AGENDA

HUMBERSIDE
Fire Authority

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Meeting	**Governance, Audit and Scrutiny Committee**
Date	**Monday, 9 November 2026**
Time	**10:00**
Location	**Humberside Fire & Rescue Service Headquarters, Summergroves Way, Hull, HU4 7BB**

Item Number	Item	Page Number	Lead	Decision required
1.	Apologies for absence	-	Monitoring Officer/ Secretary	To record
2.	Declarations of Interest	-	Monitoring Officer/ Secretary	To declare
3.	Minutes - Governance, Audit and Scrutiny Committee 6 July 2026	1 - 6	Chairperson	To approve
4.	External Audit Completion Report 2025/26	*To follow*	Forvis Mazars	To receive and make any recommendations to the HFA
5.	External Audit Annual Report 2025/26	*To follow*	Forvis Mazars	To receive and make any recommendations to the HFA
6.	Annual Statement of Accounts 2025/26 (Audited)	*To follow*	Executive Director of Finance/S.151 Officer	To receive and make any recommendations to the HFA
7.	Finance & Procurement Update – Period Ending 30 September 2026	8 - 34	Executive Director of Finance/S.151 Officer	To receive and make any recommendations to the HFA
8.	Treasury Management Mid-Year Update Report 2026/27	35 - 43	Executive Director of Finance/S.151 Officer	To receive and make any recommendations to the HFA
9.	Internal Audit Reports	44 - 58	Tiaa	To receive and make any recommendations to the HFA
10.	Strategic Risk Update	59 - 62	Head of Corporate Assurance	To receive and make any recommendations to the HFA
11.	Scrutiny Item: Procurement and Commercial	63 - 67	Head of Procurement	To receive and make any recommendations to the HFA
12.	Scrutiny Item: Emergency Response Driving	68 - 74	Head of Training	To receive and make any recommendations to the HFA
13.	Scrutiny Work Programme	75 - 78	Senior Corporate Assurance Officer	To receive

HUMBERSIDE FIRE AUTHORITY

GOVERNANCE, AUDIT AND SCRUTINY COMMITTEE

14 JULY 2026

PRESENT: Independent Co-opted Members Chris Brown (Chair), Karen Cowan, Melissa Dearey, Nigel Saxby, and Gerry Wareham.

Officers Present: Matthew Sutcliffe – Assistant Chief Fire Officer, Antoinette Diovisalvi – Joint Deputy Chief Finance Officer/Deputy S.151 Officer, Donna Chambers – Assistant Director of People and Culture, Richard Gibson – Area Manager of Service Improvement, Dan Meeke – Area Manager of Resilience and Public Safety, Shaun Edwards – Head of Finance, Jamie Morris – Head of Corporate Assurance, Glyn Saunders – Head of Estates and Resilience, Sara Laverack – Deputy Monitoring Officer/Secretary, and Rob Close – Committee Manager.

Rejoice Mapeto – Forvis Mazars (External Auditor), and David Robinson – TIAA (Internal Auditor) were also in attendance.

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

26/26 APPOINTMENT OF THE CHAIR FOR 2026/27 – The Deputy Monitoring Officer/Secretary invited nominations for the appointment of the Chair of the Committee for the 2026/27 municipal year. Chris Brown was nominated by Gerry Wareham and seconded by Melissa Dearey, and the nomination was supported unanimously. No further nominations were received.

Resolved – That Chris Brown be appointed Chair of the Governance, Audit and Scrutiny Committee for the 2026/27 municipal year.

27/26 APOLOGIES FOR ABSENCE – No apologies for absence were received.

28/26 DECLARATIONS OF INTEREST – No declarations of interest were made with respect to any items on the agenda.

29/26 MINUTES – Resolved – That the minutes of the meeting held on 13 April 2026 be approved as a correct record.

30/26 ANNUAL STATEMENT OF ACCOUNTS (UNAUDITED) 2025/26 – The Committee received a report of the Deputy Chief Finance Officer/Deputy S.151 Officer presenting the Authority's full unaudited Statement of Accounts for 2025/26.

Members were advised that the draft unaudited Statement of Accounts had been signed and published on the Authority's website on 26 June 2026, ahead of the Government deadline of 30 June 2026 for sign-off by the S.151 Officer. The accounts were subject to audit by Forvis Mazars, the Authority's external auditor, whose work was expected to commence in the summer of 2026 with completion required by 31 January 2027. The accounts captured the financial impact of the Authority's activities during 2025/26 and presented a picture of robust finances despite the significant effects of pay and non-pay inflation. The Chair commended the Finance Team on the timely production of the accounts.

The Committee asked whether historical data, particularly around casualties, could be provided for comparison within the service performance summary, and queried the context for the deliberate fires figure. It was explained that the report provided a factual output and that, in future, a link to the biannual performance report could be included, which would offer comparative and contextual detail. On deliberate fires, the Service worked with the police, whilst its powers were limited, it was involved in investigation and prevention activity, and the vast majority of deliberate fires were low-level in nature.

In response to questions on the detail of the accounts, Members were advised that the content was consistent with previous years, that the £1.4m variance was correctly recorded as an overspend, met by a transfer from reserves, that the movement in the collection fund position reflected the Authority's share of the surplus or deficit reported by the billing local

authorities, and that the reserve figures were determined by an annual calculation, with the absence of movement reflecting that the Authority had managed within its existing budget. It was confirmed that no issues were anticipated with the forthcoming audit.

Asked whether depreciation and amortisation considerations would prompt a move towards smaller appliances, officers confirmed there were no concerns with the financial management of the fleet. Larger appliances costed in the region of £350,000 and smaller appliances closer to £200,000. The options were being considered, but the fleet needed to remain reflective of the risk carried by the Service, as determined by the Medium Term Resource Strategy (MTRS). Vehicles were maintained for up to 15 years before being auctioned or donated and were rotated between busier stations so that they depreciated at a consistent rate.

On the employment tribunal case, it was explained that the timescale for resolution was not known and that the item must remain in the accounts until the Authority was advised otherwise. The associated uncertainty around liabilities would be managed by amending the assumptions and adjusting the accounts in the following year.

Recommended to the Fire Authority – That the unaudited Statement of Accounts 2025/26 be endorsed to the Fire Authority for approval subject to a corrected date in the report.

31/26 TREASURY MANAGEMENT OUTTURN 2025/26 – The Committee received a report of the Deputy Chief Finance Officer/Deputy S.151 Officer reviewing the Authority's treasury management activity and Prudential Indicators for 2025/26, in accordance with the CIPFA Code of Practice on Treasury Management.

Members were informed that the Authority's temporary investments totalled £17.0m as at 31 March 2026, with interest earned of £0.964m representing a rate of return of 4.73 per cent against a benchmark of 3.75 per cent. Interest earned was £0.214m higher than budgeted, reflecting higher interest rates and higher cash balances than anticipated. No short-term borrowing had been undertaken during the year, the Authority repaid £0.8m of PWLB debt upon maturity and took no new borrowing, leaving closing PWLB debt of £15.0m at 31 March 2026. The Authority had operated wholly within its approved Prudential Indicators, and the under-borrowed position of £7.5m would save approximately £0.4m in interest each year until the borrowing was taken.

The Committee commended officers on the Authority's sound financial management. In response to a question on the effect of interest rates, it was explained that if rates were high the Authority would utilise short-term borrowing and keep its capital programme under review. On investments, it was confirmed that the cash balance held for investment had performed better than anticipated.

Recommended to the Fire Authority – That assurance be taken from the treasury management activities undertaken during 2025/26 and the Prudential Indicators, as detailed in the report and its Appendix 1.

32/26 EXTERNAL AUDIT – ANNUAL STRATEGY MEMORANDUM 2026/27 – The Committee received the Audit Strategy Memorandum of Forvis Mazars for the year ending 31 March 2026, setting out the planned scope, approach and timing of the external audit, the significant and enhanced audit risks identified, materiality, fees, and the auditor's consideration of its independence.

The external auditor confirmed that the significant audit risks remained consistent with the prior year, comprising the valuation of property, plant and equipment, management override of controls, and the valuation of the net defined benefit pension liability. Overall materiality was anticipated at £1.650m, with performance materiality of £1.320m and a specific materiality of £5,000 applied to senior officers' remuneration including exit packages.

In response to a question, the auditor advised that no issues were foreseen at present. The audit would commence in September 2026 and sufficient time was available ahead of the backstop deadline.

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

33/26 INTERNAL AUDIT: MONITORING OF SECONDARY EMPLOYMENT – RECOMMENDATIONS PROGRESS – The Committee received a report of the Assistant Director of People and Culture setting out the actions undertaken and planned to address the findings of His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) inspection and the recommendations of the internal audit review of the monitoring of working hours of employees with declared secondary employment.

Members were advised that arrangements now in place included targeted manager training and guidance issued in February 2026, routine discussion of secondary employment within On Call one-to-one meetings, more formalised 7-day and 56-day checks with reporting to senior officers, monthly HR-led dip sampling, an updated PDR form with a dedicated secondary employment section, an annual data cleanse, next due July 2026, and automated monitoring through the FireWatch system. Quarterly letters to the main secondary employer, HFRS Solutions, and quarterly HR meetings with Heads of Function would continue, and the Secondary Employment and Outside Interests Policy and associated EIA had been reviewed.

The Committee asked what could be done in respect of employees with external employment. It was acknowledged that the Service was reliant on individuals declaring their position through the annual data cleanse and PDR conversations, but that considerable due process now surrounded secondary employment. Hours were recorded daily within the FireWatch system, which contained inbuilt rotas and flagged where individuals exceeded their Working Time Regulations hours, enabling appropriate management action. A new governance structure was in place around the resulting reports, with internal staff supporting those roles and the Head of HR challenging managers on the content of the reports.

In relation to employees holding dual contracts, it was explained that On Call availability was recorded as rest time, given that the timing of emergencies could not be known, and that the command-and-control system would draw this information through into a single report. Members observed that the Service's responsibility in this area had its limits. It was noted that the objective was to provide assurance that the Service was doing the right thing. It was also confirmed that the wellbeing of staff with secondary employment was considered, particularly those running their own businesses, in relation to stress. The Committee confirmed that it was assured by the arrangements described.

Resolved – That assurance be taken from the actions outlined in response to the HMICFRS inspection finding.

34/26 INTERNAL AUDIT – JOINT ESTATES SERVICE – RECOMMENDATIONS PROGRESS – The Committee received a report of the Head of Estates and Resilience providing an update on the actions identified through the TIAA internal audit of the Joint Estates Service (JES) and how these had been addressed within the revised JES Collaboration Agreement, effective from 1 April 2026.

Members noted that five of the six audit recommendations were complete, with improvements embedded across governance (including the Joint Estates Board and escalation to the Transformation Board), an expanded KPI and performance framework, operational oversight, business continuity, and financial transparency through open-book accounting. One action remained in progress relating to the development of a statutory compliance register, which would be monitored through Joint Estates Board governance arrangements. The associated risk rating had been reduced from high to medium, with the next milestone in October 2026 to support implementation from April 2027.

In response to a question, it was confirmed that the outstanding recommendation would be completed within the current financial year. The Committee was advised that the revised agreement identified responsibilities and KPIs, the delivery of which could be monitored through the facilities management software. The JES was seeking a new system, and the Service was exploring bringing the facilities management system in-house within Humberside to offer an improved service to the end user, with a system having been onboarded by the

team. Whilst there was a clear risk in transferring the register in-house, the efficiency benefits were considered to outweigh it, with an in-house cost of approximately £10,000 compared with the Service's contribution to the joint system. It was further explained that the October 2026 milestone related to the review of the whole collaboration agreement with the police, with the annual review cycle running from October to April.

Resolved – That assurance be taken in the accuracy and completeness of the report and the progress made in addressing the findings of the TIAA audit of the Joint Estates Service.

35/26 INTERNAL AUDIT – DIRECTOR OF AUDIT OPINION AND ANNUAL REPORT 2025/26 – The Committee received the 2025/26 Internal Audit Annual Report of TIAA, summarising the outcomes of the reviews carried out on the Service's framework of governance, risk management and control.

The Internal Auditors' annual opinion was that, for the areas reviewed during the year, the Service had reasonable and effective risk management, control and governance processes in place. All 65 days of planned coverage had been delivered, comprising ten assurance reviews of which two received Substantial Assurance, five Reasonable Assurance, two Limited Assurance and one No Assurance (Monitoring of Working Hours). A total of 12 urgent, 24 important and 5 routine recommendations were made during the year, and all internal audit performance targets were met or exceeded.

The Committee observed that the compliance risk area stood out within the analysis of recommendations. Officers explained that audit coverage was deliberately directed at areas where issues were likely to be found, and that compliance findings were usually about the effective recording of information where activity required by policy was being undertaken but not always recorded. The Service was compliant with all legislation and significant work was underway to address recording practices. Contributing factors included the transient nature of some posts and shift rotation, meaning that keeping training records up to date could be a challenge, and a campaign was in progress to ensure policy was applied consistently. TIAA added that the number of recommendations had been driven largely by two audits, including Monitoring of Working Hours, which skewed the overall figures.

Asked whether policies were too demanding, TIAA advised that the issue was more one of staff awareness. Policies were driven by legislation, and record keeping was often the challenge. On the consequences of non-compliance, officers confirmed that the Service was alive to the issue, had met with Heads of Function, and had put in place additional measures and clarity.

The Committee sought further detail on the Limited Assurance opinion for Multi Agency Training and whether compliance applied there. TIAA confirmed the review had been reported to the Committee previously; five recommendations had been made, of which four related to compliance and three were priority two, typically concerning late renewal of training. Officers undertook to review the audit after the meeting and circulate additional information to Members. It was also noted that new exercises were held in the exercise hub with multi-agency partners, and that the Health and Safety team audited the exercises to ensure they remained reflective of the Service's risk.

Resolved – That the Internal Audit Director of Audit Opinion and Annual Report 2025/26 be received.

36/26 INTERNAL AUDIT REPORTS – The Committee received the Summary Internal Controls Assurance (SICA) report of TIAA, providing an update on emerging governance, risk and internal control issues and progress against the 2025/26 and 2026/27 Annual Plans.

Since the previous meeting, final reports had been issued in respect of Talent Development (Reasonable), Visibility of Senior Managers (Reasonable), ICT Management Controls (Substantial), Key Financial Controls (Substantial) and the year-end Follow Up, together with the first review of 2026/27, Project Management (Reasonable). No Priority 1

recommendations had been made since the previous SICA report, no changes had been made to the approved plan, and no frauds or irregularities had been notified.

In response to a question on project costs within the Project Management review, officers confirmed the finding had been addressed; it was a governance matter concerning a clearer line of reporting and was now complete.

On the Visibility of Senior Managers review, which stemmed from an HMICFRS Area for Improvement, officers explained that the perception of visibility related in practice to station managers rather than the Strategic Leadership Team. A range of activities had been undertaken in response, and a report detailing these would be presented to the Fire Authority. The three lines model was used to ensure governance was sustainable, encompassing SLT visits and the measurement of outputs and outcomes, recognising that Areas for Improvement of this kind were inherently subjective. The Service was also taking creative approaches to increase visibility across the organisation, including different types of briefings and guest speakers, and had reviewed how it communicated with staff on full-time shift systems. Internal audit coverage was deliberately directed at areas that might fall short of best practice, providing independent verification. Visibility would be measured through the staff survey and focus groups, taking place in August and September.

Members also queried whether the priority rating would now reduce, and the position of the recommendation. TIAA confirmed that the priority would drop if the audit were reperformed now, and that whilst some recommendations could be difficult to implement and embed, the recommendation in question was complete, with guidance and policies having been updated.

Resolved – That the Internal Audit reports be received**.**

37/26 ANNUAL STATEMENT OF ASSURANCE 2025/26 – The Committee received a report of the Area Manager of Service Improvement presenting the draft Annual Statement of Assurance 2025/26, produced in accordance with the Fire and Rescue National Framework for England.

The Statement provided assurance that robust arrangements were in place across financial, governance and operational matters, and that due regard had been paid to the expectations set out in the Community Risk Management Plan 2025-28 and the requirements of the National Framework. Members noted that the Service had completed all 15 recommendations of the HMICFRS thematic inspection into the handling of misconduct within the deadlines set.

Recommended to the Fire Authority – That the draft Annual Statement of Assurance 2025/26 be endorsed for approval by the Fire Authority.

38/26 ANNUAL GOVERNANCE STATEMENT 2025/26 – The Committee received a report of the Area Manager of Service Improvement presenting the draft Annual Governance Statement (AGS) 2025/26, providing an overall assessment of the effectiveness of the Authority's governance arrangements for the period 1 April 2025 to 31 March 2026, in compliance with the Accounts and Audit Regulations 2015 and informed by the CIPFA/Solace Delivering Good Governance in Local Government Framework (2016 Edition) and its May 2025 Addendum.

The review had concluded that governance arrangements were fit for purpose during 2025/26, that no significant governance failures had been identified, and that arrangements were in place and operating effectively across the seven principles of good governance, supported by a robust system of internal control and assurance.

Recommended to the Fire Authority – That the draft Annual Governance Statement 2025/26 be endorsed for approval by the Fire Authority.

39/26 ANTI-FRAUD AND CORRUPTION STATEMENT 2025/26 – The Committee received a report of the Area Manager of Service Improvement presenting the draft Anti-Fraud and

Corruption Statement 2025/26, setting out the arrangements in place to manage and counter the risk of fraud and corruption to the Authority.

Members noted that the Committee had reviewed the anti-fraud related policies at its meeting of 9 February 2026 and that its recommendations to enhance the policies had been implemented. Appropriate anti-fraud arrangements had been maintained during 2025/26 through regular policy review, whistleblowing mechanisms and the Service's relationship with Internal Audit, including participation in the Cabinet Office's National Fraud Initiative. No allegations of fraud, bribery or corruption had been reported during the year.

Recommended to the Fire Authority – That the draft Anti-Fraud and Corruption Statement 2025/26 be endorsed for approval by the Fire Authority.

40/26 USE OF REGULATION OF INVESTIGATORY POWERS ACT (RIPA) 2000 – ANNUAL REPORT 2025/26 – The Committee received a report of the Area Manager of Service Improvement on the Authority's use of powers under the Regulation of Investigatory Powers Act 2000 and the Investigatory Powers Act 2016 during 2025/26.

Members were advised that over the course of 2025/26 no covert surveillance, nor any requests for covert surveillance activity, had been undertaken, and that the Authority had not been subject to any investigation by the Investigatory Powers Commissioner's Office.

