Fire & Rescue Service Headquarters Summergroves Way Kingston upon Hull HU4 7BB

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To: Members of the Governance, Audit and Scrutiny Committee	Enquiries to:	Samm Campbell
	Email:	committeemanager@humbersidefire.go.uk
	Tel. Direct:	(01482) 393205
	Date:	1 April 2021

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 the **GOVERNANCE, AUDIT AND SCRUTINY COMMITTEE** will be held on **MONDAY, 12 APRIL 2021 at 10.00AM**.

To access this remote meeting please visit <https://zoom.us/join> and then enter:
Meeting ID: 952 6251 8979
Password: 516597

Or telephone +44 203 901 7895 and use the above Meeting ID and Password

The business to be transacted is set out below.

Yours sincerely

Mathew Buckley
Monitoring Officer & Secretary to Fire Authority

Enc.

A G E N DA

Business	Page Number	Lead	Primary Action Requested
Procedural			
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 the meeting of 22 February 2021	(pages 1 - 3)	Chairperson	To approve
4. Matters arising from the Minutes, other than on the Agenda	-	Chairperson	To raise

Business	Page Number	Lead	Primary Action Requested
Governance			
5. Update: Matters Arising/ Feedback from Fire Authority	verbal	Chairperson and Monitoring Officer/ Secretary	To consider and make any recommendations to the HFA
Audit			
6. External Audit Update	verbal	External Audit (Mazars)	To consider and make any recommendations to the HFA
7. Internal Audit Annual Report 2020/21	(pages 4 - 8)	Internal Audit (TIAA)	To consider and make any recommendations to the HFA
Finance and Performance			
8. Management Accounts for the Period Ending 28 February 2021	(pages 9 - 18)	Head of Finance	To consider and make any recommendations to the HFA
9. CIPFA Financial Management Code Risk Assessment Update	(pages 19 - 22)	Head of Finance	To consider and make any recommendations to the HFA
10. Draft Annual Governance Statement 2020/21	(pages 23 - 33)	Director of Service Improvement	To consider and make any recommendations to the HFA
11. HMICFRS Inspection Update	verbal	Director of Service Improvement	To consider and make any recommendations to the HFA
Scrutiny Programme			
12. Diversity and Recruitment - Progress and Plans	(pages 34 - 80)	Temporary Director of People and Development	To consider and make any recommendations to the HFA
13. GAS Committee Scrutiny Programme 2020/21	(pages 81 - 86)	Monitoring Officer/Secretary	To receive
14. Any Other Business	-	All Members	To raise
B EXEMPT BUSINESS			
The Authority is asked to consider excluding the press and public from the meeting during consideration of the following item on the grounds that it is likely to involve the 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 Fire Authority is asked to confirm that, having regard to all circumstances, it is satisfied that the public interest in maintaining the exemption outweighs the public interest in disclosing the information.			
15. Investigation Report	(Pages 87 - 93)	Monitoring Officer/ Secretary & TIAA	To receive

Humberside Fire Authority (the "Authority") uses third-party video conferencing platforms in order to facilitate remote meetings, seminars and webinars. The Authority uses a variety of platforms including Zoom and Microsoft Teams. These products are external, third-party platforms and, as such, security cannot be assured. The Authority does not directly host these platforms nor does it exercise control over their infrastructure or privacy protocols. It is the responsibility of the participant to be aware of the risks involved in using these, or similar platforms, and to satisfy themselves that the security of any platform they elect to use is sufficient for their needs. Each participant should read the relevant privacy policy of the platform provider and should exercise adequate caution, including using appropriate anti-virus/malware/spyware software and device encryption.

The Authority does not accept responsibility or liability for any damage caused or loss suffered howsoever arising out of the use of external video conferencing platforms. In using these platforms, the participants acknowledge that they are aware of, and accept, any risk associated with their use.

HUMBERSIDE FIRE AUTHORITY

GOVERNANCE, AUDIT AND SCRUTINY COMMITTEE

22 FEBRUARY 2021

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

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, Mathew Buckley - Monitoring Officer/Secretary, Samm Campbell - Committee Manager, 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

16/21 APOLOGIES FOR ABSENCE - There were no apologies for absence.

17/21 DECLARATIONS OF INTEREST - There were no declarations of interest.

18/21 MINUTES - *Resolved* - That the minutes of the meeting of the Committee held on 25 January 2021 be confirmed as a correct record.

19/21 MATTERS ARISING FROM THE MINUTES, OTHER THAN ON THE AGENDA - There were no matters arising.

GOVERNANCE

20/21 UPDATE: MATTERS ARISING/FEEDBACK FROM FIRE AUTHORITY - The Monitoring Officer/Secretary provided feedback on items considered by the Fire Authority at its meetings of 12 February 2021.

Resolved -   That the update be received.

Audit

21/21 DRAFT EXTERNAL AUDIT STRATEGY MEMORANDUM 2020/21 - Ross Woodley (Mazars) submitted the draft External Audit Strategy Memorandum for 2020/21.

The presentation of the Strategy was similar to those of previous years but, as a result of the ongoing effects of the Covid-19 pandemic, the timelines would run a month later than usual. Mazars and the Service were working to a deadline of 30 September 2021 for the completion of the external audit process. The Service's accounts were due to be finalised by June 2021, after which the audit would be undertaken. As in previous years, property, plant and equipment, and changes to pension schemes would remain significant areas of priority.

Resolved -   That the draft External Audit Strategy Memorandum be received.

22/21 INTERNAL AUDIT REPORT - HEALTH AND SAFETY - Andy McCulloch (TIAA) submitted a report of an audit of health and safety.

The report had been circulated following the Sub-Committee's meeting held on 25 January 2021. The audit had been undertaken by a qualified health and safety professional and concluded with three 'Important' recommendations and one 'Routine' recommendation. A Member queried TIAA's findings in relation to the "no blame" culture. The audit had concluded that a disproportionate "no blame" culture would have a negative impact on accountability and it had been recommended that the Service ensure that "no blame" culture, which would foster good rates of health and safety reporting, was balanced with a culture of personal responsibility for health and safety.

Resolved - That the report be received.

23/21 DRAFT INTERNAL AUDIT PLAN 2021/22 - Andy McCulloch (TIAA) submitted the draft Internal Audit Plan for 2021/22.

The 2020/21 internal audit process was due to conclude by 31 March 2021. Two audit activities were yet to be undertaken and some additional days, which had not been used during 2020/21 as a result of the pandemic, would be carried over for use in 2021/22. Cybercrime continued to be a significant issue for all of TIAA's internal audit clients and would be addressed in the 2021/22 Plan. The draft Plan provided details of the 13 audit activities due to be undertaken in 2021/22 as well as indicative plans for the following two years.

A Member queried Appendix D to the draft Internal Audit Plan, the Internal Audit Charter, and asked that, if it was necessary for the Committee or Fire Authority to approve it, that it be considered as a separate item.

A Member noted that TIAA intended to undertake an audit of equality, diversity and inclusion at the Service. The Committee agreed that its scrutiny of diversity and recruitment (due to be considered at the meeting to be held on 12 April 2021) should be taken into consideration during the audit process.

Resolved - (a) That the draft Internal Audit Plan 2021/22 be received, and

(b) that the Committee's scrutiny of diversity and recruitment (due to be considered at the meeting to be held on 12 April 2021) be taken into consideration during TIAA's audit of equality, diversity and inclusion as part of its Internal Audit Plan 2021/22.

PERFORMANCE, RISK AND PROGRAMME MANAGEMENT

24/21 TREASURY MANAGEMENT AND CAPITAL EXPENDITURE PRUDENTIAL INDICATORS, TREASURY MANAGEMENT POLICY STATEMENT 2021/22 AND MINIMUM REVENUE POSITION 2021/22 - The Head of Finance submitted a report summarising the Treasury Management and Capital Expenditure Prudential Indicators, Treasury Management Policy Statement 2021/22, and Minimum Revenue Provision 2021/22.

This report was the first of three received by the Committee during each year in relation to treasury management. The Service expected to spend £3.4m on capital schemes, which was a typical amount for a year without a significant building project. However, this figure also included capital projects which had slipped from the 2020/21 financial year as a result of Covid-19, including the replacement of firefighters' personal protective equipment.

The Service's borrowing as a percentage of revenue remained within its financial means and its debts remained affordable. The Committee was due to receive treasury management training on 23 April 2021 at 10:30am.

> *Resolved* -   That the report be received.

25/21 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).

The national thematic report focussed on Covid-19 and the reports resulting from its individual inspections of each fire and rescue service had been published by HMICFRS on 22 January 2021. Since the Committee's previous meeting, HMICFRS had published a report on the progress made by London Fire Brigade in relation to the Grenfell Tower Inquiry's Phase One Recommendations. The Inspectorate's annual State of Fire and Rescue report was expected to be published in March 2021. However, the six recommendations made within the Inspectorate's State of Fire and Rescue report, published in 2019, had not yet been addressed by the Government.

> *Resolved* -   That the update be received.

SCRUTINY PROGRAMME

26/21 GAS COMMITTEE SCRUTINY PROGRAMME 2020/21 - The Committee Manager submitted a report summarising the Committee's Scrutiny Programme 2020/21.

> *Resolved* -   (a)   That the updates be received, and
>
>   (b)   that a workshop be held in April 2021 to consider items for the 2021/22 Scrutiny Programme.

27/21 ANY OTHER BUSINESS - COMMITTEE MEMBERSHIP - Mr M Allingham and Mr C Vertigans' terms of office were due to expire on 31 March 2021, making the current meeting their final one as Members of the Committee. Councillor Briggs, Chair of the Fire Authority, and Mr D Chapman, Chair of the Committee, registered their thanks for Mr M Allingham and Mr C Vertigans' valuable and effective contributions to the Service spanning more than eight years. In particular, Mr D Chapman added his thanks for their support of him as Chair of the Committee and their diligence during periods of change for the Committee. The Deputy Chief Fire Officer and Director of Service Improvement added their thanks to Mr M Allingham and Mr C Vertigans' on behalf of all officers.

tiaa

Humberside Fire & Rescue

INTERIM Internal Audit Annual Report

2020/21

March 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 summaries 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:	31st March 2021

Annexes

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	Draft report issued
Risk Management Business Continuity Staff Shortages	Assurance	4	0	-	Replaced by Strategic Risk Mitigation
Strategic Risk Mitigation	Assurance	0	4	Reasonable	Draft report issued
Follow Up	Follow Up	3	3	N/A	Draft report issued
Annual Planning for 2020/21	Management	2	2	N/A	N/A
Annual Report for 2020/21	Management	1	1	N/A	N/A
Management, Planning & Joint Audit Committee Reporting / Support	Management	5	5	N/A	N/A
Total Days		**66**	**66**		

Management Accounts
for the period ending 28th February 2021

HUMBERSIDE
Fire & Rescue Service

Safer Communities Safer Firefighters

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Key To Traffic Light System

The elements of the Traffic Light system being used in the report to highlight significant outturn variances / issues are as follows:-

Status Column - indicates, using a colour reference whether an issue is:-

Red **Potentially detrimental** to the finances of the Authority

Green **In line with budget or potentially advantageous** to the finances of the Authority.

HUMBERSIDE FIRE & RESCUE SERVICE
COMMENTARY ON THE MANAGEMENT ACCOUNTS
For the period 1 April 2020 to 28 February 2021

The following statements represent a summary of the financial activity of the Service for the period stated above.

Each statement is accompanied with notes, referenced to specific lines on that statement where significant variances have been forecasted or where further explanation of information shown is necessary.

Revenue Statements

These statements show the actual and committed revenue expenditure, in summary subjective heading format (Table 1) as at 28 February 2021 compared to the profiled 2020/21 budget for the same period. The report also shows the forecasted outturn for the full year based on current levels of income and expenditure and any known variations to the end of the financial year.

Table 1

HUMBERSIDE FIRE & RESCUE SERVICE
REVENUE MONITORING SUMMARY STATEMENT 2020/21
1 April 2020 to 28 February 2021 (Period 11)

	Original Budget	Revised Budget	28 February 2021 Profile	28 February 2021 Actual & Committed	Full Year Projection	Full Year Variance £'000	Full Year Variance %	Status	Note
	£'000	£'000	£'000	£'000	£'000	£'000	%		
Employees									
Wholetime Firefghters	25,127	24,988 *	22,920	22,886	24,782	(206)	(0.82)	Green	1
On-Call Firefighters	4,798	4,898 *	4,321	4,016	4,612	(286)	(5.84)	Green	1
Non-Operational	6,810	6,946 *	6,377	6,066	6,722	(224)	(3.22)	Green	2
Other Employee Expenses (Training, Occ Health, Insurance)	1,517	1,517	1,300	1,122	1,861	344	22.68	Red	3
Total Pay & Pensions	38,252	38,349	34,918	34,090	37,977	(372)	(0.97)		
Premises	2,660	2,723 *	2,715	2,454	2,591	(132)	(4.85)	Green	4
Transport	1,744	1,744	1,706	1,440	1,510	(234)	(13.42)	Green	5
Supplies & Services	3,850	4,110 *	3,790	3,422	3,601	(509)	(12.38)	Green	6
Support Services	204	204	188	189	284	80	39.22	Red	7
Total Expenditure	46,710	47,130	43,317	41,595	45,963	(1,167)	(2.48)		
Income	(4,001)	(4,621) *	(4,313)	(4,812)	(4,950)	(329)	7.12	Green	8
Net Expenditure (Ex Capital Charges)	42,709	42,509	39,004	36,783	41,013	(1,496)	(3.52)		
Interest Payable	661	661	331	296	626	(35)	(5.30)	Green	9
Interest Receivable	(60)	(60)	(55)	(16)	(20)	40	(66.67)	Red	10
Accounting Adjustments	1,915	2,015 *	-	-	1,384	(631)	(31.32)	Green	11
Contributions to / (from) Reserves	44	144 *	-	-	1,822	1,678	1,165.28	Red	12
Net Budget Requirement	45,269	45,269	39,280	37,063	44,825	(444)	(0.98)	Green	
Financed By									
Business Rates	(3,915)	(3,915)	(3,588)	(3,653)	(3,915)	-	-		
National Non Domestic Rates	(17,104)	(17,104)	(15,877)	(15,877)	(17,104)	-	-		
Precepts	(24,250)	(24,250)	(22,269)	(22,272)	(24,250)	-	-		
	-	-	(2,454)	(4,739)	(444)	(444)	-		

*budgets increased to reflect additional spend and grant received from Government in relation to COVID19

Notes

1. This projected underspend is primarily due to the pay award for both wholetime and on-call firefighters being lower than anticipated as well as lower callout costs for on-call staff.

2. This projected underspend is due to a higher than anticipated pay award for support staff which is offset by a number of vacant support roles.

3. This projected overspend is due to a higher level of ill health contribution to the Firefighters' Pension Fund as well as higher insurance costs. In addition to this there has been less spent on course fees due to the impact of COVID19.

4. This projected underspend is due to lower than anticipated Business Rate charges on our properties combined with lower property insurance premiums.

5. This projected underspend is due to BP offering free fuel to blue light services during the COVID19 pandemic. In addition to this there has been a lower level of officer travel as training courses and meetings have moved to a virtual delivery.

