## **HUMBERSIDE FIRE AUTHORITY**

## **GOVERNANCE, AUDIT AND SCRUTINY COMMITTEE**

## 7 JULY 2025

**PRESENT:** Independent Co-opted Members Chris Brown (Chair), Karen Martin, and Melissa Dearey.

Officers Present: Matt Sutcliffe – Assistant Chief Fire Officer, Antoinette Diovisalvi – Joint Deputy Chief Finance Officer/Deputy S.151 Officer, Steve Duffield – Area Manager of Emergency Response, Jason Kirby – Area Manager of People and Culture, Dan Meeke – Area Manager of Public Safety and Resilience , Shaun Edwards – Head of Finance, Jamie Morris – Head of Corporate Assurance, Dominic Purchon – Head of Protection, Sarah Wilkinson – Head of Prevention, Gareth Naidoo – Senior Corporate Assurance Officer, David Robinson – Internal Audit (TIAA), Lisa Nicolson – Monitoring Officer/Secretary, and Rob Close – Committee Manager.

Nigel Saxby (GAS Committee Member), Rejoice Mapeto (Mazars) and James Collins (Mazars) were in remote attendance.

The meeting was held at the Humberside Fire and Rescue Service Headquarters, Kingston upon Hull.

**13/25 APOLOGIES FOR ABSENCE** – Apologies for absence were received from Gerry Wareham and Nigel Saxby. With the Chair's permission, Nigel Saxby was invited to contribute to the meeting remotely.

**14/25 DECLARATIONS OF INTEREST** – No declarations of interest were made with respect to any items on the agenda.

**15/25 MINUTES** – The Committee reviewed the previous set of minutes for accuracy.

**Resolved** – That the Minutes of the meeting held on 17 February be approved as a correct record, subject to the following amendments:

- (a) That Melissa Dearey be added to the attendance list;
- (b) That the fourth paragraph of minute number 05/25 be amended to read:

"Observing the reported short-term borrowing figure of £4m on 31 December 2024, the Committee questioned why the Service needed to borrow that sum. The Executive Director of Finance/Section 151 Officer explained that the Authority experienced a temporary cash flow issue following an error in cashflow planning. To meet its cashflow requirements, the Authority took short-term borrowing to cover this. It was believed that any loss to the Authority as a result of this was negligible due to the high yields on the investment. Policies and procedures had been reviewed, and a subsequent audit was completed. The Committee was assured that this would not happen again."

(c) That minute number 05/25 be amended to include the following challenge:

"The Committee asked if the increase in employers' national insurance contributions would impact the Service's on-going revenue budget. Officers explained that the increase may be mitigated by other revenue generation including any increases to the Authority's Council Tax precept."

(d) That minute number 05/25 be amended to include the following challenge:

"The Committee asked if the ongoing mesothelioma insurance claim might affect the Service's future insurance premiums. Officers explained that, while the claim would indeed have some impact on insurance premiums, this would be mitigated to an extent by effective investigation of incidents and appropriate security measures."

**16/25 EXTERNAL AUDIT – ANNUAL STRATEGY MEMORANDUM –** The Committee received a report of Mazars, the Authority's external auditors, detailing the annual strategy memorandum. The external auditors advised the Committee that the Audit Strategy Memorandum had not significantly changed compared to those of previous years. It was reported that the planning and risk assessment of the 2025/26 audit would be concluded by July 2025, before fieldwork continued from July lasting until September with an expected completion time of November. The Memorandum presented an overall materiality for the year ended 31 March 2025 to be in the region of £1,655k, and performance materiality to be in the region of £1,324k.

The Committee was advised the key risk areas and the external auditor's responses included the management override of controls, the net defined benefit liability valuation, the valuation of land and buildings, and the International Financial Reporting Standard (IRFS) 16 adoption.