In discussion, it was confirmed that the Authority had never found it necessary to exercise its covert powers, and that if it ever did so it would be alongside police colleagues and it was difficult to envisage a situation in which the powers would be required. The power was delegated to the Chief Fire Officer, and annual reporting was required irrespective of use. Asked whether the powers had been considered for internal surveillance, officers explained that this had been considered but that surveillance was preferred to be used overtly, as a preventative measure.

Resolved – That the update be received.

41/26 ANNUAL REVIEW OF STRATEGIC LEADERSHIP TEAM REGISTER OF INTERESTS – The Committee received a report of the Area Manager of Service Improvement supporting its responsibility under the Constitution (Part 2, Article 6, Section 6.4.6(a)) to maintain oversight of Strategic Managers' registers of interests.

Members noted that the Strategic Leadership Team Register of Interests was reviewed at least annually and updated as necessary to reflect changes in personnel or declared interests, and was published on the Service's website in the interests of transparency and public accountability. The annual review had been completed. It was also noted that declarations of interests were examined by the external auditors as part of the audit process.

Resolved – That the contents of the report and the arrangements in place for the review and publication of the Strategic Leadership Team Register of Interests on the Service's website be noted.

42/26 SCRUTINY WORK PROGRAMME – The Committee received the Scrutiny Work Programme for 2026/27, setting out the topics, scope, sources and lead officers for scrutiny activity across the year, including Procurement and Commercial and Emergency Response Driving (9 November 2026), Responding to Fires and Other Emergencies and Health and Wellbeing of the Workforce (8 February 2027), and Communication and Engagement and Environmental Sustainability (8 March 2027).

Resolved – That the Scrutiny Work Programme be received.

	Agenda Item No. **7**
Governance, Audit and Scrutiny 9 November 2026	**Report by the Executive Director of Finance/S.151 Officer**

FINANCE AND PROCUREMENT UPDATE 2026/27 FOR THE PERIOD ENDING 30 SEPTEMBER 2026

1. SUMMARY

1.1 This report highlights the current financial position based on information to 30 September 2026.

1.2 The end of year projections are set out at section 4.1 for the revenue budget, capital programme and pensions account.

2. RECOMMENDATIONS

2.1 It is recommended that the GAS Committee takes assurance of the Authority's financial position for the period ending 30 September 2026.

3. BACKGROUND

3.1 The Quarterly Finance and Procurement Update is provided to Members four times a year with the financial position at 30 June, 30 September, 31 December and 28 February.

4. PERIOD ENDING 30 SEPTEMBER 2026

4.1 The summary estimated outturn position for the current financial year, based on information to 30 September 2026, is as follows:

CATEGORY	2026/27 OUTTURN PROJECTION
HFA	
Revenue Budget	£0.08m underspend
Capital Programme	£6.099m spend against a £11.010m allocation
Pensions Account	£15.590m deficit

4.2 Further details on these areas can be found in Appendix 1.

5. EQUALITY, DATA PROTECTION & RISK IMPLICATIONS

5.1 There is no requirement to carry out an Equality Impact Analysis (EIA) and/or Data Protection Impact Assessment (DPIA) as this report does not relate to a policy or service delivery change or involves the processing of personal data.

5.2 Associated risks have been duly assessed and are captured on the Risk and Opportunity Register as a Strategic risk (Reference 2023/24 – 01 Financial Constraints Around National Grant Funding).

6. CONCLUSION

6.1 Members should take assurance from this report and the Authority's financial position for the period ending 30 September 2026.

Martyn Ransom
Executive Director of Finance/S.151 Officer

Officer Contact

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Background Papers

2026/27 Quarterly Finance and Procurement Update working papers

Glossary/Abbreviations

EIA	Equality Impact Assessment
DPIA	Data Protection Impact Assessment
S.151	Section 151 Officer under the Local Government Act 1972

HUMBERSIDE
Fire & Rescue Service

QUARTERLY FINANCE AND PROCUREMENT UPDATE

For the period ending 30th September 2026



Safer communities, safer firefighters

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1. Executive Summary

At Quarter Two the Service is in a sound financial position, with a revenue underspend forecast of £8k for 2026/27 and total reserves projected to be £14.9m at 31 March 2027.

The capital replacement reserve remains strong at £6.8m, with plans in place to gradually release this over the next five years to meet some of the planned investments.

Significant work undertaken during the first half of 2026/27 has enabled the Authority to fully deliver the £1.2m efficiency target included within the approved budget. A further £0.4m of recurring savings has also been identified, placing the Authority in a strong position to deliver future savings requirements within the Medium-Term Resource Strategy while maintaining frontline service delivery and providing flexibility to respond to changing organisational priorities

The Procurement Team continue to monitor and review risk critical contracts and have awarded contracts of £3.4m in the second quarter of the financial year (£7.1m year to date). Alongside this, 33 contract management meetings have been conducted to ensure effective service delivery and value for money is maintained.

Three contracts were awarded outside of the Fire Authority Constitution between July and September 2026. These were exceptional circumstances due to the urgent nature of the procurement and need to provide continuity of services.

Martyn Ransom
Executive Director of Finance/S151 Officer
20/10/26

2. Finance

2.1 Revenue

The table below shows the actual and committed expenditure as at 30th September 2026 for revenue, compared to the 2026/27 profiled budget for the same period. The table also shows the forecasted outturn for the full year based on current levels of income and expenditure plus any known variances to the end of the financial year.

2026/27 Revenue Monitoring Summary
1st April 2026 to 30th September 2026 (Period 06)

	Original Budget	Revised Budget	30 September 2026		Full Year			Status	Notes
			Profiled Budget	Actual and Committed	Projection	Variance			
	£'000	£'000	£'000	£'000	£'000	£'000	%		
Pay	51,920	50,875	25,307	25,189	50,965	90	0.18	Red	1
Non Pay	10,771	11,816	7,702	7,579	11,555	(261)	(2.21)	Green	2
Income	(3,091)	(3,091)	(1,546)	(2,246)	(3,147)	(56)	1.81	Green	
Interest Receivable	(500)	(500)	(250)	(268)	(555)	(55)	11.00	Green	
Capital Financing	3,569	3,569	332	179	3,843	274	7.68	Red	3-4
Transfers to / (from) Reserves	(580)	(580)	-	-	(580)	-	-	Green	
Net Budget Requirement	**62,089**	**62,089**	**31,545**	**30,433**	**62,081**	**(8)**	**(0.01)**	Green	

Notes

The following details the reasons for the projected variances that are in excess of £100k, shown in the table on page 5:

1. The forecast overspend reflects a higher volume of operational incidents during the first six months of 2026/27, together with an increase in the average duration of incidents attended.

2. The forecast underspend reflects a combination of lower than anticipated Business Rates liabilities, savings associated with the disposal of a property, and insurance costs remaining below budgeted levels.

3. The favourable variance reflects the Authority's decision to postpone borrowing pending further assessment of market conditions and interest rate movements.

4. This forecast additional spend is due to an additional revenue contribution to capital outlay to cover the fitting out element of the new stores facility.

The table below shows a further breakdown of the data that is shown in the table on page 4:

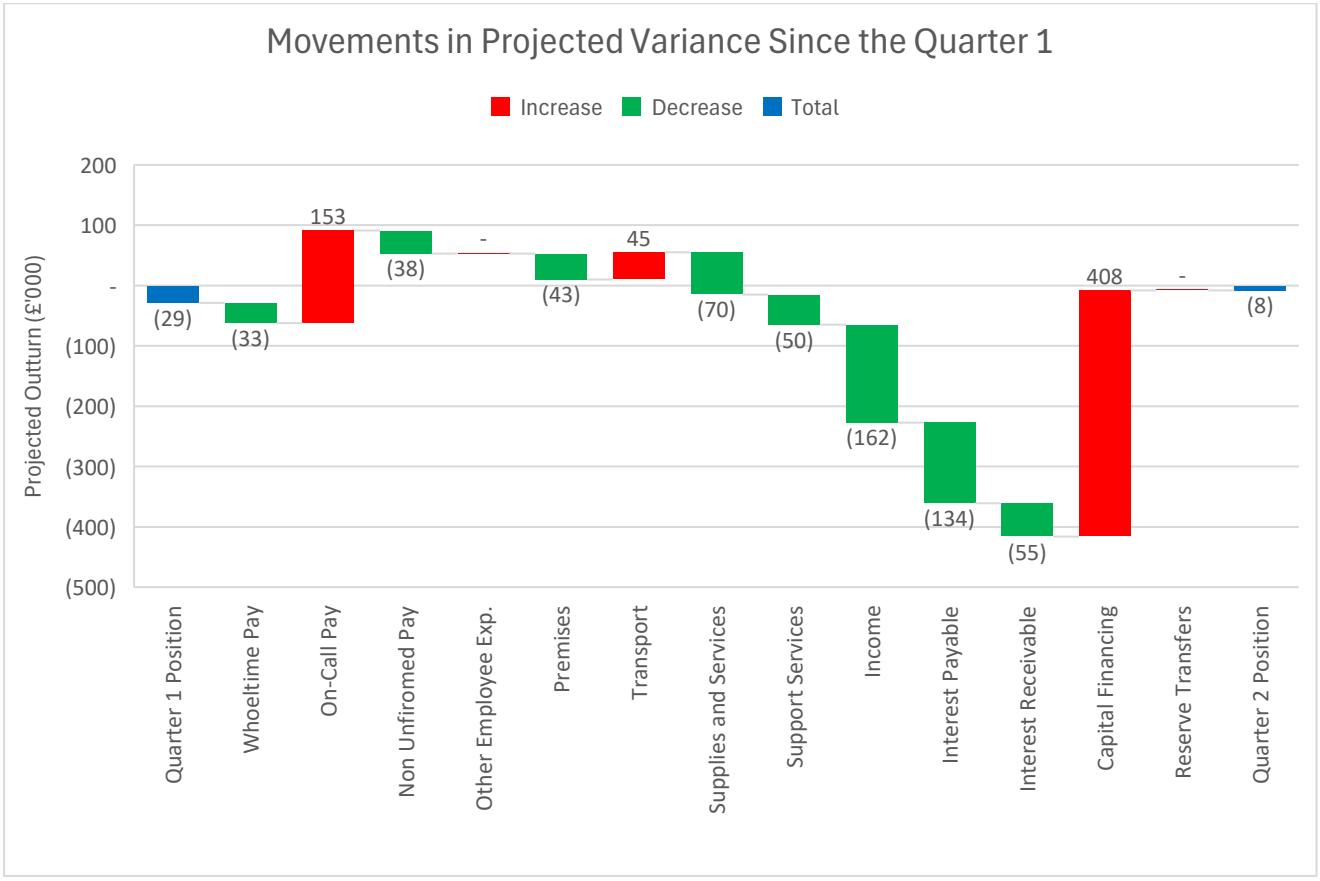
2026/27 Revenue Monitoring Detail
1st April 2026 to 30th September 2026 (Period 06)

	Original Budget	Revised Budget *	30 September 2026		Full Year			Status	Note
			Profiled Budget	Actual and Committed	Projection	Variance			
	£'000	£'000	£'000	£'000	£'000	£'000	%		
Employees									
Wholetime Firefighters	32,555	32,221	16,117	16,107	32,214	(7)	(0.02)	Green	
On-Call Firefighters	6,793	6,743	3,209	3,233	6,893	150	2.22	Red	1
Non-Uniformed	10,203	9,585	4,793	4,774	9,532	(53)	(0.55)	Green	
Other Employee Expenses (Training, Occ Health, Insurances etc.)	2,369	2,326	1,188	1,075	2,326	-	-	Green	
Total Pay and Pensions	**51,920**	**50,875**	**25,307**	**25,189**	**50,965**	**90**	0.18	Red	
Non Pay Expenditure									
Premises	3,898	3,898	2,453	2,423	3,750	(148)	(3.80)	Green	2
Transport	2,316	2,316	1,158	1,172	2,323	7	0.30	Red	
Supplies and Services	5,244	5,153	3,853	3,808	5,083	(70)	(1.36)	Green	
Support Services	479	449	238	176	399	(50)	(11.14)	Green	
Non Pay Efficiency Savings	(1,166)	-	-	-	-	-	-	Green	
Total Expenditure	**62,691**	**62,691**	**33,009**	**32,768**	**62,520**	**(171)**	**(0.27)**	Green	
Income	(3,091)	(3,091)	(1,546)	(2,246)	(3,147)	(56)	1.81	Green	
Net Expenditure (Exlcuding Capital Charges)	**59,600**	**59,600**	**31,463**	**30,522**	**59,373**	**(227)**	**(0.38)**	Green	
Interest Payable	663	663	332	179	529	(134)	(20.21)	Green	3
Interest Receivable	(500)	(500)	(250)	(268)	(555)	(55)	11.00	Green	
Capital Financing	2,906	2,906	-	-	3,314	408	14.04	Red	4
Transfers to / (from) Reserves	(580)	(580)	-	-	(580)	-	-	Green	
Net Budget Requirement	**62,089**	**62,089**	**31,545**	**30,433**	**62,081**	**(8)**	**(0.01)**	Green	

**The revised budget includes the Virement in section 2.7 of this report, that will be taken to Fire Authority in November 2026 for formal approval.*

The net revenue forecast has fallen slightly from a projected underspend of £29k at Quarter 1 to a projected underspend of £8k at Quarter 2, representing an adverse movement of £21k.

The chart over the page shows the movement in projection between this quarter and the previous quarter.



The following details the reasons for the movements that are in excess of £100k shown in the chart above:

On-Call Pay (+£153k)
The movement reflects a higher volume of operational incidents during the first six months of 2026/27, together with an increase in the average duration of incidents attended.

Income (-£162k)
The income forecast has improved following confirmation that the Authority expects to receive the full amount of grant funding assumed within the approved budget. The Quarter 1 forecast had reflected a prudent assumption that grant receipts would be lower than budget.

Interest Payable (-£134k)
This movement reflects the Authority's decision to postpone borrowing pending further assessment of market conditions and interest rate movements.

Capital Financing (+£408k)
This adverse movement reflects an increase in the planned revenue contribution to capital outlay, principally to fund the fit-out of the new stores facility and reduce the Authority's future borrowing requirement.

Other Movements (-£244k)
This is the net impact of smaller variances.

2.2 Cash Releasing Efficiency Savings

FRSs are required to produce an annual Productivity and Efficiency Plan which provides detail of the efficiency and productivity progress against the national goals. The 2026/27 Productivity and Efficiency Plan for Humberside can be found here.

A cash releasing efficiency saving is a permanent reduction in recurring costs including reduction in revenue budget. Examples include:

- A permanent removal of a post (Deleted from the TOM/Establishment).
- Renegotiation of a contract to a reduced cost (doing the same for less) and therefore generating a permanent reduction in budget.
- Identification and removal of budget (permanently) due to either reprioritisation or a realisation that the budget is no longer required (permanently).

(This list is not exhaustive and is to provide examples of efficiency savings).

The Finance Team works closely with budget holders throughout the year to identify, validate and monitor efficiency savings with their areas of responsibility.

The £1.166m efficiency target incorporated within the 2026/27 budget has been fully achieved. In addition, a further £0.410m of recurring savings has been identified, which will contribute towards the achievement of future efficiency targets. This places the Authority in a strong position to deliver the savings required with the Medium-Term Resource Strategy whilst continuing to protect frontline service delivery.

2.3 Capital

The table below shows the actual and committed expenditure as at 30th September 2026 for Capital, compared to the 2026/27 profiled budget for the same period. The table also shows the forecasted outturn for the full year based on current levels of expenditure plus any known variances to the end of the financial year.

2026/27 Capital Monitoring Summary
1st April 2026 to 30th September 2026 (Period 6)

	Original Budget	Revised Budget *	30 September 2026		Full Year			Status	Note
			Profiled Budget	Actual and Committed	Projection	Variance			
	£'000	£'000	£'000	£'000	£'000	£'000	%		
Building Works									
New Buildings	1,000	3,010	1,505	143	3,010	-	-	Green	
Training Infrastructure	950	950	475	-	-	(950)	(100.00)	Green	1
Station Refurbishments	3,737	3,737	1,870	1,129	1,094	(2,643)	(70.73)	Green	2
Electrical Vehicle Charging Infrastructure	40	40	20	-	40	-	-	Green	
	5,727	**7,737**	**3,870**	**1,272**	**4,144**	**(3,593)**			
Vehicles									
Operational Vehicles	1,370	1,470	735	109	186	(1,284)	(87.35)	Green	3
Support Vehicles	394	787	394	432	709	(78)	(9.91)	Green	
	1,764	**2,257**	**1,129**	**541**	**895**	**(1,362)**			
Equipment	716	716	358	109	760	44	6.15	Red	
ICT Equipment	300	300	150	39	300	-	-	Green	
	8,507	**11,010**	**5,507**	**1,961**	**6,099**	**(4,911)**			

**The revised budget includes the Virement in section 2.7 of this report, that will be taken to Fire Authority in November 2026 for formal approval.*

Notes

The following details the reasons for the projected variances that are in excess of £100k, shown in the table above:

1. The Service is awaiting final reporting on our Training infrastructure condition surveys, after which, we will detail any future capital spending within our Medium-Term Estates Strategy.

2. The forecast variance reflects the reprofiling of the estates capital programme pending completion of condition and sustainability surveys across the Authority's estate. The findings of these surveys have informed a revised estates investment plan, which is scheduled for consideration by Fire Authority in November 2026.

3. The forecast variance arises from extended manufacturer lead times for fire appliances. As delivery is now expected to occur after the end of 2026/27, the associated expenditure will be rephased into 2027/28.

2.4 Firefighters' Pension Fund

The Firefighters' Pension Fund is administered by each Fire and Rescue Service with any deficit on the fund being met with a top-up grant by the MHCLG. The grant is received in July annually and covers 80% of the estimated deficit for the year plus the balancing amount of the previous year.

