



## YORK AND NORTH YORKSHIRE COMBINED AUTHORITY – FIRE

### Operational Training

FINAL Internal Audit Report: 3.25/26

15 October 2025

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# AUDIT OUTCOME OVERVIEW

In line with our scope, included at Appendix C, the overview of our findings is detailed below.


**Background:** We undertook a review as part of the approved internal audit plan to determine whether the Service has effective processes in place to manage its continuous training programmes for firefighters, ensuring that all firefighters maintain the required competency levels and are equipped to carry out their roles safely and effectively. As part of the audit we have considered a range of areas, including the operational training framework, policies and procedures, development plans, assessment and verification and governance and reporting.

The Service utilises the Firewatch system as its platform for managing and maintaining training records. In addition, the LearnPro system is used to deliver e-learning modules, providing staff with accessible, structured training content that supports continuous professional development.


**Conclusion:** Through our review, we concluded that the Service had a number of well-designed controls in place to help mitigate risks associated with safety-critical training. However, we noted some exceptions where these were not consistently applied.

As a result of our audit testing, we identified issues which have resulted in **one medium priority action** being agreed with management. The action was in relation to staff who had not completed their Casualty Care (IEC) training module.


**Internal audit opinion:**




**Minimal Assurance**



**Partial Assurance**



**Reasonable Assurance**



**Substantial Assurance**

Taking account of the issues identified, the board can take reasonable assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified risk(s).

**Audit themes:** **The following controls identified exceptions with our testing resulting in one medium priority action:**

**Assessment and Verification of Training**

As part of our testing, we selected a sample of 20 members of staff from the Service to confirm that all Core Operational Training Modules have been completed and refreshed.

Our testing identified three instances where a member of staff had overdue water safety training. We also identified eight instances of staff who had not completed their IEC training (**Medium**).

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Where staff have not completed the required training or training dates are not recorded, there is a risk that staff may lack the necessary competency to respond safely and effectively incidents.

We also selected a sample of 10 members of staff who did not pass an operational training module and confirmed that a Personal Development Plan (PDP) has been developed in all cases.

**The following controls were well designed and complied with based on our coverage and testing:**

**Operational Training Framework**

The Service has in place a Training and Development Framework that clearly details the service training and development provision and how they intend to deliver it. Upon reviewing the Framework, we confirmed that it clearly defines the Service's career development pathways and the process for achieving and maintaining workplace competence.

**Training Policies and Procedures**

We examined the training policies and procedures in place and confirmed in all cases that they were in date and reflected current practice.

**Training and Development Plans**

We obtained the Service's Training Plan and confirmed it outlines the core operational training to be delivered. Review of the 2025 Training Programme document confirmed that it details all courses being held at both Incident Command and the Training Centre. Additionally, we confirmed a Course Planning spreadsheet is maintained, listing all available courses along with details such as the number of spaces, enrolled candidates, trainers, locations, durations, and frequency.

