

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: 5 November 2021
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Dear Member

I hereby give notice that a meeting of the **GOVERNANCE, AUDIT AND SCRUTINY COMMITTEE** of Humberside Fire Authority will be held on **MONDAY 15 NOVEMBER 2021 at 10.00AM** at HUMBERSIDE FIRE & RESCUE SERVICE HEADQUARTERS, SUMMERGROVES WAY, KINGSTON UPON HULL, HU4 7BB.

Public and press attendance at meetings

Due to current social distancing requirements, a **maximum of 4 people** will be permitted entry to the public gallery - **places must be booked in advance** by contacting the Committee Manager on the contact details above.

The business to be transacted is set out below.

Yours sincerely



Mathew Buckley
Monitoring Officer & Secretary to Fire Authority

Enc.

A G E N D A

Business	Page Number	Lead	Primary Action Requested
<u>Procedural</u>			
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 9 September 2021	(pages 1 - 11)	Chairperson	To approve

Business	Page Number	Lead	Primary Action Requested
4. Matters arising from the Minutes, other than on the Agenda	-	Chairperson	To raise
<u>Governance</u>			
5. Update: Matters Arising/ Feedback from Fire Authority	verbal	Chairperson and Monitoring Officer/ Secretary	To consider and make any recommendations to the HFA
<u>Audit</u>			
6. Internal Audit Update	(pages 12 - 17)	Internal Audit (TIAA)	To consider and make any recommendations to the HFA
<u>Finance and Performance</u>			
7. HMICFRS Inspection Update	Verbal	Director of Service Improvement	To consider and make any recommendations to the HFA
8. Management Accounts - Period Ending 30 September 2021	(pages 18 - 19)	Head of Finance	To consider and make any recommendations to the HFA
9. Treasury Management Mid-Year Report 2021-22	(pages 20 - 26)	Head of Finance	To consider and make any recommendations to the HFA
10. CIPFA Financial Management Code Risk Assessment	(pages 27 - 28)	Head of Finance	To consider and make any recommendations to the HFA
<u>Scrutiny Programme</u>			
11. Implementation of the NFCC Core Code of Ethics	(pages 29 - 41)	Director of People and Development	To consider and make any recommendations to the HFA
12. GAS Committee Scrutiny Programme 2021/22	(pages 42 - 47)	Monitoring Officer/Secretary	To approve
13. Any Other Business	-	All Members	To raise

Under the Openness of Local Government Bodies Regulations 2014 members of the public may film, record, take photographs or use social networking during Authority and committee meetings that are open to the public. *The Monitoring Officer/Secretary kindly requests advance warning from anyone wishing to film, record or take photographs during open meetings so that suitable provision can be made.*

HUMBERSIDE FIRE AUTHORITY
GOVERNANCE, AUDIT AND SCRUTINY COMMITTEE

6 SEPTEMBER 2021

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

Councillor Briggs attended as an observer.

Jason Kirby - Temporary Director of People and Development, Paul McCourt - Director of Service Delivery, Simon Rhodes - Temporary Director of Service Improvement, Steve Topham - Director of Service Delivery Support, Martyn Ransom - Head of Finance, Ruth Gilmour - Head of Human Resources, Mathew Buckley - Monitoring Officer/Secretary, Samm Campbell - Committee Manager, Andy McCulloch - Internal Audit (TIAA) and Ross Woodley (Mazars) were also present.

The meeting was held at the Humberside Fire and Rescue Service Headquarters, Kingston upon Hull. Meeting commenced at 10.00 a.m.

PROCEDURAL

73/21 APOLOGIES FOR ABSENCE - There were no apologies for absence.

74/21 DECLARATIONS OF INTEREST - There were no declarations of interest.

75/21 MINUTES - *Resolved* - That the minutes of the meeting of the Committee held on 5 July 2021 be confirmed as a correct record.

76/21 MATTERS ARISING FROM THE MINUTES, OTHER THAN ON THE AGENDA - There were no matters arising.

GOVERNANCE

77/21 UPDATE: MATTERS ARISING/FEEDBACK FROM FIRE AUTHORITY - The Monitoring Officer/Secretary provided feedback on items considered by the Fire Authority at its meetings of 23 July 2021.

Resolved - That the update be received.

78/21 ANNUAL UPDATE ON THE DECLARATION AND REGISTRATION OF INTERESTS BY MEMBERS - The Monitoring Office/Secretary provided an update on the declaration and registration of interests by Members.

Resolved - That the update be received.

Audit

79/21 INTERNAL AUDIT REPORTS- Andy McCulloch (TIAA) presented the following reports:

- (i) **Enforcement** - The review process found that targets for the number of inspections under the Risk-Based Inspection Programme were not being met as a result of the prioritisation of other activities. However, given the importance of each inspection as part of the risk-based approach, TIAA concluded that the Service should prioritise inspections to meet the target of 10 per month. The Service

explained that it had needed to fill vacant posts within the inspection team and that training inspectors took time. The Service had begun to triage tasks in different ways to prioritise inspections and was confident that the situation would improve as the staff members being trained would be able to undertake high-risk inspections from the end of September 2021.

- (ii) **Grievance Arrangements** - The review found that the Service followed its processes appropriately, but that managers would benefit from training because some of the grievances reviewed could have been resolved by effective management actions at the first stage of the formal grievance process. The Service was in the process of securing extra resources to improve its grievance process, and its HR partner was involved from the beginning of each grievance process to support the Service's managers.
- (iii) **National Operational Guidance Phase 3 and 4** - TIAA had concluded the review with an assessment of 'reasonable assurance'. The process for implementing the Guidance was found to have been appropriately directed, and the review had resulted in two recommendations; one Priority 2 and one Priority 3.
- (iv) **Productivity - Shift System** - The review had found that appropriate procedures had been agreed, but were yet to be fully embedded across the Service. TIAA had concluded with a Priority 1 recommendation, two Priority 2 recommendations and one Priority 3 recommendation.

Resolved - (a) That the reports be received, and

(b) That TIAA report on the progress made in relation to the Risk-Based Inspection Programme in spring 2022.

80/21 INTERNAL AUDIT UPDATE - Andy McCulloch (TIAA) presented a report updating the Committee on progress in relation to the internal audit process.

The review of the Shift System (Minute 79/21 refers) had found that activity was not being recorded in sufficient detail, which meant that it was difficult to evidence the improvements being made. As a result, TIAA would make use of three days of its contingency capacity to follow up on this review and report on progress. As a result of the Committee's recommendation in relation to TIAA's review of Enforcement (Minute 79/21 refers), TIAA would use a further day of its contingency capacity to gauge the Service's progress.

Resolved - That the update be received.

81/21 EXTERNAL AUDIT COMPLETION REPORT 2020/21 - Ross Woodley (Mazars) presented the External Audit Completion Report 2020/21.

Mazars offered its thanks to members of the Service's finance team for their diligent work which had enabled Mazars to have substantially completed the report during a challenging time. Expectations of public sector auditors had risen while there was a shortage of auditors nationally. Mazars had decided to prioritise its larger authorities (including the Service) and was on track to complete its 2020/21 audit by the 30 September 2021 deadline. Overall, Mazars expected to deliver an 'unqualified' opinion. There were no material errors in the Service's accounts and Mazars was awaiting the assurance letter from the auditors of the Pension Fund.

A Member asked when the contract for valuation services was due to be tendered. It had been around five years since the tender process had been undertaken in relation to valuation services, and the contract was due to be tendered again in the coming months.

Resolved - (a) That the report be received, and

(b) that the Committee offer its thanks to the Service's finance team and to Mazars for the hard work to ensure that the external audit process for 2020/21 would be completed by the 30 September 2021 deadline.

FINANCE AND PERFORMANCE

82/21 HMICFRS INSPECTION UPDATE - The Temporary 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).

Since the Committee's previous meeting, the Service had received the request for self-assessment documents from HMICFRS. The documents had been completed and circulated to Members, and the Service was pleased with the information reported to HMICFRS. The self-assessment documents would be used by HMICFRS to develop its key lines of enquiry. At the time of the meeting, an engagement visit was underway with the Inspectorate's new liaison officer for the Service, Gareth Bradbury. While engagement visits were not taken into account as part of the inspection process, they were important in ensuring that the liaison officer was familiar with the Service.

Sir Thomas Winsor, Chief Inspector of HMICFRS, had written to fire authority chairs and chief fire officers to seek comments on the Inspectorate's annual State of Fire and Rescue report. The State of Fire and Rescue report due to be published later in the year would be Sir Thomas Winsor's last, as his term of office was due to come to an end. It was expected that the report would reflect on the progress made since the Inspectorate's inception in 2017.

Resolved - That the update be received.

83/21 ANNUAL STATEMENT OF ACCOUNTS 2020/21 - The Head of Finance presented the Annual Statement of Accounts for the 2020/21 financial year.

Resolved - That the Annual Statement of Accounts 2020/21 be received.