The revised budgeted deficit for 2026/27 is £15.590m which is broken down in the following table:

2026/27 Pensions Account Summary
1st April 2026 to 30th September 2026 (Period 06)

	Revised Budget	30 September 2026		Full Year			Status	Note
		Profiled Budget	Actual and Committed	Projection	Variance			
	£'000	£'000	£'000	£'000	£'000	%		
Expenditure								
Payments to Pensioners	24,224	14,116	15,002	24,224	-	-	**Green**	
Commutations	3,907	1,737	1,737	3,907	-	-	**Green**	
Transfer Values	100	17	-	100	-	-	**Green**	
Total Pensions Expeniture	28,231	15,870	16,739	28,231	-			
Income								
Employer Pension Contributions	(8,922)	(4,461)	(4,378)	(8,922)	-	-	**Green**	
Employee Pension Contributions	(3,106)	(1,553)	(1,494)	(3,106)	-	-	**Green**	
Ill Health Pension Contributions	(242)	(121)	-	(242)	-	-	**Green**	
Transfer Values	(371)	(371)	(371)	(371)	-	-	**Green**	
Total Pensions Income	(12,641)	(6,506)	(6,243)	(12,641)	-			
Net Pensions Deficit/(Surplus)	**15,590**	**9,364**	**10,496**	**15,590**	**-**			

2.5 Investments and Borrowing

The Authority must ensure that:

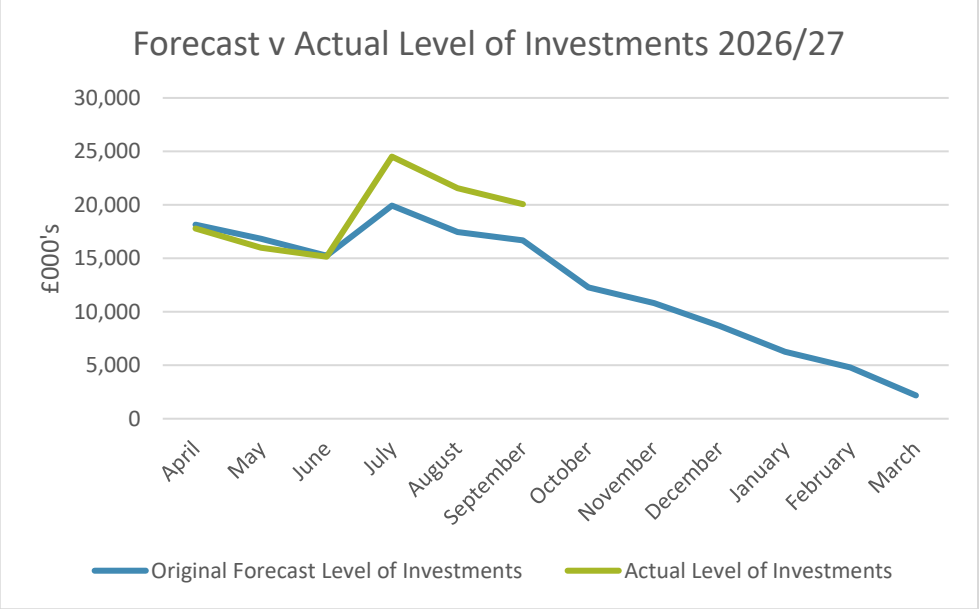
- its cash flow is adequately planned, with cash being available when it is needed. Surplus monies are invested in low-risk counterparties or instruments commensurate with the Authority's low-risk appetite, providing liquidity initially before considering investment return.

- It understands its borrowing need in terms of funding its capital plans. This management of longer-term cash may involve arranging long or short-term borrowing.

Investments

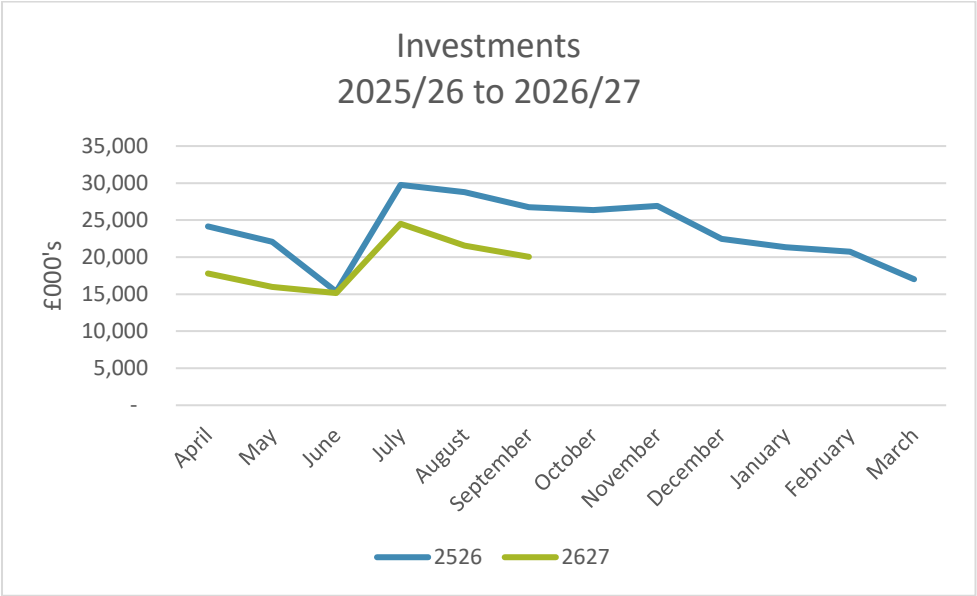
The Authority had £20.050m of investments held at 30th September 2026. A breakdown of this and investments that have been returned during the period can be found in appendix 1.

The graph below shows the actual level of investments (cash) that the Authority holds compared to the original estimate level of investments (cash) held:



Investment balances are higher than forecast due to higher than anticipated pension grant funding and the deferred timing of expenditure, resulting in higher cash balances available for investment.

The following graph shows our level of investments during the year to date compared to the previous financial year:



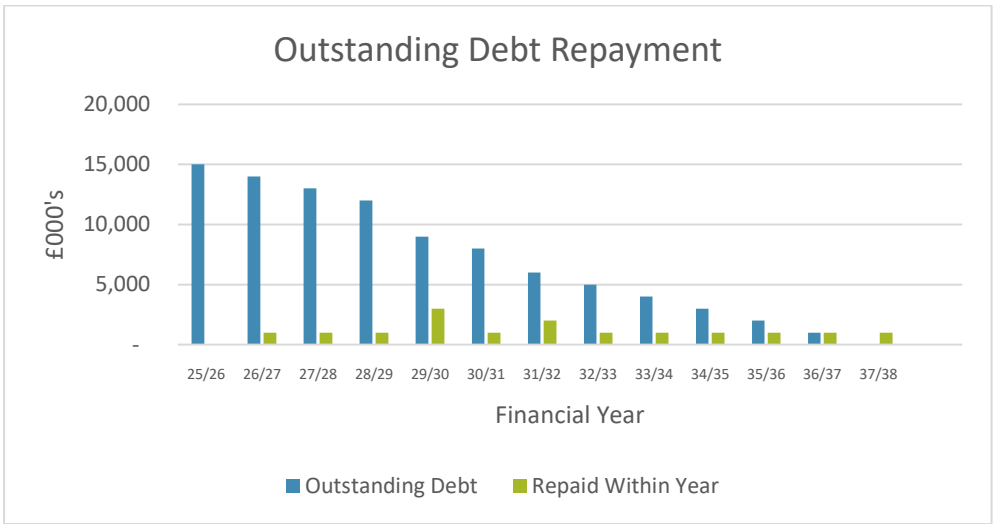
The Authority receives the Firefighters Pension Fund grant in July of each year which allows a higher level of investments to be held until the grant is fully utilised.

Borrowing

Long Term Borrowing

The current level of borrowing that the Authority holds as at 30th September 2026 is £14.0m.

The graph below shows the level of borrowing that the Authority currently holds at the end of each financial year and how this reduces over time as the debt matures:



There hasn't been any long-term borrowing taken during the year to date but this will be closely monitored by the Executive Director of Finance/S.151 Officer.

Short Term Borrowing

The Authority hasn't taken any short-term borrowing during the financial year.

2.6 Reserves

The Authority retains several revenue reserves that can be used to fund expenditure.

The table below shows the movement on these reserves for the period 1st April 2026 to 30th September 2026 and also what the projected balance will be at 31st March 2027 based on the projections in Revenue Monitoring table that can be found on page 4:

2026/27 Movement in Reserves
1st April 2026 to 30th September 2026 (Period 06)

	As at 1st April 2026 *	In Year Movements	Projected Balance as at 31st March 2027
	£'000	£'000	£'000
General Reserve	6,005	48	6,053
Earmarked Reserves			
Insurance	500	-	500
Capital Programme	7,380	(620)	6,760
Resilience Reserve	500	-	500
Pay and Prices	600	-	600
Strategic Transformation Fund	500	-	500
	15,485	**(572)**	**14,913**

2.7 Budget Virements

Budget Virement – Subject to HFA Approval

The below budget virement is subject to HFA approval:

2026/27 Budget Virements
1st April 2026 to 30th September 2026

Budget Vired From	Budget Vired To	Detail of Budget Virement	Virement Value £'000
Pay	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	939
-	Capital - New Stores Facility	To increase the capital budget for the new Stores facility to fund additional requirements identified through detailed design development, including new storage systems and improvements to the facility's operational resilience and environmental performance.	400

The following budget virements have been processed during the period to 30th September 2026:

2026/27 Budget Virements
1st July 2026 to 30th September 2026

Budget Vired From	Budget Vired To	Detail of Budget Virement	Virement Value £'000
Supplies & Services	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	32
Other Employee Expenses	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	30
On-Call Pay	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	30
Supplies & Services	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	30
Support Services	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	30
Supplies & Services	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	23
Other Employee Expenses	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	20
On-Call Pay	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	20
Wholetime Pay	Non-Pay Efficiency Savings	Identification of a Non-Pay Efficiency (See Efficiency section on page 5)	13
Supplies & Services	Other Employee Expenses	Movement of Budget from Corporate Assurance to OD	7

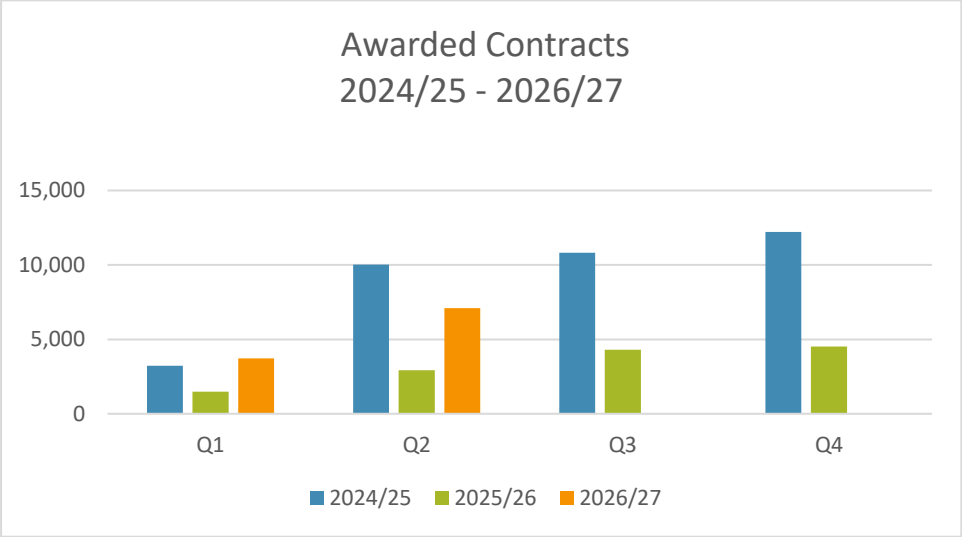
3. Procurement

3.1 Contracts

Contracts Awarded

The Authority has awarded contracts to the value of £7.089m during the six months to 30th September 2026. A breakdown of the contracts that have been awarded in this period can be found in appendix 2.

The graph below shows the cumulative value of contracts that have been awarded in 2026/27 to date as well as in the previous two financial year:



Contract Management

A review of the Services contracts has been undertaken using a supplier segmentation and analysis tool which is used to identify the risk to the Service. The contracts that have been identified as having the highest strategic importance rating can be found in appendix 3.

Following on from the identification of the risk rating of each contract, the Procurement Team will work closely with contract owners to implement the appropriate contract management measures required for each contract. This will allow for contract review meetings to be scheduled for the remainder of the financial year and beyond.

During this quarter, we received 43 notifications from the Service's contract register prompting the need for contract meetings. Contract owners successfully conducted 33 of these meetings, representing a 77% completion rate and demonstrating a strong commitment to contract management.



Details of contract meetings that have been held in this quarter with the supplier for those contracts that have been identified as having the highest strategic rating can be found in appendix 4.

Contracts Awarded Outside of the Constitution

The following contracts have been awarded outside the process detailed within part 4 section E of the constitution during the quarter ending 30th September 2026:

2026/27 Contracts Awarded Outside of Constitution
1st July 2026 to 30th September 2026

Contract Description	Justification	Responsible Officer	Contract End Date	Contract Value £'000
HFRS Data Warehouse Project Phase 2	Continuation of Phase 2 of the Data Warehouse project following the successful completion of the proof-of-concept phase. The work will develop and integrate additional data pipelines and reporting functionality, supporting the wider programme to consolidate organisational data and deliver a single, trusted source of performance information.	Head of Digital Services	31/12/2026	30
Staff Survey and Cultural Diagnostic	To maintain continuity with previous staff engagement survey delivered by previous supplier, enabling meaningful comparison of results and assessment of organisational process over time.	Head of Human Resources	30/11/2026	40
Provision of a Monitoring Officer and Secretary	A waiver is sought due to the limited availability of providers locally in this specialist market. An external contract offers a cost-effective one-year solution, delivering greater operational cover and flexibility than direct employment.	Head of Corporate Assurance	31/03/2027	12

3.2 Procurement Workstreams for the remainder of the year

During Quarter 2, the Procurement Team has continued to deliver a significant programme of procurement and contract management activity in support of the Service's strategic and operational objectives.

The procurement exercises for both the Financial Management System and Payroll Administration Services have now been completed and attracted strong levels of market interest. Evaluation of initial tender responses is underway, with subsequent solution demonstrations planned as part of the assessment process. Subject to successful completion of the evaluation stages, both contracts are anticipated to be awarded during Quarter 3.

Progress has continued on the procurement of Wide Area Network (WAN) Services, with contractual negotiations now in their final stages and contract award expected shortly.

Quarter 2 also saw the completion of procurements for both 'A' Class and 'B' Class Fire Appliances. Following evaluation, contracts were awarded and orders have subsequently been placed, supporting the Service's ongoing fleet replacement and operational capability programmes.

A Request-for-Quotation (RFQ) was undertaken to secure a single provider for the delivery of Level 3 Fire Safety qualifications. The resulting contract provides a fixed-price arrangement for the duration of the agreement and supports continuity of training provision.

A procurement exercise for Hybrid Firefighting Boots was also completed during the quarter. Following a competitive tender process and evaluation of responses received, a preferred supplier has been identified and contract finalisation is currently underway.

Preparatory work continues on a number of key strategic procurements scheduled for Quarter 3 and beyond. This includes the forthcoming procurement of a new Asset Management System, the purchase and conversion of Tactical Response Vehicles (TRVs) and the development of requirements for a comprehensive workforce management solution incorporating HR, rota and availability management, competency management and assurance monitoring functionality.

Alongside these procurement activities, the Procurement Team continues to undertake contract management across the Service's portfolio of strategic contracts. Regular contract review meetings are being held, contract management proformas are being completed consistently and supplier performance continues to be monitored to ensure compliance, value for money and continuous service improvement.

3.3 Procurement Savings

Through commercially sound practices the Procurement Function delivers a vital role for Humberside Fire and Rescue Service ensuring value for money is achieved whilst also ensuring the sustainability of goods and services and supporting local small and medium-sized enterprises.

Effective and efficient procurement is vital to the cost-effective delivery of our organisation's core services. It is integral to delivering commercially advantageous and innovative solutions essential for meeting our objectives and driving continuous improvement.

The methodology which HF&RS uses to identify and record the savings realised through its proactive procurement and contract management activity is summarised below and is in line with current Government Commercial Function guidance.

Baseline

Saving must be a consequence of commercial-led activity. Savings must have an evidenced baseline for the saving to be approved.

Baseline calculated based on an existing contract or in the case of procurement:

- Use the historical price paid for goods/services; the spending on the same goods or services in a previous period, adjusted for inflation using the Consumer Price Index (CPI) and any other appropriate changes based on market knowledge.

Baseline calculated on a new or novel procurement:

- Median compliant supplier bid (and the mean when only two compliant bids are received)
- External benchmarks/ market intelligence/ "Should cost" exercises e.g. CCS contract prices or pre-procurement market engagement.
- Budget – The budget must be a realistic expectation of the contract cost and is normally only appropriate for the purchase of new goods/services.
- Another agreed baseline model (particularly for complex procurements).

Cashable Procurement Savings

Cash-releasing savings are those that, all things being equal, will directly reduce a Departmental or contract budget requirement. They are financial savings that are made against an established baseline where the new cost results in a reduction in cost which can be released or redeployed to meet other cost pressures.

Worked example:
An existing 4 year service worth £2m is reprocured. The savings baseline is the cost of the existing service (i.e. £2m). The new contract will run for 4 years, and the winning supplier bid £1.5m. The result is a cashable saving of £500k. The savings would be recorded as:

- Y1 - £125k cashable
- Y2 - £125k cashable
- Y3 - £125k cashable
- Y4 - £125k cashable

The table below shows the cashable Procurement savings as at 30th September 2026:

Cashable Savings
1st April 2026 to 30th September 2026

Contract	Saving £'000
SIM Card and Mobile Data Usage	76
Microsoft Licensing Software	66
Smoke Alarms	44
Incident Command System	37
Cleaning and Janitorial Supplies	19
Occupational Health Physician	16
Multi-Functional Photocopier Devices	11
Replacement SLT Vehicle	7
IT Service Desk	6
Breathing Apparatus Cylinder Testing Service	6
Wicking Polo Shirts	4
Hazardous Materials Training	4
Portable Ground Anchors	1
Heat Alarms	1
Vehicle Livery	7
Conference & Control Room Multi-media Support	2
Pool Stock Vehicles	38
Meraki Licenses	35
OSG Vehicle	16
Level 3 Fire Safety Courses	18
Total for 2026/27	**414**

Non-Cashable Procurement Savings

A quantifiable financial benefit generated by commercial activity which does not release cash back into a budget. This could include multiple categories or definitions, all of which can create non-cashable savings. Such as Inflation avoidance, value-add, price protection and cost avoidance. This would be the case when a cost increase is avoided or reduced e.g. a price reduction applied to additional demand or when the Authority receives greater outputs or improved quality for the same spending.

Worked example:
A contract runs at £1m a year for 5 years. At the end of Y1 the vendor proposes a cost increase of £200k pa. This is negotiated away completely for the remainder of the contract. Non cashable savings of £800k would be recorded as:

- Y2 - £200k non-cashable
- Y3 - £200k non-cashable
- Y4 - £200k non-cashable
- Y5 - £200k non- cashable

There were no non-cashable Procurement savings as at 30th September 2026.