Although the external auditors had not fully completed the planning and risk assessment work, the results of the initial work would be reported to the Committee on completion. This included reporting any risk of significant weakness in arrangements identified. The Auditor's Annual Report on the 2023/24 work in February 2025 included the Value For Money (VFM) commentary required by the Code. This did not identify any significant weaknesses in arrangements or make any recommendations.

The Committee asked what work had been done to mitigate the risk of site plans not being updated with the remeasured Gross Internal Areas (GIAs). The external auditors explained that any new investments into estates must result in site plans being referred on regardless of their overall materiality. In a follow-up question, the Committee asked if the deficiencies in internal controls would likely have an impact on the delivery of the audit. The external auditors explained that the progression of this would be reported within forthcoming reports to the Governance, Audit, and Scrutiny Committee. The Assistant Chief Fire Officer explained that Humberside Fire and Rescue Service was seeking a strategic partner for future estates work and would expect that any variance in estates after this would be referred to the external auditors.

**Resolved** – That the External Audit Annual Strategy Memorandum be received.

17/25 DIRECTOR OF AUDIT OPINION AND ANNUAL REPORT 2024/25 – The Committee received a report of report of TiAA, the Authority's internal auditors, detailing the Audit Opinion and Annual Report for 2024/25. The internal auditors advised the Committee that, as part of the 2024/25 internal audit, nine reviews were carried out. Three audits received Substantial Assurance, four audits received reasonable assurance, and two received limited assurance. The internal auditors were satisfied that, for the areas reviewed during the year, Humberside Fire and Rescue Service had reasonable and effective risk management, control and governance processes in place.

**Resolved** – That the Director of Audit Opinion and Annual Report 2024/25 be received.

**18/25 ANNUAL STATEMENT OF ACCOUNTS (UNAUDITED) 2024/25 –** The Committee received a report of the Executive Director of Finance/S.151 Officer, detailing the unaudited annual statement of accounts for 2024/25. The Joint Deputy Chief Finance Officer/Deputy S.151 Officer advised the Committee that the accounts were signed by the Section 151 Officer on 5 June 2025 with the audit work commencing on 16 June 2025.

The Committee questioned if the aspiration of a three percent non pay saving was realistic. The Joint Deputy Chief Finance Officer/Deputy S.151 Officer explained that Fire and Rescue Services (FRS) in England were required by the Home Office to produce and publish Efficiency Plans for increasing productivity and creating efficiency savings. These plans were part of a national framework and assessed by the Home Office, Local Government Association, and National Fire Chiefs' Council. The Home Office set the target for FRS to achieve 2 percent non-pay efficiency savings and a 3 percent annual increase in productivity for wholetime (full-time) firefighters. Officers monitored this on a monthly basis to ensure its progression and offered assurance that this target had not only been met but exceeded every year previously.

The Committee asked if the allocated capital spend for forecasted years was likely to impact on service delivery. The Joint Deputy Chief Finance Officer/Deputy S.151 Officer offered assurances that capital spending would not impact on operational service delivery.

The Committee asked if there had been any alteration to the 2025/26 financial year's budget. The Joint Deputy Chief Finance Officer/Deputy S.151 Officer confirmed that no amendment to the 2025/26 financial year's budget had been made.

The Committee asked why 10 operational staff had reached the £50,000 salary threshold in 2024/25. The Assistant Chief Fire Officer explained that this was a result of the most recent pay award and in year recruitment which pushed had pushed those employee's salaries into the upper threshold.

The Committee sought assurance that the Service operated effective processes for making period adjustments. The Head of Finance confirmed this was correct.

- **Resolved** (a) That narrative context be added to the Officers' Emoluments contextualising the increase in non-operational remuneration above £50,0000;
- (b) That the Committee thank and congratulate the accounts team for getting the year end accounts prepared within the timescales.
- (c) That the Statement of Accounts for 2024/25 be recommended to the Fire Authority for approval.