SCRUTINY PROGRAMME

84/21 PROMOTION WITHIN UNIFORMED ROLES - The Temporary Director of People and Development submitted a report in response to the scope within the Committee's Scrutiny Programme for 2021/22.

During the previous 20 years, fire and rescue services across the country had gone from having nationally regulated promotion processes underpinned by prerequisite examinations, to an assessment centre process which replaced the examinations, before the Government announced in 2010 that it would no longer mandate any particular process. Between 2010 and 2019, the Service operated a system in which candidates would be interviewed and assessed, with successful candidates then held in a pool until a suitable vacancy arose. This process resulted in candidates sometimes being held in the promotional pool for more than two years, with no ongoing support or requirement to develop or maintain their skills. In 2015, the Service introduced the Institute of Fire Engineers (IFE) examinations; initially as a voluntary qualification, and later as a prerequisite qualification. While the IFE remained a prerequisite qualification for firefighters seeking promotion, the

Service reviewed its processes in early 2019. At that point, the Service temporarily recruited to vacancies on an individual basis while it developed its Recruitment Policy, which replaced its previous policy on promotion. After a short time, the Service came to understand that it would not be possible to recruit the required number of crew, watch and station managers (CMs, WMs and SMs respectively) on a post-by-post basis while also maintaining high service delivery standards. The Service's retirement profile, and the fact that CM and WM posts arose with such frequency, led to the development of the talent pipeline.

Following significant consultation with representative bodies, the Service developed its current talent pipeline process, which had been introduced in July 2020. The talent pipeline process addressed the need to support employees through a structured development process that identified and developed applicants for operational managerial positions in accordance with the Service's specifications. It also addressed the need to maintain a ready supply of potential candidates for promotion, whether permanently or temporarily. The talent pipeline process categorised applicants in three ways following a stringent and transparent assessment process: 'appointable'; 'appointable on a temporary basis' or; 'not appointable at this time'. The process also ensured that applicants would not remain in the pipeline for excessive periods of time, and would have to reapply, meaning that the Service could be assured that anyone in the pipeline assessed as 'appointable' or 'appointable on a temporary basis' could be called upon. The Service adopted a Transfers and Postings Policy in 2019, and monthly meetings governed the process.

A Member asked how many applications had been submitted for the talent pipeline. In the previous year, around 60 applications had been received for consideration for promotion to CM positions. It was agreed that the Committee would be provided with details of the number of applications for each role, the number of successful promotions, and the number of applicants who needed to reapply.

A Member queried the reasoning behind the decision to restart the talent pipeline process every 12 months. In the previous pool system, some applicants had been in the pool for two or three years, without any assurance to the Service that they remained suitable for promotion. Some Members remained concerned and asked whether it would be possible to review 'appointable' applicants on individual basis every 12 months rather than restart the process. The Service worked flexibly with 'appointable' candidates when vacancies arose. Many would be willing to travel in order to take up a promotion but, for example, the Service would not ordinarily offer a post at one end Humberside to an employee living at the other end. The Service remained open to adapting the pipeline process depending on its reception and success, but it had only recently been established in July 2020.

A Member asked whether the Service recruited externally. The Service advertised all of its permanent posts to external applicants using local and national publications, the transfer list and its own website. Temporary posts would usually involve internal recruitment processes due to the time-limited nature of the appointments.

A Member asked how the Service's recruitment processes would advance its positive action objectives. Positive action was difficult to advance using internal recruitment processes, meaning that the Service would need to appoint more external applicants. However, the Service's work on improving the gender balance had progressed well in recent years, and the mentorship scheme had helped to encourage more female applicants.

The Service's exit interview process had been reviewed and was due to become automated in an effort to improve response rates. The existing process allowed those leaving the Service to offer any feedback they wanted to, but none had so far highlighted the Service's promotion processes as an issue. The Service had begun to undertake short 'pulse' surveys to gauge issues such as wellbeing and bullying in its workforce.

Resolved - (a) That the Committee be provided with details of the number of applications to the talent pipeline process for each role, the number of successful promotions, and the number of applicants who had needed to reapply, and

(b) that the Committee reconsider promotion within uniformed roles as part of a future scrutiny programme.

85/21 GAS COMMITTEE SCRUTINY PROGRAMME 2021/22 - The Committee Manager submitted a report summarising the Committee's Scrutiny Programme 2021/22.

Resolved - That the Programme be received.

86/21 ANY OTHER BUSINESS - UPCOMING GAS COMMITTEE VACANCIES - The Chair highlighted to those present that three of the Committee's Members' terms of office were due to expire at the end of March 2022.

Date	Item	Minute	Resolution	Responsible	Brief summary of outcome
13 July 2020	Internal Audit Update	49/20	Resolved - (b) that the Committee be updated in relation to TIAA's assessment of key financial controls at a future meeting.	TIAA	The Committee received the report relating to key financial controls at its meeting held on 25 January 2021.
13 July 2020	Draft Annual Performance Report 2019/20	51/20	Resolved - b) that the report be revised, taking into account the Committee's suggested amendments, prior to its receipt by the Fire Authority on 24 July 2020.	Director of Service Improvement	The report was updated prior to its receipt by the Fire Authority on 24 July 2020.
13 July 2020	LGA Consultation on Draft Code of Conduct	54/20	Resolved - That the Committee respond to the consultation collectively through Mandy Tomlinson.	Mandy Tomlinson	The consultation was responded to as planned.
13 July 2020	GAS Committee Scrutiny Programme 2020/21	56/20	Resolved - That the Scrutiny Programme 2020/21 be approved subject to the addition of scoping questions agreed by the Committee.	Committee Manager	Scrutiny Programme updated.
13 July 2020	AOB - Action Schedule	58/20	Resolved - That the Committee receive an action schedule tracking its recommendations at future meetings.	Committee Manager	Action schedule created.
7 September 2020	Internal Audit Progress Update	68/20	Resolved - that the TIAA briefing note, Cyber Threats using the COVID-19 Pandemic, be circulated to the Committee.	TIAA	The briefing note was circulated to the Committee following the meeting.
7 September 2020	Performance Reporting Update	70/20	Resolved - that, in future, changes of this calibre be communicated to the Committee further in advance.	Director of Service Improvement	ONGOING
7 September 2020	Absence Management Q1	72/20	Resolved - that the Service seek further feedback from its employees in relation to its anti-bullying campaign.	Director of People and Development	The Committee received a report on the Anti-Bullying Campaign at its meeting held on 5 July 2021.
7 September 2020	Effectiveness of the Protection Risk-Based Targeting Strategy	77/20	Resolved - (c) that the Committee be updated in six months in relation to the uptake of fire safety inspection training among on-call firefighters, and (d) that the Committee be updated in six months in relation to the Service's work with the University of Hull.	Director of Service Delivery Support	

7 September 2020	Update in relation to the Emergency Medical Response Cost Recovery Model (Scrutiny Programme 2019/20)	78/20	Resolved - That the updates be received.	Director of Service Delivery	Reschedule for further update.
16 November 2020	Performance and Risk Report - Second Quarter 2020/21	88/20	Resolved - (b) that the Service consider publishing details of the complaints it receives on its website.	Director of Service Improvement	A summary of complaints was uploaded to the Service's website.
16 November 2020	Absence Management - Second Quarter 2020/21	90/20	Resolved - (b) that the Temporary Director of People and Development update Members with the costs related to the delivery of the Employee Assistance Programme.	Temporary Director of People and Development	The Committee was provided an update on 30 November 2020.
16 November 2020	Treasury Management Mid-Year Update Report 2020/21	91/20	Resolved - (b) that the Service facilitate a session for the Committee on long-term treasury management issues.	Head of Finance	The session was held on 26 April 2021.
16 November 2020	Development and Delivery Plans to Support the Health and Wellbeing of Staff	94/20	Resolved - (b) that a verbal update be provided to the Committee in around three months.	Head of Occupational Health	Updates in relation to the Employee Assistance Programme were received at the Committee's meeting held on 5 July 2021.
16 November 2020	Update in relation to the Emergency Medical Response Cost Recovery Model (Scrutiny Programme 2019/20)	95/20	Resolved - (b) that the matter of the Emergency Medical Response Cost Recovery Model be considered resolved.	Director of Service Delivery	The cost recovery programme in relation to the Emergency Medical Response service was aligned across the Service's area.
25 January 2021	Internal Audit Update	8/21	Resolved - (b) that the audit report relating to health and safety be circulated to the Committee prior to its next meeting, and (c) that the Committee be informed of the final topic for the 2020/21 internal audit programme.	(b) Committee Manager (c) Head of Corporate Assurance	(b) The health and safety audit report was circulated on 2 February 2021 and included on the agenda for the 22 February 2021 meeting. (c) The decision was taken to move this slot into

