

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

**9 FEBRUARY 2026**

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

**Officers Present:** Matt Sutcliffe – Assistant Chief Fire Officer, Antoinette Diovisalvi – Joint Deputy Chief Finance Officer/Deputy S.151 Officer, Richard Gibson – Area Manager of Services Improvement, Jason Kirby – Area Manager of People and Culture, Dan Meeke – Area Manager of Public Safety and Resilience, Mike Anthony – Head of Organisational Development, Shaun Edwards – Head of Finance, Jamie Morris – Head of Corporate Assurance, 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) and Rejoice Mapeto (Forvis Mazars) were in remote attendance.

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

**01/26 APOLOGIES FOR ABSENCE** – Apologies for absence were received from Nigel Saxby and Karen Cowan. With the Chair’s permission, Nigel Saxby was invited to contribute to the meeting remotely

**02/26 DECLARATIONS OF INTEREST** – No declarations of interest were made with respect to any items on the agenda.

**03/26 MINUTES** – The Committee reviewed the previous set of minutes for accuracy.

In relation to minute 29/25, the Committee asked how the payroll services had progressed since contract expiry in December 2025. It was explained that a procurement exercise was currently underway for a payroll service.

In relation to minute 33/25, the Committee asked whether the recruitment campaign had proceeded. It was explained that recruitment had been paused for a period of three months to allow time to consider wider organisational actions, undertake equality, diversity and inclusion activity, and await confirmation of the Service’s funding settlement.

In relation to minute 36/25, the Committee asked when the proposed Member development session would take place on the Committee scrutiny function. It was explained that this would form part of the programme at the start of the 2026/27 municipal year. Members indicated that they would welcome advance notice of the session.

In relation to minute 36/25, the Committee asked when Members would be invited to the next multi-agency debrief. It was explained that Members would be invited when the next debrief took place.

**Resolved** – That the minutes of the meeting held on 10 November 2025 be approved as a correct record, subject to the following amendment:

Minute 38/25 be amended to read, “From a Service perspective, the report *made* several positive...”.

**04/26 INTERNAL AUDIT REPORTS** – The Committee received reports from TIAA, the Authority’s internal auditors, outlining internal audit activity since the previous meeting. It was confirmed that there were no proposed changes to the Internal Audit Plan and there were no instances of fraud reported. Along with the Mid-Year Follow-Up Report, three other audit reports were submitted; Confidence in Using Staff Feedback Mechanisms; Monitoring of Working Hours; and Joint Estates.

Confidence in Using Staff Feedback Mechanisms – Reasonable assurance was provided, with two important recommendations, both of which had been accepted. The robustness of the staff survey evidence was challenged, with assurance sought on the response rate. It was explained that this represented the highest response rate achieved to date, at just over 60 per cent, and that findings had been strengthened through follow-up focus groups, resulting in a robust evidence base.

Monitoring of Working Hours – No assurance was provided, with six urgent recommendations and six important recommendations, all of which had been accepted. The Committee expressed concern given that no assurance had been provided and sought reassurance that risks were now being effectively managed. It was explained that, since the issues had been identified, a range of mitigating actions had been implemented, including training for staff and managers, updated guidance documents, clearer routes for accessing support, and specific guidance relating to fatigue. The Committee further challenged whether there was a formal mechanism for recording and monitoring working hours. It was explained that a system was in place which produced monthly reports, identified concerns, and set out actions where required.

Clarification was sought on whether work with Fire Watch (the HR system) had delivered the intended outcomes. It was explained that further enhancements to the system were still ongoing. Further challenge explored whether alternative solutions were available should progress not be achieved. It was explained that alternative options, including the use of an internal database, were being considered as a contingency.

The Committee challenged the appropriateness of the target dates challenged the appropriateness of the target dates extending to December 2026 for meeting the recommendations. Members were reassured that these had now been brought forward to the end of March 2026. Given the rating of no assurance, the Committee emphasised the importance of continued oversight of the subject and requested a six-month progress update.

Joint Estates – Limited assurance was provided, with six urgent recommendations and three important recommendations, all of which had been accepted. It was explained that a significant proportion of the mitigation depended on a joint agreement which had not yet been finalised, and that this was linked to work being undertaken by external consultants from a capital perspective. Given the limited assurance rating the Committee requested a six-month progress update to seek assurance all actions have either been completed or were on track.

