONS

20. None directly arising.

## COMMUNICATION ACTIONS ARISING

21. The Strategic Plan and Performance Reports are publicly available via the HFRS Website.

## DETAILS OF CONSULTATION

22. The Strategic Leadership Team have been consulted in relation to performance management.

## RECOMMENDATIONS RESTATED

23. That Members endorse the approach for reporting performance during 2021/22.

**N MCKINIRY**

Officer Contact: Simon Rhodes ☎ 01482 567479  
Head of Corporate Assurance

Humberside Fire & Rescue Service  
Summergroves Way  
Kingston upon Hull  
SR  
30 April 2021

# Our Mission...

**Safer communities, safer firefighters.**

**Keeping communities in the Humber area safe, keeping our firefighters safe.**

**Contributing to the emergency response capabilities of the UK.**



**HUMBERSIDE**  
Fire & Rescue Service



## **What we must do well**

- 1.1** Continue to complete planning arrangements and interventions to reduce fire related fatalities or casualties.
- 1.2** Effectively deliver activities to prevent fires and other emergency incidents.
- 1.3** Protect the public from fires and other risks by delivering fire regulation, legislation and protection activities.
- 1.4** Efficiently manage our resources to meet current risk.



## **How we support our communities**

- 2.1** We understand our community and the risks they face.
- 2.2** We help the public and businesses to stay safe.
- 2.3** We respond quickly and effectively to emergency incidents.
- 2.4** We treat everyone in an open and fair manner.



## **We value and support the people we employ**

- 3.1** We encourage, attract and retain a diverse range of people to help us provide the best service.
- 3.2** We develop and cultivate a highly trained, competent workforce.
- 3.3** We promote our principles and expected behaviours, and are ethical, transparent and accountable.
- 3.4** We ensure the health, safety and wellbeing of our staff.





## **We efficiently manage the Service**


- 4.1** We deliver sound financial control and resilience.
- 4.2** We make appropriate use of public money and deliver value for money.
- 4.3** We promote good governance and ensure openness, transparency and accessibility.


**Strategic Plan  
2021 - 2024**



Objective Statement	Outcome	Output Measure
<div data-bbox="121 228 577 634">  <p>What we must do well</p> </div> <p><b>1.1 Continue to complete planning arrangements and interventions to reduce fire related fatalities or casualties.</b></p> <p><b>1.2 Effectively deliver activities to prevent fires and other emergency incidents.</b></p> <p><b>1.3 Protect the public from fires and other risks by delivering fire regulation, legislation and protection activities.</b></p> <p><b>1.4 Efficiently manage our resources to meet current risks.</b></p>	<p>Our interventions reduce fire related fatalities or casualties.</p>	<p>Total Fatalities. Total Casualties Resources are efficiently and effectively mobilised to Dwelling Fire incidents. First Fire Engine mobilised achieves response standards. Second Fire Engine mobilised is in attendance within 5 minutes of the first fire engine arriving on scene. Total Deliberate Primary Fires. Total Accidental Dwelling Fires. Total High Severity Dwelling Fires. Total Deliberate Secondary Fires</p>
	<p>Safe and Well Visits target the most vulnerable and at risk in our communities.</p>	<p>Safe and Well Visits to High Risk dwellings. Safe and Well Visits to High Risk dwellings completed on time. Referrals that result in a Safe and Well Visit. Referrals that result in advice provided. Evaluation of activities.</p>
	<p>Our Risk-Based Inspections support the business community through proportionate advice, intervention and enforcement, where necessary</p>	<p>High Risk premise inspections completed. Low Risk premise inspections completed. Inspections that result in further action or enforcement. Statutory Consultations are completed on time. Evaluation of activities.</p>
	<p>We are prepared to respond to major and/or multi-agency incidents</p>	<p>Major Incident, Cross Border and Multi-Agency Exercise Programme. LRF - Multi-agency Incident Debriefs. Compliance with the National Co-ordination and Advisory Framework (NCAF). NOL, JOL, NOG, JESIP. IRMP. COMAH Plans.</p>
	<p>We respond efficiently and effectively to meet current risks.</p>	<p>Fire Engines are fully crewed and available when required, in line with our Optimum Crewing Model. UWFS calls received in non-domestic property. UWFS calls attended in non-domestic property. Working time is productive in supporting the delivery of Service Priorities.</p>