Appendix 1

2026/27 Investing Activities
1st July 2026 to 30th September 2026

Counterparty	Amount (£) Invested	Amount (£) Returned	Date Invested	Date Returned	Rate %	Interest (£)
Money Market Funds						
Deutsche Managed Sterling Fund	2,000,000					
Aberdeen Liquidity Fund	2,000,000					
Goldman Sachs Liquid Reserve Fund	2,000,000					
Investments						
Current Investments						
Kent County Council	2,000,000	-	30/04/2026	30/10/2026	4.250	42,616.44
Powys County Council	2,000,000	-	02/07/2026	02/10/2026	4.150	20,920.55
Windsor and Maidenhead Royal Borough Council	2,000,000	-	05/08/2026	05/11/2026	4.100	20,668.49
Gloucester City Council	2,000,000	-	28/08/2026	30/11/2026	4.050	20,860.27
Halton Borough Council	2,000,000	-	24/08/2026	24/11/2026	4.050	20,416.44
West Northamptonshire Council	2,000,000		14/08/2026	15/02/2027	4.150	42,068.49
DMADF (Debt Management Account Deposit Facility)	2,050,000		30/09/2026	06/10/2026	3.710	1,250.22
Total Amount Invested as at 30 September 2026	**20,050,000**		**Total Interest Due on Current Investments**			**168,800.90**
Investments Returned During the Period						
Powys County Council	2,000,000		02/04/2026	02/07/2026	4.100	20,443.84
Bradford Metropolitan District Council	2,000,000		08/01/2026	08/07/2026	4.450	44,134.25
Telford & Wrekin Council	2,000,000		23/01/2026	23/07/2026	4.450	44,134.25
Eastbourne Borough Council	2,000,000		22/04/2026	14/08/2026	4.050	25,298.63
DMADF (Debt Management Account Deposit Facility)	1,600,000		20/07/2026	28/07/2026	3.715	1,302.79
DMADF (Debt Management Account Deposit Facility)	2,170,000		21/07/2026	28/07/2026	3.710	1,543.97
DMADF (Debt Management Account Deposit Facility)	1,350,000		23/07/2026	31/07/2026	3.715	1,099.23
DMADF (Debt Management Account Deposit Facility)	2,200,000		28/07/2026	30/09/2026	3.765	14,523.62
DMADF (Debt Management Account Deposit Facility)	3,000,000		29/07/2026	04/08/2026	3.715	1,832.05
DMADF (Debt Management Account Deposit Facility)	2,000,000		29/07/2026	05/08/2026	3.720	1,426.85
DMADF (Debt Management Account Deposit Facility)	5,830,000		29/07/2026	28/08/2026	3.730	17,873.34
DMADF (Debt Management Account Deposit Facility)	1,000,000		04/08/2026	11/08/2026	3.710	711.51
DMADF (Debt Management Account Deposit Facility)	2,500,000		19/08/2026	24/08/2026	3.705	1,268.84
DMADF (Debt Management Account Deposit Facility)	2,300,000		21/08/2026	25/08/2026	3.705	933.86
DMADF (Debt Management Account Deposit Facility)	2,000,000		25/08/2026	26/08/2026	3.700	202.74
DMADF (Debt Management Account Deposit Facility)	1,800,000		28/08/2026	02/09/2026	3.705	913.56
DMADF (Debt Management Account Deposit Facility)	3,650,000		21/09/2026	25/09/2026	3.705	1,482.00
DMADF (Debt Management Account Deposit Facility)	3,050,000		25/09/2026	30/09/2026	3.705	1,547.98
Total Amount Returned During the Period	**42,450,000**		**Total Interest Received During the Period**			**180,673.31**

Summary of Interest Receipts

	Budget	Actual & Due	Under/(Over)	
	£	£	£	%
Interest Receipts to 30 September 2026	(250,002)	(268,293)	(18,291)	(7.32)

Appendix 2

2026/27 Contracts Awarded
1st July 2026 to 30th September 2026

Contract Title	Contract Start Date	Contract End Date	Contract Value £'000
'A' Class Appliances	01/09/2026	31/03/2029	1,346
B' Class Appliances	01/09/2026	30/09/2028	1,119
Wicking Shirts and T-Shirts	01/07/2026	30/06/2030	337
Five Non-Operational Vehicles	01/07/2026	30/09/2026	100
OSG Vehicle Replacement	01/08/2026	19/01/2027	71
Half-face Masks	01/07/2026	31/10/2026	62
Station End Equipment Annual Maintenance	01/07/2026	30/06/2027	49
Staff Survey and Cultural Diagnostic	01/08/2026	30/11/2026	40
Mediana Semi Automatic Defibs	13/07/2026	20/07/2026	34
Data Warehouse Project Phase 2	01/08/2026	31/12/2026	30
Meraki Enterprise Licences	29/08/2026	29/08/2029	26
Rope Rescue & Confined Space Instructor Training	14/09/2026	13/11/2026	20
Level 3 Fire Safety Courses	01/09/2026	31/08/2028	16
Electric Vehicle Plugs & Suppression Blankets	10/09/2026	30/09/2026	15
TomTom Software Licence and Support	01/09/2026	31/08/2027	14
Sharepoint Template Licence and Support	01/07/2026	30/06/2029	14
Internal Communications and Engagement Support	01/09/2026	30/09/2026	12
Electric Vehicle Plugs	10/09/2026	30/09/2026	11
Estates Telecommunications Support	01/07/2026	01/07/2027	10
Baseball Caps	01/07/2026	01/06/2027	8
Protective Cases for Half-face masks	01/07/2026	31/07/2026	7
Workplace Needs Assessments and Workplace Coaching	01/09/2026	31/03/2027	6
Level 4 Fire Safety Courses	01/07/2026	30/06/2027	6
Lenovo Laptops	01/07/2026	31/07/2026	6
Replacement Treadmill Trial	01/09/2026	30/10/2026	5
Articulate 360 Licenses	30/07/2026	29/06/2027	5
Wellbeing Van Livery	01/07/2026	20/09/2026	3
Total Amount of Contracts Awarded Within The Period			**3,372**

Appendix 3

2026/27 Contract Management
High Strategic Risk Rating

Service Area	Contract Title	Contract Start Date	Contract End Date	Progress
Digital Services	WAN, Firewall, Internet and Co-Location Services	15/07/2019	30/09/2026	Contract negotiation ongoing between HFRS and supplier with the anticipation of the new contract being agreed within October 2026. Supplier agreed to continue providing service between the expiry of the previous contract and start of the new contract.
Human Resources	Firewatch	20/03/2020	19/03/2027	Pre-procurement complete and specification build in final stages. Procurement expected in Q4 to award a new contract.
Digital Services	MDT Software–Annual Maintenance & Support	01/05/2026	30/04/2027	Contract meetings ongoing to consider support provision, software performance, user feedback and service effectiveness. Ongoing monitoring will ensure the system continues to meet operational needs.
Digital Services	Station end equipment – Annual Maintenance 26-27	01/07/2026	30/06/2027	Regular performance reviews with the supplier to monitor maintenance delivery, equipment reliability and response times. Service performance will be reviewed against operational requirements.
Procurement	Laundry and Aftercare Services	01/08/2021	31/07/2027	Regional meeting took place in August 2026. Next meeting scheduled for January 2027. Regular communication between the supplier and contract owner ongoing.
Digital Services	TomTom Software Licence and Support	01/09/2026	31/08/2027	Contract management meetings to review software performance, support arrangements, contract compliance, risks and ongoing service requirements. Monitor market developments and maintain oversight of future business needs.
Digital Services	SIM Cards and Mobile Data	17/02/2025	16/02/2028	Monthly reviews to monitor usage trends, service performance, coverage issues and expenditure. Changes in operational demand will be considered during the life of the contract.
Digital Services	Cyber Security Backup and Updating Software	01/06/2026	31/05/2029	Contract management meetings are taking place and focus on cyber resilience, system availability, software updates, incident reporting and compliance with security requirements. Emerging technology developments will be monitored.
Procurement	Supply of Structural PPE	01/06/2021	30/06/2029	Previously fixed price term has expired, and fixed price was negoitatied. Price increase was negotiated between supplier and contract manager, agreeing on a new 2-year fixed price. Contract management currently in place to ensure contract is running as expected.
Fleet	SCBA Replacement	01/09/2024	31/08/2029	Contract meeting took place in July 2026. Contract deliverables continuing to be monitored to ensure they are maintained and action tracker in place to improve service and rectify any current issues. Next meeting due in October 2026.
Digital Services	Airwave San N Replacement	08/10/2024	31/12/2029	Contract management meetings taking place to monitor delivery against agreed milestones, implementation progress and operational effectiveness. Risks and dependencies will be reviewed throughout the programme.
Digital Services	Airwave Services	01/11/2006	31/03/2030	Contract is active and subject to ongoing contract management arrangements. Airwave remains the primary secure communications platform used by UK emergency services. Service performance, operational requirements and developments relating to the Emergency Services Network (ESN) programme will continue to be monitored throughout the contract term.

Fleet	ESFM Fleet Maintenance	01/04/2015	31/03/2030	Contract agreement with Humberside Police.
Estates	Estates Support Partner	01/10/2025	30/09/2030	Strategic review meetings ongoing to monitor delivery of estates-related projects, resource requirements, service outputs and alignment with organisational objectives.
Control	Control Room Systems	31/07/2024	30/07/2031	Implementation phase is currently in place, and contract management has begun to maintain performance of contract.
Control	MAIT	01/04/2025	29/06/2033	Service reviews to assess contract delivery, value for money, system effectiveness and business requirements. Contract risks and opportunities for service improvement will be monitored throughout the contract term.
Estates	Underlease of Premises at the Jean Bishop ICC	11/07/2017	10/07/2042	Long term agreement for lease of property. Contract management ongoing.

Contract information correct as of 30th September 2026.

Appendix 4

2026/27 Contract Management
Contract Meetings - High Strategic Risk Rating
1st July 2026 to 30th September 2026

Contract Title	Supplier	Date of Meeting	Outcome
MAIT	AVR Group	10/07/2026	No significant performance or delivery issues were identified during the contract monitoring period. Performance since implementation has been satisfactory, and the Service remains content with the contractor's delivery against contractual requirements.
Control Room Software	SSS Public Safety	10/07/2026	Progress against the implementation plan was reviewed, including agreement of a revised go-live timetable. Remaining implementation activities and project checkpoints assessed and confirmed as progressing appropriately.
Laundy Aftercare	ELIS	24/07/2026	A regional contract review meeting was held with South Yorkshire Fire and Rescue Service and West Yorkshire Fire and Rescue Service. Key discussions covered communication improvements, logistics enhancements including driver QR scanning and route optimisation, garment reporting and data cleansing activities, and reinforcement of bagging procedures for contaminated garments. Actions were agreed to address identified issues and support ongoing service improvement.
Estates Support Partner	HLM Architects	19/08/2026	A contract performance review was held, with RIBA Stage 2 successfully completed on schedule for both the Crowle and Headquarters projects. A contract variation is planned for October 2026, including the additional of sustainability and condition surveys, which remain on track for delivery within agreed timescales.
MDT Software Annual Maintencne and Support	Lampada	18/08/2026	Contract performance and future service provision were reviewed. Development of the latest MDT software release remains ongoing, with implementation delayed while the supplier resolves issues identified during testing. Parallel work continues on the Service's in-house replacement solution, and a further assessment will be undertaken later in 2026 to determine whether the existing contract can be terminated or requires a final one-year extension.
Firewatch	Softcat	22/09/2026	Contract performance was reviewed, with recent system patches resolving the majority of outstanding technical issues. Ongoing enhancement work continues to improve functionality, performance and usability, and both LearnPro Group and Infographics remain engaged and responsive in supporting service improvements and delivering an enhanced user experience.
Station End Equipment	Telent	29/09/2026	A contract review was held to consider the ongoing provision of site equipment. Telent has scheduled maintenance and condition assessments to identify any preventative works that may extend the life of the existing assets while the Service determines its long-term replacement strategy.

	Agenda Item No. 8
Governance, Audit and Scrutiny 9 November 2026	**Report by the Executive Director of Finance/S.151 Officer**

TREASURY MANAGEMENT MID-YEAR UPDATE REPORT 2026/27

1. SUMMARY

1.1 This report provides an update on the Authority's treasury management activities for the first half of the financial year 2026/27.

2. RECOMMENDATIONS

2.1 It is recommended that the GAS Committee considers the treasury management activities undertaken during the first half of 2026/27 and the Prudential Indicators as outlined in paragraphs 4.7 and 4.8 and detailed in Appendix 1.

3. BACKGROUND

3.1 Treasury Management, as defined by the Chartered Institute of Public Finance and Accountancy (CIFPA) Code of Practice 2017 is:

''The management of the organisation's investments and cash-flows, its banking and 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.''

3.2 The Authority on 27 March 2026 approved the annual 2026/27 Treasury Management Strategy and agreed a range of Prudential Indicators aimed at ensuring effective treasury management and affordability of capital plans.

3.3 This report provides details of the Authority's treasury management activities undertaken since the beginning of the financial year and highlighting key Prudential Indicator information, in line with the requirements of the Code.

4. PERIOD ENDING 30 SEPTEMBER 2026

INVESTMENT ACTIVITY

4.1 The Authority's temporary investments totalled £20.05M as at 30 September 2026.

Table 1 – Investment Income April to September 2026

Interest Earned April to September 2026	Rate of Return April to September 2026	Benchmark Return April to September 2026	Difference April to September 2026 (+ favourable)
£0.268m	3.84%	3.73%	0.11%

*Benchmark set as average SONIA rate for the year

4.2 The Authorities rate of return has exceeded the benchmark return provided by MUFG.

BORROWING

Short-Term Borrowing

4.3 The Authority seeks to minimise the use of short-term borrowing to fund temporary cash shortfalls, as such none has been taken in the period April to September 2026.

Long-Term Borrowing

4.4 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.

4.5 The Authority's level of borrowing was £14.0m as at 30 September 2026, with an equated average rate of interest payable at 2.83%. An expected £529k of interest is projected to be payable on external debt for 2026/27.

4.6 The Authority has not undertaken any new long-term borrowing to date this financial year but this position will continue to be reviewed against the backdrop of interest rate changes and projections.

Prudential Indicators

4.7 Appendix 1 details the agreed Prudential Indicators for 2026/27 and the actual figures for the same period.

4.8 During the period April to September 2026, the Authority operated wholly within the limits approved.

Capital Expenditure

4.9 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 aligned its resources to key strategic priorities.

Treasury Management

4.10 Based on Operational Boundary definition, external debt at 30 September 2026 was £19.5m below the agreed Operational Boundary for 2026/27. The maturity structure for both borrowing and investments remain within the approved upper and lower limts. Subsequent borrowing or rescheduling during 2025/26 will continue to take into 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 keeping down cash-balances.

Financial/Resourcing/Value for Money Implications

4.11 The approach outline within the report is aimed at achieving effective and efficient management of the Authority's financial resources and reflects a prudent approach to the management of financial risk for the Authority.

4.12 The Authority has delivered an under-borrowed position in relation to long-term borrowing of £10.8m at September 2026.

Risk/Health and Safety/Legal Implications

4.13 The Authority must comply with the requirements of the CIPFA Code of Practice on Treasury Management 2017 and the Local Authorities (Capital Finance and Accounting) (England) (Amendment) Regulations 2017. This report ensures such compliance.

4.14 The application of a prudent Treasury Management Policy and MRP provision ensures that the Authority effectively manages financial risks such as exposure to interest rate changes and liquidity risk whilst minimising borrowing costs and maximising investment income. It further ensures that sufficient levels of resource are set aside for the repayment of debt. Effective treasury management is key to making the best use of the Authority's financial resources and thus the successful delivery of its Strategic Plan.

Linkages to CRMP/Strategic Plan/Strategies/Plans/Policies

4.15 Treasury Management is an integral part of the financial management of the Authority with Prudential Indicators providing a framework for the Authority to monitor key elements of its financial position. Utilising approved Borrowing and Investment Strategies, the Executive Director of Finance/S.151 Officer has sought to minimise borrowing costs and maximise investment income whilst adopting a prudent approach to the Authority's exposure to market risks, especially given the current economic situation.

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5. EQUALITY, DATA PROTECTION & RISK IMPLICATIONS

5.1 There is no requirement to carry out an Equality Impact Analysis (EIA) and/or Data Protection Impact Assessment (DPIA) as this report does not relate to a policy or service delivery change or involves the processing of personal data.

5.2 Associated risks have been duly assessed and are captured on the Risk and Opportunity Register as a Strategic risk (Reference 2023/24 – 01 Financial Constraints Around National Grant Funding).

