Tyne and Wear Fire and Rescue Authority

# Annual Governance Statement

2025/2026

## 1. About this statement

1.1 This Annual Governance Statement explains how Tyne and Wear Fire and Rescue Authority ("the Authority") ensures strong governance, transparency, and accountability. It sets out how we comply with relevant legislation and national guidance, manage risk, and use public money responsibly to deliver safe, efficient, and effective services for our communities.

1.2 This statement covers the period 1 April 2025 to 31 March 2026 and accompanies the Authority's 2025/2026 Statement of Accounts.

## 2. Our responsibilities

2.1 The Authority is responsible for ensuring that:

- Its business is conducted in accordance with the law and relevant regulations.
- Public money is safeguarded and properly accounted for.
- Resources are used economically, efficiently, effectively and fairly to deliver agreed priorities for local people.

2.2 Fire Authority Members (elected councillors) and officers share responsibility for establishing effective governance arrangements, including risk management, and for overseeing the stewardship of the Authority's financial and non financial resources.

## 3. Our governance framework

3.1 Governance is how we make decisions and manage Tyne and Wear Fire and Rescue Service ("the Service") in an open, honest, and accountable way. It encompasses the systems, culture, and values that guide how we operate and engage with our communities.

3.2 The Authority follows nationally recognised best practice, including the *Delivering Good Governance in Local Government: Framework (2016)* and the *Accounts and Audit Regulations 2015*. Our Local Code of Corporate Governance sets out how the Authority apply these principles through clear policies and processes, ensuring transparency, accountability, and high standards.

3.3 How we are led:

- **Fire Authority:** Sixteen elected members from the five Tyne and Wear councils provide strategic leadership, democratic oversight, and challenge. Meetings of the Authority and its committees are open to the public.

- **Governance Committee:** Offers independent review and assurance on governance, risk management, internal controls, and financial reporting. It also promotes high standards of conduct among Members.

- **Chief Fire Officer/Chief Executive (CFO):** Responsible for day-to-day leadership and service delivery of the fire service, supported by the Executive Leadership Team.

- **Executive Leadership Team:** Sets strategic direction, ensures effective governance, oversees risk management, and monitors performance**.**

- **Senior Leadership Team:** Manages day to day operations and ensure Service priorities are delivered effectively.

- **Section 151 Officer (Director of Finance, Estates and Facilities):** Statutory officer responsible for lawful and prudent financial management and stewardship.

- **Monitoring Officer:** Ensures decision making is legally sound and oversees governance arrangements and Member conduct.

3.4 Sources of assurance

3.4.1 The Authority draws assurance from:

- Committee oversight and formal reporting.
- Member feedback and statutory officer statements.
- Internal governance board and risk management arrangements.
- Performance management, improvement activity, and audit reports.
- His Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) inspections.
- Partnership and counter-fraud arrangements.
- External audit and the Statement of Accounts.

## 4. Applying the principles of good governance

4.1 Each year, the Authority reviews its governance arrangements against the seven core principles of the Delivering Good Governance Framework. A summary of how each principle is applied is set out below.

4.2 **A: Behaving with integrity, demonstrating a strong commitment to ethical values, and respecting the rule of law.**

- The Authority's **Constitution,** including Standing Orders, Financial and Procurement Regulations, Terms of Reference, and Scheme of Delegation provides a clear framework for lawful and transparent decision-making. Updated Standing Orders were approved by the Authority on 11 December 2025.

- The **Monitoring Officer** is a qualified solicitor and advises on legality and governance, ensuring proposals, decisions or omission by the Authority or any committee comply with statutory requirements and good administrative practice.

- The Monitoring Officer and the **Clerk to the Authority** are jointly responsible for overseeing the Authority's governance arrangements and ensuring that all meetings are properly organised and convened in accordance with the Standing Orders.

- The **Section 151 Officer** is a qualified accountant and provides strategic leadership on financial governance, including the Medium Term Financial Strategy (MTFS), Reserve Strategy, and annual budget, supported by a professionally qualified finance team.

- **Codes of Conduct and Ethics** for Members and employees are actively monitored. Registers of interests, gifts and hospitality are maintained.

- **Mandatory training** covers health and safety, anti-fraud and corruption, information governance, and equality, diversity, and inclusion. Compliance is monitored and reported.

- Policies addressing **bullying and harassment**, **discipline, counter-fraud** and **whistleblowing** are operating. Employees can raise concern confidentially via Safecall, with themes and outcomes reported to the Internal Governance Board.

