

HUMBERSIDE FIRE AUTHORITY
GOVERNANCE, AUDIT AND SCRUTINY COMMITTEE

7 FEBRUARY 2022

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

Councillor Briggs and Councillor Green attended as observers.

Phil Shillito - Deputy Chief Fire Officer/Executive Director Service Delivery, Niall McKiniry - Assistant Chief Fire Officer, 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, Mathew Buckley - Monitoring Officer/Secretary, and Samm Campbell - Committee Manager were also present. Andy McCulloch - Internal Audit (TIAA) and Ross Woodley (Mazars) attended remotely.

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

PROCEDURAL

1/22 APOLOGIES FOR ABSENCE - There were no apologies for absence.

2/22 DECLARATIONS OF INTEREST - There were no declarations of interest.

3/22 MINUTES - *Resolved* - That the minutes of the meeting of the Committee held on 15 November 2021 be confirmed as a correct record.

4/22 MATTERS ARISING FROM THE MINUTES, OTHER THAN ON THE AGENDA - There were no matters arising from the minutes.

GOVERNANCE

5/22 UPDATE: MATTERS ARISING/FEEDBACK FROM FIRE AUTHORITY - The Monitoring Officer/Secretary provided feedback on items considered by the Fire Authority at its meeting of 3 December 2021.

Resolved - That the update be received.

Audit

6/22 EXTERNAL AUDIT ANNUAL REPORT 2020/21 - Ross Woodley (Mazars) presented the external audit annual report 2020/21.

Resolved - That the report be received.

7/22 INTERNAL AUDIT UPDATE - Andy McCulloch (TIAA) presented a report updating the Committee on progress in relation to the internal audit process.

The three individual audit reports referred to in the internal audit update had been circulated to Members prior to the meeting:

1. Data Quality - Risk Information Enforcement
2. Out of Hours Arrangements

3. Shift Productivity (Follow-up)

There were no proposed changes to the remainder of the 2021/22 audit plan, and no Priority 1 recommendations had been issued since the Committee's previous meeting. Work was underway in relation to the audit plan for 2022/23, and it would be adapted to take account of the outcomes of the Service's inspection by Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services during December 2021 and January 2022.

Resolved - That the update be received.

FINANCE AND PERFORMANCE

8/22 2021/22 ANNUAL ACCOUNTS CLOSEDOWN TIMETABLE - The Head of Finance presented a report summarising the annual accounts closedown timetable for 2021/22.

The Service would work with Mazars to agree the annual accounts closedown timetable, and aimed to present the Service's audit accounts by the end of November 2022.

Resolved - That the annual accounts closedown timetable be received.

9/22 PUBLIC SECTOR AUDIT APPOINTMENTS - The Head of Finance presented a report which would seek the Fire Authority's approval to allow Public Sector Auditor Appointments (PSAA) to act on its behalf to appoint an external auditor.

Mazars was contracted to undertake external audit duties for the Authority until 2022/23. Through PSAA the Authority would look to appoint an auditor until 2027/28. While Mazars had experienced difficulties in producing the final audited accounts for the Authority, so had the other nine audit firms that the Authority could have contracted with.

Resolved - that the report be received.

10/22 REVIEW OF ANTI-FRAUD RELATED POLICIES - The Temporary Director of Service Improvement presented drafts of the following anti-fraud related policies due to be considered for approval by the Fire Authority:

1. Anti-Fraud and Corruption Policy
2. Anti-Money Laundering Policy
3. Anti-Bribery Policy
4. Whistleblowing Policy

Resolved - That the draft anti-fraud related policies be received.

11/22 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).

At the time of the meeting, the Service was undergoing the final week of a six-week inspection by HMICFRS. The Inspectorate had reviewed significant amounts of data during the early stages of its inspection, which had been conducted both on-site and remotely.

Resolved - That the update be received.

SCRUTINY PROGRAMME

12/22 MANAGEMENT OF RISK AT ON-CALL FIRE STATIONS - The Director of Service Delivery submitted a report in response to the scope within the Committee's Scrutiny Programme for 2021/22.

TIAA's recent audit of data quality and risk information enforcement had yielded a judgement of 'reasonable assurance'. Operational risk information underpinned the Service's approach to emergency response, enabling it, for example, to work tactically to prevent incidents from becoming worse, or from damaging national infrastructure. As Outlined in the Service Delivery Operational Risk Management Policy (appendix 1), the Service had a statutory duty under the Fire and Rescue Services Act 2004 and the Civil Contingencies Act 2004 to gather, assess and share risk information to mitigate the impact of emergency incidents. The Service was proactive in identifying, obtaining, assessing, recording, and disseminating operational risk information to all 31 fire stations, including 19 on-call-only stations. The adopted approach follows nationally developed protocols from Fire and Rescue National Operational Guidance, Provision of Operational Risk Information Systems (PORIS). The processes for operational risk gathering, its subsequent review and application into operational plans were identical for both on-call and full-time staff.

If any firefighter observed an undocumented risk in the community, they could register the risk provisionally for later assessment and potential incorporation into a site-specific risk information (SSRI) record. Each fire station was responsible for monitoring and updating the information in its SSRIs; the Service was 99 percent compliant in this regard. SSRIs also attracted an overall risk rating (very high, high or medium) and would be regularly verified to maintain accurate records according to that rating (every six months, year or two years respectively). SSRIs enabled the Service to plan its approach to an intervention, meaning that, in the event of an incident, plans would already be in place for ambulance access and the number of required pumping appliances.

Members raised the following points:

- **Software Provision** - The Service had initially contracted a software provider (Chameleon) to develop bespoke software to manage its risk information, including through devices inside the fire appliances. However, Chameleon had since opted to withdraw from the contract and refund the Service. The Service's current software worked sufficiently well, but it was in the process of procuring similar software that was more easily accessible.
- **SSRIs** - The Service maintained SSRI's in relation to around 1,300 high risk properties, many of which had associated operational pre-plans. While SSRIs assessed as very high would each have an associated operational pre-plan, not all those assessed as high risk did. If a high risk property was well-managed and had its own plans in place, an operational pre-plan would not necessarily be needed.
- **National Guidance** - In line with HMICFRS's recommendations in the 2019 State of Fire and Rescue report, the Fire Standards Board and National Fire Chiefs Council had begun to issue a series of fire standards, and would likely continue to do so following relevant consultation processes. The Inspectorate was also in the process of deciding whether to recommend the publication of guidance on the balance of whole-time and on-call firefighters, which was different in each fire and rescue service.
- **Sharing Information** - Fire and rescue services had a duty to share risk information with neighbouring services. The Service's own policy was to share and seek relevant

data within 10km of a neighbouring service's borders, where either service could be the first to respond to an incident.

- Internal Audit Report - The Committee noted the findings within the internal audit report and asked how the Service would address them. The Service was working to standardise information recording processes across each of its stations to ensure consistency. Station and watch managers, many of whom were relatively new in post, were being trained to provide greater assurance.

Resolved - (a) That the Committee be provided with further details on the number of high and very high risk site-specific risk information records;

(b) that the Committee be updated on progress made against the internal audit report, and

(c) that the Committee be updated concerning the procurement of software.

13/22 GAS COMMITTEE SCRUTINY PROGRAMME 2021/22 - The Committee Manager submitted a report summarising the Committee's Scrutiny Programme 2021/22.

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

(b) that the Committee's meeting due to be held on 21 February 2022 instead be held on 7 March 2022.

14/22 ANY OTHER BUSINESS - ARK PROJECT - The project board had continued to meet and to liaise with the University of Hull to identify a new partner for the project. A decision on how to move the project forward was due to be made in April 2022.