6. This projected underspend is due to spending less on issue, cleaning, repairs and replacement of PPE. The uniform replacement programme funding has been slipped into 2021/22. In addition to this it is projected that the smoke alarm and hydrant maintenance budgets will not be fully utilised due to having a sufficient stock of smoke alarms and less hydrant maintenance required.

7. This projected overspend is due to the conclusion of the mesothelioma claim which is partly offset by insurance income covered in note 8.

8. This additional income is primarily due to additional grants from Government in relation to Protection and Grenfell with any unspent grant to be slipped into 2021/22 as well as insurance income received in relation to a mesothelioma claim.

9. No additional borrowing taken during the year has resulted in lower interest payments.

10. This variance is due to lower interest rates than anticipated.

11. This underspend is primarily due to the change of method used when calculating the Authority's Minimum Revenue Provision (MRP) as agreed Members in December 2020.

12. This variance is due to transfers to reserves for:

    - Uniforms (see note 6);
    - Protection and Grenfell (see note 8);
    - Transferring the saving from MRP (see note 11);
    - Replacement boats;
    - East Coast and Hertfordshire Control Room Consortium anticipated part contribution to 2021/22 infrastructure replacement cost.

Capital Statement

This report shows the actual and committed capital expenditure as at 28 February 2021 compared with the adjusted profiled 2020/21 budget for the same period. This report also shows the forecasted outturn for the full year based on current levels of expenditure and any known variations to the end of the financial year.

Table 2

HUMBERSIDE FIRE & RESCUE SERVICE
CAPITAL MONITORING STATEMENT 2020/21
1 April 2020 to 28 February 2021 (Period 11)

	Original Budget	Revised Budget	28 February 2021		Full Year			Traffic Light Status	Note
			Profile	Actual & Committed	Projection	Variance			
	£'000	£'000	£'000	£'000	£'000	£'000	%		
SCHEME									
Building Works									
Invest to Save	260	402	161	35	168	(234)	(58.21)	Green	1
Goole	-	387	155	-	2	(385)	(99.48)	Green	1
Scunthorpe	-	498	199	6	498	-	-	Green	
Bridlington	100	516	206	441	416	(100)	(19.38)	Green	1
BA Training Refurbishment	-	18	7	-	18	-	-	Green	
Furniture & Equipment	-	87	35	-	87	-	-	Green	
HQ OTC	-	34	14	-	34	-	-	Green	
Dignity Works	-	168	67	127	168	-	-	Green	
Industrial Training Centre	-	657	263	657	657	-	-	Green	
Co-Location	-	97	39	-	15	(82)	(84.54)	Green	1
Cleethorpes	-	36	14	-	36	-	-	Green	
Howden	200	395	158	-	10	(385)	(97.47)	Green	1
Calvert	100	100	40	-	5	(95)	(95.00)	Green	1
	660	3,395	1,358	1,266	2,114	(1,281)	(37.73)		
Vehicles									
Operational Vehicles	70	372	149	146	146	(226)	(60.75)	Green	2
Support Vehicles	400	487	195	70	70	(417)	(85.63)	Green	2
Equipment	227	278	111	5	5	(273)	(98.20)	Green	2
PPE	400	1,400	560	-	-	(1,400)	(100.00)	Green	3
Information Technology	600	820	328	704	820	-	-	Green	
	2,357	6,752	2,701	2,191	3,155	(3,597)	(53.27)		

Notes

1. These works will not be completed until 2021/22.

2. The purchase of some of the vehicles and equipment will not be delivered until 2021/22.

3. The new PPE will not be rolled out during 2020/21.

Pensions Account Statement

The Authority has a revised budgeted deficit of £11.255m on this account for 2020/21. The deficit for the year is now projected to be £11.157m. This is a result of:

1. No transfers out of the Firefighters pension schemes; and

2. A higher level of ill health pension contributions plus a combination of a lower pay award, fewer incidents and fewer staff in the Firefighters Pension Scheme than anticipated has resulted in lower employer pension contributions.

The deficit on this account is financed through the Pensions Top-up Grant given by the Home Office, of which 80% of the grant was received in July of this financial year. The Authority has to stand any cash flow losses until the balance of the grant is paid in full in July 2021.

Table 3

HUMBERSIDE FIRE & RESCUE SERVICE
PENSIONS ACCOUNT STATEMENT 2020/21
1 April 2020 to 28 February 2021 (Period 11)

| | Revised Budget £'000 | 28 February 2021 | | Full Year | | | Note |
| | | Profile £'000 | Actual £'000 | Projection £'000 | Variance | | |
					£'000	%	
Expenditure							
Pension payments	16,670	13,892	15,248	16,652	(18)	(0.11)	
Commutations	2,855	2,141	2,413	2,867	12	0.42	
Transfer Values	100	75	-	-	(100)	(100.00)	
Total Pensions Expenditure	19,625	16,108	17,661	19,519	(106)	(0.54)	1
Income							
Contributions							
Ill Health	(186)	(139)	-	(322)	(136)	73.12	2
Employee's	(2,462)	(1,846)	(2,194)	(2,491)	(29)	1.18	
Employer's	(5,622)	(4,217)	(5,004)	(5,460)	162	(2.88)	2
	(8,270)	(6,202)	(7,198)	(8,273)	(3)	0.04	
Transfer Values	(100)	(75)	(89)	(89)	11	(11.00)	
Total Pensions Income	(8,370)	(6,277)	(7,287)	(8,362)	8	(0.10)	
Net Pensions Deficit/(Surplus) To be financed by HO grant	11,255	9,831	10,374	11,157	(98)	(0.87)	

Treasury Management

Borrowing & Lending Activity

This statement shows the borrowing and lending activities undertaken by the Corporate Finance section of Hull City Council, on behalf of the Service, for the period 1 April 2020 to 28 February 2021 under the terms of the SLA. It also shows any variation between the actual interest received from the temporary investment of surplus monies and the budgeted interest.

Table 4

HUMBERSIDE FIRE & RESCUE SERVICE
BORROWING AND LENDING ACTIVITY STATEMENT
For the Period Ending 28 February 2021

Ref.	Company	Investment £	From	To	%	Returned Interest £	Returned Investment £
MMF	Deutsche Managed Sterling Fund	560,000.00					
MMF	Aberdeen (SL) Liquidity Fund	1,000,000.00					
MMF	Goldman Sachs Liquid Reserve Fund	-					
301715	Thurrock Council	2,000,000.00	30/10/2020	29/01/2021	0.06	299.18	2,000,000.00
301716	Cornwall Council	2,000,000.00	30/11/2020	26/02/2021	0.02	96.44	2,000,000.00
301718	Coventry BS	2,000,000.00	03/12/2020	03/03/2021	0.03	147.95	-
301720	DMO	2,200,000.00	22/02/2021	31/03/2021	0.00	-	-
						543.56	

Total Investments at 28 February 2021   **5,760,000.00**

Summary of Interest Receipts

		Projection £	Actual £	Variance under/(over) £	%
Accumulated interest on Investments to :	28/02/2021	55,000	15,985	39,015	70.94

Temporary Loans

Investment £	From	To	%	Interest £
-			-	-

The total amount temporarily invested at 28 February 2021 is £5.760m.

Movement in Revenue Reserves

This statement shows the movements on the revenue reserves for the period 1 April 2020 to 28 February 2021.

This statement also gives a projected value of revenue reserves at 31 March 2021 based on the projections in Table 1.

Table 5

HUMBERSIDE FIRE & RESCUE SERVICE
MOVEMENT IN REVENUE RESERVES
as at 28 February 2021

	As at 1 April 2020 £'000	In Year Movements £'000	Projected Balance at 31 March 2021 £'000
General Reserve	5,758	488 *	6,466
Earmarked Reserves			
Insurance	500	-	500
The Ark - National Flood Resilience Centre	1,000	-	1,000
Capital Programme	3,000	910 **	3,760
Resilience Reserve	300	-	300
ESMCP	373	(52)	321
Grenfell and Protection	-	100	100
East Coast & Hertfordshire Control Room Consortium	-	400	400
Uniform Replacement Programme	-	150	150
COVID	-	100	100
	10,931	2,166	13,097

*In year contribution to the General Reserve is based on the budgeted contribution to the reserve plus any estimated under/overspend as at 28th February 2021.
** included within this in year movement is 150k for the replacement of our boats.

Budget Virements (transfer between lines) Processed

There were no budget virements processed during the period to 28th February 2021.

CIPFA Financial Management Code reference		Humberside FA	
	Description	RAG	Comments
Section 1 - The responsibilities of the chief finance officer and leadership team.			
A	**The Leadership team demonstrates that the services provided for the authority provide value for money.**		**The authority complies with this requirement because of a clean Vfm audit opinion and 'Good' HMICFRS inspection report on the Efficiency and Effectiveness strands**
B	**The authority complies with the CIPFA Statement on the Role of the Chief Finance Officer in Local Government.**		**The authority complies with this requirement (See B1 to B10)**
B1	The Chief Finance Officer in a public service organisation is a key member of the leadership team, helping it to develop and implement strategy and to resource and deliver the organisation's strategic objectives sustainably and in the public interest.		S151 Officer is a member of the Strategic Leadership Team
B2	The Chief Finance Officer must be actively involved in, and able to bring influence to bear on, all material business decisions to ensure immediate and longer term implications, opportunities and risks are fully considered, and alignment with the organisation's financial strategy. Organisations which are required to explain (rather than comply) should set out clearly how the associated risks will be managed and demonstrate notification of the risks to the political leadership.		S151 Officer is a member of the Strategic Leadership Team, S151 is a permanent officer of the Fire Authority
B3	The Chief Finance Officer must lead the promotion and delivery by the whole organisation of good financial management so that public money is safegaurded at all times and used appropriately, economically , efficiently and effectively. The Chief Finance officer should regularly review the skillsets of the elected members and all officers with budget/financial management responsibility and ensure appropriate support is provided.		Finance input is provided at member days to ensure the members understand the financial issues of the authority, SLT and TLT are provided with regular finance updates and information.
B4	The Chief Finance Officer must lead and direct a finance function that is fit for purpose. The Chief Finance Officer should regularly review the skillsets of all finance staff with senior budget/financial management responsibility and ensure ongoing appropriate support is provided. The ratio of qualified staff as a proportion of total finance staff ensures that the finance function has the necessary financial competence.		The structure, size and skill sets within the finance function are regularly reviewed and finance staff developed through the PDR process (67% Qualified)
B5	The Chief Finance Officer must be professionally qualified and suitably experienced. The Chief Finance Officer must be able to demonstrate adherence to professional CPD requirements on an annual basis		S151 Officer is CIPFA qualified and maintains CPD requirements
B6	The Chief Finance Officer should promote the highest standards of ethical behaviour in the conduct of financial management. Professionally qualified staff should evidence ongoing benchmarking against the principles of objectivity, integrity, professional behaviour, professional competence, due care and confidentiality.		Requirements of S151 Officer and Officers is clearly defined in the Authority's constitution
B7	To enable financially informed decision making: The Chief Finance Officer should be able to provide the leadership team with sound advice on the key principles of local government finance; and The Chief Finance Officer should be able to demonstrate a sound system which ensures the authority has access to high standards of technical financial advice.		S151 Officer has 28 years of local government finance experience, specialist advice is provided by Link Asset Service, PS Tax, Pixel, Capsticks and West Yorkshire Pension Fund
B8	The Chief Finance Officer should report explicitly on the affordability and risk associated with the capital strategy and where appropriate have access to specialised advice to enable them to reach their conclusions.		The S151 regularly report to the Governance, Audit and Scrutiny Committee and Fire Authority on the Capital Strategy and affordability. Link Asset Services provide specialist advice.

CIPFA Financial Management Code reference		Humberside FA	
	Description	RAG	Comments
B9	The Chief Finance Officer must establish the reporting and monitoring processes, and integrate the treasury management indicators into the overall financial planning process		Treasury Management indicators are reflected and included in the budget setting process.
B10	The Chief Finance Officer of Local Government Pension Scheme (LGPS) administering authorities satisfies the requirements of the CIPFA Code of Practice on Public Sector Pensions Finance Knowledge and Skills (2013 Edition).		Not Applicable
Section 2 - Governance and financial management style			
C	**The leadership team demonstrates in its actions and behaivours responsibility for governance and internal control.**		**The leadership team has established whistleblowing, anti fraud and corruption, internal audit and anti money laundering policies in place and published and has a zero tolerance of fraud**
D	**The authority applies the CIPFA/SOLACE Delivering Good Governance in Local Government: Framework (2016).**		**The authority complies with this requirement (See D1-D3)**
D1	The authority maintains an effective audit committee.		The Governance, Audit and Scrutiny Committee fulfils this role and meets 7 times a year.
D2	the audit committee receives and monitors the implementation of internal and external audit recommendations. When threats to the financial sustainability of the authority are identified by auditors the audit committee should ensure that the recommendations are communicated to the leadership team and that the committee are informed of the effectiveness of the leadership teams's response.		The chair of the GAS Committee reports to every meeting of the Fire Authority. On a monthly basis SLT review the Audit recommendations and actions.
D3	The authority has a PSIAS conformant internal audit function.		TIAA provide the Authority's internal Audit function
E	**The Financial Management Style of the authority supports financial sustainability.**		**The authority complies with this requirement (See E1-E5)**
E1	The organisation has an effective framework of financial accountability that is clearly understood and applied throughout, from the political leaders, elected members to directors, finance officers and front line service managers.		The constitution, scheme of delegation and Management Accounts are published 4 times per year.
E2	Finance teams and the organisation they support are actively committed to continuous improvement and focused on efficient and effective delivery and organisational performance. The organisation has an effective framework of financial accountability that is clearly understood and applied throughout from political leaders, elected members to directors, finance officers and front line service managers.		The constitution, scheme of delegation are published annually and Management Accounts are published 4 times per year. The Authority has a robust performance
E3	Enabling transformation: the finance team have input into strategic and operational plans, taking into account proactive risk management, clear strategic directions and focus-based outcomes		The Finance team are involved in all strategic and operation plans and ensure decisions are made while understanding the financial implications
E4	Managers understand they are responsible for delivering services cost effectively and are held accountable for doing so. Financial literacy is diffused throughout the organisation so that decision takers understand and manage the financial implications of their decisions.		Budget Managers are trained and supported to understand the impact of the decisions they make and are held accountable for those decisions