					<p>2021/22 and await further guidance regarding the focus of the HMICFRS inspection before deciding on the topic. The following topic was also due to be proposed to the Committee for scrutiny in 2021/22:</p> <p>Business Continuity – Response to Covid Pandemic: Evaluation of lessons learned and the adoption of new working practices.</p>
25 January 2021	Protection Engagement with the Commercial and Business Community	13/21	<p>Resolved - (a) That an update on the Service's protection engagement be received during the 2021/22 scrutiny programme;</p> <p>(b) that the Committee be assured that the new Risk-Based Inspection Programme methodology enables the Service to prioritise and target engagement activities effectively, and</p> <p>(c) that the Committee note the ongoing impacts of both the Grenfell Tower fire and the Covid-19 pandemic, including the positive changes arising from them.</p>	Committee Manager/ Director of Service Support	<p>(a) The Committee approved its work programme at the meeting held on 14 June 2021;</p> <p>(b) N/A;</p> <p>(c) N/A.</p>
25 January 2021	GAS Scrutiny Programme 2020/21	14/21	<p>Resolved - (b) that the Workforce Plan be added as a matter for consideration as part of the scrutiny item due to be heard on 12 April 2021, Diversity and Recruitment - Progress and Plans.</p>	Committee Manager	The Programme was updated and included on the agenda for the 22 February 2021 meeting.
22 February 2021	Draft Internal Audit Plan 2021/22	23/21	<p>Resolved - (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</p>	TIAA	The Committee received TIAA's report on equality, diversity and inclusion at its meeting held on 5 July 2021.

			into consideration during TIAA's audit of equality, diversity and inclusion as part of its Internal Audit Plan 2021/22.		
22 February 2021	GAS Committee Scrutiny Work Programme 2020/21	26/21	Resolved - (b) that a workshop be held in April 2021 to consider items for the 2021/22 Scrutiny Programme.	Committee Manager	The workshop was held on 20 May 2021 in order for the Programme to be considered for approval at the Committee's meeting due to be held on 14 June 2021.
12 April 2021	Draft Annual Governance Statement	37/21	Resolved - (b) that the draft Annual Governance Statement be updated to incorporate recent changes to the Committee's membership, and (c) that the Chair of the HFA and the Monitoring Officer consider an appraisal process for the GAS Committee.	Director of Service Improvement	(b) The Annual Governance Statement was updated prior to its receipt by the Fire Authority.
12 April 2021	Diversity and Recruitment - Progress and Plans	39/21	Resolved - (a) That the Service's future Positive Action Strategy and Framework be applied consistently; (b) that the Service ensure that its employees fully understand its Positive Action Strategy and Framework; (c) that the Service gather improved data in order to understand the makeup of its workforce in comparison to local demographics and other fire and rescue services; (d) that the Service improve its exit interview process to understand why employees leave the Service, and (e) that the Committee be updated about to the Service's progress in relation to the revision of its workforce plan and the recommendations of the associated internal audit report.	Temporary Director of People and Development	

14 June 2021	Annual Statement of Accounts (Unaudited)	51/21	Resolved - (b) that the Annual Statement of Accounts for 2020/21 be updated in response to the Committee's recommended amendments.	Head of Finance	The Annual Statement of Accounts for 2020/21 was updated prior to its receipt by the Fire Authority.
14 June 2021	Draft GAS Committee Scrutiny Programme 2021/22	55/21	Resolved - (a) That the Programme be approved subject to the addition of a reference to feedback on promotion processes received through exit-interviews on the scope of the item due to be heard on 6 September 2021.	Committee Manager	The scope was updated and received at the meeting held on 5 July 2021
5 July 2021	Anti-Bullying Campaign	70/21	Resolved - (a) That the Service use its exit interviews and appraisals process to develop a clearer understanding bullying and changes to its organisational culture; (b) that initial feedback on the progress of recommendation (a) be reported during the follow-up anti-bullying campaign item due to be heard on 11 April 2022; (c) that the Service obtain high-quality data through a survey of staff in order to develop a clearer understanding of bullying and organisational culture than that afforded by the HMICFRS surveys of 2018 and 2020, and (d) that the report for the follow-up anti-bullying campaign item contain feedback from the relevant unions.	Temporary Director of People and Development	
5 July 2021	GAS Committee Scrutiny Programme 2021/22	71/21	Resolved - (a) That the Programme be updated in accordance with Minute 70/21.	Committee Manager	The Programme was updated and received at the meeting held on 6 September 2021.
6 September 2021	Internal Audit Reports	79/21	Resolved - (b) That TIAA report on the progress made in relation to the Risk-Based Inspection Programme in spring 2022.	TIAA	

6 September 2021	Promotion within Uniformed Roles	84/21	<p><i>Resolved -</i></p> <p>(a) That the Committee be provided with details of the number of applications to the talent pipeline process for each role, the number of successful promotions, and the number of applicants who had needed to reapply, and</p> <p>(b) that the Committee reconsider promotion within uniformed roles as part of a future scrutiny programme.</p>	<p>(a) Temporary Director of People and Development</p> <p>(b) Committee Manager</p>	
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Humberside Fire and Rescue Service

Summary Internal Controls Assurance (SICA) Report

2021/22

November 2021

Summary Internal Controls Assurance

Introduction

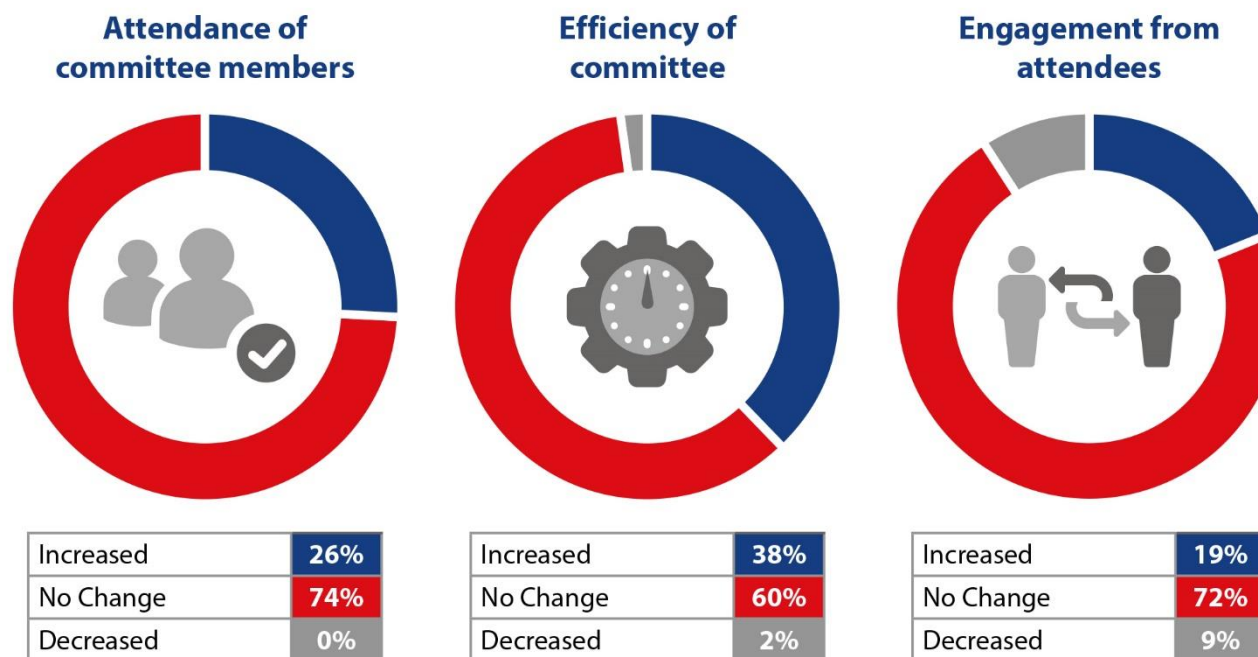
1. This summary controls assurance report provides the Governance, Audit and Scrutiny Committee with an update on the emerging Governance, Risk and Internal Control related issues and the progress of our work at Humberside Fire and Rescue Service as at 4th November 2021.

Emerging Governance, Risk and Internal Control Related Issues

2. In our recent 'Post-Lockdown Working Practices Briefing', we explored the results of our survey of clients to ascertain how organisations are planning to deliver some of their functions going forward. We asked a number of questions regarding Audit Committee meetings and their effectiveness since the pandemic started and gained thoughts on how these will take place once restrictions are eased.

The experience of remotely held Audit Committee meetings has been positive with the majority of respondents recording no change in or increased attendance, efficiency and engagement at meetings.

Post Lockdown Audit Committee Attendance



Audits completed since the last SICA report to the Governance, Audit and Scrutiny Committee

3. The table below sets out details of audits finalised since the previous meeting of the Governance, Audit and Scrutiny Committee.