- **Disclosure and Barring Service (DBS)** checks, including enhanced checks are mandatory where roles require them.

- **Procurement and financial regulations** ensure ethical practice and value for money.

4.3 **B: Ensuring openness and comprehensive stakeholder engagement.**

- Strategies, policies, performance information, financial data and decisions are **published on the Service's website**.

- **Authority and committee meetings are open to the public,** with papers and minutes published on Sunderland City Council's website, as they undertake the democratic services function for the Authority. Confidential reports are utilised only when necessary and legally permitted.

- The **Strategic Framework for Communications, Engagement, and Consultation** sets out how the Authority engages with communities, employees and partners. Consultation on the Community Risk Management Plan (CRMP) is extensively and publicly reported on.

- **Employee engagement** is supported through briefings and team meetings, ELT listening events and all staff engagement sessions, the CFOs Vlog and the intranet.

- We operate a **Freedom of Information Publication Scheme** and proactively publish key transparency information to keep the public informed.

- Our **Staff Networks** promote inclusion, representation, and employee voice, helping to create a supportive and diverse workplace.

- The **Joint Consultative Forum** helps maintain positive industrial relations and provides a formal way for the Service to consult with representative bodies, including the Fire Brigades Union (FBU), Unison, and GMB. It works alongside our day-to-day arrangements to ensure open communication and effective collaboration.

- We manage all **compliments and complaints** in line with our published policy and procedure, ensuring fairness, transparency, and continuous improvement.

- Our **partnership register** clearly sets out roles and governance responsibilities, helping us maintain accountability and strong collaborative relationships.

4.4 **C: Defining outcomes in terms of sustainable economic, social, and environmental benefits.**

- **Our Strategy, Our Future** sets the Service's long term vision and priorities to ensure we meet the needs of our communities now and in the years ahead. It provides a clear roadmap for how we will deliver our services, adapt to emerging risks, and make the best use of resources.

- Our **CRMP (2024-2027)** is the strategic plan that explains how we deliver fire and rescue services across Tyne and Wear. It identifies the risks faced by our communities and sets out how we will use our resources to reduce those risks and keep people safe. This plan is extensively consulted on and based on a **Community Risk Profile**, which uses data and evidence to understand local risks such as fires, road traffic collisions, and other emergencies. We also consider factors like population changes, housing types, and social vulnerabilities**.**

- **MTFS** aligns resources with priorities and is supported by the capital and reserves strategies. Regular budget monitoring and reporting ensure sound financial management.

- **Equality, data protection, and risk assessments** support fair and lawful decision-making. Employees complete these when embarking on projects, policy changes, collaborations, events, and writing business cases.

- Governance arrangements extend to our wholly-owned trading subsidiary **TWFRS Ltd.**

4.5 **D: Determining the interventions necessary to optimise the achievement of the intended outcomes.**

- We ensure **decisions are informed** by accurate information, supported by financial, legal, and professional advice. Options are carefully considered, and internal and external stakeholders are consulted to maintain transparency and accountability

- The **Internal Governance and Assurance Fire Standard** underpins effective oversight of governance activities. While broadly aligned, achieving full compliance remains an ongoing priority.

- Progress against departmental and district plans is monitored and reported to the Programme Board. Our **Programme Management Office** (PMO) provides governance and assurance throughout this programme of work.

- Progress against the **HMICFRS Inspection Action Plan** is tracked and reported to the Performance and Improvement Board, with regular updates to the Fire Authority.

4.6 **E: Developing the Service's capacity, including the capability of its leadership and the individuals within it.**

- We have the right **structures and leadership** in place, supported by employees with the skills, qualifications and experience needed to deliver high-quality services. Clear expectations are set through the *Leading the Service Fire Standard* and *People and Organisational Development Strategy.*

- **Our Recruitment, induction, training and development processes** ensure employees are equipped to perform effectively in their roles. We provide ongoing support and opportunities for growth to help our people reach their full potential.

- We provide **development programmes for Members** to enhance their knowledge and skills. This ensures they can make informed decisions and provide effective governance, supporting transparency and accountability across the Service.

- We invest in **workforce planning**, leadership development and apprenticeship programmes to ensure employees have the support and opportunities they need throughout their careers.

- Every employee completes an annual **Performance and Development Review (PDR)** which includes discussions about their performance, aspirations and personal objectives. This process helps individuals grow and ensure their goals align with the Service's priorities.