Objective Statement	Outcome	Output Measure
<div data-bbox="270 388 428 548">  </div> <p data-bbox="220 560 478 613"><b>How we support our communities</b></p> <p data-bbox="111 824 535 894"><b>2.1 We understand our community and the risks they face.</b></p> <p data-bbox="111 959 478 1029"><b>2.2 We help the public and businesses to stay safe.</b></p> <p data-bbox="111 1094 495 1192"><b>2.3 We respond quickly and effectively to emergency incidents.</b></p> <p data-bbox="111 1240 527 1310"><b>2.4 We treat everyone in an open, fair and equal manner.</b></p>	We engage and consult our communities, including those most at risk, or seldom heard to understand fire and other emergency risk profiles.	IRMP Consultation. Strategic Plan Consultation. Public Safety Engagement. EDI Engagement. Precept Consultation. Corporate Communication.
	Our interventions reduce fire related fatalities or casualties.	Total Fatalities. Total Casualties.
	Our Safe and Well Visits are targeted at those most at risk, using domestic risk profiling.	Safe and Well Visits to High Risk dwellings.
	We complete Safe and Well Visits arising from On-Line Services within our target timescales.	Safe and Well Visits to High Risk dwellings completed on time.
	All dwellings/occupiers identified High Risk are offered a Safe and Well Visit or are provided with advice.	Referrals that result in a Safe and Well Visit. Referrals that result in advice provided.
	Our Business Safety Risk Based Inspection Programme supports the business community through proportionate advice, intervention and enforcement where necessary.	High Risk premise inspections completed. Inspections that result in further action or enforcement. Statutory Consultations are completed on time.
	We respond effectively to meet current risks.	First Fire Engine mobilised achieves response standards. Second Fire Engine mobilised is in attendance within 5 minutes of the first fire engine arriving on scene. Other responders and agencies are informed appropriately. Evaluation provides operational assurance.
	We are open and transparent and are accountable to our communities.	Public HFA Minutes. Public GAS Minutes. HMICFRS Report. Service Improvement Plan. Compliance with Local Government Transparency Code. Public Policies. Complaints Contact Area on Website. FOI Contact Area on Website.

Objective Statement	Outcome	Output Measure
<div data-bbox="123 274 546 704">  <p data-bbox="205 545 468 597">We value and support the people we employ</p> </div> <p data-bbox="113 784 556 917"><b>3.1 We encourage, attract and retain a diverse range of people to help us provide the best service.</b></p> <p data-bbox="113 964 560 1031"><b>3.2 We develop and cultivate a highly trained competent workforce.</b></p> <p data-bbox="113 1078 537 1222"><b>3.3 We promote our principles and expected behaviours, and are ethical, transparent and accountable.</b></p> <p data-bbox="113 1289 562 1356"><b>3.4 We ensure the health, safety and wellbeing of our staff.</b></p>	We employ the right people who display our values.	Evaluation of Recruitment and Selection processes. Positive Action Plan. Community engagement activities to promote employment opportunities. Adoption of best practice.
	We develop and cultivate a highly trained competent workforce.	Operationally available staff completion of mandatory training and development. Non-operational staff completion of mandatory training and development. Workforce Planning. Leadership and Management Development Programme. PDR evaluation. Adoption of best practice.
	We promote our values and expected behaviours and are ethical, transparent and accountable	PDR Completion. Management of Complaints. Management of Grievances. Receipt of Compliments. Responses to FOI Requests on time. Corporate Communications. Training and Development Programmes. Leadership and Management Development Programme. Public HFA Minutes. Public GAS Minutes. HMICFRS Report. Service Improvement Plan. Compliance with Local Government Transparency Code.
	We ensure our staff feel safe, valued and supported.	Number of workplace accidents. Number of Near Miss Reports. Sickness absence levels. Occupational Health and Wellbeing services. Evaluation of Staff Survey outcomes. Corporate Communications. JCC Meetings. PDR completion. SLT Visits. Team meetings.