Audits completed since previous SICA report

Review	Evaluation	Key Dates			Number of Recommendations			
		Draft issued	Responses Received	Final issued	1	2	3	OEM
Shift Productivity	Limited	09/07/21	17/08/21	25/08/21	1	2	1	0
NOG (Phases 3 and 4)	Reasonable	10/08/21	24/08/21	25/08/21	0	1	1	0
Grievance Arrangements	Reasonable	16/08/21	25/08/21	26/08/21	0	3	2	0

4. There are no issues arising from these findings which would require the annual Head of Audit Opinion to be qualified.

Progress against the 2021/22 Annual Plan

5. Our progress against the Annual Plan for 2021/22 is set out in Appendix A.

Changes to the Annual Plan 2021/22

6. There are no proposed changes to the plan other than the additional Shift Productivity Follow Up audit which was requested by management and was resourced from the contingency days in the original plan.

Progress in actioning priority 1 & 2 recommendations

7. We have made one Priority 1 recommendation (i.e. fundamental control issue on which action should be taken immediately) since the previous SICA. Management responses to the recommendation and the commissioning of a Follow Up review confirms that management actions have been taken and the risk exposure identified has been effectively mitigated.

Frauds/Irregularities

8. We have not been advised of any frauds or irregularities in the period since the last SICA report was issued.

Other Matters

9. We have issued a number of briefing notes and fraud digests, shown in Appendix B, since the previous SICA report.

Responsibility/Disclaimer

10. 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. The matters raised in this report not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. 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.

Progress against Annual Plan

System	Planned Quarter	Current Status	Comments
Equality, Diversity and Inclusion	1	Completed	Final Report Issued
Productivity – Shift System	1	Completed	Final Report Issued
NOG Phase 3 and 4	1	Completed	Final Report Issued
Enforcement	1	Completed	Final Report Issued
Out of Hours Arrangements	2	Draft issued 01/11/21	
Data Quality – Risk Information	2	Draft issued 03/11/21	
Grievance Arrangements	3	Completed	Final Report Issued
Shift System Productivity Follow Up	3	Draft issued 27/10/21	Additional review requested by management
Key Financial Controls	4	To be booked	
Contingency (targeted on inspection outcomes)	3 - 4		
Follow-up	4	To be booked	


KEY:

	To be commenced		Site work commenced		Draft report issued		Final report issued
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Briefings on developments in Governance, Risk and Control

TIAA produces regular briefing notes to summarise new developments in Governance, Risk and Control, which may have an impact on our clients. These are shared with clients and made available through our Online Client Portal. A summary list of those CBNs issued in the last three months which may be of relevance to Humberside Fire and Rescue Service is given below. Copies of any CBNs are available on request from your local TIAA team.

Summary of recent Client Briefing Notes (CBNs)

CBN Ref	Subject	Status	TIAA Comments
CBN - 21039	UK Finance Confirm Fraud Losses Rise by 30%	For Information Only	Boards and Governing Bodies to note the changing nature of fraud, and in particular, the increase in APP fraud.
CBM - 21035	NCSC Launches Scam Website Reporting Service	For Information Only	No action required
CBN - 21030	VMWare Vulnerabilities		Action Required All organisations running the VMWare virtualisation software need to install the latest version as soon as practicable to address the vulnerability.

MANAGEMENT ACCOUNTS 2021/22 - PERIOD ENDING 30 SEPTEMBER 2021

SUMMARY

1. This report highlights the current financial position based on information to 30 September 2021.
2. The end of year projections are set out below for the revenue budget, the capital programme and the pensions account.

RECOMMENDATIONS

3. That Members take assurance from this report and the Authority's financial position for the period ending 30 September 2021.

PERIOD ENDING 30 SEPTEMBER 2021

4. The summary estimated outturn position for the current financial year based on information to 30 September 2021 is as follows:-

CATEGORY	2021/22 OUTTURN PROJECTION
HFA	
Revenue Budget	£0.298m underspend
Capital Programme	£5.006m expenditure against £7.029m allocation
Pensions Account	£12.940m deficit

5. This is the second set of Management Accounts for the 2021/22 financial year and further updates will be brought to the Authority based on the periods ending 31/12/21 and 28/2/22.
6. Further details on all of these areas are available electronically alongside the agenda papers on the Fire Authority's website at www.humbersidefire.gov.uk/fire-authority.

STRATEGIC PLAN COMPATIBILITY

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

FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

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

LEGAL IMPLICATIONS

9. No direct issues arising.
- EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS
10. No direct issues arising.
- CORPORATE RISK MANAGEMENT IMPLICATIONS
11. The monthly Management Accounts help to ensure that the Authority meets its legal and regulatory requirements.
- HEALTH AND SAFETY IMPLICATIONS
12. No direct issues arising.
- COMMUNICATION ACTIONS ARISING
13. No direct issues arising.
- DETAILS OF CONSULTATION AND/OR COLLABORATION
14. No direct issues arising.
- BACKGROUND PAPERS AVAILABLE FOR ACCESS
15. Working papers for 2021/22 Budget Monitoring.
- RECOMMENDATIONS RESTATED
16. That Members take assurance from this report and the Authority's financial position for the period ending 30 September 2021.

K WILSON

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Executive Director of Corporate Services/S.151 Officer

Humberside Fire & Rescue Service
Summergroves Way
Kingston upon Hull

KW
11 October 2021

15 November 2021

TREASURY MANAGEMENT MID-YEAR UPDATE REPORT 2021/22

SUMMARY

1. This report provides an update on the Authority's treasury management activities for the first half of the financial year 2021/22.

RECOMMENDATIONS

2. That Members consider the treasury management activities undertaken during the first half of 2021/22 and the Prudential Indicators as outlined in paragraphs 14 and 15 and detailed in Appendix 1.

BACKGROUND

3. Treasury Management, as defined by the Chartered Institute of Public Finance and Accountancy (CIFPA) Code of Practice 2009 is:

"The management of the organisation's investments and cash-flows, its banking, money market and capital market transactions, the effective control of the risks associated with those activities and the pursuit of the optimum performance consistent with those risks."

4. The Authority on 12 March 2021 approved the annual 2021/22 Treasury Management Policy Statement and agreed a range of Prudential Indicators aimed at ensuring effective treasury management and affordability of capital plans.
5. This report ensures compliance with recommended practice as outlined in the Code, by providing Members with an update on treasury management undertaken since the beginning of the financial year and highlighting key Prudential Indicator information.

INVESTMENT ACTIVITY

6. The Authority's temporary investments totalled £15.5m as at 30 September 2021.

Table 1 – Investment income earned April to September 2021

Interest Earned April to September 2021	Rate of return April to September 2021	Benchmark return at 30 September 2021*	Difference (Favourable) April to September 2021
£2k	0.02%	-0.08%	(0.10%)

* Benchmark set as 7 day compounded LIBID

7. The Authority's rate of return pleasingly has exceeded the benchmark return provided by Link Asset Services.

BORROWING

Short-Term Borrowing

8. The Authority has not taken any short-term borrowing in the first six months of the year. The Authority is unlikely to undertake short-term borrowing in the second half of the financial year.

Long-Term Borrowing

9. Long-term loans are taken out either to replace existing loans which have matured or to fund capital expenditure. Under the Prudential Regime there are no longer centrally imposed limits on borrowing, but individual Authorities are required to determine themselves what is a sustainable and affordable level of borrowing as an integral part of their Medium-Term Financial Planning processes.
10. The Authority's level of borrowing was £16.9m as at 30 September 2021, with an equated average rate of interest payable at 3.49%. An expected £661k of interest is projected to be payable on external debt for 2021/22.
11. The Authority has not undertaken any new long-term borrowing so far this financial year but this position will be reviewed in the second half of the financial year against the backdrop of interest rate changes and projections.

PRUDENTIAL INDICATORS

12. Appendix 1 details the Prudential Indicators agreed by Members at the Fire Authority on 12 March 2021 and shows for comparison the actual figures as at 30 September 2021.
13. During the period April to September 2021, the Authority operated wholly within the limits approved.

Capital Expenditure

14. The S.151 Officer considers the current capital programme to be affordable and sustainable with the revenue effects of capital investment built into the Medium-Term Financial Plan. Through the Medium-Term Financial Planning Process the Authority has ensured alignment of its capital resources to key strategic priorities.

Treasury Management

15. External debt is currently £13.3m below the agreed authorised limit for 2021/22 and the maturity structure for both borrowing and investments remain within the approved upper and lower limits. Subsequent borrowing or re-scheduling will take in to account prevailing interest rates on offer from the Public Works Loans Board, the current maturity structure of loans, balanced with the need to reduce capital risk by maintaining prudently low levels of cash-balances.

STRATEGIC PLAN COMPATIBILITY

16. Treasury management is an integral part of the financial management of the Authority. Utilising approved borrowing and investment strategies will maximise investment income whilst minimising exposure to liquidity and market risks.

FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

17. The Authority's approach to investment of surplus funds is designed to further mitigate against potential losses as a consequence of counterparty failure and reflects a prudent approach to treasury management activity.