19/25 TREASURY MANAGEMENT OUTTURN 2024/25 – The Committee received a report of the Executive Director of Finance/S.151 Officer, detailing the treasury management outturn and prudential indicators for 2024/25. The Joint Deputy Chief Finance Officer/Deputy S.151 Officer advised the Committee that, in 2024/25, the Service earned £1.191m of interest on it's investments at an average rate of return of 4.99 per cent. Interest earned during 2024/25 was £0.941m higher than originally budgeted for in respect of investment activity during the year. This was due to higher interest rates and higher cash balances than originally anticipated as a result of the additional Firefighters' Pension Fund grant given during 2024/25. The Authority sought to minimise the use of short-term borrowing to fund temporary cash shortfalls. However, £8.2m short-term borrowing was taken during the course of the year. £4m of this balance remained outstanding at 31 March 2025. No new long-term borrowing had been taken since the previous reporting period.

The Committee requested that specific detail of the cash flow error that led to the need to take short-term borrowing to fund cash flow activities be included in the report to the Fire Authority. The Head of Finance explained that this error had been identified, and financial controls were introduced to avoid this in the future.

**Resolved** – (a) That narrative context be added to the summary of short-term borrowing to outline the error which led to requirement to take short-term borrowing for all future reporting;

(b) That the Committee take assurance from the treasury management activities undertaken during 2024/25 and the Prudential Indicators.

**20/25 INTERNAL AUDIT REPORTS** – The Committee received a report of TiAA, the Authority's internal auditors, detailing the internal audit reports. The internal auditor advised the Committee that, since the last meeting of the Governance Audit and Scrutiny Committee, three audits had been completed on the Key Financial Controls, receiving substantial assurance, Contingency Fire Crew, receiving reasonable assurance, and Follow Up Review. The Assurance Review of Key Financial Controls audit identified that the Authority had robust controls in place across its key financial systems and they were operating effectively. The Assurance Review of Contingency Fire Crew audit found that several policies and plans were in place that detailed response and arrangements for fire fighters in the event of an emergency, such as industrial action. Testing found weaknesses in the way fitness tests were previously carried out. Three recommendations had been made, and all had been accepted by the Service. At the time of the end of year follow up audit, six actions were outstanding.

The Committee sought clarification why an audit slot for 2025/26 was listed as a contingency. The Head of Corporate Assurance explained that one slot remained open to respond to in year activity such as His Majesty's Inspectorate of Constabulary and Fire and Rescue Service Inspection (HMICFRS) target areas, or other time sensitive or national topical subjects. In a follow-up question, the Committee asked how the Service would respond if it did not require space for a reactive audit. The Head of Corporate Assurance explained that, if the slot was not required for something in year, then a matter scheduled for the following year's audit would be brought forward.

The Committee, noting, that the four-year Service Level Agreement (SLA) with East Riding of Yorkshire Council for the provision of payroll services expired on 1 April 2025, asked if this contract had been extended. The Head of Finance explained that the contract had been temporarily extended while the Service explored alternative market options.

The Committee asked why the one debtor referenced in the Aged Debtors Report had not been provided as a bad debt. The Head of Finance explained that an arrangement had been made for that debtor to repay the debt over an extended period of time, and that the Head of Finance was satisfied it was not provided as a bad debt.

The Committee sought assurance from officers that they were confident that the appropriate controls were in place to accommodate changes in supplier bank details. The Head of Finance explained that the extensive controls were in place within the finance team to mitigate the risk of new or changed supplier details.

The Committee asked why the target implementation timetable for the recommendations relating to the assurance review of contingency fire crew audit had not been achieved. The Area Manager of Emergency Response explained that those recommendations had since been implemented. Moreover, it was added that the Community Risk Management Plan (CRMP) had also since been updated to accommodate the findings of this audit. In a follow-up question, the Committee asked if the employee Fitness and Wellbeing Policy accommodated the requirement for contingency firefighters to be operationally fit. The Area Manager of Emergency Response explained that, for contingency firefighters to meet their competency threshold, they were required to evidence operational fitness through fitness testing.