Objective Statement	Outcome	Output Measure
<div data-bbox="142 272 546 682">  <p data-bbox="218 529 472 578">We efficiently manage the Service</p> </div> <div data-bbox="111 773 560 1162"> <ol style="list-style-type: none"> <li>1. We deliver sound financial control and resilience.</li> <li>2. We make appropriate use of public money and deliver value for money.</li> <li>3. We promote good governance and ensure openness, transparency and accessibility.</li> </ol> </div>	We deliver sound financial control and resilience.	MTFP and Annual Statement of Accounts. Management of the Programme of Strategic Projects and Reviews.
	We make appropriate use of public money and deliver value for money.	Management of Strategic Risks and Opportunities. Income generated by HFA. Independent Audit and Scrutiny. Performance Reporting.
	We promote good governance and ensure openness, transparency and accessibility.	Effective communication. Respond effectively to HMICFRS. Cyclical reporting to HFA and GAS. Compliance with Local Government Transparency Code. Evaluation and Learning from our activities.

## **Safeguarding Arrangements**

### **SUMMARY**

1. This report outlines the progress made to the Service's safeguarding arrangements and organisational development approaches following a review against the National Fire Chief Council's (NFCC) Safeguarding Self-Assessment Toolkit.
2. NFCC's key objective is to develop a standardised approach to safeguarding for Fire and Rescue Services. The review has led to the Service introducing some strategic changes, re-aligning managerial roles, adding safeguarding responsibility to others and consideration to governance, accountability, and reporting arrangements. The Self-Assessment Toolkit consists of nine separate categories.
3. This report identifies the progress made during the last year, particularly the influences on safeguarding during the timespan of COVID-19 pandemic, together with a summary of progress against each of the nine sections.

### **RECOMMENDATIONS**

4. Members note the progress made since the launch of the NFCC Self-Assessment Toolkit for Safeguarding and Members take assurance that the Service is well positioned in this area.
5. Members note the consideration of complimenting the safeguarding arrangements with the addition of a Safeguarding Member Champion as discussed at the HFA member day of the 5<sup>th</sup> February 2021.

### **REPORT DETAIL**

6. In January 2020, the NFCC launched a Safeguarding Guidance document and a Self-Assessment Toolkit. NFCC's key objective is to develop a standardised approach to safeguarding for Fire and Rescue Services. The document has been designed to outline key legal duties together with key core themes which are underpinned by the standards set out in Section 11 of the Children Act 2004 and Section 42– 46 of the Care Act 2014.
7. A review has been completed assessing the Service's safeguarding position measured against the Self-Assessment Toolkit. The nine categories are defined as:
  - a) Senior management commitment to the importance of safeguarding
  - b) Clear statement of Service responsibilities
  - c) There is a clear line of accountability within the Service for work on safeguarding and promoting the welfare of children, young people, and adults.
  - d) Service development takes into account the need to safeguard and promote welfare of children, young people, and adults at risk.
  - e) The Service has regular training, supervision, and appraisal of staff with regard to safeguarding children, young people, and adults at risk.
  - f) Safer Recruitment and Managing Allegations
  - g) There is effective inter-agency working to safeguard and promote the welfare of children, young people and adults at risk.
  - h) Information Sharing
  - i) Working with children, young people and adults at risk

8. Progress against each of the nine categories have been reviewed. An update for each area is detailed below:

**a) Senior management commitment to the importance of safeguarding**

There is a requirement to have a responsible person at the highest (strategic) level committed to the importance of safeguarding. Furthermore, there is a requirement to have a named person(s). This needs to be a specific strategic role(s) with accountability for safeguarding advice and procedures. The named person(s) must have appropriate qualifications/training and demonstrable knowledge.