CIPFA Financial Management Code reference		Humberside FA	
	Description	RAG	Comments
E5	The financial management of the authority has been critically evaluated.	🟩	The external auditors have provided a clean value for money opinion for over 10 years and HMICFRS rating the Authority as good for efficiency and effectiveness
Section 3 - Long to medium-term financial management			
F	**The authority has carried out a credible and transparent financial resilience assessment.**	🟧	**The Authority partly complies with this requirement (See F1-F3)**
F1	Financial resilience is tested against best and worst case scenarios which cover a wide range of financial, demographic and social challenges.	🟩	The Prudent Minimum General Reserve is assessed annually
F2	The authority uses independent objective quantitative measures to assess the risks to financial sustainability.	🟧	What independent objective measures are available?
F3	Decision making by the authority demonstrates a sound understanding of the risks associated with its strategic business partners.	🟩	The Strategic and Tactical Leadership teams undertake regular scenario planning to explore and identify opportunities. The Authority has a published Strategic plan
G	**The authority understands its prospects for financial sustainability in the longer term and has reported this clearly to members.**	🟩	**The Authority complies with this requirement**
H	**The authority complies with the CIPFA Prudential Code for Capital Finance in Local Authorities.**	🟩	**The Authority complies with this requirement (See H1-H2)**
H1	The authority has an asset management plan that reviews the condition, sufficiency and suitability of assets in the light of business needs, and ambitions of the medium - Long Term Financial Strategy. The plan should evidence rigorous assessment of asset portfolio in relation to service delivery.	🟩	The Authority has a joint estates strategy with Humberside Police
H2	The authority maintains processes to ensure that information about key assets and liabilities in its balance sheet is a sound and current platform for management action.	🟩	Balance Sheet review undertaken by Link Asset Services annually
I	**The authority has a rolling multi-year Medium Term Financial Plan consistent with sustainable service plans.**	🟩	**The authority complies with this requirement**
Section 4 - The annual budget			
J	**The authority complies with its statutory obligations in respect of the budget setting process.**	🟩	**The authority complies with this requirement**
K	The budget report includes a statement by the chief finance officer on the robustness of the estimates and a statement on the adequacy of the proposed financial reserves.	🟩	**The Authority partly complies with this requirement**
Section 5 - Stakeholder engagement and business plans			
L	**The authority has engaged where appropriate with key stakeholders in developing its long- term financial strategy, medium term financial plan and annual budget.**	🟩	**The authority complies with this requirement**

CIPFA Financial Management Code reference		Humberside FA	
	Description	RAG	Comments
M	The authority uses an appropriate documented option appraisal methodology to demonstrate the value for money of its decisions.	🟧	The Authority partly complies with this requirement and the process requires further embedding throughout the organisation
Section 6 - Monitoring financial performance			
N	The leadership team takes action using reports enabling it to identify and correct emerging risks to its budget strategy and financial sustainability.	🟩	The authority complies with this requirement
O	The leadership team monitors the elements of its balance sheet which pose a significant risk to its financial sustainability.	🟩	The authority complies with this requirement
Section 7 - External financial reporting			
P	The chief finance officer has personal and statutory responsibility for ensuring that the statement of accounts produced by the local authority complie with the reporting requirements of the Code of Practice on Local Authority Accounting in the United Kingdom.	🟩	The authority complies with this requirement
Q	The presentation of the final outturn figures and variations from budget allow the leadership team to make strategic financial decisions.	🟩	Financial and Performance information is available to Service Managers and others.
Section 8 - Local requirements			
V	Appropriate and comprehensive insurance arrangements are in place.	🟩	The authority complies with this requirement
W	Treasury and cash management practices are appropriate for the organisation.	🟩	The authority complies with this requirement
X	Appropriate Pension scheme management and administration are in place.	🟩	The authority complies with this requirement

Governance, Audit and Scrutiny Committee 12 April 2021	**Report by the Monitoring Officer/Secretary and Director of Service Improvement**

DRAFT ANNUAL GOVERNANCE STATEMENT 2020/21

REPORT EXECUTIVE SUMMARY

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.

This paper sets out a draft AGS in respect to 2020/21. Given the content of the Statement, it is felt desirable that the Governance, Audit and Scrutiny Committee should specifically review the AGS separate from the Annual Accounts, although the AGS will form part of the Annual Accounts (Audited) once approved in July 2021.

It is also desirable that the Committee receive this report in advance of the draft Annual Accounts at the June 2021 Governance, Audit and Scrutiny Committee meeting.

RECOMMENDATIONS

1.   The Committee is asked to review the Annual Governance Statement for 2020/21 and make any recommendations to the Fire Authority as necessary.

THE ANNUAL GOVERNANCE STATEMENT – A REFRESHER

2.   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.

3.   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.

4.   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.

5.   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.

6.   The assurances in respect to the AGS derive from the following:-

- Internal Audit
- S.151 Officer
- Secretary/Monitoring Officer
- Strategic Leadership
- Members
- External Audit – through assessment
- Third parties, including partnership arrangements

7.   There is no model AGS, but rather the Guidance sets out best practice in developing an AGS.

8.   The production of the AGS dovetails strongly with corporate risk management and the Annual Audit Report from Internal Audit.

9. 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 in July 2021.

STRATEGIC PLAN COMPATIBILITY

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

FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

11. None arising directly.

LEGAL IMPLICATIONS

12. 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

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

CORPORATE RISK MANAGEMENT IMPLICATIONS

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

HEALTH AND SAFETY IMPLICATIONS

15. None arising directly.

COMMUNICATION ACTIONS ARISING

16. The approved version of the AGS is published on the HFRS Website.

DETAILS OF CONSULTATION

17. Consultation in producing the AGS has taken place with SLT and the Monitoring Officer.

BACKGROUND PAPERS AVAILABLE FOR ACCESS

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

RECOMMENDATIONS RESTATED

19. The Committee is asked to review the draft Annual Governance Statement for 2020/21 and make any recommendations to the Fire Authority as necessary.

N McKINIRY
M BUCKLEY

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Head of Corporate Assurance

Mathew Buckley   ☎ 01482 567174
Monitoring Officer/Secretary

Humberside Fire & Rescue Service
Summergroves Way
Kingston upon Hull

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.

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.

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 4th 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)

19. The overall Head of Internal Audit opinion for the period 1 April 2020 to 31 March 2021 provides Reasonable Assurance.

20. 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.

21. A comprehensive Assurance Map for the Service has been developed to help inform the work of SLT, the GAS Committee and Internal Audit.

22. 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

23. 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.

24. 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:
        o Searching for Missing Persons
        o Fire Investigation
        o Forced Entry for Medical Rescues
        o Drone
        o 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.

25. 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.

26. 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

27. 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.

28. <u>COVID-19 Pandemic.</u>
   Influenza Management Business Continuity Plans have been 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 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 resulting in a positive assessment of the decisions taken, actions implemented and contributions made by staff.

Conclusions

29. 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**

Governance, Audit and Scrutiny Committee 12 April 2021	Report by the Director of People and Development

REPORT EXECUTIVE SUMMARY

Diversity and Recruitment - Progress and Plans

This paper responds to the following questions\requests as part of the GAS Committee Scrutiny Programme.

1. Workforce Plan to be shared with the Committee. (Paragraph 2)

2. How diverse is the Service's workforce currently? (Paragraph 3 – 15)

3. Does this reflect the level of diversity in the local population? (Paragraph 16 – 18)

4. How does the level of diversity compare at different levels within the organisation? (Paragraph 19 – 21)

5. What have been the main challenges to increasing diversity in the organisation? (Paragraph 22 – 32)

6. How can the Service increase the diversity of its workforce? (Paragraph 33 – 38)

7. Update on training, promotion and development (Paragraph 39 – 57)

RECOMMENDATIONS

1. The GAS committee take assurance from: -

   a) the progress that the Service is making in relation to Diversity and Recruitment and,

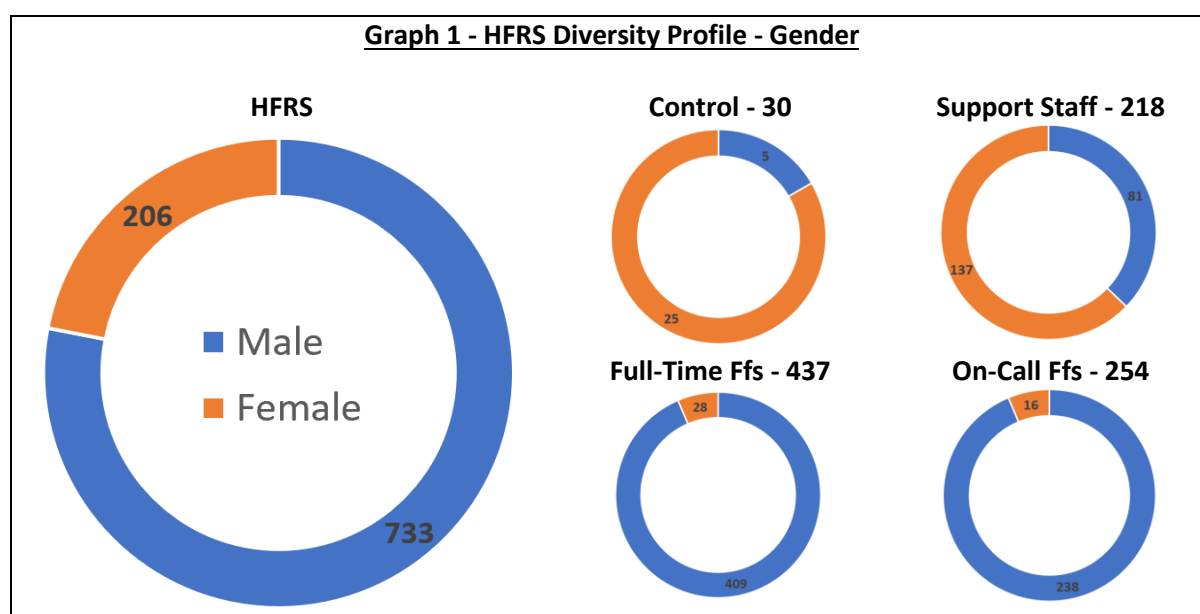   b) the progress the Service has made in relation to Training, Promotion and Development

REPORT DETAIL
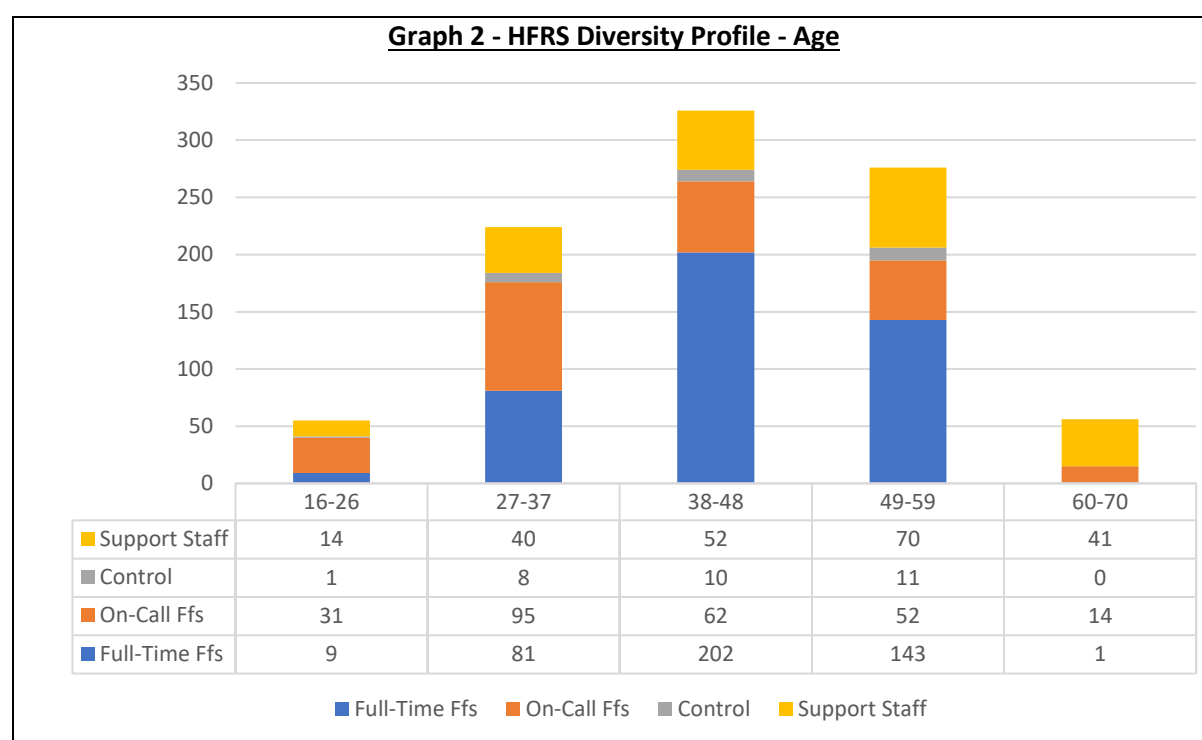
Workforce Plan to be shared with the Committee.

2. The current workforce plan 2019-22 is attached as Appendix A, following a recent Internal Audit the Director of People and Development has instigated a review of Workforce Planning arrangements, incorporating the recommendations. The audit outcome and report is attached as Appendix B. Recommendations from the GAS Committee will also be considered as part of the review.

***How diverse is the Service's workforce currently?***

3. The following tables and graphs identify the Service's diversity profile in terms of gender, age, ethnicity, disability, sexual orientation and religion or belief.

4. A headcount figure of 939 has been utilised in the calculations, this is lower than our overall establishment figure as staff on dual contracts (Full-Time\On-Call or Support Staff\On-Call) have only been counted once. Staff on casual and zero-hours contracts have also not been included in these figures. Figures were correct as at 31/03/2021.

5. The overall gender and age profiles have been further broken down into 4 staff groups Control, Support Staff, Full-Time Firefighters and On-Call Firefighters. Support Staff include all relevant grades up to Executive Director and Full-Time Firefighters include all relevant roles up to Chief fire Officer. Data sets for other areas were too small to provide meaningful comparisons at this level and so are only compared at the Service level.

Graph 1 - HFRS Diversity Profile - Gender

HFRS: Male 733, Female 206

Control - 30: Male 5, Female 25

Support Staff - 218: Male 81, Female 137

Full-Time Ffs - 437: Male 409, Female 28

On-Call Ffs - 254: Male 238, Female 16

- Male
- Female

6. The gender profile demonstrates that overall there is a much larger proportion of men in the Service than women. This is because operational Firefighter roles make up the largest proportion of the workforce and these roles are more commonly filled by men. Full-Time and On-Call Firefighter groups show a very similar gender split.

7. Women make up a larger proportion of our Support Staff group almost doubling the number of men in these roles. The proportion of women in the Control Staff group is also large however the headcount in this area is relatively small (30).

Graph 2 - HFRS Diversity Profile - Age

	16-26	27-37	38-48	49-59	60-70
Support Staff	14	40	52	70	41
Control	1	8	10	11	0
On-Call Ffs	31	95	62	52	14
Full-Time Ffs	9	81	202	143	1

Full-Time Ffs ■ On-Call Ffs ■ Control ■ Support Staff

8. Graph 2 displays the age profile of the Service. It is important to note that the normal retirement age for Firefighter roles (for those in the Firefighter Pension schemes) has been 55 until very recently following a change to 60. Support and Control Staff (on the LGPS scheme) have a normal retirement age of 67. It is very apparent that overall there is an ageing workforce. This is particularly apparent amongst Full-Time Firefighters with large numbers in the 49-59 age group, most of whom will have a normal retirement age of 55.

9. On-Call Firefighters are much better spread throughout the age groups and make up the largest proportion of the youngest (16-26) age group. Control and Support Staff are also spread more evenly across the age groups however there are smaller numbers of both in the youngest age group.