**Quality Assurance (QA) Framework**

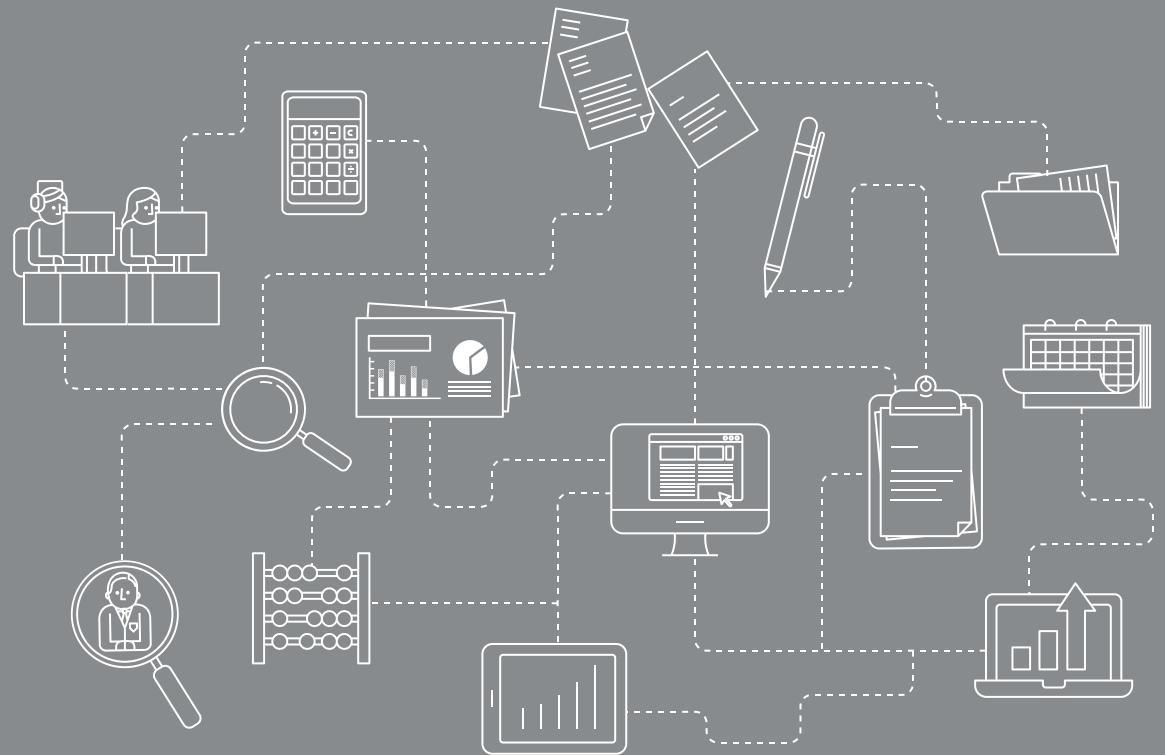
Through review of the QA Training Tracker we confirmed that it details the training sessions that have been reviewed or due to be reviewed. We examined the feedback stats report that is presented to the Workforce Planning Board and confirmed it contains training feedback from the past six months, from 97 course attendees.

**Governance and Reporting**

We confirmed the Workforce Planning and Resourcing Board meet to oversee the development of Operational Training and the associated Frameworks. There is also an Operational Training Monthly Meeting where data trends are reviewed, these meetings include training and staff development statistics, and a Training Managers Liaison Group which met quarterly to discuss training completion and course delivery.

# Summary of Actions for Management

01



# SUMMARY OF MANAGEMENT ACTIONS

The action priorities are defined as\*:

