

AT A MEETING of the HIWFRA Standards and Governance Committee held at  
Fire and Police Headquarters, Eastleigh on Wednesday, 22nd March, 2023

Chairman:

\* Councillor Derek Mellor

\* Councillor David Harrison

Councillor Cal Corkery

\* Councillor Zoe Huggins

\* Councillor Debbie Curnow-Ford

**75. APOLOGIES FOR ABSENCE**

Apologies were received from Cllr Cal Corkery.

**76. DECLARATIONS OF INTEREST**

Members were mindful of their duty to disclose at the meeting any Disclosable Pecuniary Interest they had in any matter on the agenda for the meeting, where that interest was not already in the Authority's register of interests, and their ability to disclose any other personal interests in any such matter that they might have wished to disclose.

No declarations were made.

**77. MINUTES OF PREVIOUS MEETING**

The minutes of the meeting of 28 November 2022 were reviewed and agreed.

**78. DEPUTATIONS**

There were no deputations.

**79. CHAIRMAN'S ANNOUNCEMENTS**

The Chairman reported that Watch Manager Arron Jepp had sadly passed away on 21 March. Arron had served at Rushmoor Fire Station and will be greatly missed by the Service. The Committee took some time to remember him.

The Chairman had attended a Fire Leadership Course and reported that he had found the exchange with Fire and Rescue Authority Members from other Services very useful.

**80. INTERNAL AUDIT CHARTER AND INTERNAL AUDIT PLAN 2023/24**

The Committee considered a report from the Chief Internal Auditor (item number 6 in the minute book). She presented the report and explained that the Internal Audit Charter (Appendix A) was required by the Public Sector Internal Audit Standards to formally define the purpose, authority and responsibilities of Internal Audit. It is reviewed annually and no changes had been made since last year.

The Committee heard that Internal Audit work with the Service to produce the Internal Audit Plan (Appendix B), and that the Organisational Risk Register is a key source of information. Duplication of work is avoided by joint reviews for the Shared Services areas and reliance is placed on the work carried out by Ernst and Young, the External Auditor.

A contingency is held in the Plan to provide flexibility and as the Plan is set early, there would be changes throughout the year, which will be reported to the Committee.

The Committee heard that the Plan is based on risk, and there is an open and honest relationship with the Service. Cases of suspected fraud picked up by the controls in place within systems would be referred to Internal Audit for investigation. The Service also takes part in the bi-annual National Fraud Initiative and training has been run for managers on the warning signs of fraud.

It was confirmed that the Service captures lessons learned and that actions are recorded, carried out and tracked. Best practice is also captured internally and provided by Internal Audit from their work in other organisations, where appropriate.

Resolved

The Internal Audit Charter and Internal Audit Plan for 2023/24 was approved by the Standards and Governance Committee.

## 81. **INTERNAL AUDIT PROGRESS REPORT**

The Committee received a report from the Chief Internal Auditor on Internal Audit Progress (Item number 7 in the minute book).

The Officer reported that Internal Audit was on track to finish everything on time by the end of the year. She explained that two audits had been given limited assurance. These were Continuing Professional Development (CPD), the actions for which were not yet due to be completed and the competency of operational response capability, for which work was ongoing to improve the system. She confirmed that the direction of travel for completing the latter audit actions was good.

In response to questions from Members, it was explained that CPD is part of the 'grey book' terms and conditions and is separate from the more widely understood term and refers to competency in role and that staff who had not completed the relevant training would be taken 'off the run'.

Resolved

The progress in delivering the internal audit plan for 2022/23 and the outcomes to date were noted by Hampshire and Isle of Wight Fire and Rescue Authority Standards and Governance Committee.

## 82. **INTERNAL AUDIT MANAGEMENT ACTIONS REPORT**

The Committee considered a report from the Chief Fire Officer on Internal Audit Management Actions (item number 8 in the minute book).

The officer introduced the report and reported that there was only one medium or high priority action which was outstanding beyond its agreed target date. This related to the tracking of prevention and protection staff competencies and involves work within the system to provide better efficiency. It was confirmed that there was mitigation in place in the interim.

The Committee heard that significant work had been done in respect to the Referral Pathways Audit and that all actions were complete with the February 2023 launch of the new electronic Safe and Well process.

In response to questions from Members, the information gained by the Service from Safe and Well, post incident and targeted visits was outlined as well as that gained when incidents are attended. In the event of an IT failure, a paper based system would be used.