The CFO and the DCFO are both named responsible persons who has overall responsibility for safeguarding and are trained to safeguarding level 2. The creation of accountability framework into the safeguarding policy has ensured that roles and responsibilities for safeguarding have been identified with the appropriate levels of training and that safeguarding responsibilities are included in the job descriptions of these roles and in their annual PDRs.

Those that hold governance for the Fire and Rescue Service are regularly made aware of safeguarding issues and risks affecting the Service. They demonstrate a commitment to safeguarding and can hold the Service to account regarding their safeguarding responsibilities. There is a need to record senior management discussions related to safeguarding and the positive impact on organisational development and service delivery. This will be achieved through the implementation of a recording and meeting structure highlighted in the safeguarding policy.

The Service has in place adequate resources to ensure effective and efficient safeguarding practices that includes staff, timeliness, professional supervision, and training.

**b) Clear statement of Service responsibilities**

The Service has a robust quality assurance framework, written policies and procedures which are aligned to Local Safeguarding Board/Partnership procedures.

Safeguarding policies and procedure are readily available, and all staff are advised that compliance is mandatory. The policies must be reviewed every three years, or whenever there is a major change in the organisation or in the relevant legislation or guidance.

The Safeguarding Policy has been revised and consulted on via all key stakeholders, including Local Authority Safeguarding Boards/Partnerships. There is a publicly facing position statement which provides the Service's stance on safeguarding, as well as specific safeguarding delivery and guidance documents have been created to enhance our staff's knowledge and understanding of our safeguarding processes and referral routes. The Service has a complaints policy and procedure in place and is available on our website, that is in line with statutory guidance which is available for staff and other service users.

**c) There is a clear line of accountability within the Service for work on safeguarding and promoting the welfare of children, young people and adults.**

As previously mentioned, the safeguarding policy contains details of an accountability framework which includes the roles and responsibilities for safeguarding the welfare of children, young people and adults at risk.

**d) Service development takes into account the need to safeguard and promote welfare of children, young people and adults at risk.**

Safeguarding is incorporated into Service development and delivery arrangements. The mandatory safeguarding awareness e-learning module has been reviewed and updated in line with current processes which ensures that the safeguarding basic principles are understood by all staff. Safeguarding training is available, relevant to role and recorded. The Service's careers framework incorporates safeguarding training relevant to role. Training is recorded via PDR Pro. Specific training has been sourced and consulted with relevant partners as appropriate. Role Specific Training for Frontline Staff includes:

- Level 1 Safeguarding Adults (every 3 years)
- Level 2 Safeguarding Adults (every 3 years)
- Level 1 Safeguarding Children (every 3 years)
- Mental Capacity (CPD annually)
- Domestic Abuse course (CPD annually)
- Modern Slavery Mandatory Training (CPD annually)
- PREVENT Counter Terrorism Home Office Training
- ACT Terrorism modules

***e) The Service has regular training, supervision and appraisal of staff with regard to safeguarding children, young people and adults at risk.***

The Service monitors training plans and has quality assurance in place for the safeguarding referral process. Audits of training are completed to evidence effectiveness, training given, and the numbers of staff trained. Staff with specific responsibilities in safeguarding have the appropriate training to develop the required skills and the opportunities to update their knowledge to work effectively with complex issues. Public Safety staff receive one to one supervision on a six-eight weekly basis.

***f) Safer Recruitment and Managing Allegations***

The Service has a Safer Recruitment policy that helps deter, prevent and detect people who may pose a risk to children, young people and adults at risk or are otherwise unsuited to working with them by having appropriate procedures for appointing staff. Staff involved in recruitment training are suitably trained and safer recruitment training is known to be effective by evaluation processes. Recruitment adverts include the service commitment to safeguarding and safer recruitment.