The Mid-Year Follow-Up Report provided a snapshot of progress made against previous audit recommendations as of September 2025. Owing to extenuating circumstances it was not possible for Internal Audit to submit this report to the November 2025 Committee meeting and therefore it was acknowledged that progress and management comments were now dated. Members were assured that progress had been made and that some recommendations had now been completed. Members would be provided with a more up to date picture of progress at its July 2026 meeting when receiving the Year-End report.

**Resolved** – (a) That the internal audits be received, and

(b) That the progress reports against Monitoring of Working Hours and Joint Estates audit recommendations be provided to the Committee in six months' time.

**05/26 FINANCE AND PROCUREMENT UPDATE 2025/26 FOR THE PERIOD ENDING 31 DECEMBER 2025** – The Committee received a report of the Joint Deputy Chief Finance Officer/Deputy Section 151 Officer detailing the current financial position based on information to 31 December 2025. The Committee was advised the overall revenue position had a modest overspend of £34,000. The capital programme showed expenditure of £8.437 million against an allocation of £8.156 million.

The Committee sought clarification on whether underspends on pay should be interpreted positively. It was explained that the Service's current preference was to flag overspends as red, but that this approach would be reviewed. A request was made for future financial reports to more clearly highlight new or emerging updates. Officers committed to move towards reporting by exception where appropriate.

Further clarification was requested regarding pension opt-outs, including whether the implications for staff were being clearly communicated. It was explained that opting out was a personal choice which the organisation could not control, but that staff were provided with information and guidance, including in relation to ill-health retirement.

Procurement of a new financial management system was discussed, with full implementation now being pushed back to April 2028.

**Resolved** – That future report narrative be reported by exception or highlight changes since the previous quarter report.

**Recommended to Fire Authority** – That the Authority takes assurance of its financial position for the period ending 31 December 2025.

**06/26 REVIEW OF ANTI-FRAUD RELATED POLICIES** – The Committee received a report of the Area Manager of Service Improvement, detailing the Service's anti-fraud related policies, including the Anti-Fraud and Corruption Policy, Whistleblowing Policy, Professional Standards Anti-Fraud and Corruption Policy and Professional Standards.

Clarification was sought on the timescale for the consolidation of the anti-fraud related policies into one policy statement. It was envisaged that this work would be completed during the next financial year.

The Committee suggested external anonymous reporting routes, including Crimestoppers, HMRC anonymous reporting and Action Fraud, should be more explicitly referenced within the policies to strengthen staff assurance and confidence in reporting concerns safely.

Clarification was sought on whether incidents of personal fraud disclosed by staff were monitored through organisational arrangements. It was explained that multiple reporting and monitoring channels existed within the policies and the wider suite of related policies.

The Committee referenced the Economic Crime and Corporate Transparency Act 2023 and the use of the term "associated persons" under the Bribery Act 2010 which includes employees, agents and any person performing services for or on behalf of the organisation. It was questioned whether this terminology should be reflected within the policy framework.

It was also suggested that employees should also be encouraged to report none-work related instances of fraud. The Committee was reminded that the Core Code of Ethics that all employees were expected to abide by extended to personal as well as professional affairs. There were also a number of different support routes available to staff to raised concerns, in

particular through the external Fire and Rescue Speak Up service powered by Crime Stoppers.

Clarification was sought on how the effectiveness of the anti-fraud arrangements was monitored in practice. It was explained that the Chair would be informed of any instances of fraud, providing oversight at Committee level.

**Recommended** – That the term “associated persons” under the Bribery Act 2010 be considered including in the relevant anti-fraud related policy.

**Recommended to Fire Authority** – That the Authority takes assurance from the review process undertaken for each anti-fraud related policy.

**07/26 AMENDMENT TO THE CONSTITUTION – PART 2, ARTICLE 2 – MEMBERS OF THE HUMBERSIDE FIRE AUTHORITY** – The Committee received a report from the Monitoring Officer, outlining a proposed change to the Constitution. At its meeting on 28 November 2025, the Humberside Fire Authority (HFA) resolved that Committee should review a proposed amendment to the Constitution concerning the terms of office for Members.

The proposed amendment introduced a new clause to Article 2, specifying that a Member ceases to hold office on HFA, and any entitlement to allowances, immediately upon changing political allegiance. This change was intended to maintain political proportionality and prevent public funds from being paid to individuals who no longer represent the electorate under which they were appointed to HFA.