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6. CONCLUSION

6.1 Members are requested to consider the treasury management activities undertaken during the first half of 2026/27 and the Prudential Indicators as outlined in paragraphs 4.7 and 4.8 and detailed in Appendix 1

Martyn Ransom
Executive Director of Finance/S.151 Officer

Officer Contact

Shaun Edwards – Head of Finance
✉ sedwards@humbersidefire.gov.uk

Background Papers

Treasury Management and Capital Expenditure Prudential Indicators, Treasury Management Policy Statement 2026/27 and Minimum Revenue Provision (MRP) for 2026/27 - Report to Fire Authority March 2026
CIPFA Prudential Code (Revised 2011) and November 2012 and 2017 update
The local Authorities (Capital Finance and Accounting) (England) (Amendment) Regulations 2008 and 2017

Glossary/Abbreviations

CIPFA	Chartered Institute of Public Finance and Accounting
EIA	Equality Impact Assessment
DPIA	Data Protection Impact Assessment
MRP	Minimum Revenue Provision
S.151	Section 151 Officer under the Local Government Act 1972

Appendix 1

Prudential Indicators as at 30 September 2026

Indicator 1 – Capital Expenditure

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

Capital expenditure £m	2025/26 Actual £m	2026/27 Estimate £m	2026/27 Revised £m	2027/28 Estimate £m	2028/29 Estimate £m	2029/30 Estimate £m
Total	6.547	11.010	6.099	5.076	11.957	9.823

Indicator 2 - Capital Financing Requirement

The capital financing requirement for 2026/27 and estimates for future years are as follows:

	Actual 31/03/26 £m	Estimate 31/03/27 £m	Estimate 31/03/28 £m	Estimate 31/03/29 £m	Estimate 31/03/30 £m
Underlying Capital Financing Requirement	22.493	24.841	27.060	35.024	41.179
Other Long-Term Liabilities	1.564	1.501	1.435	1.366	1.293
Total Capital Financing Requirement	**24.057**	**26.342**	**28.495**	**36.390**	**42.472**

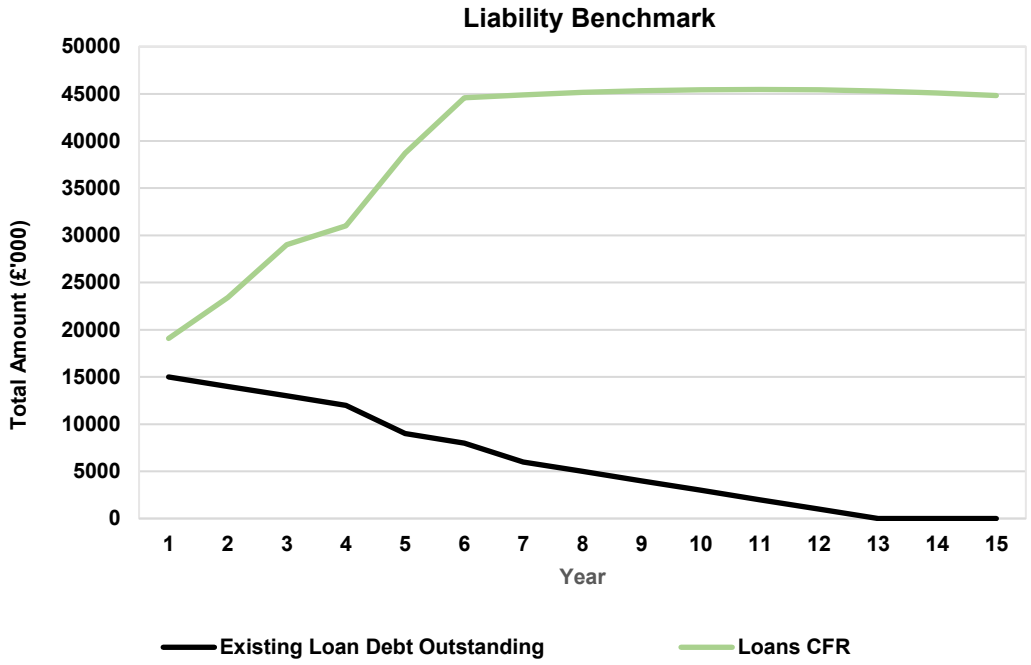
The capital financing requirement measures the Authority's need to borrow for capital purposes. In accordance with best professional practice, the Authority does not associate borrowing with particular items or types of expenditure. The Authority has, at any point in time, a number of cash flows both 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".

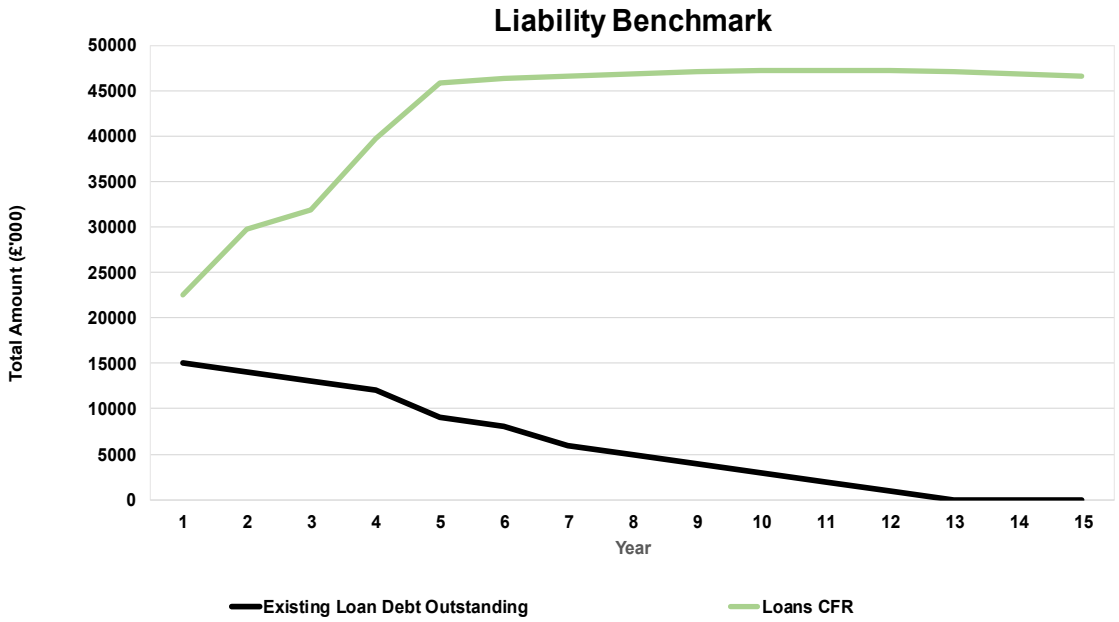
The S.151 Officer reports that the Authority has had no difficulty meeting this requirement during the course of this financial year and no difficulties are envisaged in future years. This takes into account current commitments, existing plans and the proposals contained in the Medium-Term Resource Strategy.

Indicator 3 – Liability Benchmark

The Authority is required estimate and measure the Liability Benchmark for the forthcoming year and the following two years as a minimum.
The following graph shows what the Liability Benchmark was estimated to be for 2026/27 onwards as set in the Treasury Management Strategy 2026/27:



The following graph has been updated to show the revised estimate of 2026/27 onwards:



The revised graph shows that the gap between existing loans outstanding and our future need to borrow (as shown by the liability benchmark line on the graph above) has reduced for 2026/27 as we contribute more funding to reduce the need to borrow in the future. The gap between the liability benchmark and the Existing Loan Debt Outstanding is the amount of borrowing that the Authority may have to take in the future, and there is therefore a risk that borrowing may have to be taken when the interest rate is in excess of the budgeted rate.

Indicator 4 – Core Funds and Expected Investment Balances

The total core funds and expected investments for 2026/27 and future years are as follows:

Year End Resources £m	**Original 31/03/27 £m**	**Revised 31/03/27 £m**	**Estimate 31/03/28 £m**	**Estimate 31/03/29 £m**	**Estimate 31/03/30 £m**
Total core funds	*14.110*	*14.913*	*14.150*	*12.284*	*10.997*
Expected investments	*(2.564)*	*2.102*	*(0.410)*	*(9.240)*	*(15.182)*

The application of resources (capital receipts, reserves etc.) to either finance capital expenditure or other budget decisions to support the revenue budget will have an ongoing impact on investments unless resources are supplemented each year from new sources (asset sales etc.).

Indicator 5 - 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 S.151 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 S.151 Officer.

Operational Boundary £m	**2026/27 Authorised Limit £m**	**2026/27 Actual as at 30/09/26 £m**	**2027/28 Authorised Limit £m**	**2028/29 Authorised Limit £m**	**2029/30 Authorised Limit £m**
Borrowing	31.500	14.000	36.500	41.500	46.500
Other Long-Term Liabilities	3.500	1.501	3.500	3.500	3.500
Total	**35.000**	**15.501**	**40.000**	**45.000**	**50.000**

The Chief Finance Officer/S.151 Officer confirms that borrowing in the year has not exceeded the operational boundary at any point within the year and is not expected to do so over the course of the next period based on information currently available.

Indicator 6 - Authorised Limit for External Debt

The table below shows the Authorised limit for External Debt for 2026/27 and subsequent three-year period as approved by Members compared to the actual level of borrowing as at 30 September 2026.

Authorised limit £m	**2026/27 Authorised Limit £m**	**2026/27 Actual as at 30/09/26 £m**	**2027/28 Authorised Limit £m**	**2028/29 Authorised Limit £m**	**2029/30 Authorised Limit £m**
Borrowing	36.500	14.000	41.500	46.500	51.500
Other Long-Term Liabilities	3.500	1.501	3.500	3.500	3.500
Total	**40.000**	**15.501**	**45.000**	**50.000**	**55.000**

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 S.151 Officer confirms that the Authorised Limit has not been approached at any point during the year.

Indicator 7 - 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: -

%	**2025/26 Actual %**	**2026/27 Estimate %**	**2027/28 Estimate %**	**2028/29 Estimate %**	**2029/30 Estimate %**
Ratio of Financial Costs to Net Revenue Stream	1.30	2.00	3.11	3.50	4.04

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.

Indicator 8 – 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"

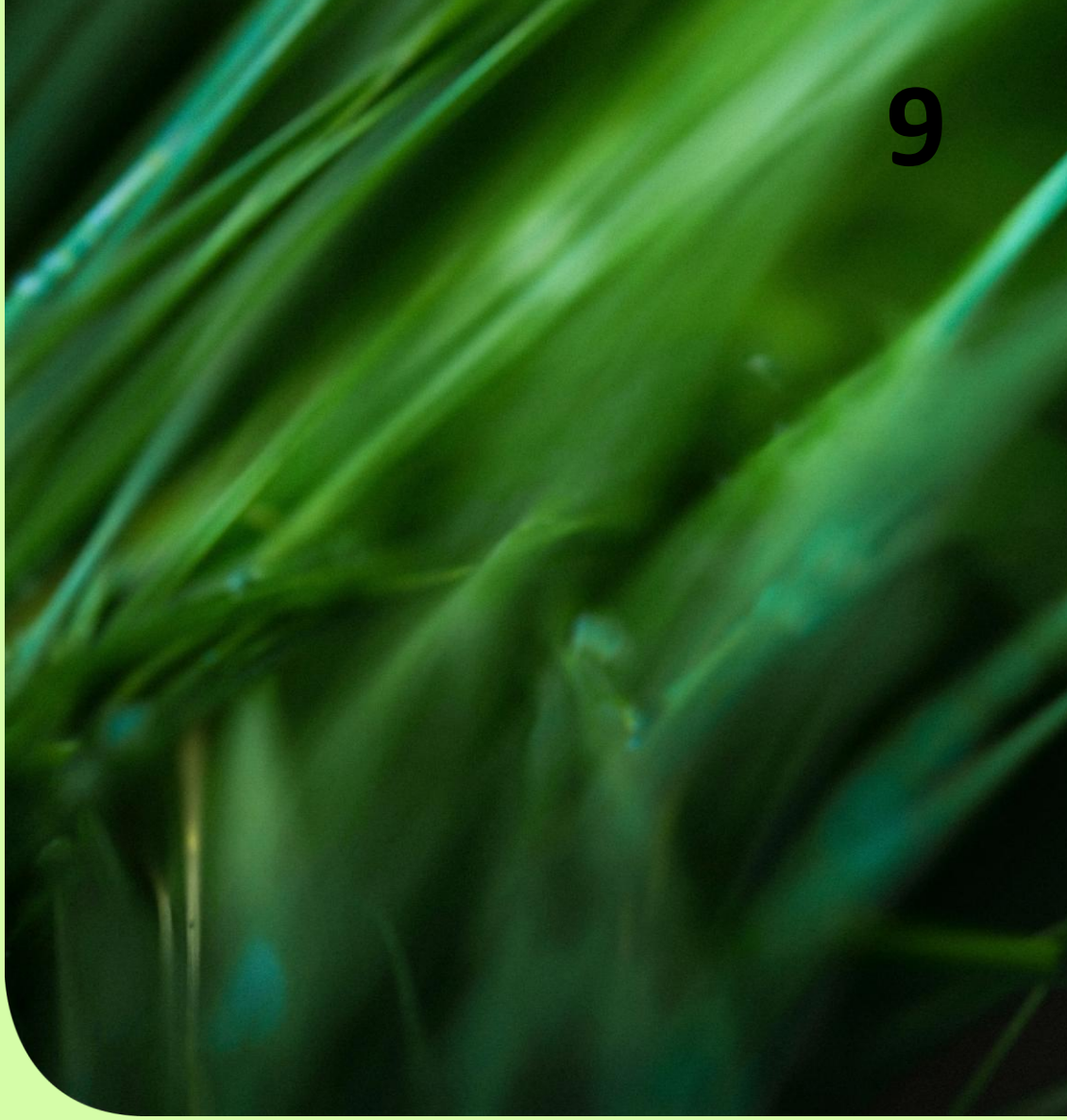
(Paragraph 74 of the code)

	Actual as at 30/09/26	Upper Limit	Lower Limit
	%	%	%
Under 12 Months	*7.14*	*15*	0
12 months and within 24 months	*7.14*	*25*	0
24 months and within 5 years	*35.71*	*50*	0
5 years and within 10 years	*35.71*	*60*	0
10 years and above	*14.30*	*80*	0

The S.151 Officer confirms that the maturity structure of external debt as at 30/09/2026 is within the upper and lower limits approved by the Authority.

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Humberside Fire and Rescue Service

Summary Internal Controls Assurance (SICA) Report

October 2026

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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 22nd October 2026.

Fraud Prevention

2. The new 'failure to prevent fraud' offence, enacted by the Economic Crime and Corporate Transparency Act 2023, has come into force on 1st September 2025. This new offence makes it a crime for large organisations to fail to prevent fraud committed by their employees, agents, or subsidiaries.

   Tiaa's recommended actions align with the requirements of the Offence of 'failure to prevent fraud' and with the government's guidance for business, published in response to the new offence and our Fraud Health Check can provide an assessment of how prepared your organisation is for this new offence and provide practice advice and guidance on further actions required to ensure compliance.

   All organisations are at risk of fraud, and our experience shows that they will be targeted where key control weaknesses are identified. At times when organisations have unfilled vacancies, where positions filled by temporary employees, or where existing employees may be struggling with financial or emotional wellbeing, fraud awareness and vigilance is even more important to ensure your employees and leaders are aware of the risks and can take steps to keep your money, people and data safe.

   Our experience tells us that in such challenging times, the risk of fraud is usually at its highest and taking your eye off the ball at times like this will leave you even more vulnerable to both internal and external fraud risks.

   We can also help support your organisation with detecting, preventing or investigating fraud. Our experienced team understand the specific risks relevant to your business and can help you develop best practice procedures and solutions to protect against threats; help ensure employees understand their responsibilities and the specific risks facing their organisation.

   We have developed a series of reviews to assist organisations in achieving compliance with key recommended actions and to provide Boards with assurance regarding key fraud risk areas.

   How Prepared are You? Download our guidance here: **Fraud Health Check**

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

		Key Dates			Number of Recommendations			
Review	Evaluation	Draft Issued	Responses	Final Issued	1	2	3	OEM
Managerial Support and Direction for Watches	Substantial	24/06/2026	20/07/2026	20/07/2026	0	0	1	1
Staff Competencies	Reasonable	09/07/2026	14/07/2026	15/07/2026	0	1	3	0
Regulation of Fire Safety	Substantial	22/07/2026	27/07/2026	28/07/2026	0	0	1	1
Responding to Fires and Other Emergencies	Substantial	19/08/2026	02/09/2026	02/09/2026	0	0	0	1
Leading People	Reasonable	11/09/2026	25/09/2026	02/10/2026	0	3	2	2
National Operational Guidance	Substantial	14/10/2026	2i/10/2026	22/10/2026	0	0	2	0

4. The Executive Summaries for each of the finalised reviews are included at Appendix A. There are no issues arising from these findings which would require the annual Head of Audit Opinion to be qualified.

Progress against the Annual Plan

5. Our progress against the Annual Plan for 2025/26 is set out in Appendix B.

Changes to the Annual Plan

6. There have been no changes to the approved plan.

Progress in actioning priority 1 & 2 recommendations

7. We have made no Priority 1 recommendations (i.e. fundamental control issue on which action should be taken immediately) since the previous SICA.

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 C, 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.

Annex A – Executive Summaries

The following Executive Summaries are included in this Appendix.

Full copies of the reports are provided to the Governance, Audit and Scrutiny Committee

Review	Key Findings
Managerial Support and Direction for Watches	• The Service has established a comprehensive and well-defined policy framework, underpinned by the Core Code of Ethics, which clearly sets expectations for leadership behaviour, staff support, and the promotion of equality, diversity, inclusion, dignity, and respect, providing a strong foundation for a positive and inclusive organisational culture. • There is strong evidence that leadership behaviours and engagement practices are being applied consistently across the Service, with staff reporting positive experiences against key themes such as visibility, communication, and ethical conduct. However, some variability in perceived support, particularly in relation to change management and the turnover of Station Managers within on-call environments, indicates an opportunity to strengthen consistency and resilience in leadership delivery. • The Service has established a structured and effective performance management framework, with regular oversight by SLT and ELT ensuring that key operational and staff-related performance metrics are monitored, and that actions are clearly identified, tracked, and addressed in a timely manner. • The Service demonstrates strong alignment with ESG principles, supported by robust governance frameworks, effective operational practices, and a clear commitment to staff wellbeing, community outcomes, and environmental responsibility, providing a solid foundation for sustainable and accountable service delivery. • The Service's blended duty system supports operational resilience, though reliance on On-Call staff presents ongoing risks requiring effective workforce management and monitoring.

Review	Key Findings
Staff Competencies	• A comprehensive and up-to-date policy framework is in place to support the recruitment, development, assessment, and management of staff competence, providing clear arrangements for achieving and maintaining workforce competency and addressing instances where required standards are not met. • Testing identified gaps in the maintenance and monitoring of mandatory training records, with instances of lapsed competencies and incomplete training information preventing assurance that all staff remain compliant with the Core Skills Framework and competent to perform their roles effectively. • Whilst mandatory training completion rates are subject to effective monitoring and demonstrate high levels of compliance across the Service, current performance reporting is focused primarily on training completion and provides limited assurance over the ongoing competence, capability, and application of role-specific skills by staff. • The combination of defined standards, structured training frameworks, and shared ownership of competence supports a sustainable model for workforce development, ensuring that skills and knowledge are consistently maintained over time and remain resilient to changes in staffing or operational requirements. • The collaborative and appropriately resourced approach provides resilience within the training and competency framework, supporting the Service's ability to maintain workforce capability and sustain effective delivery over time.
Regulation of Fire Safety	• The review found that the Community Fire Risk Management Information System (CFRMIS) contains appropriate user access and security controls that support the secure and effective delivery of fire protection activities, providing assurance over the integrity and accountability of protection data. • Enforcement activity was generally found to be proportionate, appropriately authorised and supported by effective quality assurance arrangements, with only one instance identified where evidence of management authorisation could not be demonstrated. • The Service provides accessible guidance on its website outlining the legal duties imposed by the Regulatory Reform (Fire Safety) Order 2005, including the responsibilities of Responsible Persons and the requirement to undertake and maintain fire risk assessments. • Business Engagement Visits promote awareness of statutory fire safety obligations, encourage voluntary compliance and support a preventative approach to fire safety, helping businesses understand and meet the standards expected by the Service. • Power BI is used to monitor progress against the Risk-Based Inspection Programme (RBIP), providing management with oversight of delivery against planned protection activities and supporting the effective planning and monitoring of fire safety audits throughout the year. • The Protection Plan 2025–2028 supports the long-term sustainability of the Protection Function through workforce development, succession planning and risk-based deployment of resources, although continued competency development and recruitment remain important to maintaining resilience.