The Committee asked when the Service expected to see progression with the FireWatch recommendation to move away from using substantial HR resources for duplicate data entry and parallel monitoring of the establishment. The Assistant Chief Fire Officer explained that this recommendation was on going with training currently being delivered to all staff. Moreover, payroll issues would be addressed as part of a recent testing site. Ultimately, the Assistant Chief Fire Officer expected this recommendation to be fully implemented by January 2026.

**Resolved** – That the internal audit reports be approved.

**21/25 ANNUAL STATEMENT OF ASSURANCE 2024/25 –** The Committee received a report of the Area Manager of Service Improvement, presented by the Area Manager of People and Culture, detailing the Service's Annual Statement of Assurance for 2024/25. The Fire and Rescue National Framework for England set out a requirement for Fire and Rescue Authorities to provide annual assurance on financial, governance and operational matters and show they had due regard to the expectations set out in their CRMP and the requirements included in the Framework.

The Committee asked how the Service would address its HMICFRS's 2024 adequate rating under the inspection criteria 'Promoting Values and Culture'. The Area Manager of People and Culture explained this grading, and associated action, would be presented to both Members of the Humberside Fire Authority and the Governance, Audit and Scrutiny Committee in a forthcoming Member Day. Ultimately all actions identified from the inspection report were placed on the Service Improvement Plan for progressing and monitoring improvement made against the areas for improvement.

The Committee took assurance that the quarterly Finance and Procurement updates would continue to be reported to the Governance, Audit and Scrutiny Committee.

**Recommended to the Fire Authority** - That the Committee endorse approval of the Annual Statement of Assurance 2024/25 to the Fire Authority.

**22/25 ANNUAL GOVERNANCE STATEMENT 2024/25 –** The Committee received a report of the Area Manager of Service Improvement detailing the Service's Annual Governance Statement for 2025/26. The Area Manager of People and Culture advised the Committee that Regulation Four of the Accounts and Audit Regulations 2003 required the Humberside Fire Authority to conduct an annual review of the effectiveness of its system of internal control and publish a Statement of Internal Control up until 2006/07.

Humberside Fire Authority's governance framework comprised the systems, processes, culture and values, by which the Authority was directed and controlled. The framework demonstrated how the Authority accounted to, engaged with and led the community. It enabled the Authority to monitor the achievement of its strategic objectives and to consider whether those objectives led to the delivery of appropriate, cost-effective services. The Annual Governance Statement was the formal Statement, signed by the Chairperson of the Fire Authority, the Chief Fire Officer and Chief Executive and other Statutory Officers, that recognised, recorded and published the governance arrangements of the Fire Authority. The Annual Governance Statement was much broader than the former requirement to produce a Statement of Internal Control, although the overall assurance process remained. The assurances in respect of the Annual Governance Statement derived from the following:

- External Audit through assessment;
- Internal Audit:
- Members of the Humberside Fire Authority and Governance, Audit and Scrutiny Committee:
- Section 151 Officer:
- Secretary/Monitoring Officer;
- Strategic Leadership;
- Third parties, including partnership arrangements.

The Committee sought clarity on how the Committee's terms of reference were reviewed. The Assistant Chief Fire Officer explained that the Fire Authority reviewed the Authority's constitution, of which the Committee's functions and responsibilities were set out, at least annually at its annual general meeting.

The Committee sought assurance that the Member Champions were indeed utilised effectively. The Area Manager of People and Culture confirmed that each Fire Authority Member was assigned to a Service function as Member Champion, for both information purposes and to act as a critical friend. Member Champion meetings were held on a quarterly basis by each Directorate.

**Recommended to the Fire Authority** - That the Committee endorse approval of the Annual Governance Statement 2024/25 to the Fire Authority.