Membership of fire authorities was based on political proportionality, which reflected the composition of political parties within the appointing constituent authorities. When considering constitutional provisions related to political allegiance, it was essential to distinguish between registered political parties and internal sub-groups or factions within those parties. Political allegiance referred to membership of a registered political party under the Political Parties, Elections and Referendums Act 2000. These parties were recognised for the purposes of proportionality calculations under the Local Government and Housing Act 1989.

Within these main parties, there were informal or organised sub-groups/factions that represent different ideological positions or policy priorities. For the purposes of HFA Constitution, political allegiance refers to membership of a registered political party, or as an independent. Internal factions, sub-groups, or associations within a political party do not constitute a change of political allegiance.

The proposed amendment was driven by the need to uphold financial accountability and democratic integrity within HFA. Membership of the Authority was based on political proportionality, reflecting the composition of political parties within the appointing local authorities. When a Member changes political allegiance, they no longer represent the electorate under which they were appointed to HFA. Continuing to pay allowances in such circumstances would result in public funds being allocated to an individual who no longer fulfils their representative role. By requiring that allowances cease immediately upon a change of political allegiance, HFA ensures that taxpayer money is spent appropriately, aligns with statutory governance principles, and maintains transparency and value for money in the use of public resources.

**Recommended to Fire Authority** – That the Authority approves the proposed amendment to Part 2, Article 2 of the Constitution.

**08/26 SCRUTINY ITEM: MANCHESTER ARENA INQUIRY** – The Committee received a report of the Head of Emergency Preparedness, which detailed the Services response to the Manchester Arena Inquiry, including the national response to its findings and the relevance for Humberside Fire and Rescue Service in terms of emergency preparedness, multi-agency

working and public assurance. It was explained that the Service had reviewed in full the recommendations arising from Volume 2 of the Inquiry, including the twenty-two principal recommendations and the associated agency-specific recommendations, to assess their relevance to the Service's statutory duties, operational responsibilities and governance arrangements. Members were advised that the Inquiry recommendations had been incorporated into the Service's Strategic Improvement Plan, with key themes identified and translated into defined workstreams to ensure that learning was embedded in a structured and auditable way. It was noted that, although a number of recommendations were directed at specific organisations, the Service had considered operational parallels within its own arrangements. This approach ensured that relevant learning was applied proportionately and consistently, strengthening multi-agency interoperability and operational readiness.

The programme of improvements was highlighted to the Committee delivered in response to the Inquiry, including enhancements to command, control, communication and coordination arrangements, alongside improvements in training, exercising and assurance processes, all aligned with national guidance and inspection expectations. Members were advised that progress against the Inquiry-related actions was subject to ongoing governance and oversight through established performance management and assurance frameworks, ensuring that improvements were sustained and reviewed as part of business-as-usual arrangements. Assurance was provided that the actions taken demonstrated a clear commitment to learning from the Manchester Arena Inquiry, strengthening preparedness and resilience, and maintaining a strong focus on public safety, effective partnership working and continuous improvement.

- **Joint Emergency Services Interoperability Principles** - Clarification was sought on the application of Joint Emergency Services Interoperability Principles (JESIP) arrangements in relation to the Connection Live arena in Hull or other high football venues. It was explained that JESIP principles were applied across all high-football venues in partnership with Humberside Police, and that a specific exercise was due to be undertaken in relation to Connection Live to test multi-agency interoperability.
- **Decision-Making Models** - Challenge was raised regarding whether learning from the Covid Inquiry, particularly around decision-making, had prompted consideration of alternative decision-making models. It was explained that JESIP had been adopted to ensure consistent decision-making across emergency services, but that work was also underway through the Local Resilience Forum to promote a systems-based approach. This was intended to avoid rigidity and enable more effective joint working with partner agencies that might operate different decision-making models.

**Recommended to Fire Authority** – (a) That the Authority be assured that the Service has addressed all areas identified as shortcomings within the Manchester Arena Inquiry report and implemented robust measures to prevent any recurrence of the issues identified.

(b) That the Authority be assured that appropriate processes are in place to maintain Joint Emergency Services Interoperability Principles command principles and the multi-agency exercise programme as part of business-as-usual arrangements.

(c) That the Authority be assured of the Service's ability to monitor National Fire Chiefs Council updates and to integrate future national guidance, ensuring that front-line firefighters are provided with the guidance required to support effective operational delivery.