The Service has a procedure for managing allegations or concerns against any member of staff or volunteer who works with children is initially processed via the Service's complaints procedure to enable effective working with the Local Authority Designated Officer (LADO).

The Service has a DBS policy and staff are aware of the reporting processes with regards to referral to DBS following safeguarding concerns of staff. DBS checks are undertaken on relevant roles in line with National legislation and guidance.

Safeguarding responsibilities are reflected in all job descriptions relevant to role and responsibilities.

***g) There is effective inter-agency working to safeguard and promote the welfare of children, young people, and adults at risk.***

Those responsible for safeguarding, work closely with other agencies to ensure effective inter-agency working is actively promoted, where applicable and at the appropriate levels of responsibility and knowledge. The Service regularly attends and participates at local safeguarding boards and partnerships and where reasonable, attendance at operational and sub-group meetings.

We have worked closely with the Humber Modern Slavery Partnership (HMSP) to ensure that our referral processes are appropriate and aligned to the requirements of the partnership. We consulted with HMSP during the development of a mandatory training eLearning presentation for all staff, to ensure our training is current and fit for purpose.

Staff within Safeguarding are adequately trained:

- To assess thresholds
- Refer to appropriate service
- Awareness of the roles of other agencies
- Understanding of inter-agency procedures
- Participate in inter-agency meetings where appropriate

## **h) Information Sharing**

The Service has clear policies on appropriate information sharing in line with Data Protection and safeguarding practices. The Service are Tier 2 signatory of the Humber Data Sharing Agreement. Both these documents are available on our website. This ensures that we have agreed systems, standards, and protocols for sharing information within the Service such as: embedded recording of case files, retention policy and destruction policy as well as agreed protocols between agencies in accordance with national and local guidelines when a disclosure and/or there are welfare concerns. Effective communication between agencies and is promoted at strategic level. Staff working with children, young people and adults at risk record their work in accordance with statutory and good practice guidance. Staff know where to seek advice on information sharing and have confidence in their professional judgement.

## **i) Working with children, young people, and adults at risk.**

Work with individual children, young people and adults at risk adheres to the principles of anti-discriminatory practice and equality of opportunity and they are made aware of their right to be safe from abuse. Having a person-centred approach by listening to the voice of the child and putting the adult at the centre, making safeguarding personal.

Staff are encouraged to develop a culture that ensures children, young people and adults at risk are listened to and respected as individuals. Including making them aware of their right to be safe from abuse and involving them, where possible in decisions that affect them.

The Service has a person-centred approach for both children and adults to ensure their individual needs are met where applicable. Members of staff delivering specific youth engagement activities through the Education and Development Centre are appropriately trained in making safeguarding personal and having a person-centred approach.

The Service are continuing to be key members across partner groups for example, NFCC Safeguarding Practitioner Working Group, Regional NFCC Safeguarding Practitioners sub-group, Humberside Police, Community Safety Partnerships, Safeguarding Boards, Partnerships, HMSP, MAPPA, MARAC, and Early Intervention teams. Involvement in all these delivery mechanisms have allowed improvements across data and direct referral processes, shared understanding, and delivery.

