



YORK AND NORTH YORKSHIRE COMBINED AUTHORITY – FIRE

Internal Audit Progress Report

23 September 2025

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KEY MESSAGES

The internal audit plan for 2025/26 was approved by the Independent Audit Committee at the 18 March 2025 meeting. This report provides an update on progress against the plan and summarises the results of our work to date.



We have issued two final reports as part of the internal audit plan since the Independent Audit Committee meeting on 19 June 2025:

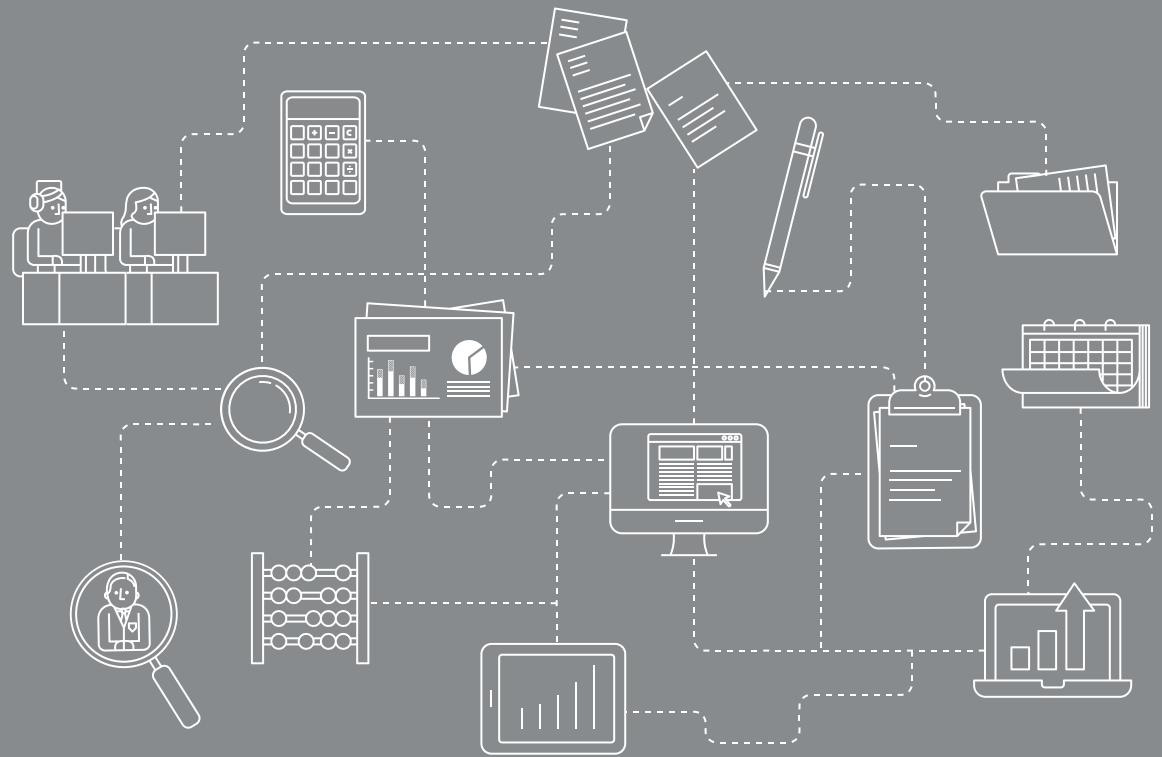
- Code of Ethics; and
- Credit Cards.

A summary of the outcome of these reviews is provided in Section 1 of this report. [\[To discuss and note\]](#)

Details of the progress made against the internal audit plan are included at Appendix A. [\[To note\]](#)