Review	Key Findings
Responding to Fires and Other Emergencies	• The Service has developed a strong framework for Organisational Learning with a suite of Policy Delivery Guidance (PDG) documents and an Organisational Learning Policy. • Sample testing of six debriefs confirmed that each had been conducted correctly according to the documented direction in the Debrief Policy Delivery Guidance. • The Service utilises an incident log that provides automatic reminders to Incident Mangers to input debrief information into the Assurance Monitoring System. • Review of the end-to-end process of seven learning cases confirmed that the procedures stated in Organisational Learning Policy Delivery Guidance documents are being followed by the Service. • Staff are able to raise concerns with Policy or Procedure through the Organisational Learning process, which was seen in action via an on-site walkthrough of the Assurance Monitoring System. It was also verified that these are actioned as appropriate.
Leading People	• Relevant obligations are reflected within approved policies and procedures, and appropriate governance, accountability, reporting and people management controls have been established to support compliance with these requirements. • Relevant HMICFRS Areas for Improvement relating to leadership, workforce management and employee engagement have been identified and formally captured within the SIP Register, with arrangements in place to monitor progress and support delivery of improvement actions. • A relevant sector-wide ethical framework is in place and has been embedded within the Service's people management and professional standards policies, supporting the scope and objectives of this audit. • The review found that leadership and workforce development arrangements are generally established and operating effectively, with most managers completing required leadership, governance and ethical training; and leadership development being considered through Performance and Development Review (PDR) processes. However, inconsistencies were identified in the monitoring and completion of mandatory refresher training, leadership qualification compliance and disciplinary / grievance training attendance, reducing assurance that all leaders consistently meet the Service's workforce management and development expectations. • The Service has established effective arrangements for providing the Strategic Leadership Team (SLT) with regular workforce intelligence and employee relations reporting, supporting effective governance and oversight of workforce performance, employee relations and organisational culture. • The Service has implemented a comprehensive leadership and people management framework that supports workforce resilience and aligns with sector good practice.

Review	Key Findings
National Operational Guidance	• The Service has established a robust framework for implementing and assuring compliance with National Operational Guidance (NOG), supported by the NOG Policy Delivery Guidance and the Strategic Gap Analysis (SGA) process. Clear governance, accountability and monitoring arrangements are in place, enabling the Service to track compliance, address gaps and demonstrate alignment with national operational standards and inspection expectations. • The Service's risk management arrangements recognise the importance of effective governance and organisational learning in supporting operational assurance, with key risks identified, mitigated and subject to regular review. • Established governance structures, oversight mechanisms and monitoring arrangements align with National Operational Guidance principles by supporting accountability, continuous improvement and the effective management of operational and organisational learning risks. • Sample testing confirmed that National Operational Guidance (NOG) updates were assessed, communicated and monitored through established governance arrangements, including the Strategic Gap Analysis (SGA) process and Assurance Management System. However, while changes arising from NOG updates were tracked and progressed, the absence of a defined approval or sign-off requirement limited the Service's ability to consistently demonstrate formal authorisation of resulting amendments to local policies, procedures and supporting documentation. • The Service has established effective performance management and governance arrangements to support the implementation, monitoring and oversight of NOG, with compliance and progress subject to regular management scrutiny through established reporting mechanisms. NOG-related actions, risks and improvement opportunities are tracked through formal governance processes, providing assurance that implementation activities are monitored and supporting continuous improvement across the Service.

Appendix B: Progress against Annual Plan

System	Planned Quarter	Current Status	Comments
Managerial Support and Direction for Watches	1	Final report issued 20/07/2026	Reported to GAS November 2026
Staff Competencies	1	Final report issued 15/07/2026	Reported to GAS November 2026
Regulation of Fire Safety	1	Final report issued 28/07/2026	Reported to GAS November 2026
Responding to Fires and Other Emergencies	1	Final report issued 02/09/2026	Reported to GAS November 2026
Leading People	2	Final report issued 02/10/2026	Reported to GAS November 2026
Project Management	2	Final report issued 08/06/2026	Reported to GAS July 2026
National Operational Guidance	2	Final report issued 22/10/2026	Reported to GAS November 2026
ICT Strategy and Management Controls	4	To commence 08/03/2027	
Key Financial Controls	4	To commence 25/01/2027	
Contingency	4	To commence 22/02/2027	

Key:

	To commence		Site work commenced		Draft report issued		Final report issued

Appendix C: Briefing on Developments in Governance, Risk and Control

Tiaa produce regular briefing notes to summarise new developments in Governance, Risk, Control, Counter Fraud and Security Management 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 briefings issued in the last three months which may be of relevance to Humberside Fire and Rescue Service is given below:

Summary of recent Client Briefings and Alerts

Date Issued	Sector	Briefing Type	Subject	Website Link	Tiaa Comments
15 September 2026	All	Tiaa News	TIAA Announces Charities of the Year	TIAA Announces Charities of the Year - Tiaa	At Tiaa, creating positive impact extends beyond the work we do with our clients. As a B Corp organisation, we are committed to supporting charities and community initiatives that make a meaningful difference to people's lives. We are pleased to announce that our Charities of the Year are St Clare Hospice and Noah's Ark Children's Hospital Charity.
11 September 2026	All	Case Study	Clarity Where It Matters Most: A University Disciplinary Investigation	Clarity Where It Matters Most: A University Disciplinary Investigation - TIAA	The University appointed Tiaa as an external adviser to investigate allegations against a current employee. Three employees had raised complaints about a student who was also employed by the University, including allegations of falsified stipend claims and timesheets. HR asked for a fraud-focused investigation and advice on whether disciplinary action was warranted.
04 September 2026	Security	Tiaa Blog	Security Matters: Staying Vigilant in a Changing Environment	Security Matters: Staying Vigilant in a Changing Environment - TIAA	The UK national terrorism threat level is currently SEVERE, meaning an attack is assessed as highly likely. While many organisations may not view themselves as direct targets, maintaining strong security awareness and robust site security practices remains essential for protecting people, premises, and operations.
01 September 2026	All	Tiaa Article	One Year On: Are Your Fraud Prevention Procedures Working in Practice?	One Year On: Are Your Fraud Prevention Procedures Working in Practice? - TIAA	When the offence of Failure to Prevent Fraud came into force, organisations were asked a simple but important question: are your fraud prevention procedures reasonable? One year on, the question has evolved. It's no longer about whether you have a framework in place. It's about whether that framework is embedded, understood and working in practice.
24 August 2026	All	Industry News	Martyn's Law: Why Organisations Should Start Preparing Now	Martyn's Law: Why Organisations Should Start Preparing Now - TIAA	The Security Industry Authority (SIA) is urging organisations to begin preparing for Martyn's Law ahead of its expected introduction next year. The legislation will require organisations responsible for publicly accessible locations to assess terrorism risks and implement appropriate safety measures. Early planning will help venue operators, event organisers, and businesses strengthen public safety and ensure compliance with future requirements.

Date Issued	Sector	Briefing Type	Subject	Website Link	Tiaa Comments
21 August 2026	Security	Newsletter	Security Focus Newsletter Edition 13	Security Focus Newsletter Edition 13 - TIAA	The 13th edition of Tiaa's Security Focus Newsletter is now available. Security and risk management is a key challenge for any organisation, this newsletter contains lots of useful advice and tips to help ensure a safe and secure environment for your staff and visitors. No organisation wants the disruption or bad publicity that incidents of violence and aggression against your staff or crimes against your property create.
06 August 2026	All	Healthcare Briefing	HR Investigations: Emerging Trends, Risks and Assurance Considerations	 2026_08_HR Investigations_Emergi	Briefing following the Summer 2026 Audit Committee Chairs Forum and HR Directors Forum. Recent discussions with both Audit Committee Chairs and HR Directors highlighted a consistent set of challenges facing organisations in the management of formal HR investigations. Findings from the HR investigations survey reveal growing pressures relating to investigator capacity, timeliness, consistency of approach, independence and the increasing complexity of cases.
04 August 2026	All	Industry News	Nearly 100 NHS Staff Left in Limbo Following Repeated Procurement Delays	Nearly 100 NHS Staff Left in Limbo Following Repeated Procurement Delays - TIAA	Ongoing procurement challenges have left almost 100 NHS employees facing prolonged uncertainty, highlighting the significant workforce impact that can result when procurement processes fail to deliver timely outcomes.
04 August 2026	All	Case Studies	Case Study – Grievance HR Investigation – Private Sector	Case Study – Grievance HR Investigation - Private Sector - TIAA	A major, private company and joint venture required independent support to review a multi-issue workplace grievance involving senior project personnel. The matter was sensitive because it sat within a complex operating model, where individuals worked on the project while remaining employed by different parent organisations. The client required an objective assessment of events, a clear evidence-based conclusion on the issues raised, and practical insight into whether management processes could be strengthened.
03 August 2026	All	Tiaa Blog	Security Matters – Social Engineering: The Security Threat Walking Through the Front Door	Security Matters - Social Engineering: The Security Threat Walking Through the Front Door - TIAA	Security Matters Blog. Healthcare organisations invest heavily in protecting their people, facilities and assets. Access control systems, CCTV networks and security personnel all play an important role. Yet many security incidents do not begin with a breach of a physical barrier. They begin with a conversation.
31 July 2026	All	Industry News	Department for Education Confirms Cyber Incident Affecting More Than 600,000 Records	Department for Education Confirms Cyber Incident Affecting More Than 600,000 Records - TIAA	The Department for Education (DfE) has confirmed that approximately 607,000 records were accessed during a recent cyber-attack, underlining the increasing threat posed by cyber criminals to public sector organisations.

Date Issued	Sector	Briefing Type	Subject	Website Link	Tiaa Comments
24 July 2026	All	Industry News	Martyn's Law: SIA Publishes New Guidance for Organisations Preparing for Compliance	Martyn's Law: SIA Publishes New Guidance for Organisations Preparing for Compliance - TIAA	The Security Industry Authority (SIA) has issued new guidance to help organisations prepare for Martyn's Law ahead of its expected introduction in Spring 2027. The guidance clarifies which premises and events will be covered, outlines the counter-terrorism responsibilities organisations will need to meet, and explains how compliance will be monitored through desk-based assessments and on-site inspections. Early preparation will help organisations understand their obligations and strengthen their security and emergency planning arrangements.
24 July 2026	All	Industry News	Patient Data Privacy Under Scrutiny: Lessons in Governance and Accountability	Patient Data Privacy Under Scrutiny: Lessons in Governance and Accountability - TIAA	Recent reports of alleged inappropriate access to patient records within NHS organisations have once again highlighted the importance of strong information governance, data protection and organisational culture.
21 July 2026	All	Industry News	NHS Cyber Security Moves to the Top of the Risk Agenda	NHS Cyber Security Moves to the Top of the Risk Agenda - TIAA	Cyber security has become a top strategic priority for the NHS as increasingly sophisticated threats, including AI-enabled cyber-attacks and state-sponsored actors, continue to evolve. In response, cyber security has been elevated on the NHS risk agenda, with greater accountability, enhanced resilience measures, and increased investment in technology and security capabilities to protect critical healthcare services and patient data.
20 July 2026	All	Tiaa Article	How Audit Committees can provide confidence during post-election transition	How Audit Committees can provide confidence during post-election transition - TIAA	In periods of political and organisational transition, Audit Committees play a critical role in maintaining confidence in governance, risk management and control. Their value is not limited to receiving audit reports. At their best, they provide an independent and informed forum that helps those charged with governance understand whether assurance arrangements are robust enough for the challenges ahead.
18 July 2026	All	Tiaa Article	Independent HR Investigations: Getting It Right the First Time	Independent HR Investigations: Getting It Right the First Time - TIAA	When workplace issues such as grievances, whistleblowing concerns, or misconduct allegations arise, it is essential that they are managed through a fair, consistent, and robust process. Effective HR investigations help organisations address sensitive and complex matters objectively, ensuring decisions can withstand scrutiny while protecting employees, organisational integrity, and reputation.
17 July 2026	All	Industry News	Construction Skills: Addressing the Workforce Challenge Behind the UK's Building Ambitions	Construction Skills: Addressing the Workforce Challenge Behind the UK's Building Ambitions - TIAA	The UK construction sector faces a significant skills shortage that threatens the delivery of new homes, infrastructure, schools, and healthcare facilities. In response, the government has announced a £625 million investment package aimed at recruiting and training up to 60,000 additional skilled construction workers by 2029. The initiative highlights the need for a stronger workforce to support the UK's building ambitions and ensure the sector has the skills required to meet future demand.

Date Issued	Sector	Briefing Type	Subject	Website Link	Tiaa Comments
17 July 2026	All	Industry News	Workforce Planning: Lessons for Building a Resilient and Future-Ready Organisation	Workforce Planning: Lessons for Building a Resilient and Future-Ready Organisation - TIAA	Effective workforce planning has never been more important. As organisations face increasing financial pressures, evolving service demands and rapid technological change, ensuring the right people, with the right skills, are in the right roles is critical to long-term success.
13 July 2026	All	Tiaa Article	Are your delegations and committee arrangements fit for a new administration?	Are your delegations and committee arrangements fit for a new administration? - TIAA	After an election, councils often inherit governance arrangements that were designed for a different political context, different priorities or a different scale of challenge. Schemes of delegation, committee structures and decision-making routes may still be technically in place, but that does not mean they remain fit for purpose. A new administration needs governance arrangements that reflect how it intends to lead, scrutinise and make decisions.
07 July 2026	All	Anti-Crime Alert	Charity fraud on the increase	Charity fraud on the increase - TIAA	Charity fraud remains a significant risk across the sector, with the Charity Commission investigating hundreds of fraud and cybercrime cases each year and warning that incidents are likely underreported. Common frauds include asset misappropriation, payment diversion scams, expenses fraud, and phishing attacks. Recent high-profile prosecutions involving a £700,000 Gift Aid scam and a £2 million fraud against a charity highlight the importance of strong financial controls, vigilance, and fraud prevention measures.
03 July 2026	Local Government	Tiaa Article	Governance assurance during LGR, restructuring and service redesign	Governance assurance during LGR, restructuring and service redesign - TIAA	Local government reorganisation, restructuring, and service redesign can put significant pressure on governance arrangements. As councils integrate services and implement changes, there is a risk that governance controls and oversight processes may not keep pace. Governance assurance helps ensure accountability, effective decision-making, and risk management are maintained while organisations continue delivering services during periods of rapid change.
03 July 2026	Local Government	Newsletter	Scrutiny, transparency and defensible decision-making in a high-pressure environment	Scrutiny, transparency and defensible decision-making in a high-pressure environment - TIAA	Local authorities are making increasingly difficult decisions in an environment shaped by financial constraint, rising demand and intense public scrutiny. In that context, the quality of decision-making matters as much as the decision itself. If councils cannot demonstrate that decisions were properly evidenced, lawfully taken and transparently recorded, they expose themselves to challenge, reputational damage and loss of trust.
01 July 2026	All	Tiaa Blog	Security Matters – Chinese Espionage Threat Highlights Importance of Insider Risk Awareness	Security Matters - Chinese Espionage Threat Highlights Importance of Insider Risk Awareness - TIAA	The ninth blog in the series. A recent Five Eyes intelligence warning highlights how Chinese intelligence services are reportedly using professional networking and recruitment platforms to identify and recruit individuals with access to sensitive information. Organisations should strengthen insider risk awareness, encourage staff to verify unsolicited approaches, and maintain robust reporting procedures for suspicious contact

Date Issued	Sector	Briefing Type	Subject	Website Link	Tiaa Comments
30 June 2026	All	Industry News	NAO Insight: Using AI Effectively	NAO Insight: Using AI Effectively - TIAA	The National Audit Office (NAO) has published new guidance to help organisations plan, deploy and scale AI safely and effectively. It highlights that success depends as much on governance, data and skills as on the technology itself.
23 June 2026	Local Government	Tiaa Article	The First 100 Days After Elections: Governance moves that make reform deliverable	The First 100 Days After Elections: Governance moves that make reform deliverable - TIAA	The first 100 days after local elections can set the tone for an administration's entire reform programme. In our latest article, we look at why the post-election period is such an important governance window for councils — particularly where there is financial pressure, transformation activity or local government reorganisation.
18 June 2026	All	Newsletter	Fraud Stop All Sectors – Issue 9	Fraud Stop All Sectors – Issue 9 - TIAA	The latest edition of our Fraud Stop All Sector publication is now available. Our Fraud Stop publication features emerging fraud trends identified at organisations, case studies that our specialists have been involved in and methods of fraud prevention.
16 June 2026	All	Anti – Crime Alert	Romance Fraud on the Rise: What You Need to Know	Romance Fraud on the Rise: What You Need to Know - TIAA	The BBC reported on 15 June 2026 that cases of fraud in the UK have surged with criminals using AI to manipulate people and even marrying victims of romance scams to steal more money.
15 June 2026	All	Anti – Crime Alert	World Cup Scams: How Criminals Target Football Fans and How to Stay Safe	World Cup Scams: How Criminals Target Football Fans and How to Stay Safe - TIAA	As excitement builds around the FIFA World Cup, millions of fans are booking trips, buying tickets, purchasing merchandise, and following their favourite teams online. Unfortunately, major sporting events also create opportunities for criminals looking to exploit the enthusiasm of supporters. Experts have warned that scams linked to the World Cup are likely to increase, with fraudsters using increasingly sophisticated tactics, including artificial intelligence (AI), fake websites, social media scams, and phishing attacks.
15 June 2026	All	Tiaa Article	Independent HR Investigations: Getting It Right the First Time	Independent HR Investigations: Getting It Right the First Time - TIAA	Most HR investigations don't fail because people don't care. They fail because the process isn't strong enough. In this article, we explore where things go wrong, what good looks like, and when independence really matters.
08 June 2026	All	Tiaa News	Tiaa Sponsors Military Miles 2026: Making a Difference Through Walking	TIAA Sponsors Military Miles 2026: Making a Difference Through Walking - TIAA	Tiaa is proud to announce our official sponsorship of Military Miles 2026, an inspiring fundraising challenge that brings together the military community, industry partners, and supporters to make a meaningful difference.