**23/25 ANTI-FRAUD AND CORRUPTION STATEMENT 2024/25** – The Committee received a report of the Area Manager of Service Improvement detailing the Service's Anti-Fraud and Corruption Statement 2024/25. The Area Manager of People and Culture advised the Committee that the Anti-Fraud and Corruption Statement set out the effective arrangements in place to manage and counter the risk of fraud and corruption to the Authority.

Related anti-fraud policies were:

- Anti-Bribery Policy;
- Anti-Money Laundering Policy;
- Professional Standards Anti-Fraud and Corruption Policy;
- · Professional Standards Whistleblowing Policy.

At its meeting of 17 February 2025, the Governance, Audit and Scrutiny Committee made recommendations to aid the effectiveness of the policies which had been implemented.

The Fire Authority also received assurance of the effective counter fraud measurements in place through the publication of its Annual Governance Statement.

**Recommended to the Fire Authority** - That the Committee endorse approval of the Anti-Fraud and Corruption Statement 2024/25 to the Fire Authority.

**24/25 SCRUTINY ITEM: PREVENTION STRATEGY** – The Committee received a report of the Head of Prevention detailing the Service's prevention strategy. The Head of Prevention advised the Committee that the Service maintained a prevention strategy, and associated prevention tactical plan, to fulfil its role in directing activities to reduce fires and other emergencies. The Service innovated through community and staff-focused initiatives, including long-standing partnerships with local health bodies, such as Hull F.I.R.S.T (Falls Team), which had contributed to reducing pressure on health services over the past decade.

The Service received an Outstanding rating from HMICFRS under the inspection criteria 'Preventing fire and risk'. The development of the Prevention Tactical Plan was underpinned by a range of strategic and operational data sources. These included the the Service's CRMP, Strategic Plan, Service Improvement Plan, HMICFRS judgement criteria for prevention, and the Fire Standards for Prevention and Safeguarding. Collectively, these documents provided a comprehensive evidence base to guide the planning, implementation, and continuous improvement of prevention activities. This was subject to an annual review to ensure it continued to effectively inform and guide prevention activities.

The Service adopted a risk-based approach to prioritise its prevention activities, ensuring that resources were directed towards individuals and communities most vulnerable to fire and other emergencies. A key component of this approach was the development and application of a Fire Fatality Profile (FFP), which identified those at greatest risk. The FFP was informed by a comprehensive analysis of national fire data spanning the past ten years and incorporated a range of contributory risk factors. The insights derived from this analysis guided the planning and delivery of targeted prevention work by operational staff at fire stations, enabling a more effective and evidence-led approach to community safety.

Prevention performance was systematically managed and monitored through monthly performance meetings conducted at three organisational levels: Leadership, Supervisory, and Delivery Teams. These meetings provided a structured forum for reviewing progress, addressing challenges, and aligning activities with strategic objectives.

The Service employed a range of evaluation tools to assess the effectiveness of its prevention initiatives. These included post-activity evaluations following youth engagement programmes, such as school education visits, Fire Safety Interventions, and targeted engagement programmes. Additionally, Problem Solving Plans were used to monitor outcomes related to deliberate fire-setting and anti-social behaviour. A robust Quality Assurance (QA) Framework supported good practice in the delivery and recording of Prevention and Safeguarding activities, aligned with the Prevention Tactical Delivery Plan. Core prevention activities underwent quarterly QA reviews, each culminating in a storyboard evaluation. An annual QA report was also produced to summarise findings and inform continuous improvement. There had been a measurable increase in the delivery of online fire safety training for partner organisations, supporting improved collaboration and shared understanding of prevention priorities and referral routes.