During the first month of operation, feedback from the new Safe and Well form had been very positive and the fact that the process had been reviewed from end to end had assisted that.

The Committee discussed areas where they may benefit from an update to gain understanding. This will be further discussed between officers and Members.

Resolved

The Standards and Governance Committee noted the progress made towards the implementation of the internal audit management actions and the delivery of the audit plan.

## 83. **ORGANISATIONAL RISK REGISTER UPDATE**

The Committee received a report from the Chief Fire Officer on the Organisational Risk Register (item number 9 in the minute book).

The officer introduced the report and explained that the organisational risks are those that could affect the ability to meet the Authority's Safety Plan. She explained that there had been a time lag and that since the last review in January, some of the risk scores had changed. Risk number ORG0027 – insufficient staff available to provide critical services (flu/pandemic) would be de-escalated and ORG0039 - possible industrial action would be removed at the next quarterly review. ORG0040 HMICFRS report relating to reputation challenges would be monitored.

Members' attention was drawn to appendix A and the scoring of risks. They heard that the Authority had approved the budget strategy in February and was in a financially manageable position in respect to risk number ORG0016. The risks related to the cost of living (ORG0037) would continue to be monitored.

With regard to ORG0017, fire ground contaminants, the processes and actions in place and being managed regarding this risk, including the internal Health and Safety Committee and the layout of fire stations were outlined to Members.

In response to questions from Members, it was explained that the risk relating to data quality had reduced slightly and that some examples were of equality, diversity and inclusion data, where people were not always confident in entering their information and where other systems were paper based. A new Data Quality procedure had been introduced and there were some actions to be taken, which would be managed through the Assurance Framework.

Resolved

The risks identified and captured in the Service's Organisational Risk Register were noted by the Standards and Governance Committee.

#### **84. FIRE STANDARDS PROGRESS REPORT**

The Committee considered a report from the Chief Fire Officer on Fire Standards Progress (item number 10 in the minute book).

The Committee heard that the report outlined the Service's compliance with the Fire Standards. Assurance against each Standard had been rated internally and these ratings were improving. There were two new standards, Leading the Service and Leading and Developing People, for which there was a gap analysis being undertaken. It was explained that these new Standards were wide ranging, with around 40 requirements between them.

In response to a question from a Member, it was explained that the assessment relating to the Fire Investigation Standard was due to the fact that the team were in the process of gaining ISO accreditation and that once achieved, the rating could be amended.

A Member reported that at the recent Fire Conference, the Standards had been mapped to the HMICFRS Pillars, that this had been useful and could fit into an awareness session.

Resolved

The Standards and Governance Committee noted the progress made towards compliance of HIWFRS with the Fire Standards.

#### **85. HIS MAJESTY'S INSPECTORATE OF CONSTABULARY AND FIRE AND RESCUE SERVICE (HMICFRS) INSPECTION ROUND 2 - REPORT**

The Committee considered a report from the Chief Fire Officer on His Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) Round Two Inspection findings (item number 11 in the minute book).

Members' attention was drawn to appendix A, and the Service's approach to address the areas for improvement. It was explained that in vast majority of areas, action is already being taken within the Authority's Safety Plan.

The areas where action is not being taken and why as detailed in the report in paragraph 18 was outlined. In terms of false alarms, the vast majority of these, it was explained, were domestic, non-attendance could pose a life risk and the opportunity to get 'upstream' and provide community safety advice would be lost.

For enforcement, it was explained that the period of data used by the Inspectorate was during the pandemic and that the Service typically undertakes significantly more protection activity, as it did in 2021/22. It was also noted that the Inspection report had praised the Service for its protection work with businesses through the Primary Authority Scheme.

The HMICFRS will produce a 'Spotlight Review' based on the Round 2 Inspections regarding values and culture, which will be published shortly.

In response to a question from Members, it was confirmed that the Service no longer has a 'cause for concern'.

The Committee discussed the fact that the focus for inspection is changing and that Equality, Diversity and Inclusion is at the centre and that all Members needed to remain current. A Member reported that she had met with the Director of People and Organisational Development as part of her Member Champion role and that the work being done in this area had been demonstrated very well. Members recognised that staff were passionate about the Service they worked in and that reports can have an impact on their resilience.

Resolved

The Standards and Governance Committee noted the outcome of the HMICFRS Round 2 inspection, and the Service's approach to embedding its improvements into the Safety Plan delivery.

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Chairman, HIWFRA Standards and  
Governance Committee