NORTH YORKSHIRE POLICE, FIRE AND CRIME COMMISSIONER

NORTH YORKSHIRE FIRE AND RESCUE SERVICE

Independent Audit Committee (IAC)
Thursday 19th June 2025
DRAFT Summary Minutes

Meeting: Independent Audit Committee
Date and Time: Thursday 19th June 2025, 10:00 – 12:00hrs
Location: Haigh Conference Room, Alverton Court Police HQ and via Teams
Chair: Roman Pronyszyn

Attendees:

Name		Role
Roman Pronyszyn	(RP)	Committee Member & Chair
Heather Cook	(HC)	Committee Member
Dr Stuart Green	(SG)	Committee Member & Vice Chair
Mat Walker	(MW)	NYFRS Deputy Chief Fire Officer
Damien Henderson	(DHe)	NYFRS Area Manager - Director for Service Improvement and Assurance
Charlie French	(CF)	NYFRS Director of Service Design and Delivery
Fiona Kinnear	(FK)	NYFRS Authority Manager
Lisa Stitt	(LS)	Assistant Chief Officer
Michael Porter	(MP)	YNYCA OPFCC Assistant Director of Resources (Deputy s73 Officer)
Rachel Antonelli	(RA)	YNYCA Director of Legal & Governance (Monitoring Officer)
Dan Harris	(DHa)	RSM UK Risk Assurance Services - Partner
Matt Stacey	(MS)	RSM UK Risk Assurance Services – Managing Consultant
Richard Malanaphy	(RM)	Member (pending vetting)
Peter Topping	(PT)	Member (pending vetting)
Giedre Klovaite Norman		Member of Public
Ian McClelland	(IM)	Governance Support Officer

Apologies:

Name	Role
None to record	

Items and Decisions:

No.	Discussion	Outcome / Decision
1.	**Attendance and Apologies.** Attendance and apologies are noted above.	
2.	**Declaration of Interest.** There were no declarations of interest. Noted that whilst SG sits on the Combined Authority Audit Committee, there are no conflicts of interests between the two committees.	

No.	Discussion	Outcome / Decision
3.	**Minutes and Actions of Previous Meeting.** The Minutes of the meeting held on 20.03.25 were reviewed. There were no comments or amendments and the Minutes were recorded as accurate. Minutes were proposed for approval by RP, seconded by HC.	**Approved**
4.	**Internal Audit.** DHa and MS provided an update on all audit documents. 4.1. **Safeguarding – Final Report.** The audit has resulted in the award of a *Reasonable Assurance* opinion. The audit had considered the framework in place, strategies, policies and procedures regarding all aspects of safeguarding, as well as the broad understanding of the framework across the workforce. Training staff on the new safeguarding module continues, numbers are expected to have increased by the next audit. The committee noted the solid report and approved the audit. 4.2. **Follow Up – Final Report**. Report noted the significant effort that continues to be afforded by the organisation to implement and close actions, progress made is very evident. The report considered 36 medium and high priority actions from previous audits reported as closed by the Service. 26 were confirmed as complete and 8 new management actions were agreed as aligned to actions not yet fully implemented, with some reductions in priority score due to partial mitigation of risks. FRS management provided assurance that further progress has been achieved since the 31.03.25 audit review in mitigating the risks identified and further noted and accepted that focus had been required; the Risk & Assurance Board Terms of Reference have been revised to provide that focus. Management are now far more informed and will continue the momentum of improvements and maintain the positive relationship forged with RSM. The committee approved the audit. 4.3. **Annual Head of Internal Audit Opinion.** Despite the active progress made through the year, the conclusion of the annual scheme of audits resulted in a third level overall opinion (a n*egative opinion)*. There is however a very clear and positive direction of travel for improvements, this is a different picture to the previous two years where a fourth level overall opinion was given. The organisation is getting a firm handle on a number of historic weaknesses. FRS management acknowledged the opinion, noting the continued journey, that hard questions had needed to be asked of the organisation and for RSM to delve into known areas of weakness. There is now more confidence and assurance within the organisation. A number of areas within the report were challenged by members, such as correlation with HMIC reports, all challenges were satisfactorily responded to. Management also provided information regarding the newly published Data Quality Strategy and recruitment of a Data Modeler. The committee approved the report and Head of Internal Audit opinion. 4.4. **Emergency Services News Briefing May 2025.** Noted that these News Briefings are compiled and published quarterly and contain relevant details of new regulation, legislation and reports that have recently been published which are hoped to be a useful document for officers to refer to. Management agreed that the document is	**Approved** **Approved** **Approved**