**High**  
Immediate management attention is necessary.

**Medium**  
Timely management attention is necessary.

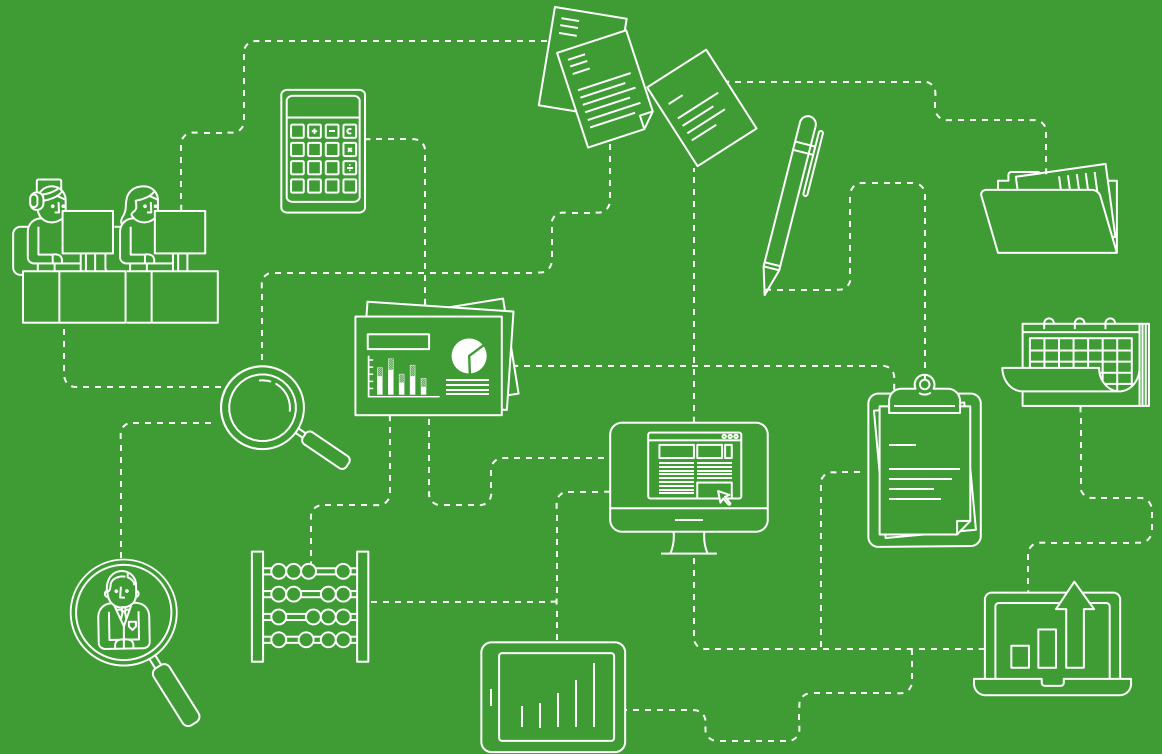
**Low**  
There is scope for enhancing control or improving efficiency.

Ref	Action	Priority	Responsible Owner	Date
1	IEC Training requirement will be reviewed to ensure that it's proportionate. Once the requirement is reviewed and documented, the Service will ensure that sufficient levels of training are provided to ensure compliance.	Medium	Area Manager Director of Emergency Response and Training	May 2026

\* Refer to Appendix B for more detail

# Detailed Findings and Actions

02



## DETAILED FINDINGS AND ACTIONS

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all audit testing undertaken.

Area: Operational Training		
<b>Control</b>	The Service has an Assurance Framework and Competency Framework documents in place that details the training requirements and plan. Staff are required to complete training courses in line with the frequencies stipulated within the Competency Framework.	<b>Assessment:</b> <b>Design</b> ✓ <b>Compliance</b> ×
<b>Findings / Implications</b>	<p>As part of our testing, we selected a sample of 20 members of staff from the Service to confirm that all Core Operational Training Modules have been completed and refreshed. We confirmed that the member of staff has completed the following modules at the following frequencies:</p> <ul style="list-style-type: none"> <li>Breathing Apparatus (Operational Licence) - Refresher required every two years.</li> <li>Incident Command ICL1 (Operational Licence) (Only for Crew Manager and above) - Refresher required every two years.</li> <li>ERD Driving (Operational Licence) - Refresher required every five years.</li> <li>Compartment Fire Behaviour Training (Operational Licence) - Refresher required every two years.</li> <li>Working at Height - No refresher required.</li> <li>Water Rescue (minimum MOD2) - Refresher required every three years.</li> <li>Casualty Care (IEC) - Refresher required every two years; and</li> <li>Road Traffic Collisions (RTC) - Refresher required every three years.</li> </ul> <p>Our sample testing and review of the Firewatch system identified:</p> <ul style="list-style-type: none"> <li>all 20 sampled staff completed their Breathing Apparatus initial course or refresher course within the past two years.</li> <li>of the 20 staff, 14 were listed as Firefighters and did not require the ICL1 training. Six of the staff were Crew Managers and therefore required the ICL1 training, we found that five of the six Crew Managers had completed their ICL1 training within the past two years in line with policy. In the other case the member of staff failed their most recent re-assessment on 12 March 2025. Review of their training log on Firewatch confirmed that the member of staff has been booked onto the ICL1 course seven time since the start of 2025, attending and failing two of them. Discussion with the Area Manager established that there is a training plan in place to for them. Review of the Firewatch system established that the member of staff was still working however not as a Crew Manager and was only completing the responsibilities of a Firefighter. As they have all the Operational Licence training modules complete for a Firefighter, they are still valid to be working. Review of the Personal Development Plan (PDP) for the member of staff confirmed that training is being given at station and that they are working towards the completion of this training.</li> <li>of the 20 sampled staff, four do not have driving responsibilities and therefore are not required to complete their ERD Driving course. For the other 16 staff we confirmed that the ERD Driver training has been completed within the past five years in line with the training requirements.</li> </ul>	