Date Issued	Sector	Briefing Type	Subject	Website Link	Tiaa Comments
02 June 2026	All	Anti – Crime Alert	Phishing Emails Targeting Omnicell Customers	Phishing Emails Targeting Omnicell Customers - TIAA	We have recently been made aware of a phishing email campaign targeting Omnicell customers. An unauthorised third party is attempting to impersonate Omnicell Accounts Receivables and is fraudulently requesting changes to payment account details.
01 June 2026	All	TIAA Blog	Martyn's Law Is Coming. Is the Heritage Sector Ready for Enforcement?	Martyn's Law Is Coming. Is the Heritage Sector Ready for Enforcement? - TIAA	The seventh blog in the series. Martyn's Law is no longer a future concept—it is on the statute book, with enforcement by the regulator (Security Industry Authority SIA) from April 2027. The question for the heritage sector is not *what is it*, but how prepared are you?

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Our work is limited to the areas detailed in the scope above.
Our conclusions are based on the information provided by management at the time of the assignment delivery.

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	Agenda Item No. 10
Governance, Audit and Scrutiny Committee 9 November 2026	**Report by the Head of Corporate Assurance**

STRATEGIC RISK AND OPPORTUNITY UPDATE

1. SUMMARY

1.1 This paper provides the Committee with an overview of the Service's approach to risk and opportunity management, the constitutional responsibilities for risk, and the evolving external inspection landscape. It is intended to support the Committee's scrutiny and assurance role, ensuring that governance, risk management, and internal controls remain robust and aligned with statutory and best practice requirements.

1.2 Members serving on the Committee are directly involved in risk oversight and are expected to:

- Drive the scrutiny process through active engagement.
- Monitor the work of the Authority and officers in carrying out policy.
- Hold officers to account for actions and require responses to questions on relevant matters.
- Investigate the basis of major decisions and monitor performance through audit reports.
- Make recommendations to the Authority arising from the scrutiny process.

1.3 The GAS Committee's role is central to ensuring that:

- The Service's governance arrangements are transparent, accountable, and continuously improving.
- The Authority is well-prepared for external inspection and able to demonstrate the impact of governance and scrutiny on service outcomes.

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2. RECOMMENDATION(S)

2.1 It is recommended that the Committee assures the Fire Authority that:

- The Service has a well embedded approach to risk and opportunity management in alignment with constitutional requirements.
- The Committee's annual work programme ensures it addresses the evolving inspection criteria and governance expectations.
- The risk registers, controls, and assurance activities are up to date and reflect both threats and opportunities.

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3. BACKGROUND

3.1 Humberside Fire and Rescue Service (HFRS) operate a structured and systematic approach to risk and opportunity management, embedded across all directorates and projects. The framework ensures:

- **Comprehensive risk identification**: Risks are described, rated for likelihood and impact, and assigned clear ownership.

- **Prioritisation**: A risk matrix is used to focus resources on the most critical risks and opportunities, in line with the Service's risk appetite.

- **Treatment and control**: Each risk is assigned a treatment strategy (accept, treat, transfer, avoid) and control type (preventative, detective, directive). Controls are documented, tested, and regularly reviewed.

- **Residual risk monitoring**: Post-control risk ratings are monitored with set review frequencies (monthly, quarterly, bi-annually), and assurance activities track progress and emerging issues.

- **Opportunities**: The register captures not only threats but also opportunities, supporting strategic decision-making and enabling the Service to leverage positive outcomes.

- **Alignment with risk appetite and quality assurance**: All risks are managed in line with defined appetite statements (financial, people, environment, security), underpinned by audits and performance reviews for continuous improvement.

Integration with Constitution

3.2 Risk management is embedded in the Authority's decision-making principles, financial and contract procedures, and member conduct requirements:

- **Part 3 (Decision Making)**: All decisions must consider lawfulness, financial propriety, proportionality, consultation, openness, sustainability, and clarity of aims. Risk management is integral to these principles.

- **Part 4 (Financial and Contract Procedure Rules)**: Before procurement, risks must be assessed and documented, with project risk registers established as appropriate. Contracts must include provisions for risk identification and management, with resources proportional to complexity and risk.

- **Part 5 (Conduct and Probity)**: The S.151 Officer is responsible for arranging and amending insurance cover, and members must ensure new risks are notified promptly for insurance purposes. Members are also expected to identify opportunities for improvement and innovation

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4. REPORT DETAIL

Committee Constitutional Role and Responsibilities

4.1 As set out in Article 6 of the Constitution, the Committee is responsible for providing independent advice and recommendations to the Authority on the adequacy of governance and risk management frameworks, internal controls, and financial reporting. Key functions include:

- Reviewing the Annual Governance Statement prior to approval.
- Considering the framework of assurance and ensuring it addresses the Authority's risks and priorities.
- Monitoring the development and operation of risk management, reviewing organisational risk, and monitoring management action on risk-related issues.
- Reviewing arrangements for the assessment of fraud risks and monitoring anti-fraud policies.
- Scrutinising decisions of the Authority and the implementation of policy at HFRS, with a focus on non-political, evidence-based recommendations.

External Inspection and Evolving Expectations

4.2 The external inspection regime (HMICFRS) has evolved, with Round 4 (2025–27) introducing:

- Fewer principal questions (reduced from 11 to 10).

- Updated characteristics of “Good”.
- Greater focus on values, culture, and handling of misconduct.
- Emphasis on leadership at all levels.
- Increased scrutiny of the impact of governance, assurance, and scrutiny on service delivery and efficiency.

Key changes include:

- Risk management: Now combines understanding and management of risk, with emphasis on integration with corporate risk registers and alignment with local/national registers.

The inspection now specifically examines:

- The relationship between internal governance and the Fire Authority.
- How well-informed the Authority is to make risk-based decisions.
- The impact of Authority decisions on prevention, protection, and operational activities.
- The outcomes of Authority decisions regarding efficiency and effectiveness

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5. EQUALITY, DATA PROTECTION AND RISK IMPLICATIONS

5.1 There is no requirement to carry out an Equality Impact Assessment (EIA) or Data Protection Impact Assessment (DPIA) as this report does not relate to a policy or service delivery change or involves the processing of personal data.

5.2 The Corporate Governance, Risk and Improvement Framework Policy is the Service’s enabling document to managing risk and opportunity. The Service maintains a Risk and Opportunity Register which is reviewed on a monthly basis.

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6. CONCLUSION

6.1 The Committee is advised to accept assurance that the report is accurate and complete, in accordance with its constitutional responsibilities [Article 6, Section 6.4].

6.2 The report demonstrates that risk and opportunity management is effectively embedded and aligned with governance requirements, the Committee’s work programme remains responsive to evolving standards, and assurance mechanisms, including risk registers and controls, are current and comprehensive.

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Background Papers

HFA Constitution

Glossary/Abbreviations

DPIA	Data Protection Impact Assessment
EIA	Equality Impact Assessment

S.151 Officer	The Section 151 Officer is the statutory Chief Finance Officer responsible for ensuring the fire and rescue authority's financial affairs are properly administered and for warning if spending becomes unlawful or unsustainable.

	Agenda Item No. 11
Governance, Audit and Scrutiny **9 November 2026**	**Report by the Head of Procurement**

PROCUREMENT & COMMERCIAL

1. SUMMARY

1.1 This report addresses the following scope as set by the Committee with regards to the Authority's Procurement activity:

- Links to wider Fire and Rescue Service goals and objectives.
- Conducting all commercial and procurement activity in compliance with relevant procurement legislation and any other statute, law, government policy notes.
- Defining those accountable and responsible for procurement and commercial activity and ensuring sufficient capability and capacity to deliver, including ongoing training and continued professional development.
- Organisational decisions and the measures implemented support equality, diversity, and inclusivity, are non-discriminatory with appropriate impact assessments undertaken.
- The procurement process includes added value/social return on investment.

2. RECOMMENDATION

2.1 It is recommended that the Committee assures the Fire Authority that the Procurement Strategy is committed to conducting all procurement and commercial activity in compliance with relevant legislation, whilst delivering value for money against the Service's Community Risk Management Plan (CRMP) and Strategic Plan objectives.

3. BACKGROUND

The Procurement Policy

3.1 The Authority's Procurement Policy was last revised in February 2025 in response to the introduction of the Procurement Act 2023.

3.2 The Procurement Act 2023 represented the most significant transformation to UK public procurement in decades. It was designed to deliver a regime that was quicker, simpler, more transparent and better able to meet the UK's needs while remaining compliant with international obligations.

3.3 It replaced four sets of regulations under the EU-based law system with a common set of UK rules.

3.4 The Authority's Procurement Policy is built around five key objectives;

- Achieve value for money
- Procure fit for purpose solutions
- Ensure legislative compliance
- Work in support of the wider agenda
- Promote professional standards

4. REPORT DETAIL

4.1 The Community Risk Management Plan (CRMP) is the Service's primary strategic document that identifies community risks and how the Service will address them.

4.2 The CRMP outlines the following objectives:

- Supporting Risk-Based Service Delivery
- Enabling Operational Readiness and Frontline Response
- Delivering Value for Money and Financial Sustainability
- Supporting Productivity, Efficiency and Collaboration

Delivering Risk-Based Service Delivery

4.3 The production of the Medium-Term Resource Strategy (MTRS) is informed by the CRMP. The alignment of these provides assurance that the balanced budget can sustain the required service to the public.

4.4 Procurement activity therefore underpins the acquisition of resources, equipment, systems and specialist services needed to manage identified risks and deliver effective emergency response.

4.5 A resilient supply chain is essential for delivering CRMP service delivery objectives. Procurement manages contracts and supplier relationships to ensure critical goods and services remain available, helping the Service maintain operational readiness and continuity during emergencies or periods of increased demand.

Enabling Operation Readiness and Frontline Response

4.5 The Fleet and Equipment Strategy explicitly states that fleet and equipment assets are strategic resources that enables the Service to respond quickly and effectively to incidents, reduce deaths and injuries, protect property and minimise impacts on communities.

4.6 Procurement is identified as a key theme within the strategy, focused on purchasing the right vehicles and equipment for operational crews in a timely manner, allowing emergency response capabilities to remain effective.

4.7 Emergency response depends on equipment being available and fit-for-purpose at all times. Through procurement and contract management, the Service secures maintenance, servicing, and support arrangements that keep vehicles and equipment operational and available for incidents.

4.8 Procurement decisions consider not only cost but also quality, reliability, safety, maintenance, and after-sales support. This helps ensure frontline staff have safe, effective, and compliant equipment to protect themselves and the public

4.9 The Service emergency response relies on digital systems, communications equipment, and digital technologies. Procurement secures these systems and associated support services, helping crews receive incident information, communicate effectively, and coordinate responses.

Delivering Value for Money and Financial Sustainability

4.10 The Service's procurement guidance states that supplier selection is based on overall value for money, considering quality, reliability, safety, delivery, maintenance and support in addition to price. This aligns procurement with the Service's wider requirement to deliver efficient and effective services while making best use of public funds.

4.11 The Service actively participates in regional and national procurement exercises to identify opportunities for enhancing practices.

4.12 Effective contract management has demonstrated benefits in reducing costs, alongside improving financial and operational performance. The Service has therefore adopted a formal approach to this.

4.13 During the planning stage of procurements this involves risk assessments, mitigation and contingency plans.

4.14 After the contract is awarded, performance is continually reviewed and managed by a designated officer, in line with the contract's terms and conditions.

Supporting Productivity, Efficiency and Collaboration

4.15 The Service plays an active role in the Yorkshire and Humberside Regional Procurement Group and contribute to National Fire Chiefs Council (NFCC) and other emergency service collaborative arrangements.

4.16 This facilitates a reduction in duplication, facilitates knowledge sharing and enhances procurement efficiency.

4.17 The Service establishes framework agreements or seeks to access framework agreements held by other public authorities, where these offer demonstrable value for money.

Compliance with Legislation

4.18 As a public sector body, Humberside Fire and Rescue Service is subject to the Procurement Act 2023 and associated procurement regulations. The Service must conduct its procurements in accordance with the statutory objectives of delivering value for money, maximising public benefit, acting with integrity, and ensuring transparency through the sharing of information.

4.19 Internally, the HFA Constitution contains Contract and Financial Procedure Rules which provide robust governance framework for the way the Service manages financial and procurement affairs. This includes obtaining competitive quotations and tenders to ensure value for money is achieved.

4.20 The robust internal governance framework comprises; Finance and Procurement Policies, Financial Procedure Rules, Contract Procedure Rules and Scheme of Delegation.

4.21 These documents establish the rules, approvals, financial thresholds and responsibilities that officers must follow when undertaking procurement activity, ensuring decisions are made lawfully and consistently

4.22 The Service maintains a dedicated Procurement Team within the Corporate Finance and Procurement Function. They are responsible for providing professional advice throughout the procurement life cycle to ensure all activities comply with legislation, policy and recognised best practice.

Those Charged with Procurement Responsibilities

4.23 Humberside Fire Authority clearly defines accountability for procurement through its Procurement Policy, Constitution, Financial Procedure Rules, Scheme of Delegation and Contract Procedure Rules.

4.24 Strategic responsibility sits with the Executive Director of Finance (Section 151 Officer), while day-to-day responsibility is assigned to the Head of Procurement and the dedicated Procurement Team. Contract managers are assigned responsibility for supplier and contract performance following award.

4.25 The Procurement Team was restructured in 2023 in order to meet both the needs of the organisation and the long term needs of the communities served.

4.26 The Head of Procurement role is held by a professionally qualified procurement practitioner (MCIPS). All other members of the team are also appropriately qualified and undertake regular CPD. This demonstrates the Service's commitment to maintaining appropriate procurement expertise and leadership.

Equality, Diversity and Inclusion

4.27 The Service ensures procurement decisions support equality, diversity and inclusion by embedding Equality Act 2010 requirements within its Procurement Policy and wider governance framework.

4.28 Suppliers are required to demonstrate compliance with equality legislation and commitment to inclusive practices.

4.29 Significant procurement-related decisions are subject to Equality Impact Assessment processes where appropriate, enabling the Authority to identify and mitigate potential adverse impacts on protected groups and demonstrate compliance with the Public Sector Equality Duty.

Added Value and Social Return on Investment

4.30 The Authority ensures that procurement delivers added value by embedding social value considerations within its Procurement Policy.

4.31 Social value is assessed during procurement planning and, where relevant, is incorporated into tender evaluation criteria. The Authority considers the wider economic, social and environmental benefits arising from contracts, including support for local businesses, social inclusion, skills development and environmental improvements.

4.32 In accordance with the Public Services (social value) Act 2012, these factors are considered for applicable contracts and are often applied voluntarily to lower-value procurements to maximise community benefit and return on investment.

4.33 The Authority seeks to generate local economic and social benefit by reducing unnecessary barriers to participation, engaging appropriately with the market and making opportunities accessible to SMEs and other suppliers, while treating suppliers equally and without unjustified discrimination.

4.34 In addition, it publishes procurement opportunities through its e-sourcing portal to promote fair and transparent access to contracts.

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5. EQUALITY AND DATA PROTECTION RISK IMPLICATIONS

5.1 There is no requirement to carry out an Equality Impact Analysis (EIA) and/or Data Protection Impact Assessment (DPIA) as this report does not relate to a policy or service delivery change or involves the processing of personal data.

5.2 Having considered the subject matter, it is confirmed that the risk implications are minimal and are effectively managed through established governance and operational controls; accordingly, no specific treatment or entry on the Risk and Opportunity Register is required.

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6. CONCLUSION

6.1 It is recommended that the Committee takes assurance from the Procurement Strategy that the Authority is committed to conducting all procurement and commercial activity in compliance with relevant legislation, whilst delivering value for money against the Service's CRMP priorities.

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Background Papers

Procurement Policy

Glossary/Abbreviations

CRMP	Community Risk Management Plan
DPIA	Data Protection Impact Assessment
EIA	Equality Impact Assessment
HFA	Humberside Fire Authority
MTRS	Medium-Term Resource Strategy
NFCC	National Fire Chief's Council

	Agenda Item No. 12
Governance, Audit and Scrutiny Committee 9 November 2026	**Report by the Head of Training**

Emergency Response Driving

1. SUMMARY

1.1 This report provides assurance to the Governance, Audit and Scrutiny Committee on Humberside Fire and Rescue Service's (HFRS) arrangements for emergency response driving against the relevant Fire Standard, legislation and National Fire Chiefs Council (NFCC) guidance.

1.2 The scope of the report, as set by the Committee, was to explore the following areas:

- Legislation and regulations that apply to emergency response driving.
- Relevant National Guidance to support instructor and driver training, including the NFCC Emergency Response Driver and Instructor Framework.
- Record management of driver competency and revalidation training.
- Periodic independent quality assured driver training provision.

1.3 The report highlights the strategic framework in place, supported by an annual training needs analysis, competency monitoring, maintained training and revalidation records, qualified and registered instructors, inclusive and accessible training arrangements. Current capacity includes a 32% resilience position for trained response drivers.

1.4 All emergency response drivers are in date for revalidation; and both Driver and Vehicle Standards Agency approved examiners and National Fire Chiefs Council-registered trainers are compliant with their assurance requirements.

1.5 Overall, the report identifies substantial compliance and effective governance, with two improvement actions in progress: completing the documented gap analysis against the updated National Fire Chiefs Council instructor framework, targeted for November 2026, and finalising and implementing reciprocal regional quality-assurance arrangements with Yorkshire and Humber services, with evidence retained. Equality and risk implications are assessed as minimal and managed through existing controls.

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2. RECOMMENDATION(S)

It is recommended that the Committee:

(i) Provides assurance to the Fire Authority that the Service is meeting the applicable Emergency Response Driving Fire Standard requirements and has effective arrangements in place to provide a safe and competent emergency response driving capability.

(ii) Recognises the following two areas for action and/or improvement identified to enhance compliance further with the Emergency Response Driving Fire Standard, accepting the risk as low and has confidence in the Service's proactiveness in identifying the respective area and acting accordingly.

a. Complete a documented gap analysis on the Emergency Response Driving Instructor Framework.
b. Establish an agreement with the Yorkshire and Humber Fire and Rescue Services, to independently quality assure one another in the area of driver training.

3. BACKGROUND

3.1 HFRS requires a suitably trained and competent emergency response driving capability to discharge the operational duties placed on Humberside Fire Authority. Sections 7 and 8 of the Fire and Rescue Services Act 2004 require a fire and rescue authority to make provision for firefighting, protecting life and property, and rescuing people from road traffic accidents. In doing so, the Authority must secure the personnel, services and equipment needed to meet normal requirements, provide training for personnel, and maintain arrangements for receiving calls for help and summoning personnel. Section 9 also enables the Secretary of State to confer functions relating to other emergencies. Emergency response driving is therefore a necessary enabling capability: appliances, officers and specialist resources must be able to reach incidents promptly and safely for HFRS to perform these functions effectively.