LEGAL IMPLICATIONS

18. The Authority must comply with the requirements of the CIPFA Code of Practice on Treasury Management and the Local Authorities (Capital Finance and Accounting) (England) (Amendment) Regulations 2008. This report ensures such compliance.

EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS

19. No direct issues arise from this report.

CORPORATE RISK MANAGEMENT IMPLICATIONS

20. The application of and regular monitoring thereafter of a prudent Treasury Management Policy and related Prudential Indicators ensures that the Authority effectively manages financial risks such as exposure to interest rate changes, liquidity and market risk whilst minimising borrowing costs and maximising investment income. As an integral part of the financial planning process, it ensures that the financial plans upon which the Authority's Strategic Plan is based are effective and robust.

HEALTH AND SAFETY IMPLICATIONS

21. No issues arising.

COMMUNICATIONS ACTIONS ARISING

22. No direct issues arising.

DETAILS OF CONSULTATION

23. The Authority's current approved Treasury Management Strategy reflects guidance and market information supplied by the Authority's treasury management advisors.

BACKGROUND PAPERS

24. 'Treasury Management and Capital Expenditure Prudential Indicators, Treasury Management Policy Statement 2021/22 and Minimum Revenue Provision for 2021/22' – Report to Fire Authority 12 March 2021.
CIPFA Code of Practice on Treasury Management 2009
CIPFA Treasury Management Guidance - March 2009

RECOMMENDATIONS RESTATED

25. That Members consider the treasury management activities undertaken during the first half of 2021/22 and the Prudential Indicators as outlined in paragraphs 14 and 15 and detailed in Appendix 1.

M RANSOM

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Head of Finance & Deputy S.151 Officer

Humberside Fire & Rescue Service Headquarters
Summergroves Way
Kingston upon Hull

22 October 2021

Prudential Indicators as at 30 September 2021

Indicator 1 - Capital Expenditure

The actual capital expenditure for the current year compared to the original estimate and revised budget, together with estimates of expenditure to be incurred in future years are shown below:

	2020/21 Actual £k	2021/22 Budget £k	2021/22 Revised £k	2022/23 Estimate £k	2023/24 Estimate £k	2024/25 Estimate £k
Total Capital expenditure	3,203	7,029	5,006	3,510	2,750	2,593

The revised 2021/22 figure reflects the latest estimate of spend, as reported to members in the Management Accounts for the period ending 30th September 2021.

Indicator 2 - Capital Financing Requirement

The capital financing requirement for 2021/22 and estimates for future years are as follows:-

	Actual 31/03/21 £k	Estimate 31/03/22 £k	Estimate 31/03/23 £k	Estimate 31/03/24 £k	Estimate 31/03/25 £k
Capital Financing Requirement	18,557	21,386	22,783	23,376	23,606
Lease - Integrated Care Centre	951	936	919	900	880
Total CFR	19,508	22,322	23,702	24,276	24,486

The capital financing requirement measures the Authority's need to borrow for capital purposes. In accordance with best professional practice, the Humberside Fire Authority does not associate borrowing with particular items or types of expenditure. The Authority has, at any point in time, a number of cash flows both positive and negative, and manages its treasury position in terms of its borrowings and investments in accordance with its approved Strategy. In day to day cash management, no distinction can be made between revenue cash and capital cash. External borrowing arises as a consequence of all the financial transactions of the authority and not simply those arising from capital spending. In contrast, the capital financing requirement reflects the Authority's underlying need to borrow for a capital purpose.

A key indicator of prudence under the Prudential Code is: -

"In order to ensure that over the medium term net borrowing will only be for a capital purpose, the local authority should ensure that net external borrowing does not, except in the short term, exceed the total of the capital financing requirement in the preceding year plus the estimates of any additional capital financing requirement for the current and next two financial years".

The S151 Officer reports that the Authority has had no difficulty meeting this requirement during the course of this financial year and no difficulties are envisaged in future years.

This takes into account current commitments, existing plans and the proposals contained in the Medium Term-Financial Plan.

Indicator 3 – Core Funds and Expected Investment Balances

The table below shows the estimates of the year-end balances for each resource and anticipated day-to-day cash flow balances.

	2021/22 Original £k	2021/22 Revised £k	2022/23 Estimate £k	2023/24 Estimate £k	2024/25 Estimate £k
Total Core Funds	12,030	13,530	10,453	9,846	9,216
Expected Investments	3,755	6,712	2,339	640	(62)

The actual total investments held as at 30th September 2021 is £15.5m. This is higher than the expected investments due to the Pensions grant of which 80% was received in July 2021 which is drawn upon each month.

Indicator 4 - Operational Boundary for External Debt

The proposed operational boundary for external debt is based on the same estimates as the authorised limit but reflects directly the S151 Officer's estimate of the most likely, prudent but not worst case scenario, without the additional headroom included within the authorised limit to allow for example for unusual cash movements, and equates to the maximum of external debt projected by this estimate. The operational boundary represents a key management tool for in year monitoring by the S151 Officer.

	2021/22 Boundary £k	Actual As at 30/09/21 £k	2022/23 Boundary £k	2023/24 Boundary £k	2024/25 Boundary £k
Borrowing	21,600	16,896	21,600	21,600	21,600
Other Long Term Liabilities	3,500	951	3,500	3,500	3,500
	25,100	17,847	25,100	25,100	25,100

The S151 Officer confirms that borrowing in the year has not exceeded the operational boundary at any point within the year to date and is not expected to do so over the course of the next period based on information currently available.

Indicator 5 - Authorised Limit for External Debt

The table below shows the Authorised limit for External Debt for 2021/22 and subsequent three year period as approved by Members, compared to the actual level of borrowing as at 30 September 2021.

	2021/22	Actual as at 30/09/21	2022/23	2023/24	2024/25
	Limit £k	£k	Limit £k	Limit £k	Limit £k
Borrowing	27,600	16,896	27,600	27,600	27,600
Other Long Term Liabilities	3,500	951	3,500	3,500	3,500
	31,100	17,847	31,100	31,100	31,100

The Authorised Limit reflects the Authority's projected long and short term borrowing requirements, together with any other long-term liabilities it may have. The figures are based on the estimate of most likely, prudent but not worst case scenario, with sufficient headroom over and above this to allow for operational management of, for example unusual cash movements.

The S151 Officer confirms that the Authorised Limit has not been approached at any point during the first half of the year, nor is it likely to during the remaining six months of 2021/22.

Indicator 6 - Ratio of Capital Financing Costs to Net Revenue Stream

The ratio of financing costs to net revenue stream for the current year and estimates for future years are as follows: -

	2020/21 Actual %	2021/22 Original %	2021/22 Revised %	2022/23 Estimate %	2023/24 Estimate %	2024/25 Estimate %
Ratio of Financial Costs to Net Revenue Stream	4.75	6.23	6.27	6.14	6.05	6.17

These ratios indicate the proportion of the net budget of the Authority that is required to finance the costs of capital expenditure in any year. Estimates of financing costs include current commitments and the proposals contained in the capital programme of the Authority.

In calculating the ratio, Net Revenue Streams in any year have been taken to exclude any element of the net budget requirement that is intended to provide reserves for the Authority.

The projected increase in the ratio over the period reflects the increase in capital financing costs resulting from the capital allocations approved as part of the medium-term financial plan.

Indicator 7 – Upper and Lower Limits for the maturity structure of borrowings

This indicator seeks to ensure the Authority controls its exposure to the risk of interest rate changes by limiting the proportion of debt maturing in any single period. Ordinarily debt is replaced on maturity and therefore it is important that the Authority is not forced to replace a large proportion of loans at a time of relatively high interest rates.

“The Authority will set for the forthcoming financial year both upper and lower limits with respect to the maturity structure of its borrowings. The prudential indicators will be referred to as the upper and lower limits respectively for the maturity structure of borrowing and shall be calculated as follows:

Amount of projected borrowing that is fixed rate maturing in each period expressed as a percentage of total projected borrowing that is fixed rate;

Where the periods in question are:

- Under 12 months
- 12 months and within 24 months
- 24 months and within 5 years
- 5 years and within 10 years
- 10 years and above”

	Actual as at 30/09/21	Upper Limit	Lower Limit
	%	%	%
Under 12 Months	4.84	15	0
12 months and within 24 months	11.13	15	0
24 months and within 5 years	18.57	30	0
5 years and within 10 years	41.01	60	0
10 years and above	23.43	80	0

The S151. Officer confirms that the maturity structure of external debt as at 30/09/21 is within the upper and lower limits approved by the Authority.

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
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 safeguarded 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
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.		within the finance function are regularly reviewed and finance staff developed through the PDR process (45% 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 27 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.		Governance, Audit and Scrutiny Committee and Fire Authority on the Capital Strategy and affordability. Link Asset Services provide specialist advice.
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 behaviours 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.		delegation are published annually and Management Accounts are published 4 times per year. The
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		strategic and operation plans and ensure decisions are made while
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.
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
Section 3 - Long to medium-term financial management			
F	The authority has carried out a credible and transparent financial resilience assessment.		The authority complies with this requirement
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?