Graph 3 - Ethnicity
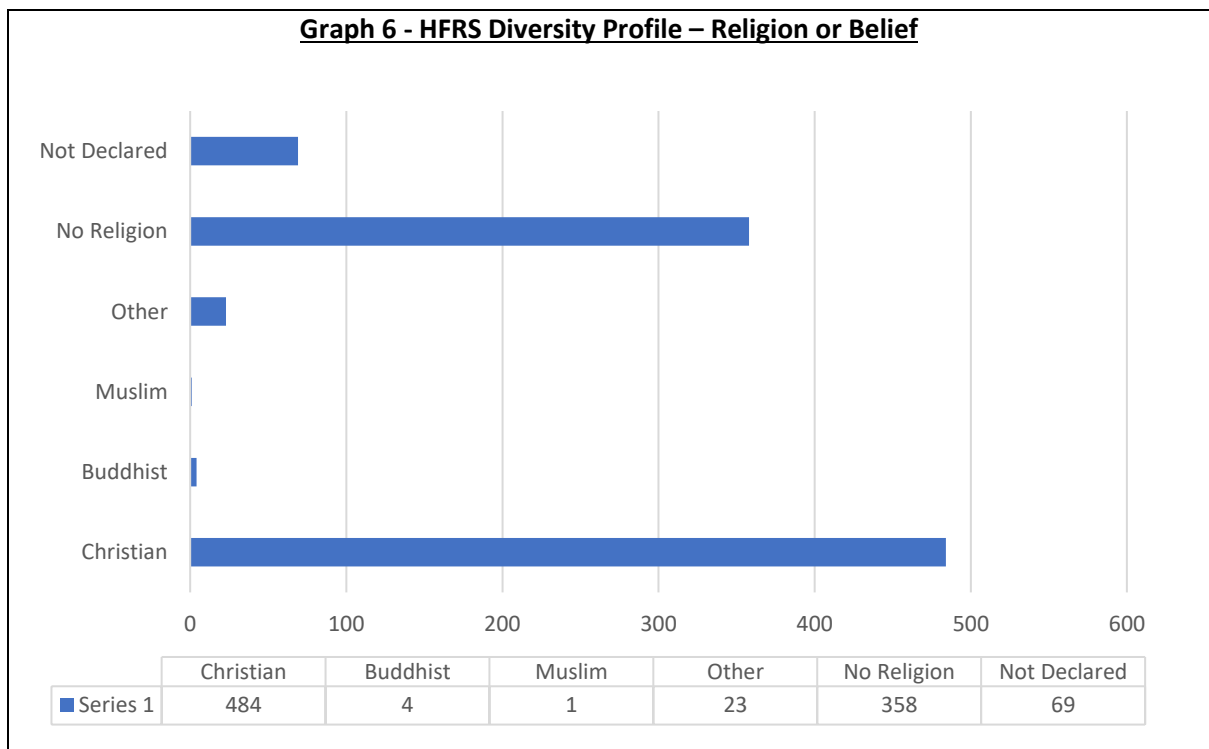
34 17

BAME
Non BAME
Not declared

888
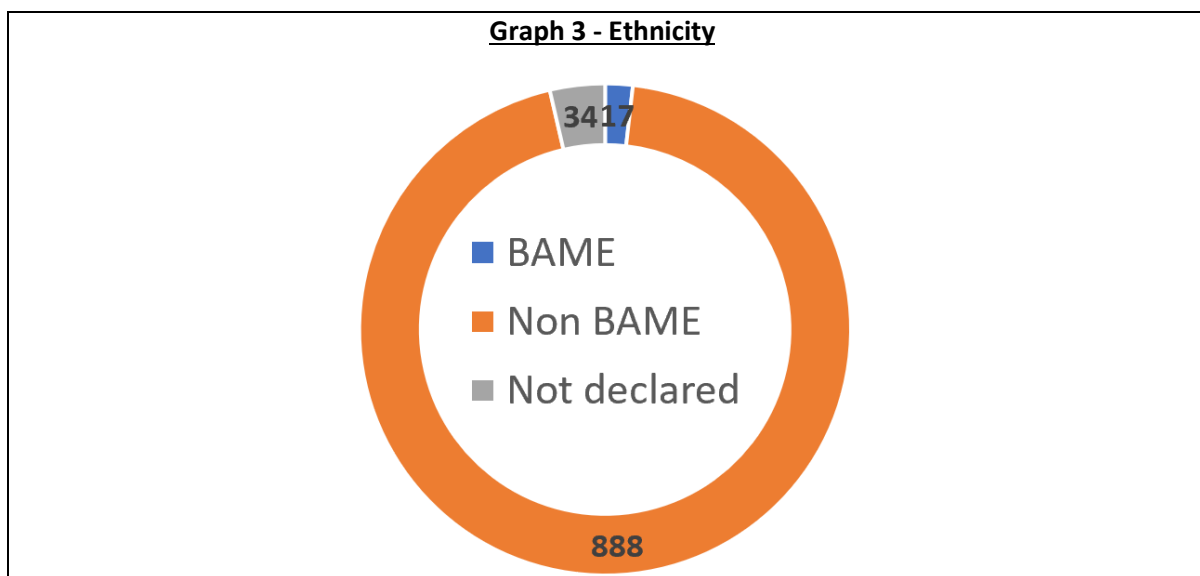
10.   Graph 3 shows the overall ethnic makeup of the Service. The acronym BAME stands for Black, Asian and Minority Ethnic and is defined as all ethnic groups except White ethnic groups. It does not relate to country origin or affiliation. In this classification, BAME comprises all Mixed, Asian, Black and Other (non-white) ethnicities. Non-BAME ethnic groups comprise White British; White Irish, Gypsy or Irish Traveller; and Other White. This is in keeping with the Office for National Statistics' harmonised output categories for ethnic groups.

11.   Only 17 staff identify as being from a BAME group with 888 staff identify as Non-BAME. 34 staff chose not to declare their ethnic group.

Graph 4 - Disability

68 21

Disabled
Non disabled
Not declared

850
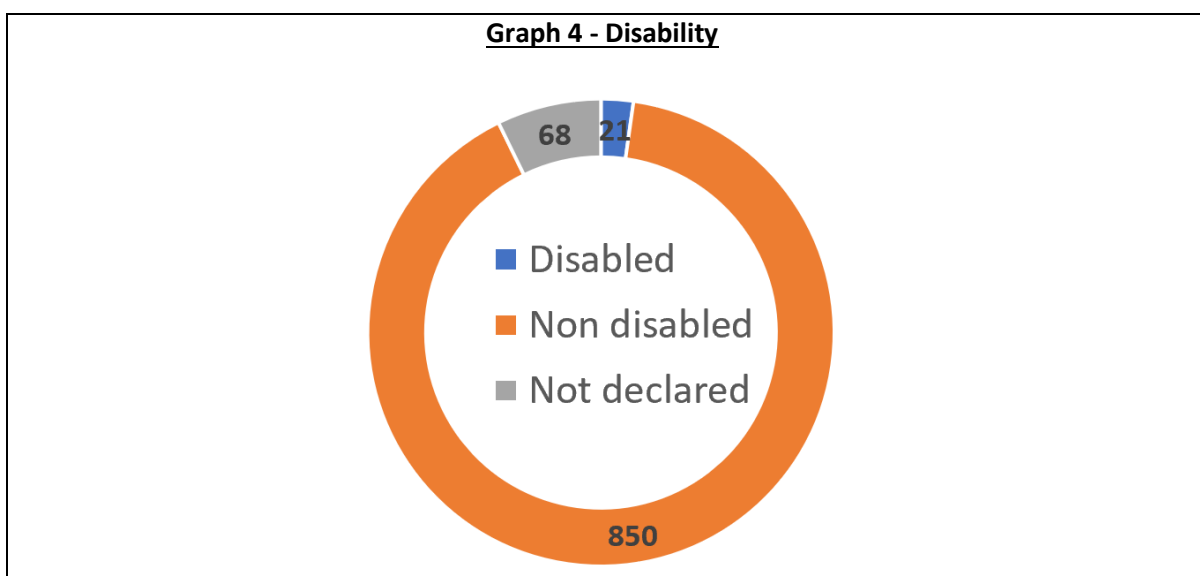
12.   Graph 4 shows that 21 members of staff have identified as being registered disabled, 68 staff chose not to declare whether they were disabled or not.

Graph 5 - Sexual Orientation

- LGBT+
- Heterosexual
- Not declared

20
76
843
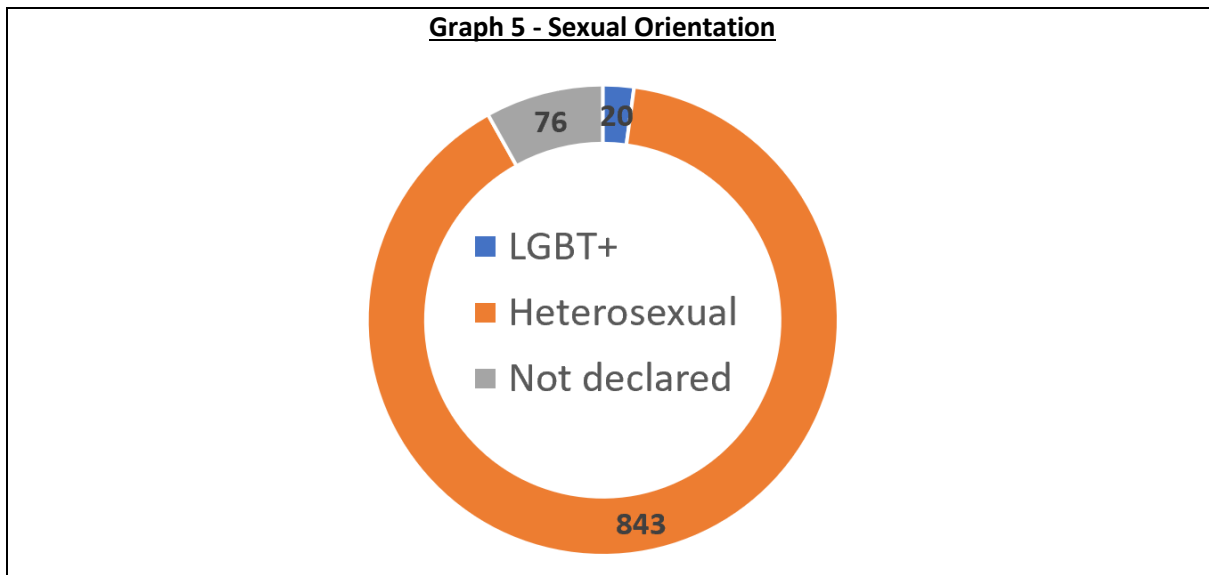
13. Graph 5 shows the makeup of the Service by sexual orientation. LGBT+ pertains collectively to people who identify as lesbian, gay, bisexual, or transgender, and to people with gender expressions outside traditional norms, including nonbinary, intersex, and those questioning their gender identity or sexual orientation, along with their allies.

14. 20 members of staff identify as LGBT+ whilst 76 members of staff chose not to declare their sexual orientation.

Graph 6 - HFRS Diversity Profile – Religion or Belief

	Christian	Buddhist	Muslim	Other	No Religion	Not Declared
Series 1	484	4	1	23	358	69

15. Graph 6 displays the diversity profile by religion and belief. The largest proportion of staff identify as Christian whist the next largest category is no religion. 69 members

of staff chose not to declare a religion or belief. A small number of staff members identified Buddhist and Muslim as their religion.

Does this reflect the level of diversity in the local population?

16.   The Service along with the data observatories for the unitary authorities utilises the Census data from 2011 to identify the diversity of the local population in terms of gender and ethnicity. Table 1 below compares the Service profile with that of the individual local authorities and the overall Humber area.
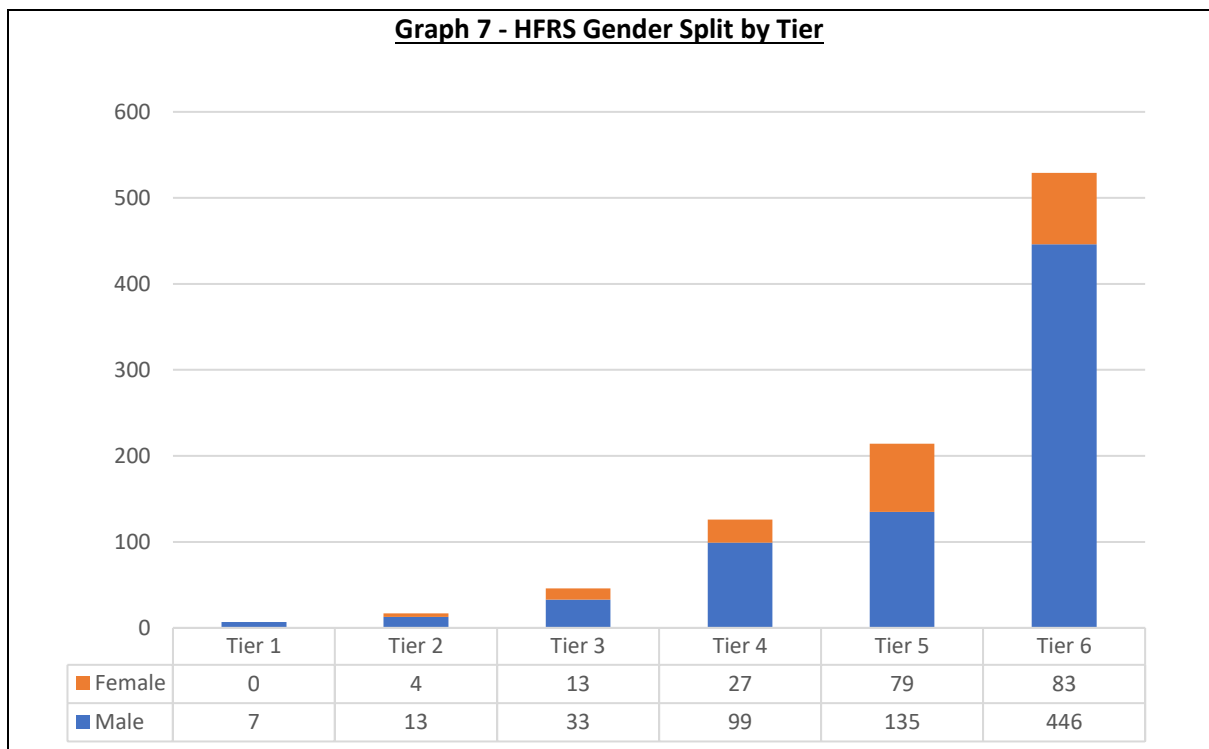
Table 1 - HFRS Diversity Profile Compared to the Humber Area					
Unitary Authority	Population	Gender		Ethnicity	
		Male	Female	White	BAME
Hull	259,778	50.5%	49.5%	89.7%	10.3%
East Riding of Yorkshire	341,173	51%	49%	96.1%	3.9%
North East Lincolnshire	159,821	51%	49%	97.4%	2.6%
North Lincolnshire	170,786	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%*