No.	Discussion	Outcome / Decision
	most useful and has become an agenda item on the refreshed Risk & Assurance Board to ensure wider organisational knowledge and focus.	**Noted**
5.	**Matters Arising.** There were no outstanding matter arising from the previous Minutes. 5.1. **Culture**. MW took the opportunity to provide details of the independently commissioned *Framework for Change* which had reviewed the culture within NYFRS. It had been a difficult, but ultimately rewarding and powerful experience with the spotlight on the organisation. An equally powerful video has been produced and will be presented across the organisation in the near future which focusses on how NYFRS are dealing with culture, both internally and externally. This was the result of a number of national scandals regarding the bullying and harassment of minority staff. This is another area that NYFRS are committed addressing. 5.2. **HMICFRS Inspection Report**. Having only been released to the public some 10-hours previously, RP wished to acknowledge the content of the HMICFRS Inspection Report which noted the '*significant progress'* that the organisation had made since the 2022 '*inadequate*' report. The report author commended the strategic leadership team and all staff for their willingness to change and continued commitment to improve. The report will be reviewed at the next committee meeting. On behalf of the Committee, RP congratulated NYFRS on the report.	
6.	**Health & Safety Report**. A comprehensive set of statistics had been provided for the meeting. MW provided updates and insight to the statistics, noting the consistency of patterns of minor injuries. Three separate significant investigations have taken place involving a water training accident, appliance incident and smokehouse incident. Follow-up actions are awaiting from HSSC. Of the seven mandatory areas of Health and Safety learning for all 670 fire officers and staff, all seven are either nearing, or over, 90% compliance. The report was accepted.	**Accepted**
7.	**Information Governance Report.** CF provided the background on the key updates within the report. In particular, it was noted that a new ICO Accountability Tracker is now in place which has replaced the previous backlog tracker. The new tracker reassess the position of the organisation against new criteria. It's very fresh, and action plans for its use are being finalised, focusing on known areas of partial non-compliance. Further questions and scrutiny were fully addressed, noting the effective communication escalation chain for information governance, sharing good practice and creating and maintaining solid working relationships with Data Protection Officer supplied through the contract with Veritau. The report was accepted.	**Accepted**
8.	**Internal Audit Tracker.** CF provided a high level summery of internal audit activity captured via recommendations from audits. As at mid-May, 17 live actions were open; 6 are on track for completion, the remaining 11 require more detail and are now overdue. The issue with clearing so many overdue actions was due to having been allocated unrealistic deadlines. A new process is in place for future audits to ensure that realistic timescales are set for all actions. On-going progress against the open actions	

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	are closely monitored at the Risk & Assurance Boards going forward which will result in a better picture being provided at the next meeting. HC noted the very informative report format. The report was accepted.	**Accepted**
9.	**Risk Register & Risk Tracker.** CF provided background on the key updates within the register and tracker. Noted that the register and tracker are discussed in detail at both the Risk & Assurance Board and at the Deputy Mayor's Strategic Oversight Board. There remain 12 open risks, all broadly stable with very little movement. Risk owners are once again in the process of finely reviewing and scoring all risks and ensure all reasonable mitigations have been put in place. Recent check-and-challenge sessions have focused on financial planning risk and cyber-security risk. Further discussion noted that an element of horizon scanning does take place to look for risks that currently do not feature on the register. The lower level functional risk register allows for an escalation process. Future meetings of the strategic Risk & Assurance Board will now also include the Chair of the Local Resilience Forum which will provide a national view on current and emerging risks. The clearly presented and useful report was noted and accepted.	**Accepted**
10.	**Complaints & Compliments.** Following the recent transition to the Mayoral Combined Authority where complaints and compliments are reported, clarity was sought and discussed on what level of detail this committee would expect. Although complaints and compliments are entirely subjective, the committee noted that they remain and important measure of performance. Therefore, a summary of how many of each, and any identifiable themes which may require further scrutiny is to be provided at the next meeting.	**Deferred**
11.	**HMICFRS Report.** DHe provided an update on the freshly released HMICFRS Inspection report. The result clearly showed excellent progress. For context, of the eleven FRS around the country subjected to an HMICFRS inspection during the inspection window, NYFRS was the only service to not receive any *requires improvement* grades. Although one area was noted as having remained static and one had dropped, two areas had improved by three grades, three had improved by two grades and four had improved by one grade. Whilst noting the overall direction of the report, scrutiny of the two areas that had either remained the same or reduced took place. These areas concern the response to high-rise buildings or a marauding terrorist attack, both of which are risk-assessed as 'low' within NY. Exercises are planned to address both these scenarios as well as training for on-call officers to increase knowledge and confidence. The committee noted and accepted the report, and the progress made by the service as seen and noted at 5.2 above.	**Accepted**

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12.	**Performance Indicators.** DHe provided background on the key updates within the report which included significant increases in productivity. Against a set national requirement to increase productivity by 3%, NYFRS achieved an 18% increase in prevention activity and a staggering 544% increase in targeted fire safety visits to those most vulnerable communities. Response times have improved by a greater margin than any other national service. This was achieved following investment in call-handling technology and better understanding demand to ensure that the right equipment is in the right place. Given the vast geography of NY, and clear necessity for safe driving, reducing drive times to incidents is very difficult to achieve. The Director of Community Risk & Resilience has set up a Working Group to review and monitor performance on a monthly basis. The committee noted and accepted the report.	**Accepted**
13.	**Previous Annual Governance Statement (AGS).** MP provided an update on the actions that required to be addressed as part of the final AGS under the previous Fire & Rescue Authority prior to transitioning to the Mayoral Combined Authority. This item had been deferred from the March 2025 meeting allowing this update to show how the actions, and themes, have been addressed. Progress was noted to have been made, but not as much as hoped. Audits noted during this meeting show that internal audit remains a significant issue and must receive continued rigour and focus. The committee noted and accepted the report.	**Accepted**
14.	**Fire Governance Review.** MP provided the update on the ongoing work to define the most efficient way to deal with FRS governance and how it flows through to the Mayoral Combined Authority AGS. With no further separate AGS, the Terms of Reference were approved at the previous meeting. The most likely, cleaner, outcome will be for an FRS report being submitted for inclusion within the MCA AGS to sit alongside the statement of accounts.	
15.	**AOB.** No further matters were raised.	
16.	**Next Meeting.** Tuesday 23rd September 2025 at 14:00. Hybrid attendance.	
17.	**Date for Future Meetings.** Thursday 4th December 2025 at 10:00.	

Actions Agreed:

No.	Action / Update	Owner	Date Issued	Due Date	Date Closed
	No actions allocated at this meeting.				