CIPFA Financial Management Code reference		Humberside FA	
	Description	RAG	Comments
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 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
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
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 comply 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

REPORT EXECUTIVE SUMMARY

Implementation of the NFCC Core Code of Ethics

A national Core Code of Ethics for Fire and Rescue Services in England has been developed in partnership with the National Fire Chiefs Council, Local Government Association, and the Association of Police and Crime Commissioners. The Core Code was launched nationally on the 18th of May 2021.

A Core Code of Ethics Fire Standard was also launched on the 18th of May 2021 by the Fire Standards Board.

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

- 1. How has the Service approached the implementation of the Core Code of Ethics?**
- 2. How has the NFCC Code of Ethics changed the Service?**

RECOMMENDATIONS

1. The GAS committee take assurance of the progress the Service is making in adopting and implementing the Coe Code of Ethics.

REPORT DETAIL

Background

2. A national Core Code of Ethics for Fire and Rescue Services in England has been developed in partnership with the National Fire Chiefs Council, Local Government Association, and the Association of Police and Crime Commissioners to support a consistent approach to ethics, including behaviours, by fire and rescue services in England.
3. The Core Code was developed as a direct response to Sir Tom Windsor's recommendation in the State of Fire Reports for 2019 & 2020.
4. The Core Code was launched, with simultaneous communications from the NFCC, LGA & APCC, on the 18th of May 2021.
5. The Core Code sets out five ethical principles, based on the Seven Principles for Public Life but tailored to suit the fire and rescue context. The ethical principles alongside the accompanying guidance provide a basis for promoting good behaviour and challenging inappropriate behaviour.
6. The five ethical principles are as follows: -
 - I. **Putting our communities first** – we put the interest of the public, the community and service users first.
 - II. **Integrity** – we act with integrity including being open, honest, and consistent in everything we do.
 - III. **Dignity and respect** - making decisions objectively based on evidence, without discrimination or bias.
 - IV. **Leadership** – we are all positive role models, always demonstrating flexibility and resilient leadership. We are all accountable for everything we do and challenge all behaviour that falls short of the highest standards.
 - V. **Equality, diversity, and inclusion (EDI)** – We continually recognise and promote the value of EDI both within the FRSs and the wider communities in which we serve. We stand against all forms of discrimination, create equal opportunities, promote equality, foster good relations, and celebrate difference.
7. The Core Code recognises there are differing governance arrangements and is flexible enough to be adopted by every service. It can be added to but not detracted from, thereby ensuring local values and expectations of behaviours can also be reflected.

Requirements of the Core Code

8. The core code should be adopted by every service in England. The principles should be embedded within everything that FRSs and their employees do, this includes those working within or on behalf of the FRS.
9. FRSs will ensure that the principles of this Core Code are represented within policies and processes to ensure they are embedded and at the heart of day-to-day activity.

10. The five principles in the Core Code apply to every action we take, as individuals or as an FRS. The principles will help all of us do our jobs in the right way.
11. The Core Code requires everyone to promote the five principles. We should all feel confident challenging behaviour that breaches the Core Code.
12. Specific responsibilities for the implementation of the Core Code are set out in four distinct tiers: all staff, supervisory and middle managers, senior managers, and Fire Authorities.
 - I. **All Staff** – all staff should have an understanding of the Core code and maintain high standards of ethical behaviour within their working life.
 - II. **Supervisory and middle managers** – additionally it is incumbent on supervisory and middle managers to understand the impact of the Core Code on their specific responsibilities.
 - III. **Senior managers** – Senior managers within the FRS must have an in-depth understanding of the contents of the Core Code. Senior managers include corporate management board members, area managers, heads of departments and heads of service.
 - IV. **Fire Authority** – Those who govern FRSs will demonstrate their commitment to the Core Code by championing its use. This may include utilising the Core Code to inform FRS values and vision; monitoring and supporting its development and progress through effective scrutiny.

The Fire Standard

13. A Core Code of Ethics Fire Standard was also launched on the 18th of May 2021 by the Fire Standards Board. The standard outlines what is expected of services, what services must have in place to achieve the desired outcome and the expected benefits of achieving the standard.
14. The fire standard uses stronger language than the Core Code guidance stating that:

A fire and rescue service **must**:

- V. Adopt and embed the Core Code to demonstrate that the service is fully committed and compliant at both an individual and corporate level.
- VI. Ensure the attitudes, professional behaviours and conduct described within the core code are reflected in its decision-making, policies, procedures, processes, and associated guidance that govern how the service manages and supports its workforce.
- VII. Provide training and support to all those who work for, or on behalf of, a service to achieve their understanding of the Core Code and an appreciation of their responsibilities in adhering to it.
- VIII. Not detract from the Core Code.

Those who lead services and those who work for, or on behalf of, the service **must**:

- IX. Understand, respect, and follow the principles of the Core Code and demonstrate this by their commitment to it and their responsibility for upholding it.
- X. Conduct themselves in accordance with the Core Code.

Those responsible for the governance of fire and rescue services, whilst complying with their own ethical codes **must**:

- XI. hold the Chief Fire Officer to account for the implementation of the Core Code at a local level;
- XII. play a proactive role in challenging behaviour inconsistent with the Core Code; and
- XIII. ensure strategies, policies and performance measures are in place to promote and embed a positive and inclusive culture.

A fire and rescue service **should**:

- XIV. Designate a senior leader who is responsible for promoting the Core Code throughout the service and ensuring that all those who work for, or on behalf of, the service understand its contents and what is expected of them.
15. Fire Standards will be the basis of future inspection judgements arrived at by the Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services in England.

How has the Service approached the implementation of the Core Code of Ethics?

- 16. The national launch of the Core Code has been communicated to staff through our internal Siren messages, supplemented with a news article on our internal portal. The CFO also included an overview of the Core Code along with the intention to adopt it in his latest video blog update on the 21st of May.
- 17. Our existing principles and behaviours are well embedded across the Service having been developed more than 5 years ago by our staff. HMICFRS praised our work on our principles and behaviours identifying that 'The Service has a set of values that are understood and demonstrated by staff at all levels'.
- 18. An assessment of our existing principles and behaviours Leadership, Passion, Innovation and Dependability identifies that they align well with the Core Code. Rather than directly replacing, adoption of the Core Code can be seen as building on our existing Principles and Behaviours. This approach recognises the good work of staff whilst avoiding any confusion in maintaining multiple sets of values and has been a key aspect of our internal messaging to staff.
- 19. At its AGM on the 4th of June HFA agreed to amend the constitution to reflect the Core Code.
- 20. At the SLT meeting, 7th June, the strategic team designated DCFO Shillito as the senior leader responsible for promoting the Core Code throughout the service, in line with the requirements of the Fire Standard. At the same meeting, it was also agreed to establish the implementation of the Core Code as a service level project to be led by Louise Marritt of the Organisational Development Section.
- 21. An overview of the Core Code was provided to the Middle Manager leadership forum on the 8th of June and the Supervisory Leadership forums through September and October.
- 22. HFA received updates at its meeting on the 25th of June and provided a further overview on the 9th of July at its member day.

23. An eLearning module has been produced to provide an overview of the code along with the service's outline plan for adoption. The eLearning module requires mandatory completion by all staff.
24. The Project lead has produced a gap analysis and action plan identifying tasks, responsibilities, and timescales to enable full adoption and embedding of the Core Code across the Service. The action plan and gap analysis are captured within a Core Code of Ethics Implementation Tool, the dashboard of which can be found at Appendix A, the full electronic version can be accessed on the Service Portal [here](#). Key highlights from the action plan include: -
 - i. Merchandise, artwork, and murals – ensure dissemination of Core Code merchandise and artwork is complete and being utilised on premises and in vehicles to best effect. Mural design and application currently being costed by Comms and liaising with Premises re. decoration and application.
 - ii. Performance Development Review (PDR) and Individual Development Plans (IDP's) – New content relating to the Core Code has been provided to ICT by OD for inclusion in the new PDR platform. The platform will be ready for viewing by 1st Dec 2021. A review and update of the IDP process and template is required. The Core Code of Ethics must feature as a requirement to evidence against. A review is to be undertaken by HR and OD following feedback and lessons learned from previous and current talent pipeline processes. The IDP template must also reflect the requirements of support roles and Control staff.
 - iii. Core Skills Framework (CSF) and associated documents - Core Code included in the CSF within the leadership pillar for all ranks and roles throughout the Service. Updates to the CSF are also reflected in all section/departmental Career Ladders and Role Specific Training Outlines (RSTO's).
 - iv. Service Policies and Policy Delivery Guidance (PDG) – a standard Service position statement around the Core Code is being written into policies as they are being reviewed, by review date. Policies and PDG's owned by HR or OD will need to be assessed to determine whether Core Code content, over and above the standard statement, is required.
 - v. Public Sector Equality Duty (PSED) action plan - The PSED action plan is a tool used by Heads of Function to evidence our compliance with the PSED. The Core Code should be incorporated into this live document and will assist in providing additional evidence against the PSED, our EDI priorities and the Core Code Fire Standard.
25. The Corporate Communications Team, working in partnership with the Project lead, have developed a communications strategy for the implementation of the Core Code. A copy of the Communications Strategy can be found as Appendix B. Key highlights from the communications strategy include: -
 - i. Producing new merchandise, which included vehicle air fresheners for all Service vehicles, which was new for staff.
 - ii. Producing an interactive guide for managers on what the Core Code of Ethics, which is available to read [here](#).
 - iii. New pens are made from recycled plastic and new notepads are made from recycled paper.
 - iv. We are in progress to donate the left-over Principles and Behaviours pens and old notepads to local community/not-for-profit groups for use in their meeting rooms.