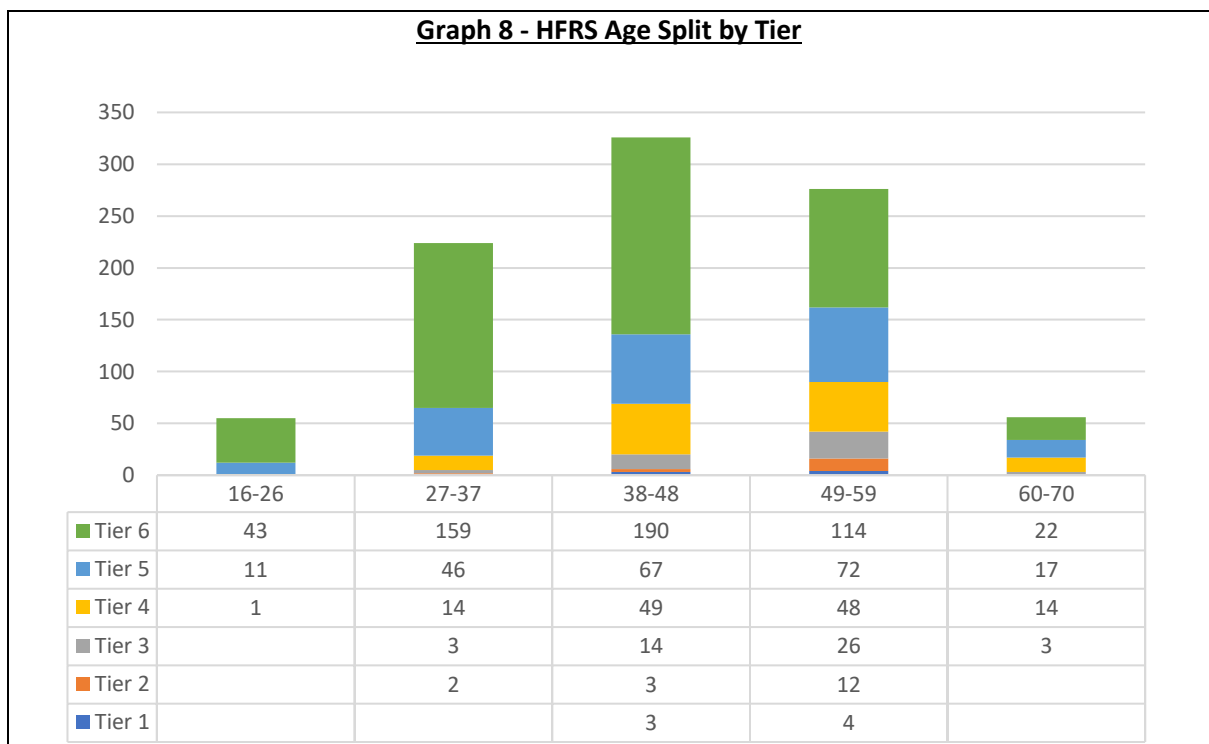*3.6% of staff did not declare their ethnicity

17.   As would be expected the gender profile of the overall Humber area is virtually equal. The Service is made up of a significantly higher proportion of men (78.1%) than women (21.9%).

18.   The definition of the BAME acronym is detailed in paragraph 10. The ethnic makeup of the Humber area is 94.6% Non-BAME and 5.4% BAME. Whilst the Non-BAME statistic for the Service is the same, the BAME statistic is only 1.8%. 3.6% of staff chose not to declare their ethnicity.

How does the level of diversity compare at different levels within the organisation?

19.   To compare statistics across different levels within the organisation it is necessary to define a range of tiers to group similar gradings and roles. The roles and grades have been categorised into tiers using the core skills framework as a guide. The tiers are as follows:

a) Tier 1 = Chief, Deputy, Principal Officers, Directors and Area Managers
b) Tier 2 = Grade 13B+, 13B, 13A, 13 and Group Managers
c) Tier 3 = Grades 12, 11 and Station Managers
d) Tier 4 = Grades 10, 9, and Watch Managers
e) Tier 5 = Grades 8, 7, 6 and Crew Managers
f) Tier 6 = Grades 5, 4, 3, 2, 1 and Firefighters

Graph 7 - HFRS Gender Split by Tier

	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5	Tier 6
Female	0	4	13	27	79	83
Male	7	13	33	99	135	446

20. Graph 7 displays the gender split across the identified tiers within the Service. As there are fewer women in the organisation overall, there are more men in every tier however the proportion of women in each of the tiers 2 – 6 is consistent (approximately 20 – 35%). Notably, there are no women in the highest tier, however, there are current vacancies at this level due to a recent restructure and this provides an opportunity for the Service.

Graph 8 - HFRS Age Split by Tier

	16-26	27-37	38-48	49-59	60-70
Tier 6	43	159	190	114	22
Tier 5	11	46	67	72	17
Tier 4	1	14	49	48	14
Tier 3		3	14	26	3
Tier 2		2	3	12	
Tier 1			3	4	

21. Graph 8 displays the age profile of the Service in terms of the identified tiers. As would be expected senior roles (tiers 1 & 2) are predominantly filled by those in the older age groups. The bulk of the workforce is in tier 6 with a similar proportion of each overall age group represented in each, tier 5 also displays a similar spread.

What have been the main challenges to increasing diversity in the organisation?

22. There are a range of challenges that HFRS and most FRSs nationally are facing, the main areas include: -
a) Limited Full-Time Firefighter recruitment
b) An ageing workforce
c) Positive Action Strategy

Limited Full-Time Firefighter recruitment

23. The Service went through a period from 2007 to 2017 of not recruiting to Full-Time Firefighter roles following a period of austerity and associated efficiency programmes. Ordinarily, the Service would run a minimum of 1 Full-Time Recruits course each year (and sometimes 2) to maintain workforce planning needs.

24. As the Full-Time firefighter staff group makes up the bulk of our workforce the diversity within the Service has largely remained static through this period. Since 2017 there have been several intakes of Full-Time Firefighters and this has provided an opportunity to improve our approach to positive action.

Table 2 – Diversity Profile of Full-Time Courses – 2017/21

Date	Male	Females	BAME	Non-BAME
2017	40	2	2	38
2018	38	2	0	40
2019	15	7	2	20

25. Table 2 shows the diversity profile of our most recent Full-Time firefighter courses. Some progress is being made as a result of our positive action initiatives however there is much more that needs to be done.

26. On-Call Firefighter recruitment has not been affected in the same way and courses have continued to run throughout the same period. On-Call Firefighters circumstances sometimes change, particularly with their primary employment which does mean that the Service is seeing an increased turnover of staff in this group. Whilst this can provide its challenges it does provide an opportunity to continually diversify the workforce. Table 3 shows the diversity profile of our On-Call courses over the same period.

Table 3 – Diversity Profile of On-Call Courses – 2017/21

Date	Male	Females	BAME	Non-BAME
2017	30	2	6	26
2018	46	4	4	46
2019	20	8	3	25
2020	21	2	0	23
2021 (to date)	3	1	0	4

27.   Limited Full-Time Firefighter Recruitment has led to the Service having an ageing static workforce. Remedy solutions for the pension schemes which were legally challenged may result in a larger number of Firefighters retiring over the next 5 years than was expected.

28.   The age profile at the senior levels of the organisation is largely in the higher age categories which means that there is likely to be a significant change of personnel in these roles. Opening our promotion processes to external candidates provides an opportunity to attract a more diverse range of candidates.

Positive Action Strategy

29.   Whilst the Service has undertaken and, had some success with positive action initiatives a clear positive action strategy and plan has not been produced. Initiatives have also stopped and started mainly in line with Full-Time Firefighter Recruitment.

30.   Recent work linked to the NFCC On-Call Firefighter campaign has been well supported and provided some positive results as can be seen in Table 3.

31.   Positive Action linked to Support and Control roles has been much more limited.

32.   In some cases, Positive Action has not been well received by our workforce with a perception that standards have been lowered to increase diversity. A greater level of engagement and education of the workforce is needed to enable understanding of what positive action is and why it is necessary.

How can the Service increase the diversity of its workforce?

33.   A Positive Action Strategy and Framework is currently in development with the aim of increasing the diversity of the workforce. The strategy will define a continuous process of positive action encompassing all roles within the organisation. Previous stop/start campaigns focussed on Full-Time Firefighter recruitment alone are no longer suitable if the Service is to take advantage of every opportunity to diversify the workforce as a whole.

34.   Four key areas of focus have been identified within the initial draft of the strategy and more detail on these is provided below.

Ensuring the provision of robust workforce and community data

35.   Accurate workforce and community data will be critical to the successful execution of this strategy. It is necessary to establish up to date community data to understand the demographics and emerging changes. It is also necessary to identify where underrepresentation exists within our workforce to be able to target Positive Action and resources appropriately.

Identifying and removing barriers to attraction

36.   We will actively improve our engagement with various underrepresented groups across the communities of the Humber area to promote the wide-ranging employment opportunities offered by HFRS. We will work closely with our internal/external stakeholders and identify opportunities to engage with communities and develop long

term partnerships so we can better understand their employment needs and raise awareness.

<u>Enhancing HFRS employer brand as an inclusive 'Employer of Choice'</u>

37. Inclusive organisations derive a range of benefits from their workforce – increased morale, productivity, skills & experience, employee retention and a healthy talent pipeline. We will ensure that we have an 'across all thinking' approach in place and regularly review supportive and inclusive policies. HFRS already has in place flexible working arrangements, employee assistance programme, active and supportive health and well-being arrangements and competitive terms and conditions. All of which help foster a supportive, positive and healthy workplace that safeguards the dignity and wellbeing of all our employees.

<u>Facilitating Meaningful Career and Personal Development</u>

38. We recognise that attracting people to HFRS is just the first step and retaining a diverse workforce that remains engaged and motivated is equally important. When employees feel valued for their individuality and unique contribution, they are more likely to remain within an organisation. To support this aim, we aim to ensure that personal and career development opportunities are accessible to all. Effective communication strategies together with the provision of targeted training, mentoring and coaching will assist with promoting the availability of these opportunities to maximise uptake in groups that are underrepresented within specific roles or grades.

Update on training, promotion and development (GAS Minute 62/19 refers)

39. Minute 62/19 resolves, item (b) '*that the Committee be updated with regard to progress against HMICFRS recommendations relating to training, promotion and PDRs'*. An update is provided over the following pages in relation to each of the areas identified. Training (Paragraphs 40 – 47), Promotion (Paragraphs 48 – 49) and Personal Development Reviews (Paragraphs 50 – 57).

Training - Learning and Development Hub Update

40. Following the Launch of the L & D Hub in April last year, the team have made significant progress

<u>Non-Operational Staff PDR Pro</u>

41. To record competence, the service currently uses a competency recording system called PDR Pro, it is important that individual accounts accurately record the required competencies of all staff.

42. Operational Staff accounts have been comprehensively developed over several years. Whilst non-operational staff have access to PDR Pro their accounts are not reflective of their operational colleagues, to address this and ensure that all staff have equal access the team is in the process of revising all non-operational accounts.

43. Each service section has been asked to provide a competency profile for their staff roles e.g. Prevention, Advocate. The L & D Hub team is in the process of administering these to individual PDR Pro accounts. Updates will be rolled out sequentially section by section to ensure that any issues are addressed progressively. Whilst this presents a significant amount of work, to date the team has already

updated all prevention staff accounts and are now working through Organisational Development staff accounts.

<u>National Operational Guidance Training Framework</u>

44.   The implementation of National Operational Guidance (NOG) has meant that the existing Training Framework has had to be completely revised to ensure that it is current and aligned.

45.   This work has been broken down into 4 phases:

- Gap Analysis - This work essentially cross-references the existing training framework with NOG
- Revision of Learning Materials and introduction of Lesson Plans.
- Development - There are several strands to this area, linking to existing L & D Hub workstreams.
- Assurance - As part of the overall strategy to ensure that the framework is being embedded successfully the L & D Hub plan will quality assure service-wide training delivery.

<u>Development of eLearning and Identifying New Ways of Learning</u>

46.   The team is also reviewing the compatibility of the material concerning different learning styles and using the new NFCC template has developed an impact assessment. Moving forward learning material will have read-aloud functions and be presented in formats that are more accessible to our workforce and their individual needs.

47.   The L & D team horizon scan to find 'New ways of Learning' and currently contribute to the NFCC Learning Materials working group. Some of the areas they are currently exploring include:
- the development of virtual reality to simulate unusual environments for staff e.g. flooding, wildfires.
- the use of 360-degree filming to further improve the immersive and interactive nature of learning and to provide improved access to training and risks for staff. 360-degree filming allows the user to more thoroughly explore environments that may be difficult to access e.g. High-Risk sites that the service has limited access to, or training scenarios staff are unable to attend.

Promotion

48.   Promotion – The new Recruitment and Selection Policy which applies to all staff has provided a robust and well-received recruitment and selection process for the Service. Career progression and development for all staff are supported by the PDR process, core skills framework, career ladders and role-specific training outlines.

49.   Historic pools/processes have now been exhausted and the implementation of a new Talent Management Framework has been completed. To date, Full-Time time Crew and Watch Manager Talent Pipelines, as well as an On-Call Crew Manager Talent Pipeline, have been run successfully. The Station Manager Talent Pipeline process is currently being finalised before running a process that will be open to both internal and external candidates. This robust development framework complements the new recruitment process.

Personal Development Reviews

50. Whilst there has been a Service history of supporting and developing staff at HFRS, not all staff have had access to an annual PDR. A review of the former Appraisal process was carried out by Organisational Development (OD) in January and February 2018, culminating in the roll-out of a new PDR process, guidance, and paperwork, incorporating the new Service principles and a section on personal resilience and wellbeing. In addition to this OD also launched the Service Core Skills Framework (CSF). The CSF has since been further developed to include Role Specific Training Outlines for all posts and Career Ladders for all functions within the Service.

51. The PDR process for 2018 was reviewed via production of an SLT paper dated 6 February 2019, in which it reported the PDR completion rate was 67%, (which included an extension to the deadline to August of that year), and detailed the training provision that OD was able to facilitate based on a partial return, (26%) from the Training Needs Analysis (TNA) conducted as part of the new PDR process.

52. The PDR process was reviewed again for 2019 and the completion rate was up to 96%, with a TNA return at 52%. Once again, the deadline for PDR completion was extended by one month. The increase in the PDR completion rate was a significant improvement from the 2018 process.

53. Whilst feedback from staff and managers reported that the 2019 PDR process was a real improvement on 2018 and that the PDR training overall was well received, the biggest finding for improvement was that the PDR needed to be electronic to reduce 'lost' paperwork.

54. An electronic PDR system was created and implemented for the 2020 PDR cycle. OD had planned a series of roadshows to promote and familiarise managers with the new electronic format to PDR, however, the emergence of COVID 19 and the Service going into business continuity restricted these from occurring. Due to lockdown restrictions and social distancing measures OD developed a suite of resources that were hosted on SharePoint, including a short tutorial video, which were promoted to managers.

55. Despite these challenges, the PDR completion rate was 97%, with a Training Needs Analysis return at 54%.

56. This first electronic process was reviewed in January 2021 using quantitative information data from the Power BI PDR monitoring dashboard and associated completion reports that were investigated by the OD team regarding both PDR and TNA returns. Use of qualitative information by the dip sampling of 50 completed PDRs (10 from each District and 10 from Corporate = 5% sample) and feedback from Learning and Development Managers within the OD team regarding the TNA requests.

57. The outcomes, benefits, and areas for improvement can be found in the full review report attached as Appendix C.

STRATEGIC PLAN COMPATIBILITY

58. The report supports the delivery of our Strategic Plan 2021-2024 through pillar 3 'We value and support the people we employ.'

FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

59. None directly, all initiatives within this report will be delivered within existing budgets.

LEGAL IMPLICATIONS

60. The report outlines several areas which contribute to the Service's compliance with the Equality Act 2010 and numerous other aspects of Employment Law.

EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS

61. The contents of this report are directly related to improving the diversity profile of the Service, improving access to development and ensuring that all of our staff have the access to appropriate levels of development.