**09/26 SCRUTINY ITEM: PERFORMANCE DEVELOPMENT REVIEWS** – The Committee received a report of the Head of Workforce Development and Culture, which detailed the purpose of the PDR process in supporting individual performance, wellbeing and development, and in ensuring that individual objectives were aligned with the Service's strategic priorities. It was explained that the PDR framework provided a structured and consistent approach for reviewing performance, setting objectives and identifying development needs, and that it formed a key part of the Service's wider people management and assurance arrangements. Members were advised of the current level of PDR completion across the Service and how this was monitored. The presentation highlighted the role of managers in ensuring reviews were completed in a timely and meaningful way, and how oversight arrangements were used to track progress and address gaps.

It was noted that the PDR process supported fairness, consistency and equality, with guidance in place for managers to promote high-quality discussions and ensure that reviews were conducted in line with policy and organisational values. Challenges affecting completion rates were acknowledged, including operational demands and capacity pressures, and outlined the actions being taken to improve consistency and timeliness. These included clearer expectations for managers, reminder processes and escalation where reviews were overdue. The Committee was advised that learning and development needs identified through the PDR process were used to inform training plans and workforce development activity, supporting continuous improvement and capability across the Service. The PDR process remained a central mechanism for performance management, staff engagement and development, and that continued focus was being applied to improving completion rates, the quality of reviews and alignment with organisational objectives.

**360-Degree Feedback and Integration with PDRs** - Clarification was sought on how 360-degree feedback currently operated and how outsourcing the process would work in practice. It was explained that the process had previously been delivered through the T2 Leadership provider, that relied heavily on internal manual input and administration, with limited ability to benchmark outcomes across the sector. A new provider was in the process of being appointed to make the process more efficient and relieve the administrative burden of managing this process. It was explained that the feedback would be linked more closely to the PDR process, enabling individuals to receive structured feedback on leadership behaviours and interpersonal relationships.

- **Health and Safety Training Courses** - Clarification was sought on why a high proportion of Health and Safety course requests, particularly IOSH courses, were being declined. It was explained that IOSH qualifications were a requirement for Crew Managers, but that refresher courses were not always necessary for revalidation. It was also noted that there were cost implications and that course approval was role-specific.
- **Initial Course Requests and Role Relevance** - Further concern was raised regarding the number of initial course requests being declined. It was explained that this was often due to individuals requesting courses that were not relevant to their current role, highlighting a need to improve the quality and clarity of PDR discussions. Members indicated that expectations around development and training requirements needed to be communicated more clearly through the PDR process.
- **Management Accountability** - Clarification was sought on whether staff felt that issues and actions escalated through the PDR process were reported back to them. It was explained that the Service was at an early stage of refreshing the process and that a key focus was ensuring that actions identified were followed through. Members emphasised the importance of accountability and consequences for managers where agreed actions were not delivered. It was

explained that staff would be given greater autonomy and confidence to challenge progression where concerns existed, and that the introduction of the new Quality Assurance Manager would play a key role in ensuring consistency across the process.

- **Consistency and Decision-Making on Course Approvals** - It was noted positively that there appeared to be consistency in the types of training requests being declined. However, concern was raised regarding the lack of clear rationale recorded where requests were not approved. It was explained that the aim was to achieve 100 per cent completion of decisions with an accompanying rationale.
- **Expectations Around Mandatory Training** - Clarification was sought on when many staff should be expected to undertake certain courses. It was explained that mandatory courses were generally completed on promotion, meaning uptake was linked to progression rather than ongoing demand.
- **Training and Support for Managers Conducting PDRs** - Clarification was sought on how managers were trained to conduct effective PDRs. It was explained that online training sessions were delivered via Microsoft Teams, with the intention of reaching all managers and reinforcing guidance on how to carry out effective and meaningful performance development reviews.

**Resolved –**

(a) That the Committee welcomes the decision to outsource the 360-degree feedback process, noting that this is expected to improve the quality, objectivity and developmental value of feedback provided to individuals.

(c) That the Committee recognises the ongoing consultation on the future structure of Organisational Development, which is intended to support more innovative and creative approaches to staff development.

(d) That the Committee supports the Service's continued commitment to continuous improvement in staff development.

**Recommended to Fire Authority –** (e) That the planned improvements to the Performance Development Review (PDR) process, to be implemented following the upgrade of the digital platform, be endorsed.

**10/26 GAS COMMITTEE SCRUTINY PROGRAMME 2025/26** – The Committee Manager submitted a report summarising the Committee's Scrutiny Programme 2025/26.

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