How has the Core Code of Ethics changed the Service?

26. Whilst the Service has adopted the Code of Ethics in its entirety it is still early days in terms of seeing significant change, the implementation is still ongoing though good progress has been made. A key part of our approach is to build on our existing values and principles, as previously detailed, due to good feedback from HMIC and the work that has been undertaken to embed them. Change will be incremental rather than big bang as we move through the stages of the project and implementation.
27. The Personal Development Review (PDR) process which commences annually in the new year will have all ethical principles incorporated. Our experience from the implementation of our previous principles and behaviours is that this is a key point in the life of the project. Individuals will discuss with managers how they contribute and demonstrate the ethical principles within the Core Code as part of the PDR.
28. Similarly, the pipeline processes have all been updated to require candidates to provide evidence on how they contribute to and demonstrate the ethical principles, again previous experience suggests that this really focusses minds and encourages staff to think about the Core Code and what it means to them as an individual and the Service as a collective.
29. The Core Code supports our increased focus on EDI, the outcomes of which will reflect Ethical Principle 5, evidence of which is contained in our published Pay Gap Reports and EDI annual plan.
30. Our August Pulse Staff Survey featured the question '*How would you describe your knowledge of the Core Code of Ethics?*'. This scored an average of 4.4 out of 5 and was the highest scoring question in the survey which suggest that the communications plan is working, and knowledge is increasing in this area.
31. Anecdotal feedback from NFCC colleagues suggests that as a Service we are making good progress compared to others. The NFCC Communications department is currently considering our approach as a potential case study.

STRATEGIC PLAN COMPATIBILITY

32. The five ethical principles within the Core Code align well with the priorities identified within our Strategic Plan.

FINANCIAL/RESOURCES/VALUE FOR MONEY IMPLICATIONS

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

LEGAL IMPLICATIONS

34. Implementation of the Core Code supports the following legal requirements and mandatory duties:
 - i. Equality Act and the Public sector Equality Duty;
 - ii. Local Audit and Accountability Act; and

- iii. The Accounts and audits regulations.

EQUALITY IMPACT ASSESSMENT/HR IMPLICATIONS

- 35. The project lead, Louise Marritt linked in with NFCC colleagues on the national equality impact assessment. The HFRS EIA identifies mainly positive impacts on the protected characteristics (a neutral impact has been identified for Marital Status).
- 36. The Core Code provides a clear set of standards for FRSs that promote equality, diversity, inclusion, dignity, and respect in the workplace as well as the delivery of services. The code also promotes the use of positive action by FRSs to address under-representation in their workforces. The code should have a positive impact on protected characteristics.
- 37.

CORPORATE RISK MANAGEMENT IMPLICATIONS

- 38. There is a clear direction within the Core Code Guidance that the Core Code should be adopted by all FRAs, the accompanying Fire Standard utilises stronger language replacing should with must in terms of the need to adopt and the associated responsibilities within the Core Code. Fire Standards will be the basis of future inspection judgements arrived at by the Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services in England.
- 39. Failure to adopt and embed the Core Code is likely to have a negative effect on the People pillar of future HMICFRS Inspections.

HEALTH AND SAFETY IMPLICATIONS

- 40. None arising directly.

COMMUNICATION ACTIONS ARISING

- 41. The national launch of the Core Code has been communicated to staff through our internal Siren messages, supplemented with a news article on our internal portal. The CFO also included an overview of the Core Code along with the intention to adopt it in his latest video blog update on the 21st of May.
- 42. The Corporate Communications Team, working in partnership with the Organisational Development Team, have developed a communications strategy for the implementation of the Core Code.

DETAILS OF CONSULTATION AND/OR COLLABORATION

- 43. The Core Code has been developed and consulted upon at a National level through the NFCC, LGA and APCC.
- 44. Staff groups will be consulted concerning the adoption of the Core Code as part of the service level project.

BACKGROUND PAPERS AVAILABLE FOR ACCESS

- 45. Guidance and other associated documents for the Core Code can be found on the NFCC Central Programme Office website [here](#)

46. Details relating to the associated Fire Standard can be found on the Fire Standards Board website [here](#)

RECOMMENDATIONS RESTATED

47. The GAS committee take assurance of the progress the Service is making in adopting and implementing the Core Code of Ethics.

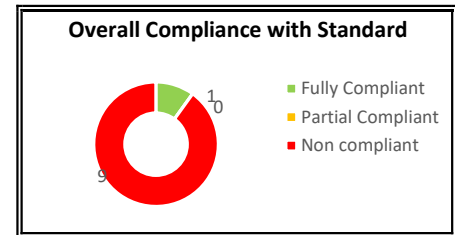
J. Kirby

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

Humberside Fire & Rescue Service
Summergroves Way
Kingston upon Hull

Core Code of Ethics IMPLEMENTATION TOOL

Please fill in the contact details below:	
Fire and Rescue Service	Humberside
Contact Name	Lou Marritt, Organisational Development
Contact Email Address	lmarritt@humbersidefire.gov.uk
Contact Phone Number	(01482) 567140



Criteria	Description	Priority			Impact			Compliance			
		Low	Medium	High	Low	Medium	High	Fully Compliant	Partially Compliant	Non Compliant	Chart
1	Must adopt and embed the Core Code to demonstrate that the service is fully committed and compliant at both an individual and corporate level.	0	3	17	0	3	17	6	3	11	
2	Must ensure the attitudes, professional behaviours and conduct described within the core code are reflected in its decision-making, policies, procedures, processes, and associated guidance that govern how the service manages and supports its workforce.	0	9	13	0	9	13	6	2	14	
3	Must provide training and support to all those who work for, or on behalf of, a service to achieve their understanding of the Core Code and an appreciation of their responsibilities in adhering to it.	1	4	4	1	4	4	4	2	3	
4	Must not detract from the Core Code.	0	2	5	0	2	5	2	1	4	
5	Must understand, respect, and follow the principles of the Core Code and demonstrate this by their commitment to it and their responsibility for upholding it.	0	1	7	0	1	7	2	3	3	
6	Must conduct themselves in accordance with the Core Code.	0	2	4	0	2	4	1	1	4	
7	Must hold the Chief Fire Officer to account for the implementation of the Core Code at a local level;	0	0	5	0	0	5	2	1	2	
8	Must play a proactive role in challenging behaviour inconsistent with the Core Code;	0	0	5	0	0	5	2	0	3	
9	Must ensure strategies, policies and performance measures are in place to promote and embed a positive and inclusive culture.	0	1	5	0	1	5	2	1	3	
10	Should designate a senior leader who is responsible for promoting the Core Code throughout the service and ensuring that all those who work for, or on behalf of, the service understand its contents and what is expected of them	0	1	0	0	1	0	1	0	0	
	Total	1	23	65	1	23	65	28	14	47	

Communication Plan: Core Code of Ethics

All Fire and Rescue Services in England are to adopt a set of five Ethical Principles from 17 May 2021.

Objectives

- Inform staff and embed the Ethical Principles, as we did with Principles and Behaviours.
- Reinforce key message: these are a natural evolution of what we in HFRS have had in place for over 5 years, and it's the sector who is catching up on our good work.

Audience and insight

- Staff already have a great understanding of HFRS Principles and Behaviours, emphasise key message and support managers with a communication document and pack of merchandise to help deliver the updated message. Link to key messages that will be a part of SLT visits.
- Fire Authority will receive the same staff update in Siren, as part of the update of merchandise make sure main meeting rooms that members of the Fire Authority will go in have new posters (HQ conference room and main stair well).
- Public message is to share the information on the Ethical Principles and link to key message to help demonstrate that we've had well established values and praised by HMICFRS.

Strategy

Focus on key message that these are a natural evolution of our Principles and Behaviours and updates to merchandise to help embed them.

Support OD team with timely internal communications based on their plan to embed the Ethical Principles into the organisation. This will be ongoing and tie into Service wide communications, such as PDR season and any other development activities.