## Area: Operational Training

- for all 20 staff, we confirmed that they have completed their Compartment Fire Behaviour Training or Tactical Firefighting Refresher training within the past two years.
- the Working at Heights training does not require a refresher and was only introduced in 2021, before then this was covered at the induction stage within the Safe To Ride training. For 15 of the sampled staff, we confirmed that they have completed their Working at Heights training or the Safe To Ride training if they joined before 2021. Five of the sampled staff joined the Service before 2010 as such their training pre-dates the Firewatch system and was not recorded.
- we confirmed that 17 of the 20 staff had completed their Water Rescue Module 2 training or refresher training within the past two years. We identified three instances where a member of staff had overdue water safety training, with their last training dates being in 2018, 2021, and 2022.
- we confirmed that 12 of the 20 sampled staff had completed their Casualty Care Immediate Emergency Care (IEC) training within the required timeframe. Our testing identified eight instances of staff who had not completed their IEC training, review of the Firewatch profiles of these staff established that they were still completing drill and also using these skills in the field. Discussion with the Area Manager established that the IEC training has recently been moved to no longer be held at the Training Centre but to be completed by the District Instructors who will complete the training at the different stations; and
- we confirmed that all 20 sampled staff had completed their Road Traffic Collisions (RTC) training within the past two years.

Where required staff have not completed their Casualty Care Immediate Emergency Care (IEC) training, there is a risk that service staff will not hold the required competency for casualty care, which may have an impact on operational effectiveness. The Service confirmed that going forward, they would not require all operational staff to be IEC trained and as such, they plan to review the policy regarding IEC training completion rates in order to review and align the training programme.