Final Reports

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1 FINAL REPORTS

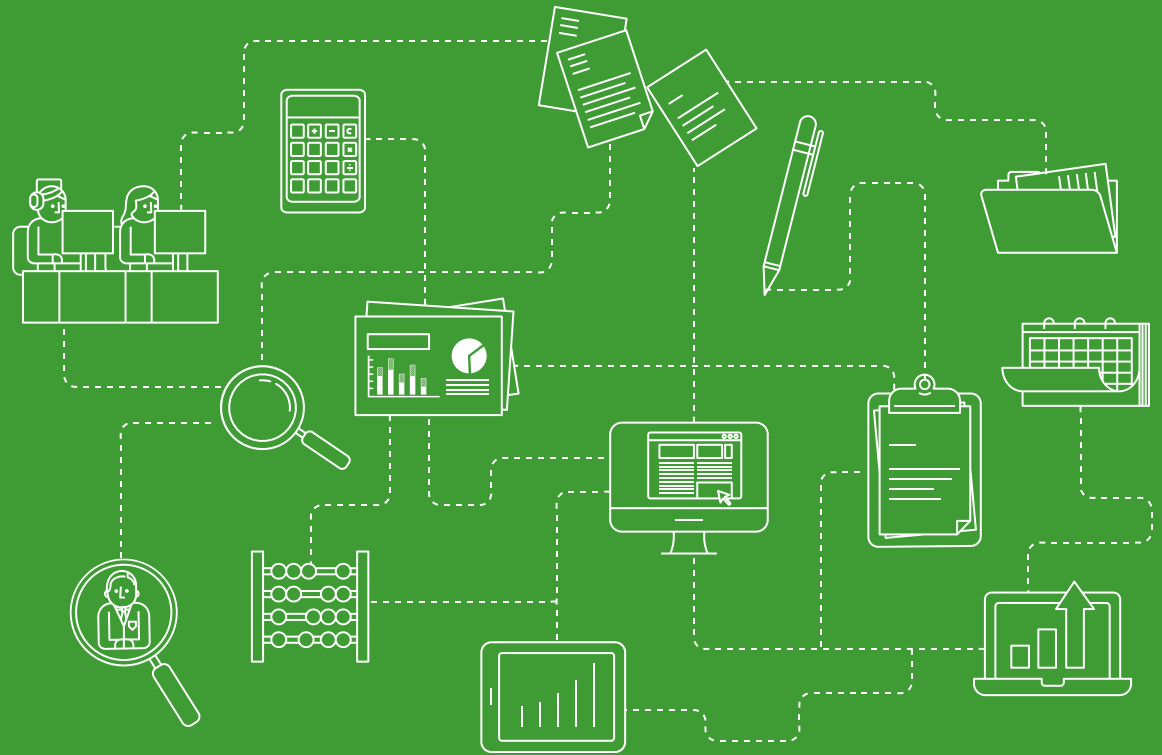
1.1 Summary of final reports being presented to this Committee

This section summarises the reports that have been finalised since the last meeting.

Assignment	Opinion issued	Actions agreed		
		L	M	H
Code of Ethics We found that a control framework is in place to manage and oversee the Service's adherence to its Code of Ethics. We noted a Leadership Strategy was in place which included policies and procedures updated to reflect the Service's commitment to the ethical principles. We evidenced the Service had adopted National Fire Chiefs' Council (NFCC) Code of Ethics in December 2024 and staff had been trained on these principles to raise their awareness. We further noted several workstreams had been established including a Code of Ethics Working Group, inclusion of the Code of Ethics into Service document templates and, Personal Development Plan Records (PDPR). Additionally, the Service had ongoing initiatives which included Lived experience projects, Framework for change project (culture monitor) as part of culture review and updates had been provided to the HMICFRS in March 2025 on embedding progress made. However, we identified minor scope for improvement in relation to: updating the published Whistleblowing Policy to reflect recent internal changes; and formalising a feedback process on the lessons learned from ethical dilemmas' investigations, for which a process had not been developed at the time of our review (May 2025).	Substantial Assurance	2	0	0
Credit Cards As part of our review of the controls in place surrounding credit cards we concluded that the Service has some well designed controls in place to help mitigate risks associated with credit card spending, however these are not always consistently applied. As a result of our audit testing, we identified findings which have resulted in two low priority, one medium priority and one high priority actions being agreed with management. The low management actions are in relation to credit card acknowledgements not being signed in a timely manner and not reviewing or signing off reconciliations. The medium management actions are regarding the Service not having a formal process in place to ensure credit cards are cancelled for leavers and monitoring of expenditure. The high action was raised as a result of identifying noncompliance with the procedure for approving credit card purchases. Additionally, we have raised a suggestion to review the outcome of our data analytics, regarding one instance in which the monthly credit card spend limit was exceeded for one cardholder.	Partial Assurance	2	1	1