Provide line managers with a communication document and with a starter pack of merchandise:

- Pens
- Notebooks
- Deskpads (for stations)
- Posters A2 and A3
- Table talkers
- A set of mugs for office/station
- Vehicle air fresheners
- Replace entrance stickers at HQ

Encourage making time in teams/stations calendar to have a catch up and discuss what are the Ethical Principles.

Work with District administrators to make sure extra frames or new frames are put up at all stations. Work with Estates to start removing the large Principles and Behaviours wall artwork.

To consider: new merchandise to be environmental where possible (made from recyclable materials). Tie in with promotion of green spaces (environmental plan) and [BBC Plant Britain](#) (wild flower meadow plants, bee/insect and hedgehog friendly, planting trees etc).

Implementation

Deadline/ Publish	Audience	Message	Action	Method	Owner
Publish 18 May	Staff	Here they are, being adopted by all FRS in England, What they area and support documents	Confirm message with CFO Upload to news story on the portal so staff can easily refer the associated documents	Siren Bulletin Portal	Ros Emily
Publish from 24 May	Staff	What they are and they are a natural evolution of our Principles and Behaviours	CFO to include as part of Chiefs update to staff	Video Siren Bulletin Portal	Emily
Deadline 24 May	Comms staff	Confirmation of full adoption or embed into current Principles and Behaviours	Update from SLT meeting which will inform future communication activities	Meeting	SLT Ros
Deadline 26 May	Estates	Confirm with estates on removal of Principles and Behaviours wall artwork	Depends on SLT outcome Notify SMs	Email	Ros
Deadline 28 May	Staff	Updated merchandise quotes now artwork has been confirmed	Quotes for starter pack: Pens Mugs Notebooks	Email/phone call suppliers	Emily
Deadline 28 May	Public	We've had well established values and praised by HMICFRS. We are joining other FRS in England and fully adopting the Ethical Principles which are a natural evolution of Principles and Behaviours	Update area on HFRS website. Request On-Call application form is updated.	Edit Website Confirm with On-Call Support changes to the application form	Ros
Deadline 28 May	Line Managers	How to introduce new Ethical Principles to your staff	Draft main messages to support managers with how they update staff to have a consistent message across to staff	Draft content for a PageTiger document so can add links and videos	Ros Luke
Deadline 4 June	Staff	These are the Ethical Principles	Design: Teams background Posters (based on content from NFCC) Add to A3 deskpads	Canva	Luke
Deadline 4 June	Staff	These are the Ethical Principles table talker	Draft design and work with supplier to	Ecolourprint in Goole produced last	Ros

			produce new table talkers	version. Decide on 4 or 3 sided document	
Publish 8 June	Leadership Forum	Overview of Core Code of Ethics	Virtual presentation	Meeting	Jason
Deadline 16 July	Staff		Confirm orders of new merch and extra frames	Order	Ros Luke
Deadline 16 July	Estates		Email completed document about large artwork. Ask Tony about frames SHQ	Email	Ros
Deadline 6 August	Estates		Email back completed forms to remove artwork	Email	Ros
Deadline 6 August	External supplier		Contact SignsExpress about window vinyl, removal and install as tricky to do by hand	Email	Ros
Deadline 6 August	District Admins	District packs and all stations materials will be delivered via Stores run with itemised list of who's getting what and stations marked	Pack boxes for their attention and send email	Email	Ros/Luke
Deadline 9 August	Supervisory Managers	Next week Core Code of Ethics materials (list items) will be available to collect from SHQ or District HQ Book some time with your team/station to go through the core code of ethics via this handy document (link to pagetiger). further support via Lou Marritt (if required)	Email supervisory managers (District GMs) about the roll out of new materials and pagetiger document, Push back due to delivery dates and Lou on leave	Email	Ros to draft message and check Pagetiger doc.
Deadline 13 August	Staff	Reminders to complete elearning module	Check completion rates and push reminders as appropriate	Siren 19 August Strategic and Managerial Updates	Lou Corp Comms team to include in Siren

Deadline 30 August	Staff	Further information and support about core code of ethics is available via Lou Marritt	Check new materials are up in offices/stations	Tie in with other visits	Corporate Assurance SMs
Once new merch has been delivered to all locations, consider using the branding and colours within corporate documents and messages where appropriate.					

Governance, Audit and Scrutiny Committee 15 November 2021	Report by the Monitoring Officer/Secretary
<p style="text-align: center;">GAS COMMITTEE SCRUTINY PROGRAMME 2021/22</p> <p style="text-align: center;">REPORT EXECUTIVE SUMMARY</p> <p>This paper summarises the Governance, Audit and Scrutiny Committee's Scrutiny Programme 2021/22. Each year, the Committee will programme six 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.</p>	

RECOMMENDATIONS

1. That Members consider and approve the Scrutiny Programme 2021/22.

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. Six areas for scrutiny were identified by the Committee for its 2021/22 programme:
 - Anti-Bullying Campaign (Assessing the Issue)
 - Promotion Within Uniformed Roles
 - Implementation of the NFCC Code of Ethics
 - Management of Risk Information by On-Call Fire Stations
 - Workforce Monitoring and Planning (Revision of Workforce Plan)
 - Anti-Bullying Campaign (Progress Update)

STRATEGIC PLAN COMPATIBILITY

6. This paper supports the achievement of Strategic Plan 2021-24 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 2021/22.

Officer Contact: Samm Campbell ☎ 01482 393205
 Committee Manager

 Mathew Buckley ☎ 01482 567174
 Secretary/Monitoring Officer

Humberside Fire & Rescue Service
Summergroves Way
Kingston upon Hull

SC
November 2021

GAS Committee Scrutiny Programme 2021/22		
Meeting Date	Responsible Officer	Item and Scope
5 July 2021	Director of People and Development	<p>Anti-Bullying Campaign (Assessing the Issue)</p> <ul style="list-style-type: none"> • How does the Service define bullying (what guidance has informed its policies etc)? • To what extent is bullying an issue within the Service? • How does the Service measure and understand its organisational culture and bullying in its workforce? • What have staff surveys shown with regard to bullying? • How many staff surveys have been conducted since the Service's last inspection by HMICFRS? • Is the Service confident that its anti-bullying campaign has/will improve its culture?
6 September 2021	Director of People and Development	<p>Promotion Within Uniformed Roles</p> <ul style="list-style-type: none"> • How does the Service manage promotions within uniformed roles? • How has this process changed across the last 20 years? • What regard has been given to public sector and sector-specific best practice/guidance? • Does the promotion process fit with the Workforce Plan and with the Service's strategy on positive action? • What reference have ex-staff members made to promotion processes in their exit interviews and surveys? • In the HMICFRS survey conducted in 2020, 50 percent of respondents disagreed with the statement, 'The promotion process within my service is fair'. How has the Service addressed this?
15 November 2021	Director of People and Development	<p>Implementation of the NFCC Code of Ethics</p> <ul style="list-style-type: none"> • How has the NFCC Code of Ethics changed the Service? • How has the Service approached its implementation?

24 January 2022	Director of Service Delivery	Management of Risk Information by On-Call Fire Stations <ul style="list-style-type: none"> • What processes are used to maintain accurate risk information by On-Call fire stations. • How is the Service assured that these processes are in line with best practice?
21 February 2022	Director of People and Development	Workforce Monitoring and Planning (Revision of Workforce Plan) <ul style="list-style-type: none"> • What changes has the Service made to its Workforce Plan? • To what extent has the Service's strategy on positive action affected both the Plan and its workforce? • Update in relation to the Committee's recommendations of 12 April 2021: <ul style="list-style-type: none"> (a) That the Service's future Positive Action Strategy and Framework be applied consistently; (b) that the Service ensure that its employees fully understand its Positive Action Strategy and Framework; (c) that the Service gather improved data in order to understand the makeup of its workforce in comparison to local demographics and other fire and rescue services; (d) that the Service improve its exit interview process to understand why employees leave the Service, and (e) that the Committee be updated about to the Service's progress in relation to the revision of its workforce plan and the recommendations of the associated internal audit report. • How does the Service balance external and internal recruitment? • How does this balance compare at different levels of seniority within the organisation?
11 April 2022	Director of People and Development	Anti-Bullying Campaign (Progress Update) <ul style="list-style-type: none"> • How has the Services anti-bullying campaign progressed? • How does the Service know progress has been made? • What have the Service's measures of organisational culture and bullying shown? • How has the Service responded to the recommendations made by the Committee at its meeting of 5 July 2021 (Minute 70/21 refers):

		<p>(a) That the Service use its exit interviews and appraisals process to develop a clearer understanding bullying and changes to its organisational culture;</p> <p>(b) that initial feedback on the progress of recommendation (a) be reported during the follow-up anti-bullying campaign item due to be heard on 11 April 2022;</p> <p>(c) that the Service obtain high-quality data through a survey of staff in order to develop a clearer understanding of bullying and organisational culture than that afforded by the HMICFRS surveys of 2018 and 2020, and</p> <p>(d) that the report for the follow-up anti-bullying campaign item contain feedback from the relevant unions.</p>
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