- **Health, safety, and wellbeing** are supported through a range of measures to promote both physical and mental wellness. Fitness equipment is provided at all sites and there is a **fitness assessment programme** for operational employees. In addition, all employees have access to occupational health services, physiotherapy, counselling and trauma support.

4.7 **F: Managing risks and performance through robust internal control and strong public financial management.**

- The **Governance Committee** provides independent assurance to the Authority on matters relating to audit, governance, risk management, and financial reporting.

- We maintain robust **budgetary control** through quarterly and annual financial reports that track performance against forecasts. Our Statement of Accounts is subject to scrutiny, and an external auditor provides an annual opinion on whether the Authority delivers value for money.

- The **MTFS** links our revenue and capital budgets to long term goals and priorities over a rolling four-year period. It is presented to the Authority as part of the annual revenue budget report.

- We follow professional standards for **treasury management**, reviewed annually. The Treasury Management Policy, Strategy and Prudential Indicators are monitored and reported quarterly to the Governance Committee. This ensures our capital programme is sustainable, affordable and achievable within available resources, while informing the MTFS.

- **Corporate risks** are actively managed through a structured risk management framework. The **corporate risk register** is reviewed monthly by the Executive Leadership Team, quarterly by the Internal Governance Board and twice a year by the Governance Committee.

- Our **business continuity planning** aligns with ISO22301 and works in partnership with tmulti-agency arrangements through the **Northumbria Local Resilience Forum** (LRF).

- We have robust **information governance** policies, mandatory training and clear information sharing protocols. The Senior Information Risk Owner (SIRO) oversees compliance with the *Data Protection Act 2018* and *UK GDPR,* ensuring all data is handled securely and responsibly.

- Our **Health and safety arrangements** meet statutory and professional standards, protecting employees and visitors across all our sites.

4.8 **G: Implementing good practices in transparency, reporting, and audit, to deliver effective accountability.**

- Reports and Authority and committee minutes are **publicly available** and follow a structured format to ensure clarity and consistency.

- Our **Procurement Team** ensures all processes comply with legal requirements and best practice. Where appropriate, tenders are used to test the market and secure the best value contracts. Clear guidance is provided on purchasing goods and services in line with the Authority's Standing Orders and regulations.

- We **publish key annual documents** including this Statement, the Statement of Assurance and the Statement of Accounts, demonstrating compliance with legislation and regulations.

- Processes are in place to record and monitor **improvement actions** whether identified internally or recommended by HMICFRS, audits or other regulatory bodies.

- Internal and external audits provide **independent assurance** on governance, financial statements and value for money. Audited accounts and annual audit letters are published for transparency.

- In line with the **Information Commissioner's model**, we publish details such as expenditure over £500, procurement information, our organisational chart, senior salaries, pay ratios, trade union facility time, and premises.

- We provide **essential data to the Home Office,** including incident statistics, workforce information, prevention and protection activity, fire safety audits, and firefighter injury data.

## 5. Assurance: audit and inspection

### 5.1 Internal Audit

5.1.1 The Authority's risk management and internal control environment is assessed through a programme of independent assurance audits. Internal audit is delivered by Sunderland City Council's Audit Team in line with professional standards. Until March 2025, audits followed the *Public Sector Internal Audit Standards*. From April 2025, the new *Global Internal Audit Standards* became the benchmark for all internal audit activity.

5.1.2 The scope and frequency of audits are determined through a risk assessment process in consultation with the Chief Fire Officer and the Director of Finance, Estates and Facilities. The 2025/2026 internal audit plan was approved by the Governance Committee on 21 February 2025.

5.1.3 Enhanced monitoring arrangements ensure timely completion and verification of actions. Quarterly progress reports are submitted to the Internal Governance Board and outcomes are reported annually to the Governance Committee.

## 5.2 External Audit

5.3.1 Our internal control environment is also assessed through an annual external audit. This review covers the Authority's financial statements, including the Annual Governance Statement, and provides independent opinion on the accounts and on whether we have arrangements in place to secure economy, efficiency, and effectiveness (known as the *value for money conclusion*).

5.3.2 At the time of writing, the audit of the 2024/25 financial statements is ongoing. External auditors, Forvis Mazars, will issue their opinion and value for money conclusion in due course (anticipated to be issued in early 2026). A progress update, including a draft Annual Audit Report, was presented to the Governance Committee on 16 December 2025.