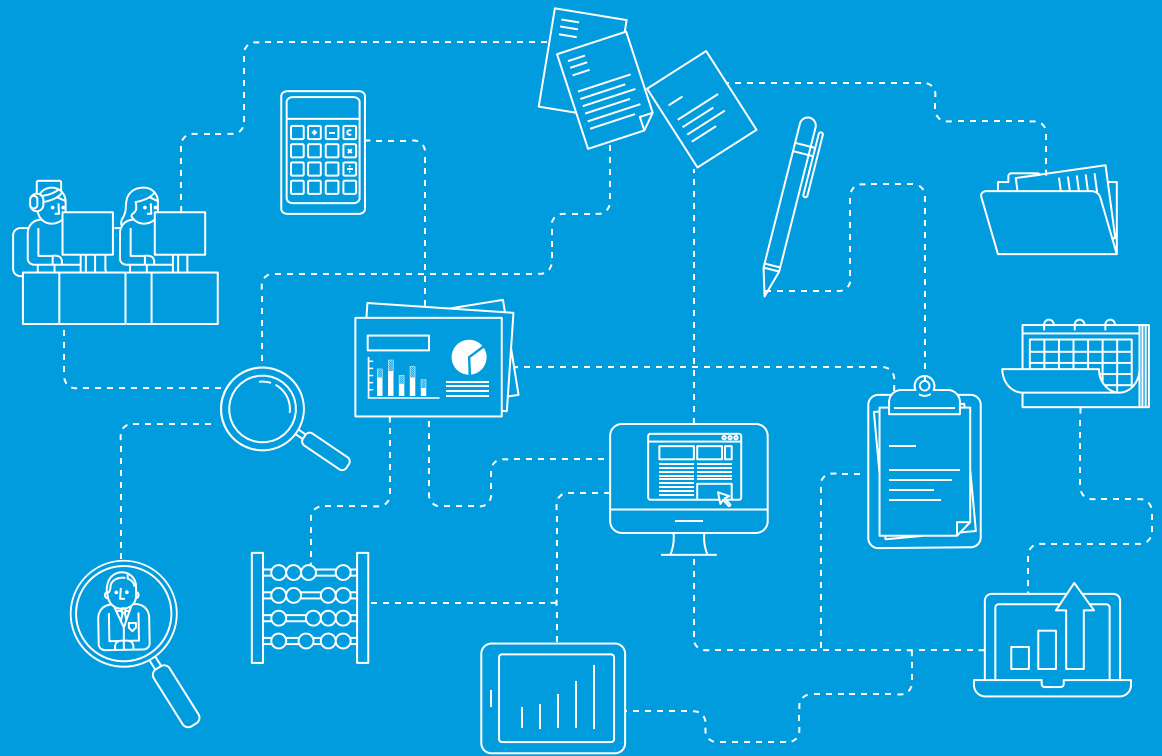
Review of the Operational Training SharePoint page confirmed that a prospectus page has been created for each training module detailing how the training will be assessed and the NOS that relate to this training to allow staff to fully prepare for the training. Review of the training dates on the system confirmed that all training completion was logged on the Firewatch system within a week of the training being completed.

We also selected a sample of 10 members of staff who did not pass an operational training module to ensure that a PDP has been developed to support the member of staff through the process to help them pass their assessment. Our testing confirmed that all 10 staff have a PDP in place that details the support and training provided to staff. The PDPs are live documents that can be updated by the Operational Training Administration Team or Instructors who will use the notes section at the back as a log of any training or bookings. We confirmed for nine of the 10 members of staff that they have since completed their training. For the other sampled instance, we confirmed that they have a PDP in place and have booked onto another training session to be assessed again.

<b>Management Action 1</b>	IEC Training requirement will be reviewed to ensure that it's proportionate. Once the requirement is reviewed and documented, the Service will ensure that sufficient levels of training are provided to ensure compliance.	<b>Responsible Owner:</b> Area Manager Director of Emergency Response and Training	<b>Date:</b> May 2026	<b>Priority:</b> <b>Medium</b>
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# Appendices

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# APPENDIX A: CATEGORISATION OF FINDINGS

## Categorisation of internal audit findings

### Low

There is scope for enhancing control or improving efficiency.

### Medium

Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible reputational damage, negative publicity in local or regional media.

### High

Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

The following table highlights the number and categories of management actions made as a result of this audit.

Area	Control design not effective*	Non-compliance with controls*	Agreed actions		
			Low	Medium	High
Operational Training	0 (6)	1 (6)	0	1	0
<b>Total</b>			<b>0</b>	<b>1</b>	<b>0</b>

\* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

## APPENDIX B: INTERNAL AUDIT ASSIGNMENT OPINIONS



### **Minimal Assurance**

Taking account of the issues identified, the board cannot take assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied or effective.

Urgent action is needed to strengthen the control framework to manage the identified risk(s).



### **Reasonable Assurance**

Taking account of the issues identified, the board can take reasonable assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified risk(s).



### **Partial Assurance**

Taking account of the issues identified, the board can take partial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied or effective.

Action is needed to strengthen the control framework to manage the identified risk(s).



### **Substantial Assurance**

Taking account of the issues identified, the board can take substantial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

## APPENDIX C: SCOPE

The scope below is a copy of the original document issued.