CORPORATE RISK MANAGEMENT IMPLICATIONS

62. Many of the areas explored within this report feature as key items on the Services Risk Register and within Improvement Plans.

HEALTH AND SAFETY IMPLICATIONS

63. None arising directly.

COMMUNICATION ACTIONS ARISING

64. None arising directly.

DETAILS OF CONSULTATION AND/OR COLLABORATION

65. None arising directly.

BACKGROUND PAPERS AVAILABLE FOR ACCESS

66. Workforce Development Plan 2020/22 – attached as Appendix A

67. Assurance Review of Workforce Planning – attached as Appendix B

68. Service PDR Management Report – attached as Appendix C

RECOMMENDATIONS RESTATED

69. The GAS committee take assurance from: -

a) the progress that the Service is making in relation to Diversity and Recruitment.

b) the progress the Service has made in relation to Training, Promotion and Development.

J. Kirby

Officer Contact: Jason Kirby   ☎ 01482 567185
                          Director of People and Development

Humberside Fire & Rescue Service
Summergroves Way
Kingston upon Hull

HUMBERSIDE
Fire & Rescue Service

WORKFORCE PLAN
2020-2022

1

48

INTRODUCTION

To achieve our priorities and aims we need to manage, plan and develop our workforce effectively. Under our 'Value Our People' strategic objectives, we are clear that we should plan for all workforce issues. This workforce plan forms part of our approach in doing so.

The following definitions should be referred to when considering the figures provided in this report.

'**Establishment**' means posts which are funded
'**Strength**' means number of staff employed
'**Vacancy**' means funded post which is not filled
'**Supernumerary**' means over and above agreed established posts

We recognise our responsibility for keeping communities in the Humber area safe, keeping our firefighters safe, and contributing to the firefighting and rescue capabilities of the United Kingdom.

This workforce plan is supported and underpinned by local plans that are developed with local line managers and driven by Heads of Service in their respective areas.   We continue to develop our vision of *"Safer Communities, Safer Firefighters"*.

Our Strategic Plan 2020-2023 is clear on our priorities, i.e. 'what we want to achieve'. These priorities are that through everything we do we want to inspire community confidence and prevent the loss of life, injuries and impact on communities caused by emergency incidents.

Our strategic aims 'what we need to do well' are to:

- Help the community to be safe at home, at work or in public places.
- Advise businesses on their fire safety responsibilities and enforce when needed.
- Safeguard the vulnerable.
- Have the capability to respond to any risk in the area.
- Work seamlessly with other emergency responders.
- Have the capacity to handle emergency calls and arrive on scene quickly.

WHAT IS WORKFORCE PLANNING?

According to the CIPD, workforce planning is a process of analysing the current workforce, determining future workforce needs, identifying the gap between the present and the future, and implementing solutions so that an organisation can accomplish its mission, goals, and strategic plan. It's about getting the right number of people with the right skills employed in the right place at the right time, at the right cost and on the right contract to deliver an organisation's short and long-term objectives.

A key aim of HFRS's workforce plan, business continuity and resilience planning is to ensure plans are in place for sustainable, fit for purpose, effective leadership and that workforce capacity and capabilities are able to deliver the Services Strategic Plan.

ORGANISATIONAL OVERVIEW

Humberside Fire Authority covers the four Unitary Authority areas of Kingston upon Hull, the East Riding of Yorkshire, North Lincolnshire and North-East Lincolnshire. The area has a total population of approximately 925,000 and covers a geographical area of 1,358 square miles.

We have 31 Fire Stations, 12 are crewed by Full-Time firefighters and 19 by On-Call firefighters. 3 of the full-time stations have mixed crewing of both Full-Time and On-Call firefighters.

Workforce Planning Cycle

Ref: CIPD – Workforce Planning Factsheet 5 June 2020

This workforce plan will be updated periodically according to service need, establishment data and the retirement profile.

ANALYSING THE WORKFORCE

The agreed establishment numbers and the current establishment structure for the Service are detailed in Appendix 1 attached. These figures are correct as at 7 July 2020, bearing in mind that this is dynamic information and subject to change. The agreed funded figure includes external secondments and funded services, for example the Falls Team.

	AGREED ESTABLISHMENT	CURRENT STRENGTH (number of staff employed)
Full Time Operational Staff	450	454
Support Staff	239	219
Control Room Staff	27	30
Total	716	703

A further breakdown of staff in each work area is provided in Appendix A and B

On Call Crewing

Our HR database is showing an actual establishment figure for On Call staff of 340; which is a flexible and fluid figure because of the description above. Our headcount for On Call currently is 256, plus 84 further full-time operational staff undertaking dual contract arrangements. In addition, 11 Support Staff and 1 Control Staff also have On-Call contracts.

Our current, notional On Call establishment is 424, which is based on our traditional approach to calculating on call establishment which is 15 personnel on a one pump station and 28 personnel on a two-pump station. However, the way HFRS manages its contracts with on call staff is dependent upon the blend of availability profiles at each station.

On Call stations are crewed by staff who provide emergency cover on an On-Call basis and generally have primary employment in addition to their Fire and Rescue Service role. Staff provide various levels of cover per week depending on their circumstances and availability, and are also required to live or work within 5 minutes travelling distance from the fire station. As such, there are a variety of contracts which outline the amount of On Call cover that staff provide per week. Contracts are banded by overall hours per week and specified hours where cover must be provided within specific periods. A variety of contracts are available to suit the needs of individuals and provide sufficient emergency cover at the station.

The following core hours bands are available:

- 100+ core hours band with 70 hours specified
- 85 core hours band with 60 hours specified
- 70 core hours band with 50 hours specified

The core hour bands are then broken down further by contract efficiency and designated as either A, B, C or Prime; with Prime contracts being the most efficient (based upon the need at each particular station).

Current On Call Crewing levels are detailed at Appendix C

Falls Team

This team of 8 Firefighters are seconded from their substantive roles across the Service. There are currently 8 posts funded by City Health Care Partnership, who are commissioned by NHS Hull Clinical Commission Group (CCG) to provide a falls service in Hull. The CCG have recently funded this service for a further year however, funding is expected to continue for a further 5 years. Should the Falls Team cease to exist those Firefighters will return to the Service to meet Service needs at that time.

Fire Resilience Crew

The current number of Reserve Fire Crew staff is 22 as at the end of June 2020. This level of cover, including training and competency, is currently being reviewed and addressed to ensure it is fit for purpose in the short to medium term. Further recruitment has taken place to increase the FRC to a target of 50 and will be ongoing.

ATTRITION: LEAVERS OF THE SERVICE AND REASONS

The workforce plan takes account of the attrition rate and reasons for staff exiting the Service, its absence rates, and any key risks such as the age of the workforce, the skills of individuals and for HFRS if, when and how many firefighters need to be recruited into the Service. Relevant data has been analysed and reported as follows:

During 2019/20, from 1 July 2019 to 30 June 2020 inclusive, there have been 67 leavers across all areas of the Service. These are summarised in the table below.

ATTRITION REASON	NUMBER
Retirement	28
Resignation	36
Early retirement	1
Ill Health	2

The work areas of leavers during 1 July 2019 to 30 June 2020 are categorised in the table below.

WORK AREA	NUMBER OF LEAVERS
Control	1
On-Call	32
Support Staff	13
Wholetime	21

EQUALITY INFORMATION

Gender

Our workforce profile as at 30 June 2020, shows a gender split of 73.1% male and 26.9% female across the whole workforce; with a split of 93.67% male and 6.33% female for grey book staff. The workforce is predominantly white. We remain broadly proportionate to the communities we serve with regard to BAME staff employed in the Service.

Age

Age Group	Number
17-24	36
25-35	217
36-45	281
46-55	338
56-65	98
66 +	7
Grand Total	**977**

WHAT DOES OUR WORKFORCE DATA TELL US?

Service wide/specific areas of risk

We have an ageing workforce, and potential specific areas of risk should staff choose to retire at their earliest opportunity. These potential retirement risks are detailed in the retirement profile information and specific station/directorate profiles.

Retirement Profile*

	Immediate	2020	2021	2022	2023
Firefighter	8	3	8	12	10
Crew Manager	2	1	2	7	2
Watch Manager	6	3	8	4	2
Station Manager	2	2	4	4	2
Group Manager	0	0	1	2	3

Post McCloud ruling

Further detail of the retirement profile is provided at Appendix D

DETERMINING FUTURE WORKFORCE NEEDS

Based on the earliest possible retirement date of the individuals concerned and assuming they actually elect to retire, it is estimated that we will need to recruit additional Wholetime staff at all ranks, as above. Plans are already in place to consider recruitment options which include; the temporary re-engagement of retired firefighters, temporary full time FF contracts for On Call staff, permanent full time FF contracts for On Call staff and external advertisement to the general public and other Fire Services.

Identifying Gaps

It is noted that as a result of Covid19, we have been unable to conduct our usual approach to Positive Action in order to attract all sectors of society, including underrepresented groups, in particular females and BAME. However, as soon as reasonably practicable, positive action initiatives will recommence.

Our Gender Pay Gap 2019 report has shown another small reduction in the pay gap, however our EDI workforce data and community demographic show that we have more work to do to improve the diversity of our workforce. This means we will continue to build on the success of our last positive action campaign.

We are hoping to engage, consult and get support both internally from our emerging staff forums, and externally through our local communities regarding their ideas and input to our next positive action campaign albeit this will remain challenging due to the continuing impacts from COVID 19 pandemic.

This is the reason why we have currently proposed recruitment from retired firefighters and On Call staff who have already experienced positive action and Service policy. With the introduction of the Talent Pipeline, we have actively commenced a process of succession planning through all staff areas.

Succession Planning and Talent Management

Succession planning processes take account of the Services Strategic Plan requirements and horizon scanning of future external and internal challenges. Outcomes of these processes are translated into timely interventions to ensure the Authority continues to meet workforce capacity requirements whilst maintaining and building skills and capability.

The Talent Pipeline process currently in the final stages of development, provides a more robust means of succession planning and career development within the Service. It aims to provide transparency to the whole workforce about how they can develop and progress at every level and to support the promotion of all role levels throughout the organisation.

Retire and Return

Consideration is being given to staff who have either recently retired or would like to retire and return in order to address specialised skills gaps or vacancies that may be more challenging to recruit to. Whilst there is some interest, the uptake will depend heavily upon the impact of the individuals' pensions and whether it is financially viable for them to return on this basis.

At the HFA meeting 13 March 2020 the authority approved the principle of re-engagement of operational staff (minute 32/20)

The Services pay policy statement does not prohibit employees who have left employment being re-employed

DEVELOPING AN ACTION PLAN

The following plans are in development for consideration by SLT to address known and predicted vacancies in the coming 18 month period;

Internal Promotion Opportunities

- The Deputy Chief Fire Officer could retire following a three-month notification period
- Group Manager recruitment to address an existing vacancy (September 2020)
- Station Manager recruitment (as a result of the impact from the GM process. October 2020)
- Talent Pipeline developed for Crew Manager and Watch Manager development/recruitment (intention to recruit once a year to these roles) (September/October 2020)

Firefighter recruitment from;

- On Call – Temporary full time firefighters (LTS/Modified cover)
- On Call – Permanent full time firefighters
- Re-engaged firefighters appointed to temporary full time firefighters (LTS/Modified cover)

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- Externally – permanent full time firefighters from other FRS and general public
- Externally – permanent Crew Managers and Watch Managers from other FRS
- Consideration of part time/flexible working for those who have indicated their intention to retire.

It is important to note that, under the Authority's Constitution, the Chief Fire Officer & Chief Executive has the authority to increase or decrease the establishment by 10 Full-Time Equivalent (FTE) posts in any given financial year. Any such change to the establishment must therefore be approved by the CFO / CEO before such changes are implemented.

MONITORING AND EVALUATE ACTION PLANS AND SOLUTIONS

For each stage of the processes above, outcomes and learning points will be evaluated to ensure continual improvement and workforce planning requirements are met.

SUMMARY/CONCLUSION

SLT remain accountable for this workforce plan and local workforce plans that follow. Directors and Heads of Service are responsible for the delivery of these plans within their respective areas of responsibility. The HR Service Partner model continues to ensure that managers have support to facilitate the delivery of local workforce plans. The revised workforce plan was agreed by SLT in July 2020.

Operational Establishment and Strength

Full Time Station	WM	Actual WM	CM	Actual CM	FF	Actual FF	No of Supernumerary	LTS/Modified	Variance +/-	Total
Central	4	4	4	4	16	16	0	1 WM Modified	-	24
Clough Road	4	4	4	4	24	26	2 (new recruits)	1 CM Modified 1 FF LTS	+2	34
Calvert Lane	4	4	8	8	32	36	4	2 FF Modified	+4	48
East Hull	4	4	4	4	16	16	0	1 WM social distancing	0	24
Bransholme	4	4	4	4	16	19	3	1 FF LTS 1 FF Social Distancing/modified	+3	27
Bridlington	4	4	4	4	20	22	2	2 FF Modified 2 FF Shielding	+2	30
Peaks Lane and Cromwell Road	4	4	12	9	52	54	2	0 LTS / modified 1 FF career break	-3CM +2FF	67
Immingham (E) &(W)	4	4	8	7	36	34	0	0 Modified 1 CM LTS	-1CM - 2FF	45
Scunthorpe	4	4	8	8	36	37	1	1 FF LTS and Modified 1 CM LTS	+ 1FF	49
Goole	4	3	4	4	20	22	2	2 FF LTS 1 FF modified	-1WM +2FF	29
Falls Team					8	8		FF Store: Modified	+8	8
TOTAL	40	39 -1 WM	60	56 -4 CM	276	290 + 14 FF				376 Actual 385

	Funded Establishment	Current Strength	Vacancies
Service Delivery GMs	4	3	1

Specialist Dept GMs	5	5	
Total	**9**	**8**	
Station Managers			
Training	3	3	
Emergency Preparedness and Fleet	1	1	
Corporate Assurance	1	1	
Public Safety Business Safety	6	6	
Service Support	1	1	
Health and Safety	1	1	
OD	2	2	
Service Delivery Station Managers	10	10	
On Call Manager - SM	1	1	
Total	**26**	**26**	

SLT, Control and Support Areas

Strategic Leadership Team

	Agreed establishment	Current strength	Vacancies
Executive Team	10	10	0

Control

	Agreed establishment	Current strength	Vacancies
Control	30	30	0

Support Services

	Agreed establishment	Current Strength	Vacancies
HR	8	6.5	1 x WT 1 x 22 hours
OH	8	8	0
OD	8	7	1 x WT
EP&F	3 (7 Grey Book)	3 (6 Grey Book)	1 WM (temporary)
Stores	3	3	
Water Supplies	5	5	
Finance/Procurement	11	10	1
Corporate Assurance	8 (2 Grey)	7 (2 Grey)	1
Internal Services ` - H&S	6 (3 Grey)	4 (3 Grey)	2