A Service or Local Level Serious Incident Review (SIR) was conducted within 30 days of a serious incident. The purpose of the SIR was to investigate an incident that led to the serious injury or death of a person. This inclusive process enabled the Service, along with partners and stakeholders, to come together and identify, develop, implement, and embed learning opportunities. Analysis of recent Serious Incident Reviews (SIRs) identified a recurring pattern of fire-related fatalities involving men aged 50 and over who were living alone and had drug or alcohol dependencies. These findings informed revisions to the Prevention Delivery Plan, prompting the Prevention Team to adopt a targeted approach of this identified vulnerable demographic. In response, the team proactively engaged with partner organisations supporting this high-risk group. Tailored prevention initiatives were implemented, including the delivery of online training to equip partners with the skills to identify, support, and refer individuals at risk.

Following the publication of the HMICFRS Round 3 Inspection Report on 11 February 2025, the Service was highly commended for its comprehensive understanding and effective prevention of fires and other risks. With the HFRS Strategic Plan being refreshed for the 2025-2028 period the Prevention and Protection Strategy would have a similar refresh. The Service would move to a plan-on-a-page format showing clear flow from risk to delivery. The joint document would be split to a specific Prevention Strategy and Protection Strategy.

- Young People: The Committee asked for further clarity on how the youth engagement was being received. The Head of Prevention explained that delivery of this engagement was carried out primarily by the non-operational staff, in partnership with operational fire-fighters, to target areas seeing the highest risk. Direct engagement with schools in particular had been received well. Moreover, work continued in order to target community events in areas where intelligence suggested there would be the most impact.
- Service or Local Level Serious Incident Review: The Committee asked how the Service had engaged with other statutory services and partners to address the recurring pattern of fire-related fatalities involving men aged 50 and over who were living alone and had drug or alcohol dependencies. The Head of Prevention explained that the Service met with drug and alcohol partners in the Authority's four constituent local authorities to seek to address issues of substance misuse and better identify that target demographic.
- Targeted Prevention: The Committee commended the Service's preventative activity and noted that the Outstanding rating for 'Preventing fire and risk' from HMICFRS was a direct result of non-operational staff identifying targeted intelligence.

**Recommended to the Fire Authority** – That the Fire Authority takes assurance in the Service's commitment to preventing fires and keeping its communities safe through the implementation of the revised Prevention Strategy and the Prevention Tactical Delivery Plan with the continuing aspiration to be outstanding in keeping our communities safe.

25/25 SCRUTINY ITEM: PROTECTION ENGAGEMENT – The Committee received a report of the Head of Protection detailing the Service's protection engagement activity. The Head of Protection advised the Committee that fire and rescue services had a statutory duty to enforce the Regulatory Reform (Fire Safety) Order 2005 and to promote fire safety in commercial premises. Premises which were identified by the Services Risk and Intelligence data as presenting the biggest risk were prioritised for audit by the Service's Inspectors. Premises considered to have a lower consequential risk, but a high risk of fire, were subject to engagement visits by operational crews. Where significant fire safety issues were identified, crews would work with Protection Inspectors to reduce the risk.

A Risk Based Inspection Programme (RBIP) was generated annually by the Data and Intelligence Team. The RBIP identified key attributes of risk in commercial premises, from a range of data sets. The output divided the data into two lists, one high risk list for Protection Inspectors, and the other medium or low risk for Operational Crews. During 2024/25, Protection Inspectors visited 937 high risk premises as part of the proactive RBIP. This was in addition to 782 visits carried out reactively, responding to complaints by members of the public. or following up referrals from partners such as the local authority. The main objective of risk profiling was to target resources in an efficient way, ensuring that engagement activity with businesses was effective. Of the 937 high risk premises visited, 92 per cent required further action or enforcement due to inspectors finding failings with fire safety, indicating that resources were being targeted at the right premises. Operational crews carried out 1,662 engagement visits on medium and low risk business premises. Crews had been trained to an appropriate level to highlight specific fire safety failings. Some of these failings could be resolved by the crews advising on the scene and issuing appropriate documentation, others were more serious or complex and must be referred to the protection team. Over the last three years, the number of issues having to be referred to the protection team was consistently around eight per cent or less of visits. This offered further assurance that the risk modelling was accurate in directing crews to premises which their skill set was aligned with the appropriate premises risk. The Service had created a machine learning model to generate the RBIP using a variety of data sets to identify key attributes which increased the risk of a fire.