## **OTHER INFLUENCES**

9. Whilst COVID-19 crisis has had unprecedented impacts on all areas of our work, our safeguarding processes is an area which has remained unchanged. We have maintained business as usual in relation to our safeguarding referral process and the role out and completion of mandatory training.
10. We were asked to complete several Local Authority Assurance Reports for the Safer NEL Partnership (Safeguarding Children Partnership, Safeguarding Adults Board, Community Safety Partnership), regarding our safeguarding arrangements and how we were meeting responsibilities during COVID-19. The challenges of managing the COVID-19 crisis during 2020 has further increased partnership working and identified and ensured that our safeguarding processes are robust and embedded.
11. When we consider Domestic Abuse in particular, referrals out from our Service have not shown any signs of increase throughout the period of Covid-19. However, this might be because our targeted activities and physical visits into people's homes are traditionally to people who live alone and are elderly. In receiving referrals from agencies such as MAPPA and MARAC, for Threats of Arson, when arson is potentially weaponised in domestic abuse case, we have not noticed any significant increase of referrals into our services. Our data has shown that the highest recorded period for Threats of Arson referrals were seen following the ease of the first lockdown restrictions. Whereas the highest recorded period for Domestic Abuse referrals were during the period of the second lockdown. Whilst it has been reported Nationally that there is increase in Domestic Abuse cases during COVID-19, this has not been the case within the Service.



12. NFCC are presenting the Safeguarding Guidance document and Self-Assessment toolkit to HMICFRS and are putting in a recommendation that they use the toolkit as a thematic within their inspection regime.
13. NFCC Safeguarding Practitioners Working group future focus is regarding Male Victims of Domestic Abuse. This is due to the fire sector over indexing for men. This is to make sure there are suitable provision in place to safeguard male victims of abuse.

#### **STRATEGIC PLAN COMPATIBILITY** *(tick all that apply)*

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Value Our People       | <input checked="" type="checkbox"/> Responding Effectively   |
| <input checked="" type="checkbox"/> Support Delivery       | <input type="checkbox"/> Finance and Resources               |
| <input checked="" type="checkbox"/> Make Communities Safer | <input checked="" type="checkbox"/> Governance and Assurance |

#### **PLEDGE COMPATIBILITY** *(tick all that apply)*

- |  |   |
|--|---|
| <input type="checkbox"/> MIND Blue Light Time To Change Pledge | <input type="checkbox"/> White Ribbon Pledge  |
| <input type="checkbox"/> HeForShe Movement Pledge              | <input type="checkbox"/> Dying to Work Pledge |
| <input type="checkbox"/> Armed Forces Pledge                   |   |

#### **FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS**

14. There are no direct financial implications.

#### **LEGAL IMPLICATIONS**

15. There are no direct legal implications.

#### **HUMAN RESOURCE IMPLICATIONS**

16. Any Implications within Human Resources are the management and administration of safer recruitment and managing allegations processes.

#### **HEALTH AND SAFETY IMPLICATIONS**

17. There are no direct Health and Safety implications

#### **EQUALITY IMPACT ASSESSMENT**

##### **Equality Analysis Completed?** *(tick relevant box)*

- ☐ Yes

If you have ticked "Yes" please complete the comment boxes below providing details as follows:-

Summary of any Impacts Identified:	Key Mitigating Actions Proposed and Agreed:

- ☐ No

- ☒ N/A

If you have ticked "No" or "N/A" please complete the comment boxes below providing details of why an EA is not required/is outstanding:-

The existing EIA stands as this report seeks only to update Members on the current Service position.
--

## CORPORATE RISK MANAGEMENT IMPLICATIONS

### Risk Impact Assessment Completed? (tick relevant box)

☐ Yes

If you have ticked "Yes" please complete the comment boxes below providing details as follows:-

Summary of any Impacts Identified:	Key Mitigating Actions Proposed and Agreed:

☒ No

☐ N/A

If you have ticked "No" or "N/A" please complete the comment boxes below providing details of why an RIA is not required/is outstanding:-

The existing RIA stands as this report seeks only to update Members on the current Service position.

## COMMUNICATIONS ARISING

18. An internal communication will be progressed across the Service as well as through SIREN for organisational wide communication.

## CONSULTATION

### Consultation Undertaken or Planned? (tick relevant box)

☐ Yes

☐ Planned

If you have ticked "Yes" or "Planned" please complete the comment boxes below providing details as follows:-

Summary of any consultation:

☒ No

☐ N/A

If you have ticked "No" or "N/A" please complete the comment boxes below providing details of why consultation is not required/is outstanding:-

No formal consultation necessary as this report seeks only to update Members on the current Service position.