- SSC	15	13 (2 Grey -temp)	1 (1 x temp grey)
- Directors' PAs - GM - SMs	3 (1 grey) (2 grey)	3 (1 grey) (1 grey)	 (1 temp grey (H&S)
ICT	27 (*Incl 1 temporary*)	23	4
Training	11 (14 Grey)	9 (13 Grey) (incl 1 supernumerary)	2 (2 Grey)
Cleaners - SHQ - Stations	 7 26	 7 25	 1 *(Goole)*
Public Safety SHQ/Central *(Service Centre and GM Steve Duffield's team)*	9 (4 Grey)	10 (4 Grey)	
Support & Education *(incl Road Safety/Business Safety)*	12	12	
Beverley	15 (2 Grey)	15 (3 Grey)	
Bransholme	1	1	
Calvert Lane	1	1	
Clough Road	7	6	1
East Hull	1	1	
Central	1	1	
Guildhall	4	4	
Scunthorpe	12 (2 Grey)	10 (1 Grey)	2 (1 Grey)
Cromwell Road	12	11	1

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On-Call Strength

Station	One or two pump	No of Watch Managers	No of Crew Managers	No of Firefighters
Barton	1	1	2	13
Beverley	2	1	2	23
Bridlington	2	1	3	16
Brigg	1	0	2	10
Brough	2	1	2	18
Cleethorpes	TRV	1	1	5
Crowle	1	0	2	10
Driffield	2	1	2	20
Epworth	1	1	2	13
Goole	1	1	2	10
Hornsea	2	1	3	17
Howden	1	1	1	16
Kirton	1	1	1	8
Market Weighton	2	1	2	17
Patrington	1	0	3	9
Pocklington	2	1	3	14
Preston	1	0	2	10
Scunthorpe	1	1	1	11
Snaith	1	1	2	11
Waltham	TRV	1	1	5
Winterton	1	1	2	10
Withernsea	2	1	2	13

Current Pension Scheme Retirement Profile 2020

Retirement Profile 2020	FF	CM	WM	SM	GM	AM	DCFO/CFO
Can go now	**8**	**2**	**6**	**2**			**1**
July		1	2				
August	1						
September				1			
October				2			
November	1						
December	1						
Grand Total	**11**	**3**	**9**	**4**	**0**	**0**	**1**

Retirement Profile 2021

Retirement Profile 2021	FF	CM	WM	SM	GM	AM
January	4		1	1		
February	3	1	1	1		
March		1				
April			2			
June			1	1		
August			1			
September					1	
November	1		2	1		
Grand Total	**8**	**2**	**8**	**4**	**1**	

Retirement Profile	FF	CM	WM	SM	GM	AM
2022	1	2	0	0	0	
2023	0	0	0	0	0	

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Humberside Fire and Rescue Service

Assurance Review of Workforce Planning

2020/21

March 2021

Executive Summary

OVERALL ASSESSMENT

REASONABLE ASSURANCE

- SUBSTANTIAL ASSURANCE
- REASONABLE ASSURANCE
- LIMITED ASSURANCE
- NO ASSURANCE

ASSURANCE OVER KEY STRATEGIC RISK / OBJECTIVE

SROAR-2019-046: Impact on Workforce Planning following McCloud Judgement

KEY STRATEGIC FINDINGS

Significant progress has been made in confirming the Service's workforce establishment and in confirming medium term staffing requirements.

There is a need for a more co-ordinated approach to Workforce Planning, in order to clearly demonstrate compliance with the requirements of HMICFRS.

Where shifts are overstaffed, the current shift model was found to not always facilitate the deployment of firefighters to activities benefiting the community.

HMICFRS improvement themes relating to Workforce Planning were not found to be consistently monitored via the Service Improvement Plan.

GOOD PRACTICE IDENTIFIED

The Talent Pipeline initiative was found to be an effective approach to filling vacancies within the agreed establishment.

SCOPE

The review considered the arrangements in place for workforce planning, including the move to the new shift system, and considered the points arising from the HMICFRS inspection report.

ACTION POINTS

Urgent	Important	Routine	Operational
0	3	1	0

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Assurance - Key Findings and Management Action Plan (MAP)

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
1	Directed	The last HMICFRS performance report states that: "The Service should ensure its workforce plan takes full account of the necessary skills and capabilities to carry out the integrated risk management plan." The existing Workforce Plan has a more narrow focus on workforce establishment, staff numbers and addressing current and forecasted vacancies.	The Workforce Plan be reviewed and expanded to explicitly fulfil the expectations of HMICFRS, demonstrating a co-ordinated approach to workforce planning across the Service, including referencing the IRMP, links to training and development and the role of shift planning.	2	*Workforce plan to be updated with additional area considering the skills and capabilities required in each area of the Service in accordance with the IRMP* *Skills gap analysis to be conducted following Feb 21 – Apr 21 PDR process* *Shift planning activity – capture and consider (within the workforce plan) how additional capacity, generated through the shift system, is utilised.*	*30/06/21* *30/06/21* *31/05/21*	*Director of People & Development/ Director of Service delivery* *Head of OD* *Director of People and Development / Director of Service Delivery*

PRIORITY GRADINGS

1	URGENT	Fundamental control issue on which action should be taken immediately.

2	IMPORTANT	Control issue on which action should be taken at the earliest opportunity.

3	ROUTINE	Control issue on which action should be taken.

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
2	Directed	Through discussion with Group Manager, Head of Service Delivery, Hull, it was established that the shift model can result in excess firefighters being on shift who are not always able to be deployed to other duties of benefit to the community. It was confirmed that a new online shift management tool is to be introduced in early 2021.	The shift model, including the new online management system, be reviewed to maximise the effective deployment of firefighters.	2	*Shift planning activity – Shift working group in place and meeting monthly.*	*31/05/21*	*Director of Service Delivery*
4	Delivery	In response to the last HMICFRS report, a Service Improvement Plan was created, which is regularly reviewed by the Senior Leadership Team. The actions in the Plan relating to Workforce Planning are beyond their target completion dates of 01/01/2020 and progress on these actions is not being consistently updated.	The actions in the Service Improvement Plan relating to Workforce Planning be consistently updated and reported to senior leadership, in line with process for other areas of the Plan.	2	*Corporate Assurance have initiated a meeting with HR to review the SIP and evidence against this action.* *HR to provide regular updates to Corporate Assurance on progression made against the SIP.*	*12/01/21*	*Head of HR/OD*

PRIORITY GRADINGS

1	URGENT	Fundamental control issue on which action should be taken immediately.	2	IMPORTANT	Control issue on which action should be taken at the earliest opportunity.	3	ROUTINE	Control issue on which action should be taken.

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
3	Directed	Management noted that the recent Talent Pipeline round identified inconsistent performance among applicants in relation to Equality, Diversity & Inclusion and Leadership skills. These were also noted as areas for improvement in the HMICFRS report: - "We found that not all staff fully understand the benefits of a diverse workforce or of positive action events. - "... talent management framework... to identify future leaders and potential staff for significant roles... we found little evidence of this being in place for all roles within the service." Management confirmed that further action is planned to address the inconsistency in these areas.	The ongoing interventions to address inconsistencies among staff in EDI awareness and leadership skills be regularly monitored to assess their effectiveness.	3	*Internal recruitment will always limit the ability to diversify the workforce. However the new talent pipeline process allows for development and support to the whole workforce ahead of any selection processes, and is transparent in its requirements.* *All panels have at least one person and often more trained in unconscious bias and ongoing leadership development further raises the profile of the importance of an inclusive and diverse workforce.*	*Ongoing*	*Head of OD/HR*

PRIORITY GRADINGS

1	**URGENT**	Fundamental control issue on which action should be taken immediately.
2	**IMPORTANT**	Control issue on which action should be taken at the earliest opportunity.
3	**ROUTINE**	Control issue on which action should be taken.

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Operational - Effectiveness Matter (OEM) Action Plan

Ref	Risk Area	Finding	Suggested Action	Management Comments
There were no operational effectiveness matters identified.				

ADVISORY NOTE

Operational Effectiveness Matters need to be considered as part of management review of procedures.

Findings

Directed Risk:

Failure to properly direct the service to ensure compliance with the requirements of the organisation.

Ref	Expected Key Risk Mitigation		Effectiveness of arrangements	Cross Reference to MAP	Cross Reference to OEM
GF	**Governance Framework**	There is a documented process instruction which accords with the relevant regulatory guidance, Financial Instructions and Scheme of Delegation.	Partially in place	1 & 2	-
RM	**Risk Mitigation**	The documented process aligns with the mitigating arrangements set out in the corporate risk register.	In place	-	-
C	**Compliance**	Compliance with statutory, regulatory and policy requirements is demonstrated, with action taken in cases of identified non-compliance.	Partially in place	3	-

Other Findings

A number of detailed Workforce Planning procedures have been established, facilitating vacancy management, promotions, transfers and postings, in order to facilitate the deployment of staff to meet the needs of the Service.

The required capabilities of the workforce are addressed through the Learning and Development Plan, Training Needs Analysis and Performance Development Review process.

The Strategic Risk & Opportunity Register includes the risk of losing staff to retirement earlier than expected due to the McCloud judgement. The mitigations identified align closely with the actions taken in the implementation of the Workforce Plan, Talent Pipeline and the anticipated recruitment of temporary firefighting staff in 2021.

Validation of staff and vacancy numbers across the Establishment Report and the Firewatch Database identified no discrepancies within the sample examined.

Delivery Risk:

Failure to deliver the service in an effective manner which meets the requirements of the organisation.

Ref	Expected Key Risk Mitigation		Effectiveness of arrangements	Cross Reference to MAP	Cross Reference to OEM
PM	Performance Monitoring	There are agreed KPIs for the process which align with the business plan requirements and are independently monitored, with corrective action taken in a timely manner.	Partially in place	4	-
FC	Financial Constraint	The process operates within the agreed financial budget for the year.	In place	-	FC -
R	Resilience	Good practice to respond to business interruption events and to enhance the economic, effective and efficient delivery is adopted.	In place	-	-

Other Findings

The Workforce Plan states that it will be subject to periodic evaluation. Management confirmed, however, that the details of this evaluation process were yet to be determined as the first phase of implementation was ongoing at the time of the audit.

In order to maintain staffing levels while adhering to budgetary constraints, the Head of HR confirmed that vacancies are to be covered through recruitment of temporary firefighters from the on-call population, until permanent recruitment becomes viable (due to the minimum numbers required for training school).

Use of on-call firefighters to supplement the permanently contracted workforce allows the Service to flex to demand, control overtime costs and cover vacant posts without incurring excessive costs or hiring permanent staff who may then become supernumerary.

Scope and Limitations of the Review

1. The definition of the type of review, the limitations and the responsibilities of management in regard to this review are set out in the Annual Plan. As set out in the Audit Charter, substantive testing is only carried out where this has been agreed with management and unless explicitly shown in the scope no such work has been performed.

Disclaimer

2. The matters raised in this report are only those that came to the attention of the auditor during the course of the review, and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. This report has been prepared solely for management's use and must not be recited or referred to in whole or in part to third parties without our prior written consent. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.

Effectiveness of arrangements

3. The definitions of the effectiveness of arrangements are set out below. These are based solely upon the audit work performed, assume business as usual, and do not necessarily cover management override or exceptional circumstances.

In place	The control arrangements in place mitigate the risk from arising.
Partially in place	The control arrangements in place only partially mitigate the risk from arising.
Not in place	The control arrangements in place do not effectively mitigate the risk from arising.

Assurance Assessment

4. The definitions of the assurance assessments are:

Substantial Assurance	There is a robust system of internal controls operating effectively to ensure that risks are managed and process objectives achieved.
Reasonable Assurance	The system of internal controls is generally adequate and operating effectively but some improvements are required to ensure that risks are managed and process objectives achieved.
Limited Assurance	The system of internal controls is generally inadequate or not operating effectively and significant improvements are required to ensure that risks are managed and process objectives achieved.
No Assurance	There is a fundamental breakdown or absence of core internal controls requiring immediate action.

Acknowledgement

5. We would like to thank staff for their co-operation and assistance during the course of our work.

Release of Report

6. The table below sets out the history of this report.

Stage	Issued	Response Received
Audit Planning Memorandum:	10th November 2020	17th November 2020
Draft Report:	22nd December 2020	25th March 2021
Final Report:	26th March 2021	

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AUDIT PLANNING MEMORANDUM

Appendix B

Client:	Humberside Fire & Rescue		
Review:	Workforce Planning		
Type of Review:	Assurance	Audit Lead:	Stuart Whittingham

Outline scope (per Annual Plan):	The review will consider the arrangements in place for workforce planning, including the move to the new shift system, and will consider the points arising from the HMICFRS inspection report.	
Detailed scope will consider:	**Directed** Governance Framework: There is a documented process instruction which accords with the relevant regulatory guidance, Financial Instructions and Scheme of Delegation. Risk Mitigation: The documented process aligns with the mitigating arrangements set out in the corporate risk register. Compliance: Compliance with statutory, regulatory and policy requirements is demonstrated, with action taken in cases of identified non-compliance.	**Delivery** Performance monitoring: There are agreed KPIs for the process which align with the business plan requirements and are independently monitored, with corrective action taken in a timely manner. Financial constraint: The process operates with the agreed financial budget for the year. Resilience: Good practice to respond to business interruption events and to enhance the economic, effective and efficient delivery is adopted.
Requested additions to scope:	(if required then please provide brief detail)	
Exclusions from scope:		

Planned Start Date:	14/12/2020	Exit Meeting Date:	17/12/2020	Exit Meeting to be held with:	Head of Organisational Development; Senior Service Improvement Officer

SELF ASSESSMENT RESPONSE

Matters over the previous 12 months relating to activity to be reviewed	Y/N (if Y then please provide brief details separately)
Has there been any reduction in the effectiveness of the internal controls due to staff absences through sickness and/or vacancies etc.?	N
Have there been any breakdowns in the internal controls resulting in disciplinary action or similar?	N
Have there been any significant changes to the process?	N
Are there any particular matters/periods of time you would like the review to consider?	N

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Service Performance and Development Review (PDR) 2020

Management Report – Sam O'Connor January 2021

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1. Background

Whilst there has been a Service history of supporting and developing staff at HFRS, the approach has previously been ad-hoc, sporadic, inconsistent and not all staff have had access to an annual PDR. A review of that former Appraisal process was carried out by Organisational Development (OD) in January and February 2018, culminating in the roll out of a new PDR process, guidance and paperwork, incorporating the new Service principles and a section on personal resilience and wellbeing. In addition to this OD also launched the Service Core Skills Framework (CSF).

OD hosted several training sessions for middle managers (SM/Grades11/12) during March 2018 to introduce the new PDR format, seek feedback on the content and layout, and to explain the process required to collate and submit both individual PDR's and the PER51a Section/Station returns for their teams. The training also introduced the development of the Core Skills Framework (CSF), and how each of these could be used to aid discussions around training and development with individuals during their PDR's. The CSF has since been further developed to include Role Specific Training Outlines for all posts and Career Ladders for all functions within the Service.

The PDR process for 2018 was reviewed via production of an SLT paper dated 6 February 2019, in which it reported the PDR completion rate was 67%, (which included an extension to the deadline to August of that year), and detailed the training provision that OD was able to facilitate based on a partial return, (26%) from the Training Needs Analysis (TNA) conducted as part of the new PDR process..

The PDR process was reviewed again for 2019 and the completion rate was up to 96%, with a Training Needs Analysis return at 52%. Once again, the deadline for PDR completions was extended by one month. The increase in the PDR completion rate was a significant improvement from the 2018 process.