The Service was committed to providing clear information and guidance to those it regulated on complying with their legal responsibilities. When arranging inspections, the Service provided written guidance, advice and signpost to videos on the website which explained what to expect during a visit. The outcomes of all inspections were confirmed in writing. Social media messaging was also used to provide general and targeted business safety advice and promote national campaigns. The Service continually reviewed and improved the information on the website and make a range of resources available.

A top-level report showed performance in relation to completing the delivery plan aim to carry out crew engagement visits with business premises. A station level report tracked how many engagement visits were still required by the end of the year. A further threshold report showed the rate of engagement visits done by the stations and monitors that they were within expected threshold corridors. The threshold corridors worked better than fixed targets because they allowed the Service to flex activity up and down to meet other demand. The performance management of Protection Inspectors followed a similar methodology to monitor their progress against higher risk business premises. Compliance was also monitored for issues for the enforcement work carried out by our Inspectors. This allowed the Service to observe that the non-compliance rates were increasing which may be due to the improved ability to identify high-risk properties using our evolving machine-learning methods or that inspectors were uncovering more issues because of enhanced training and mentoring. A Quality Assurance system was in place, focusing on improving and delivering sustained and consistent quality in engagement activity. Operational crews were quality assured by competent Inspectors, whilst Protection Inspectors were quality assured by manager, providing validation of information against legislation and related policies for all risk types.

Volume of Visits: The Committee was impressed by the number of visits completed per year and asked if this frequency was sustainable. The Head of Protection explained that targets for visits were set on a monthly basis, and efforts had been undertaken to ensure that a maximum number of crews were attending commercial premises. Significant work had gone into improving productivity and efficiency to enable this. It was noted too that those visits were in addition to the Service's statutory consultations.

- Non-Compliance: The Committee sought clarity on the Service's arrangements for premises failing to comply with their legal obligations. The Head of Protection explained that, under the Regulatory Reform (Fire Safety) Order 2005, the Service could issue an Enforcement Notice mandating the premises to resolve the fire safety issues identified by a specific date. If a risk to life was identified, the Service could issue a Prohibition Notice which immediately restricted the use of the premises until the issue was resolved. Ultimately, if non-compliance with the enforcement or prohibition notice was observed, the Service could, and did, prosecute the premise's responsible person.
- Data Analysis: The Committee commended the Service for its data driven intelligence and asked if Artificial Intelligence was used to support target prioritisation. The Head of Prevention explained that the Service had created a machine learning model to generate its Risk Based Inspection Programme using a variety of data sets to identify key attributes which increased the risk of a fire.
- Categorisation of Address Lists: The Committee asked if hospitals were classified within the Service's address list. The Head of Protection explained that premises such as hospital would always be featured as a high risk and prioritised accordingly.
- **Funding:** The Committee asked if there was a risk if the withdrawal of government grant funding could impact on delivery of this service. The Head of Protection explained that the baseline budget for staffing and training costs could cover the costs associated with protection engagement should government grant funding cease. For this reason, withdrawal of the grant was not on the Service's risk register.

**Resolved** – That the Fire Authority takes assurance in the Service's commitment to keeping its communities safe by carrying out effective engagement with local businesses through the implementation of the revised Protection Strategy and the Protection Tactical Delivery Plan with the continuing aspiration to be outstanding in keeping communities safe.

**12/25 HIS MAJESTY'S INSPECTORATE OF CONSTABULARY AND FIRE AND RESCUE SERVICES (HMICFRS) UPDATE—** The Committee received a verbal update from the Head of Corporate Assurance explaining that the next round of Inspections would consider matters of internal governance. While a date had not been confirmed yet, the Service's next inspection was expected to later in 2026.