3.2 Emergency response driving is undertaken within the wider road-traffic law framework. Section 87 of the Road Traffic Regulation Act 1984 currently provides a limited exemption from statutory speed limits when a vehicle is being used for fire and rescue authority purposes and observance of the limit would be likely to hinder that use; it does not create a general exemption from road-traffic law or remove the driver's duty to drive safely and with due care.

3.3 Section 19 of the Road Safety Act 2006 provides for section 87 to be replaced so that the speed-limit exemption would apply only where the driver has satisfactorily completed a prescribed course of high-speed driving training, or is driving as part of such a course, while also enabling regulations to govern course content and the approval of training providers and instructors. Section 19 remains prospective and will not alter the present legal position until commenced through regulations. Nevertheless, it establishes a clear direction of travel towards a statutory training threshold. HFRS must therefore ensure that only appropriately authorised, licensed, trained and competent personnel undertake response driving and that its training, assessment and assurance arrangements are capable of evidencing readiness for the section 19 requirements, alongside compliance with current legislation, national guidance and Service policy.

3.4 The Health and Safety at Work Act 1974 requires HFRS, so far as is reasonably practicable, to protect employees health, safety and welfare and to provide the information, instruction, training and supervision necessary to achieve this. Regulation 13 of the Management of Health and Safety at Work Regulations 1999 further requires employers to take account of employees capabilities and to provide adequate health and safety training when staff are recruited or exposed to new or increased risks, with training repeated and adapted where appropriate.

3.5 HFRS's emergency response driver training, assessment, revalidation and assurance arrangements support these duties by controlling the occupational road risk arising from emergency driving. They also give practical effect to the Community Risk Management Plan (CRMP) which identifies community risks and sets out how HFRS will allocate and maintain resources to respond quickly and effectively to fires, road traffic collisions and other emergencies across the Humber area, effectively supporting the attainment of intervention standards as prescribed within the CRMP.

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4. REPORT DETAIL

4.1 This section responds in detail to the areas of the the scope as set by the Committee. The detail contained within this section uses the Fire Standards as a clear, directive structure to support the formulation of responses to the scoping points.

- Comply with legislation and regulations that apply to emergency response driving

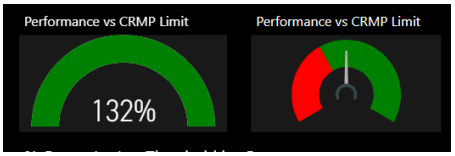
- Give due regard to relevant National Guidance to support instructor and driver training including the NFCC Emergency Response Driver and Instructor Framework
- Ensure that records of driver competency and revalidation training are kept and maintained
- Ensure that driver training provision is periodically independently quality assured.

Fire Standards - Have a strategic approach to ensure that it can continue to deliver an emergency response in line with the risks outlined in its Community Risk Management Plan.

4.2 HFRS has established an Emergency Response Driving Framework aligned with the NFCC Emergency Response Driving Framework. It incorporates the relevant NFCC requirements and maps both response and non-response driving standards to role requirements. This gives HFRS assurance that drivers in all roles are trained and assessed against the appropriate standard.

4.3 To ensure that HFRS achieves and maintains an appropriate number of emergency response drivers and trainers an annual Training Needs Analysis (TNA) is conducted in accordance with the Training, Competence and Proficiency Policy. This TNA determines the number of emergency response drivers required by location (fire stations and flexi duty officers) to maintain emergency response capabilities in accordance with the CRMP. Furthermore, when conducting the TNA, a gap analysis is conducted against that of current trained drivers, the retirement profile and the average number of staff leavers, to subsequently determine the number of training courses required in the upcoming training year. Consequently, setting the training delivery plan for new drivers for the preceding 12 months. This enables budgeting and resourcing requirements of the driver training team to be established based on data as opposed to subjective analysis.

4.4 The prescribed requirement is mapped within a competency dashboard, which all managers have access to. The analysis and assessment of staff competencies is embedded within performance and assurance auditing processes, which are completed monthly. Effective of October 1st 2026, a 32% resilience position is in place for the established number of trained response drivers.



(Source: HFRS competency performance dashboard)

Comply with legislation and regulations that apply to emergency response driving.

4.5 Section 19 of the Road Safety Act 2006 is subject to review and change. However, are still prospective and have not yet been implemented. As of now, the legislation remains in force as it was on or before the proposed changes. These changes pertain to exemptions from speed limits for certain vehicles, including those used for fire and rescue authority purposes, ambulance purposes, police, organised crime agency purposes, and training purposes. Additionally, the new provisions require drivers of such vehicles to complete a course of training in high-speed driving. Once the implementation date is confirmed, it will be reflected in the legislation. Until such time, the existing rules continue to apply.

4.2 The training delivery, as detailed within HFRS Emergency Response Driving Framework is compliant with both the current requirements as prescribed in Section 19 and has been compliant with the proposed changes currently in debate/consultation since 2022.

4.3 All HFRS driving instructors fulfil the requirements of attending the NFCC Continuing Professional Development (CPD) events, undergo portfolio assessment and verification, and are duly registered on the Emergency Response Driving instructor register, thereby meeting legislative mandates.

4.4 An independent Policy has been produced within HFRS titled 'Management of Occupational Road Risk' or MORR Policy which sets the policy position for all HFRS drivers, inclusive of emergency response and non-emergency response. This policy has been gap analysed against driving legislation and health and safety legislation, to satisfy the compliance requirements and provide a clear and directive position for all HFRS vehicle uses (and passengers) to comply with.

Give due regard to relevant National Guidance to support instructor and driver training including the NFCC Emergency Response Driver and Instructor Framework.

4.5 HFRS has completed a gap analysis against the NFCC Emergency Response Driver Framework and has produced an HFRS framework that provides evidence of alignment. The NFCC instructor framework was updated in 2025. Although the revised framework has been reviewed, a further documented gap analysis is in progress to provide a complete audit trail and is expected to be finished by November 2026.

4.6 The HFRS Emergency Response Driver Framework takes the knowledge skills and behaviours (practical and theoretical) from National Operational Guidance and embeds the identified requirements into training packages (practical and theory).

4.7 All HFRS driving instructors are registered on the NFCC Emergency Response Driving instructor register, satisfying the requirements of the framework thereby meeting legislative mandates.

Action/area for Improvement: Complete documented instructor framework gap analysis (in progress).

Ensure that records of driver competency and revalidation training are kept and maintained.

4.8 As outlined in above, a TNA is performed annually to determine the training requirements. The records of current driver compliance, including that of revalidation are recorded on each staff members Course Management System (CMS) via pdrPro Learning Management System. The CMS highlights when training/revalidation is due based on the set parameters built within the system for a timeline. This is audited on a monthly basis and documented to ensure compliance requirements are achieved and maintained. The data/record is held for the duration of the employees employment with HFRS, auditable at any point in time by the individual or managers, and is retained post-employment in accordance with the retention schedule (3-years).

4.9 Each driver also has a training folder, hosted on HFRS SharePoint site in the secured documents area of Training. All assessment records (theory and practical) are retained in this area and at the time of writing this report all emergency response drivers were in date for their driving revalidation.

4.10 A resilient buffer is built within the required revalidation frequencies. According to the NFCC framework; periodic reassessment is to be completed within 60 months of initial training or previous reassessment, in each vehicle class for which the driver is qualified. HFRS aim to attain a 36-month frequency which is used to influence planning, and the driving training needs analysis, occupational road-risk profile, operational exposure, collision and near-miss evidence, skill-decay evidence and assurance findings. Providing a 24-month compliance buffer with the NFCC framework.

4.11 All HFRS driver trainers are registered on the NFCC driver training portal. As registered NFCC driver trainers, they attend an annual CPD event and are required to provide evidence of driver training and CPD. Failure to attend or complete the requirements results in the registration being revoked. All records are published on the NFCC driver training portal. At the time of this report, all HFRS driver trainers are registered as compliant. This paragraph also compliments point five (below) related to independent quality assurance.

Ensure that driver training provision is periodically independently quality assured.

4.12 HFRS has two qualified Driver and Vehicle Standards Agency (DVSA) authorised delegate driving examiners. Consequently, there is a compliance requirement for each of these examiners to undergo and assessment/verification/assurance process by a DVSA assessor four times per year. Failure to attain the required standard, or fulfil the timebound assessment frequency, results in the examiner credentials being revoked. Both examiners are within date for their independent assessment.

4.13 These examiners, due to their higher-level status and owing to them being independently assured, conduct internal peer assessments with the other driver trainers.

4.14 A regional agreement is currently being established with the Yorkshire and Humber Driver Training teams to periodically quality assure each other. At present, due to this element being relatively new to the standard, this has not been completed. The agreement will see each Service quality assure a full driving course within another Service area. For example, HFRS assuring West Yorkshire and South Yorkshire assuring HFRS.

Action/area for Improvement: Finalise agreement, implement and partake with evidence captured (in progress).

Deliver inclusive and accessible training, recognising that every workforce, community and group has different and diverse needs.

4.15 An Equality Impact Assessment (EIA) has been completed related to all learning and development within HFRS. This links to the Training, Competence and Proficiency Policy. In accordance with the respective policy and EIA, where staff require adjustments making, these will be made and or considered, in accordance with the Reasonable Adjustment Policy Delivery Guidance.

4.16 HFRS digital learning material is compliant with WCAG 2.2 AA accessibility standards, and printed material is compliant with UKAAF Clear Print accessibility standards. Furthermore, HFRS commissioned an independent organisation to determine the most widely accessible PowerPoint format, which now has alignment with the respective presentations.

4.17 In the event a staff member has a reasonable adjustment passport, identifying particular requirements, the respective adaptations are incorporated. For example, print on a set paper colour.

Support the national Driver Training Advisory Group (DTAG) through regional structures.

4.18 HFRS undertakes the regional lead position within the Yorkshire and Humber Region related to driver training. HFRS has an appointed position (driver training supervisor) who attends DTAG as both HFRS representative and the regional lead.

4.19 HFRS hosted the national Annual DTAG meeting and CPD event at Service Headquarters in March 2026 across two days.

Provide appropriate representation at relevant national meetings, events and conferences.

4.20 The driver training supervisor is the nominated individual within HFRS who attends relevant meetings and conferences, with the Station Manager or another driver trainer deputising in their absence. As this is outlined as a requirement within the Emergency Response Driving Instructor Framework, a budgeted allowance is incorporated within the annual training budget to ensure the relevant funds are secured, enabling attendance.

4.21 As identified in point seven, HFRS has hosted these meetings previously and the next annual conference, CPD event and DTAG meeting is planned for March 2027. HFRS has offered to host the event again and awaiting confirmation if HFRS will be the host. In either circumstance, Service representation is planned for the respective event.

Ensure that both managers who are responsible for emergency response driving and those working as driving instructors, contribute to the continual improvement of driver training standards. They do this by communicating and sharing learning and experiences with the NFCC network of fire and rescue service driving instructors and centres through engagement with the relevant forums.

4.22 Following the completion of each driving course, the candidate completes a course feedback form, with a range of different questions. The feedback from the candidates is analysed holistically to identify areas for improvement and good practice, based on the data (survey).

4.23 Where areas for improvements are identified either via the respective survey, incident debriefs or accident reports, these are recorded via the Assurance Monitoring System (AMS) with actions for completion being assigned to the appropriate manager. The intention of this, is to continually learn and improve. Where relevant learning is identified, communication is published. Similarly, following the attendance at DTAG or any NFCC event, where learning is identified or good practice which can be adopted, this is recorded and allocated through the AMS.

4.24 In the past 12-months 12 points have been recorded via the AMS related to driving. All learning areas have been actioned, implemented and recorded as complete. Breakdown as follows:

Learning Area	Number Identified
Direct response driving / blue-light response learning	3
Wider mobilisation, stand-down, and appliance response learning	6
Road traffic management, appliance positioning, and driver safety learning	3

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5. EQUALITY, DATA PROTECTION AND RISK IMPLICATIONS

5.1 An EIA has been completed and there are no identified negative impacts on any protected characteristic groups. As part of the requirement of the Training, Competence and Proficiency Policy, where staff have particular needs, based on assessment, reasonable adjustments will be considered and/or made, in accordance with the Reasonable Adjustment Policy Delivery Guidance.

5.2 Having considered the subject matter, it is confirmed that the risk implications are minimal and are effectively managed through established governance and operational controls; accordingly, no specific treatment or entry on the Risk and Opportunity Register is required.

6. CONCLUSION

6.1 The report concludes that HFRS has effective arrangements to provide a safe, competent and resilient emergency response driving capability aligned with its statutory duties, the CRMP, applicable road-traffic and health and safety requirements, the Emergency Response Driving Fire Standard and NFCC guidance.

6.2 Assurance is supported by the strategic framework and annual training needs analysis, a 32% driver resilience position, current revalidation records, qualified and registered instructors, established competency monitoring, accessible training and national and regional engagement.

6.3 Two improvement actions remain in progress: completion of the documented gap analysis against the updated NFCC instructor framework and implementation of reciprocal regional independent quality assurance. These are enhancements rather than material non-compliance, and the residual risk is assessed as low. The Committee is asked to take assurance that HFRS is meeting the applicable emergency response driving requirements, note the two improvement actions and their planned completion, and accept the associated low level of risk.

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Background Papers

None

Glossary/Abbreviations

AMS	Assurance Monitoring System
CMS	Course Management System
CPD	Continuing Professional Development
CRMP	Community Risk Management Plan
DPIA	Data Protection Impact Assessment
DTAG	Driver Training Advisory Group
DVSA	Driver and Vehicle Standards Agency
EIA	Equality Impact Assessment
GAS	Governance, Audit and Scrutiny Committee
HFA	Humberside Fire Authority
HFRS	Humberside Fire and Rescue Service
MORR	Management of Occupational Road Risk
NFCC	National Fire Chiefs Council
SLT	Senior Leadership Team
TNA	Training Needs Analysis
UKAAF	UK Association for Accessible Formats
WCAG	Web Content Accessibility Guidelines

Date of Meeting	Topic	Scope	Source	Lead
9 November 2026 [Report deadline: 12 October 2026]	**Procurement & Commercial**	• Have a Procurement/Commercial Strategy (or equivalent) linked to wider FRS goals and objectives • Conduct all commercial and procurement activity in compliance with relevant procurement legislation and any other statute, law, government policy notes • Clearly define those accountable and responsible for its procurement and commercial activity and ensure sufficient capability and capacity to deliver, including ongoing training and continued professional development • Ensure that organisational decisions and the measures implemented support equality, diversity, and inclusivity, are non-discriminatory and that appropriate impact assessments are undertaken • Ensuring the procurement process includes added value/social return on investment	• Fire Standard: Procurement and Commercial • HFRS Strategic Plan 3.1 & 3.4	**Head of Procurement**
9 November 2026 [Report deadline: 12 October 2026]	**Emergency Response Driving**	• Comply with legislation and regulations that apply to emergency response driving • Give due regard to relevant National Guidance to support instructor and driver training including the NFCC Emergency Response Driver and Instructor Framework • Ensure that records of driver competency and revalidation training are kept and maintained • Ensure that driver training provision is periodically independently quality assured.	• Fire Standard: Emergency Response Driving and • HFRS Strategic Plan 1.5	**Head of Training** Driver Training Supervisor

Date of Meeting	Topic	Scope	Source	Lead
8 February 2027 [Report deadline: 11 January 2027]	**Responding to fires and other emergencies**	• Developed response strategy that is based on a thorough assessment of risk to the community. • Have an appropriate range of resources (people and equipment) available to respond to personal, property and environmental risk in line with its risk management plan. • Understand and actively manages the resources and capabilities available for deployment. • Able to handle calls in a timely manner to ensure public safety. • Able to manage the fair deployment (and temporary redeployment) of resources to meet operational need • Reference to Vision 2050 – resourcing for now and the future	• HMI Criteria • HFRS Strategic Plan 1.4 & 1.5	**Head of Emergency Response** District Manager – Hull District Manager – East Riding District Manager – South Bank
8 February 2027 [Report deadline: 11 January 2027]	**Health and Wellbeing of the Workforce**	• Effective, trusted and well-understood policies and procedures to support and maintain the health, safety and wellbeing of its staff. • Leaders at all levels prioritise and promote the physical and mental health of all staff, with a strong focus on prevention and early intervention	• HMI Criteria • HFRS Strategic Plan 2.3	**Head of Occupational Health & Wellbeing**

Date of Meeting	Topic	Scope	Source	Lead
8 March 2027 [Report deadline: 8 February 2027]	**Communication and Engagement**	• Have a strategic approach to communications and engagement, including consultation, which includes clear principles about how the organisation will communicate with its audiences, aligned to organisational goals of the service, its values and the principles contained within the Core Code of Ethics • Have leaders that support the strategic approach to communications and engagement and are exemplars in good communication behaviours and principles, aligned to those included in the NFCC Leadership Framework • Have an appropriately resourced and competent communications and engagement capacity that: ○ plans for and manages reactive communication issues such as crises and emergencies, working with local resilience partners ○ plans proactive communications internally and externally; and ○ carries out meaningful engagement exercises and consultations, aligned to the Gunning Principles to inform strategic direction and support decision making processes	• Fire Standard: Communication and Engagement • HFRS Strategic Plan 4.2	**Head of Corporate Assurance** **Senior Communications Officer**
8 March 2027 [Report deadline: 8 February 2027]	**Environmental Sustainability**	• Ensure operational practices that minimise our environmental impact and support the sustainability of the Service, including a clear policy and / or delivery plan • Evidence compliance with related legislation and regulations that apply • Evidence of the management, recording and reporting of related performance standards / targets • Demonstrate evaluation and learning from activities	• HFRS Strategic Plan 3.3	**Head of Health & Safety, Environmental Sustainability and Organisational Learning**

Date of Meeting	Topic	Scope	Source	Lead
BRIEFING NOTE [Deadline: 8 June 2026]	**Major and multi-agency incidents preparedness**	• Working with neighbouring FRSs to form part of a multi-agency response in line with Joint Emergency Services Interoperability Principles (JESIP). • Participation in the LRF, ensuring being well prepared for, or routinely contributing to, multi-agency debriefs. • Local arrangements to ensure compliance with, and supporting, the requirements within the 'National Coordination and Advisory Framework (NCAF) England'. Further to the Scrutiny Item of 10 November 2025, to provide a further update on: • Management of joint exercise programme, including requirements, types and frequency. • Recording processes used to capture exercises.	• HMI Criteria • HFRS Strategic Plan 1.1	**Head of Estates and Resilience**