Appendices

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APPENDIX A: PROGRESS AGAINST THE INTERNAL AUDIT PLAN 2025/26

Assignment	Status / Opinion issued	Actions agreed			Target Committee meeting (as per IA plan / change controls*)	Actual Committee meeting
		L	M	H		
Code of Ethics	Substantial Assurance [●]	2	0	0	November 2025	23 September 2025
Credit Cards	Partial Assurance [●]	2	1	1	November 2025	23 September 2025
Operational Training	Audit fieldwork concluded and report undergoing RSM's internal quality assurance process.				November 2025	-
Recommendation tracking from external parties	Scheduled for November 2025				November 2025	-
Follow Up of Negative Assurance Opinions from 2023/24	Due to the extensive follow up completed at the end of 2024/25 (and in discussion with management), we are proposing the budget from this work be reallocated to accommodate the audits as detailed in the changes to plan below, Appendix B.				November 2025	-
Operational Fire Review: Prevent and Protection Engagement	Fieldwork commenced in August 2025, and currently ongoing.				November 2025	-
Workforce Planning	Scheduled for later in September 2025. Agreeing scope at point of papers submission.				March 2026	
Equality and Diversity	Scheduled for December 2025				March 2026	-
Fire and Rescue Plan	Scheduled for January 2026				March 2026	-
Environment Review	Following introduction of a new sustainability strategy, steer would be beneficial on the best timing for this review. If it is considered that time is needed to let the strategy embed, as with the Follow Up above, the budget from this work could be used to accommodate the audits as detailed in the changes to plan below.				March 2026	-

Assignment	Status / Opinion issued	Actions agreed			Target Committee meeting (as per IA plan / change controls*)	Actual Committee meeting
		L	M	H		
Process and Control Assurance Review – focus on procurement activities	Consideration has been made to moving the timing of this review to next year.				March 2026	-
Follow Up	Scheduled for January 2026				March 2026	-

* The timing of these audits have been changed to accommodate staff availabilities (we have not noted any issues with these timing changes).

APPENDIX B: OTHER MATTERS

Detailed below are the changes to the audit plan:

Note	Auditable area	Reason for change	Reported to IAC
1	Credit Cards	In March 2025, RSM were informed that following the Force identifying inappropriate use of an Authority credit card, an internal investigation was conducted. It identified no fraudulent use of the card (nor an IT breach), however the card was used by an employee outside of Authority process in that prior approval by the relevant Budget Holder had not been confirmed. At the request of management, RSM included an internal audit review of the area in the 2025/26 internal audit plan.	September 2025*
2	Operational Training	We agreed during the 2024/25 year to defer the Operational Training to the 2025/26 Internal Audit Plan due to ongoing internal activity in the area.	September 2025*

*While these were verbally discussed at the June 2025 meeting, no progress report was taken to confirm the changes.

Head of Internal Audit Opinion 2025/26

The committee should note that the assurances given in our audit assignments are included within our Annual Assurance report. The committee should note that any negative assurance opinions or advisory reviews with significant weaknesses will need to be noted in the annual reports and may result in a qualified / negative annual opinion. We have issued two final reports to date, one with a positive assurance and one that was negative (based on an area identified in year where known breaches of policy had occurred). The negative report will impact but will not in isolation qualify our opinion.

Other assurance activity

Since the last Independent Audit Committee meeting, we have issued the following briefings:

- Emergency Services News Briefing (August 2025)

APPENDIX C: KEY PERFORMANCE INDICATORS

	Delivery				Quality		
	Target	Actual	Notes*		Target	Actual	Notes*
Audits commenced in line with original timescales*	Yes	Yes		Conformance with the Global Internal Audit Standards in the UK Public Sector	Yes	Yes	
Draft reports issued within 10 days of debrief meeting	10 days	1 / 2 (50%)	Average of 13.5 days	Liaison with external audit to allow, where appropriate and required, the external auditor to place reliance on the work of internal audit	Yes	Yes	
Management responses received within 10 days of draft report	10 days	1 / 2 (50%)	Average of 13.5 days	Response time for all general enquiries for assistance	2 working days	100%	
Final report issued within 3 days of management response	3 days	1 / 2 (50%)	Second report was sent during annual leave from RSM side, missing the timeline	Response for emergencies and potential fraud	1 working day	N/A	

Notes

This takes into account changes agreed by management and Audit Committee during the year. Through employing an agile or a flexible approach to our service delivery we are able to respond to your assurance needs.

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The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Actions for improvements should be assessed by you for their full impact. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

Our report is prepared solely for the confidential use of **York and North Yorkshire Combined Authority – Fire**, and solely for the purposes set out herein. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights from RSM UK Risk Assurance Services LLP for any purpose or in any context. Any third party which obtains access to this report or a copy and chooses to rely on it (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM UK Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

This report is released to you on the basis that it shall not be copied, referred to or disclosed, in whole or in part (save as otherwise permitted by agreed written terms), without our prior written consent.

We have no responsibility to update this report for events and circumstances occurring after the date of this report.

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