## COLLABORATION

### Opportunities for Collaboration? (Tick relevant box)

☒ Yes

☐ No

If you have ticked "Yes" please provide brief details in the box below and include a third party/parties, it would involve: -

Collaboration opportunities exist with Local Authority, Police and other partners. These opportunities have been a feature throughout the Safeguarding Self-Assessment Review.

## BACKGROUND PAPERS AVAILABLE FOR ACCESS

19. NFCC Safeguarding Self-assessment toolkit and guidance document

## **RECOMMENDATIONS RESTATED**

20. Members note the progress made since the launch of the NFCC Self-Assessment toolkit for Safeguarding and that this provides members with assurance that the Service is well positioned in this area.
21. Members note the consideration of complimenting the safeguarding arrangements with the addition of a safeguarding member champion as discussed at the HFA member day of the 5<sup>th</sup> February 2021.

**S TOPHAM**

Officer Contact  
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Humberside Fire & Rescue Service  
Summergroves Way  
Kingston upon Hull

Ref: ST/SW  
Date: 26 March 2021



## **USE OF DELEGATED POWERS UNDER FIRE AUTHORITY CONSTITUTION BY CHIEF FIRE OFFICER & CHIEF EXECUTIVE**

### **SUMMARY**

1. This report provides the Authority with details of the decisions taken by the Chief Fire Officer & Chief Executive during 2020/21 to vary the establishment, under his delegated powers within the Fire Authority Constitution.

### **RECOMMENDATIONS**

2. The Authority is asked to consider this report and take assurance that the Scheme of Delegation has been properly exercised.

### **BACKGROUND**

3. The Scheme of Delegation set out in the Constitution (Part 3, Section B) gives the Chief Fire Officer & Chief Executive delegated authority as follows:

“(m) (vi) to vary in any one financial year the overall establishment to a maximum of 0.5% of total annual budget (provided that such a variation does not affect more than 10 permanent full-time equivalent posts), and provided that any such variations are within the approved Budget (and confirmed by the S.151 Officer) and are in accordance with the approved Strategic Plan (and IRMP) of the HFA. The Chief Fire Officer & Chief Executive shall report on an annual basis to the HFA setting out the basis upon which such powers have been exercised.”

4. In the year 2020/21 the following substantive establishment changes (not including temporary changes or those approved by the Fire Authority as part of a HFA report) have been approved under the delegated authority given to the Chief Fire Officer & Chief Executive:
  - Creation of one additional post in Corporate Assurance – Information Governance Officer.
5. Members should note that this report concerns only permanent changes to the establishment. Temporary posts, re-gradings and changes in job content where the post remains substantially the same are not included as such decisions are within the remit of the Chief Fire Officer & Chief Executive under the Constitution.

### **STRATEGIC PLAN COMPATIBILITY**

6. The proper use of delegated powers is in accordance with the Strategic Plan objective of ‘making the best use of the resources we have.’

### **FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS**

7. None arising directly.

LEGAL IMPLICATIONS

8. None arising directly.

EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS

9. None arising directly.

CORPORATE RISK MANAGEMENT IMPLICATIONS

10. None arising directly.

HEALTH AND SAFETY IMPLICATIONS

11. None arising.

COMMUNICATION ACTIONS ARISING

12. None arising directly

DETAILS OF CONSULTATION AND/OR COLLABORATION

13. Not applicable.

BACKGROUND PAPERS AVAILABLE FOR ACCESS

14. Constitution of Humberside Fire Authority.

RECOMMENDATIONS RESTATED

15. The Authority is asked to consider this report and take assurance that the Scheme of Delegation has been properly exercised.

**C BLACKSELL  
M BUCKLEY**

Officer Contact: Mathew Buckley ☎ 01482 567174  
Monitoring Officer & Secretary

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