## 5.3 His Majesty's Inspectorate of Constabulary and Fire & Rescue Services Inspection

5.3.1 HMICFRS last inspected the Service in April 2024 with the report issued on 8 October 2024. The inspection assessed the Service against 11 areas, with each area receiving a graded judgement.

5.3.2 The full report Effectiveness, Efficiency and People 2023–25: An inspection of Tyne and Wear Fire and Rescue Service is publicly available. A summary of the graded judgements is provided below:

| Outstanding | Good | Adequate | Requires improvement | Inadequate |
|---|---|---|---|---|
| | Public safety through fire regulation | Understanding fire and risk | Promoting fairness and diversity | |
| | Responding to major incidents | Preventing fire and risk | | |
| | | Responding to fires and emergencies | | |
| | | Best use of resources | | |
| | | Future affordability | | |
| | | Promoting values and culture | | |
| | | Right people, right skills | | |
| | | Managing performance and developing leaders | | |

5.4 **Fire Standards Board**

5.4.1 The National Fire Chiefs Council (NFCC) Fire Standards Board oversees the development and maintenance of professional standards for fire and rescue services in England. It approves Fire Standards and sets the approach for their development.

5.4.2 There are currently 19 Fire Standards covering all areas of the Service. We have governance arrangements in place to ensure these standards are achieved and reflected in our local policies and procedures.

5.4.3 The Service uses systems, tools, and processes to assess alignment with the standards' desired outcomes. This includes conducting gap analyses, reviewing progress against HMICFRS Areas for Improvement, and implementing governance and reporting mechanisms. Key compliance tools include:

- Compliance Tracker
- Liaison with Action Leads to maintain compliance.
- TWFRS representation on the Protection Standard Review Group.
- Collaboration with the NFCC Implementation Manager regarding Fire Standard updates.

## 6. Progress on improvement actions

6.1 Actions carried forward from the 2023/2024 governance review:

6.1.1 **HR policies (2023/2024) – *Target: September 2025.***

- **Status: Completed.** Policies have been reviewed, consulted upon, and approved through the appropriate governance routes.

6.1.2 **Stakeholder analysis and prioritisation (2023/2024) – *Target: March 2026***

- **Status: Completed.** A structured approach to stakeholder mapping and prioritisation is now in place.

6.1.3 **Data Protection Officer role standardisation (2023/2024) – *Target: March 2024***

- **Status: Completed.** Reported in the 2024/2025 Annual Governance Statement.

6.1.4 **Leaver checklist effectiveness review (2023/2024) – *Target: June 2025***

- **Status: Completed.** The process is operating as intended and will be reviewed periodically.

6.1.5 **Digitalisation of the Occupational Health Unit (2023/2024) – *Target: March 2026***

- **Status: Ongoing.** The first stage has begun. A provider has been identified to scan and convert existing paper records into a secure digital format. OHU is working with IT and the Data Protection Officer to ensure full compliance with data protection requirements. The implementation of a dedicated OHU system is currently on hold until the HR system replacement project is completed. Once the new HR system is operational, Phase 2 will introduce an OHU system to fully support digital record management and workflow. ***New Target: March 2027.***

6.2 Actions from the 2024/2025 governance review:

6.2.1 **Standing Orders and Scheme of Delegation – review and update – *Target: June 2025***

- **Completed.** Updated Standing Orders approved by the Authority on 11 December 2025.

6.2.2 **Information governance and data protection – additional training – *Target: April 2025***

- **Completed.** Targeted training delivered to relevant employees and teams to strengthen compliance.

6.2.3 **Service policies and procedures – SLT plan to refresh outdated documents – *Target: September 2025***

- **Completed.** Legacy policies updated; embedding and review process are ongoing.

## 7. Governance matters identified in 2025/2026

7.1 No new or significant governance issues were identified during the review. The main focus remains on completing the **Digitalisation of the Occupational Health Unit,** now scheduled for completion by March 2027.

## 8. Opinion on the governance framework

8.1 Based on the annual review, the Authority is satisfied that its governance framework remains fit for purpose. It provides reasonable assurance that risks are managed effectively, resources are used appropriately, and public money is safeguarded.

## 9. Approval of the Annual Governance Statement

9.1 This Statement has been reviewed and approved by the Authority and will continue to be monitored through established governance arrangements.

| | | |
|---|---|---|
| **Councillor Phil Tye** | **Peter Heath** | **Michelle Ronan** |
| Chair of the Fire Authority | Chief Fire Officer/ Chief Executive | Director of Finance, Estates and Facilities (S151 Officer) |
| Date: | | |