### Scope of the review

The scope was planned to provide assurance on the controls and mitigations in place relating to the following risk.

Objective of the risk under review	Risks relevant to the scope of the review	Risk source
<p>The recent HMICFRS inspection determined that the Service does not have in place adequate workforce planning processes, which included areas such as safety-critical training.</p> <p>This review will consider how the Service manages its continuous training programmes for firefighters, ensuring that all firefighters maintain the required competency levels and are equipped to carry out their roles safely and effectively.</p> <p>We will consider the scheduling, delivery, monitoring and reporting on operational training completions, how the Service ensures any specialist skills are maintained, and the escalation processes to manage any non-completions.</p>	<p>People - Ineffective workforce planning results in loss of key skills and resources at all levels of the organisation.</p>	<p>Corporate risk register</p>

### When planning the audit, the following were agreed:

#### Areas for consideration:

The initial HMICFRS inspection previously determined that the Service does not have in place adequate workforce planning processes, which included areas such as safety-critical training.

This review will consider how the Service manages its continuous training programmes for firefighters, ensuring that all firefighters maintain the required competency levels and are equipped to carry out their roles safely and effectively. We will consider the scheduling, delivery, monitoring and reporting on operational training completions, how the Service ensures any specialist skills are maintained, and the escalation processes to manage any non-completions. In particular our review will focus on the following:

- There is an up to date operational training strategy in place which has been approved, meets the requirements of the Fire and Rescue Plan, and is available to staff.
- There are training policies in place which underpin the operational training strategy and these are up to date and available to staff.
- There is a clear training and development plan in place which is regularly reviewed and approved. We will confirm the plan details the core operational skills and knowledge for a firefighter or operational commander requires in line with the National Operational Standards. This will consider whether training is clearly defined based on statutory/mandatory training, role specific and optional.
- Assessment and verification of training at regular intervals by qualified/competent assessors is undertaken and in line with the Service's quality assurance framework. In addition, we will confirm:
  - Assessment has been undertaken in line with the Service's policy.
  - Assessment standards have been published.

- Assessment outcomes have been recorded in a timely manner.
- Where employees do not achieve the standards required, an appropriate action plan is put in place and a period of retraining offered.
- Where training has been delivered internally, there is an appropriate quality assurance framework model in place.
- There are appropriate governance reporting and committees /groups in place to oversee the development of the operational training strategy and the completion of training activities.

#### **Limitations to the scope of the audit assignment:**

- We will not review the content of the operational training strategy or confirm it is aligned to the National Operational Guidance.
- We will not comment on the content of training.
- We will not review the costing to deliver the training or whether the Service has sufficient budget to achieve this.
- We cannot provide absolute assurance that the Service has identified all training needs aligned to Fire Standards, but that there are processes in place to do so.
- Appraisal and recruitment processes are outside the scope of this audit.
- Our review will not confirm the outcome of a HMICFRS inspection.
- The results of our work are reliant on the quality and completeness of the information provided to us.
- Our work will not provide an absolute assurance that material errors, loss or fraud do not exist.

Please note that the full scope of the assignment can only be completed within the agreed budget if all the requested information is made available at the start of our fieldwork, and the necessary key staff are available to assist the internal audit team. If the requested information and staff are not available, we may have to reduce the scope of our work and/or increase the assignment budget. If this is necessary, we will agree this with the client sponsor during the assignment.

To minimise the risk of data loss and to ensure data security of the information provided, we remind you that we only require the specific information requested. In instances where excess information is provided, this will be deleted, and the client sponsor will be informed.

**Debrief held** 16 September 2025  
**Draft report issued** 3 October 2025  
**Responses received** 14 October 2025

**Internal audit Contacts** Dan Harris, Head of Internal Audit  
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**Final report issued** 15 October 2025

**Client sponsor** Ben Illsley, Director of Emergency Response and Training  
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