Whilst feedback from staff and managers reported that the 2019 PDR process was a real improvement on the 2018, and that the PDR training overall was well received, the biggest finding for improvement was that the PDR needed to be electronic to reduce 'lost' paperwork. An electronic PDR system was created and implemented for the 2020 PDR cycle. OD had planned a series of roadshows to promote and familiarise managers with the new electronic format to PDR, however the emergence of COVID 19 and the Service going into business continuity restricted these from occurring. Due to lockdown restrictions and social distancing measures OD developed a suite of resources which were hosted on SharePoint, including a short tutorial video, which were promoted to managers.

2. Purpose

The purpose of this management report is to update Directors on the review, findings, recommendations and actions from the review of the 2020 PDR process.

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3. Methodology

Quantitative information utilising data from the Power BI PDR monitoring dashboard and associated completion reports have been investigated by the OD team regarding both PDR and TNA returns.

Qualitative information has been incorporated into the report from OD dip sampling of 50 completed PDRs (10 from each District and 10 from Corporate – 5%sample) and feedback from Learning and Development Managers within the OD team regarding the TNA requests.

4. Report Detail

Findings from the quantitative and qualitative information from Power BI dashboard, random audit sample and feedback from OD/HR team members who co-ordinated the 2020 cycle of PDR process have been analysed. Overall the improvements from introducing an electronic system for PDRs have been successful from an individual, line manager and Service point of view. The outcomes and benefits of the 2020 PDR cycle are noted as:

- Electronic PDR form and Power BI reporting dashboard.
- Better submission and recording of PDRs – 97% completion rate.
- Due to COVID 19 occurring mid cycle some PDRs were conducted remotely.
- Improved recording and monitoring system through use of Power BI dashboard
- Individual PDRS linked electronically to individual's firewatch account.
- Improved extraction of data from Power BI dashboard to inform Service wide Training Needs Analysis.

The analysis has subsequently identified areas for improvement and these along with recommendations and actions for 2021 PDR cycle are noted in Table 1 below:

	Area for improvement	Evidence source	Possible causes	Recommendations	Actions
1	The overall quality of the information recorded on the PDR returns was considered generally good across the Districts and Corporately and many managers identified objectives and development needs, a common finding was that most of the managers did not complete the individual's action plan of how these objectives and development needs would be met.	PDR submissions Qualitative audit sample findings	Lack of time spent conducting the PDRs Lack of line manager confidence and competence in conducting PDRs Lack of individual awareness and contribution in their PDR	Although all the information is available in the PDR guidance notes; Incorporate finding into 2021 training/communications and re-emphasise.	Create a PDR checklist re RSTO, Person spec, role map and ensure access to documents on sharepoint. Refresh PDR guidance notes. Re-emphasise PDR process in training and communications
2	Managers also identified aspiring individuals, keen to progress/develop/go for promotion, however most managers did not detail how individuals could progress by using the career ladders, role specific training outlines and core skills framework and detail agreed development within the individual's action plan.	PDR submissions Qualitative audit sample findings TNA report	Lack of time spent conducting the PDRs Lack of line manager confidence and competence in conducting PDRs Lack of understanding how to use career ladders, role specific training outlines and core skills framework for development Lack of individual awareness and contribution in their PDR	Information is available in PDR guidance and supporting documentation, however there is a need to further communicate/educate managers and staff. Incorporate finding into 2021 training/communication provision	Awareness of PDPs Develop guide on how to conduct a PDP for aspiring staff. Ensure link in with Talent management pipeline process and paperwork.

	Area for improvement	Evidence source	Possible causes	Recommendations	Actions
3	Specific findings from the sample audit such as a planned retirement, grievance discussion, a family member carrying out a family member's PDR	PDR submissions Qualitative audit sample findings	Lack of line manager competence in understanding what is and what is not appropriate to discuss in PDRs and conducting them	Review guidance to ensure good practice is explicit and what is acceptable and what is not acceptable to discuss in PDRs and whom should conduct them and in 2021 training delivery.	Ensure guidance is updated and explicit about what is acceptable and what is not acceptable to discuss in PDRs and any potential areas of conflict re manager responsibility
4	Management responsibility for conducting PDRs	Power BI dashboard OD Team	Due to a number of structural changes, temporary promotions etc left a number of individuals without a line manager or had a change in line manager when completing their PDRs	Improvements in establishment control during 2020 should improve structure information within Firewatch, however it is recommended that OD produce a spreadsheet based on 2020 PDR activity so that HRSPs can work with SMs and corporate teams ahead of 2021 cycle to confirm individual line manager responsibility for conducting individual PDRs within their designated areas. This should also identify any people forms that require completing.	Guidance notes updated to include it is the primary responsibility of the outgoing manager to conduct the PDR – if staff move in the PDR window i.e. 1 Feb- 30 April. The incoming PDR will set the new objectives Paper PDR (existing) and IDP/ PDP to be reviewed by outgoing and individual and then to new manager to complete rest of PDR. Spreadsheet too manually heavy to do, establishment control should reduce these errors. Changes in Firewatch should assist next year's PDR process

	Area for improvement	Evidence source	Possible causes	Recommendations	Actions
5	Duplicate PDRs submitted	Power BI dashboard OD Team	Line managers submitting a PDR for each role undertaken by an individual.	A decision to only allow one PDR per employee unless the role is different. This should be clearly communicated within guidance and training. The PDR form should encourage the primary manager to contact the 'secondary' manager to discuss any developmental or performance issues to agree what relates to which role. Include examples in the guidance. All staff and managers should note, that if staff are dual contract and the role is the same (e.g. a Firefighter who is WDS and On-Call) then only one PDR should take place at the WDS station; the WDS line manager should discuss the On-Call element of the FF's role as part of the PDR, there should also be a discussion between the WDS and On-Call managers -recording any outcomes. If the roles are	Tie in with service number to record that one service number links any PDRs – Actioned by ICT for 2021

Guidance notes updated for 2021 |

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				different (e.g. FF and EDC), then two PDRs will take place, the managers should still discuss any issues for the staff member e.g. to avoid unrealistic workloads or issues relating to one particular role. To consider how this can be recorded and electronically attached to one individual	
6a	PDR errors	Power BI dashboard OD Team		There was a 20% error rate was during 2020 PDR cycle, the most common errors were spelling of names e.g. use of nicknames or misspelling of names and lack of 4 digit service numbers. This meant manual corrections had to be made putting unavoidable workload onto OD/IT/HR staff	Despite repeated communication this remained a repeated error. Recommendation to explore if PDR form will not continue until the 4 code service number is inputted correctly. To repeat accuracy requirements in comms and training for 2021.	ICT have amended the form so will not allow PDR to progress unless 4 digit number is recorded. Guidance notes updated Further improvement for 2022 pull through service number linked to person as automatic populated data on form. (ICT)

	Area for improvement	Evidence source	Possible causes	Recommendations	Actions
6b	PDR return email – the individual only is notified.	OD/HR Team	Line managers were not cited on the PDR return and it did not give opportunity for managers to read and check before submission	Explore if the individual and line manager can be notified of PDR return, giving both a chance to verify accuracy before submission	Add line manager to return email submission –so staff member and manager have a copy- ICT actioned for 2021 Guidance notes updated
7	Managers reluctant to conduct PDRs for staff on long term absence including secondments	OD Team	Managers reported that staff on long term absences/secondments/career breaks etc did not require PDRs	PDR Guidance is explicit that staff on long term absence should, as good practice, have a PDR as part of their return to work plan. Staff on secondment/career breaks should also be offered a PDR at their secondment/break review and or when they return to the Service. Guidance and training for 2021 to explicitly reflect these good practices.	Guidance notes updated Separate tab for secondments, career break, maternity, long term sick etc to complete and not on main account – ICT actioned for 2021
8	Areas with poor PDR returns	Power BI dashboard OD Team	Staffing issues Remote stations Line manager lack of competence/confidence in conducting PDRs Poor individual uptake /involvement in PDRs	Targeted training and support for 2021 for areas that struggled to complete PDRs in 2020. Seek ideas for better engagement with hard to reach on call staff	OD team to action in 2021 round

	Area for improvement	Evidence source	Possible causes	Recommendations	Actions
9	Loss of PDRs	Power BI dashboard OD/HR team	A small number of PDRs showed as complete on dashboard but did not get electronically filed in Firewatch	The electronic system has been well received and on the whole reliable for a first attempt. Investigate with ICT to try and improve for 2021	Due to other errors e.g. service numbers etc these were picked up in HR – 40/50 errors. Improvements identified should lessen these for 2021. Add to guidance for forum/ training events.
10	Some duplication of course requests on TNA return	Power BI dashboard OD Team	Duplicate PDR submissions	Explore with IT if this can be improved for 2021	Linking of PDRs to one service number should improve this
11	Impact of conducting PDRs remotely due to COVID 19			This aspect has yet to be explored; recommendation to conduct a simple questionnaire about PDR experience during 2020 round	OD to conduct Pre or Post questionnaire for 2021
12	Education and Training for managers and staff	Power BI dashboard Qualitative audit finding sample OD Team	Line manager lack of competence/confidence when completing PDRs Variable individual uptake/involvement in PDRs	Update guidance for 2021 Provide further PDR training 2021 – consider remote learning and resources through Trans2Hub Once developed blend into First Line Management programme session on PDR	Further resources added to sharepoint and OD team to promote during training/communication
13	New Developments			Areas for incorporating into 2021 PDR guidance/process: - Further promotion and use of Trans2Hub resources	Additional resources added to sharepoint site and OD team to promote during training/communication Vitual help line to be trailed during 2021

				- Talent Management Pipeline development - Leadership behaviours - Individual feedback re quality of PDRs and the effects of conducting PDRs remotely - Further amendments required to drop down lists within Microsoft forms. - PDRPro to begin to be populated with RSTO/CSF requirements	Any new development to be included in guidance notes
14	Staff reported as not having PDRs				OD reviewed list on Power BI and to follow up to establish why not and ensure these are conducted for 2021.

Rag Rating: Green – actioned/completed Amber – in progress

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Training Needs Analysis (TNA)

In addition to the individual PDRs that are conducted there is a TNA process to identify learning needs from individual objectives that have been set during the PDR discussion.

Methodology

OD have utilised the CSF to collate the individual training needs identified by individual PDRs and created criteria to assist appropriate allocation for training/course attendance.

The core criteria consist of the following:

- The training/skill is identified as part of the postholder's current RSTO.
- The training/skill has been identified as part of their development needs within their current role.
- The training/skill as been identified as part of an IDP.
- Individuals are acting up/in temporary positions higher than their permanent rank/role, and the training has been identified as part of their development/progression.

OD has informed appropriate Heads of Function e.g. Operational Training, Occupational Health, Health and Safety of the TNA requests and sought clarification regarding any specific criteria to assist with allocation of courses.

This has enabled a traffic light system for course allocation; red not eligible, amber needs further clarification, green eligible. Course allocation is through normal application routes and line managers have been informed, who in turn should inform individual outcomes.

Report Summary

This report has demonstrated the incremental improvement of the PDR process within HFRS since 2018, and has, and will continue to review this on an annual basis and produce a management report of findings and recommendations.

There are 5 broad areas identified from the 2020 PDR/TNAreview these are:

1. Line manager and individual awareness, competence and confidence in conducting/engaging in effective PDRs/TNA.
2. Improvements to electronic PDR/TNA system.
3. Improvements to PDR/TNA process and documentation.
4. Improved communication and engagement.
5. New developments.

The systems and processes recommendations have been addressed via a small working group, the outputs from which are included in table 1. These have or will be included for the 2021 round of PDRs.

The training, education and communication improvements will be addressed via further PDR awareness raising, guidance updates, dedicated support from OD team during the PDR cycle and formal PDR training will be blended into the First Line Management Programme – performance and development module.

Recommendations

Directors are as requested to acknowledge the content of the report for information only.

Governance, Audit and Scrutiny Committee 12 April 2021	Report by the Monitoring Officer/Secretary

GAS COMMITTEE SCRUTINY PROGRAMME 2020/21

REPORT EXECUTIVE SUMMARY

This paper summarises the Governance, Audit and Scrutiny Committee's Scrutiny Programme 2020/21. Each year, the Committee will programme four specific, defined scrutiny items complete with scopes in order that relevant officers can focus their reports. Appendix 1 to this report will serve as a point of reference for report-writers and as a 'living document' during the year for the Committee as it considers the scopes for its scrutiny items.

RECOMMENDATIONS

1.   That Members consider and approve the Scrutiny Programme 2020/21.

PUBLIC SCRUTINY PROCESS

2.   Public scrutiny is a corporate process undertaken by the GAS Committee, appointed by the Fire Authority for its breadth of professional experience.

3.   Four areas for scrutiny were identified by the Committee for its 2020/21 programme:

- 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
- Diversity and Recruitment - Progress and Plans

STRATEGIC PLAN COMPATIBILITY

6.   This paper supports the achievement of Strategic Plan 2018/21 through the provision of independent scrutiny of activity.

FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

7.   Independent scrutiny contributes towards efficiency review activity.

LEGAL IMPLICATIONS

8.   None directly arising.

EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS

9.   None directly arising.

CORPORATE RISK MANAGEMENT IMPLICATIONS

10.   Scrutiny of performance provides an assurance that arising risks are being mitigated.

HEALTH AND SAFETY IMPLICATIONS

11.   None directly arising.

COMMUNICATION ACTIONS ARISING

12.   GAS Committee papers are publicly available via the HFRS Website.

DETAILS OF CONSULTATION AND/OR COLLABORATION

13.   SLT regarding scrutiny topics.

RECOMMENDATIONS RESTATED

14.   That Members consider and approve the Scrutiny Programme 2020/21.

S CAMPBELL
M BUCKLEY

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SC
July 2020

		GAS Committee Scrutiny Programme 2020/21
Meeting Date	**Responsible Officer**	**Item and Scope**
7 September 2020	**Director of Service Delivery Support**	**Effectiveness of the Protection Risk-Based Targeting Strategy.** • How is public protection activity targeted according to risk and intelligence? • What systems does the Service use to undertake its risk-based targeting activities? • How does the Service gather the intelligence necessary to target intervention effectively? • How does the Service respond to referrals for intervention that would not necessarily result in action according to the Risk-Based Targeting Strategy? • What impact has COVID-19 had on the Risk-Based Targeting Strategy?
16 November 2020	**Director of People and Development**	**Development and Delivery Plans to Support the Health and Wellbeing of Staff** • How have matters improved since the Service's previous HMICFRS inspection? • What support has the Service put in place for staff in the light of the significant challenges posed by COVID-19? • What has the Service learned from the health and wellbeing initiatives in other areas? • What have been the main challenges to supporting the health and wellbeing or staff?
25 January 2021	**Director of Service Delivery Support**	**Safety Protection - Engagement with the Commercial/Business Community** • What has the Service changed about the way it prioritises its engagement with the commercial/business sector in the light of the previous HMICFRS inspection? • How has the Grenfell Tower Inquiry affected the Service's business safety work? • What have been the main challenges in relation to engaging the commercial and business communities?

12 April 2021	**Director of People and Development**	**Diversity and Recruitment - Progress and Plans** • Workforce Plan to be shared with the Committee. • How diverse is the Service's workforce currently? • Does this reflect the level of diversity in the local population? • How does the level of diversity compare at different levels within the organisation? • How can the Service increase the diversity of its workforce? • Update on training, promotion and development (Minute 62/19 refers). • What have been the main challenges to increasing diversity in the organisation?