# SUPPLEMENTARY AGENDA

HUMBERSIDE Fire Authority

**Enquiries to: Max Sleight**
**Email:** committeemanager@humbersidefire.gov.uk
**Tel:** (01482) 567509
**Date published:** 06/11/2026

| | |
|---|---|
| **Meeting** | **Governance, Audit and Scrutiny Committee** |
| **Date** | **Monday, 9 November 2026** |
| **Time** | **10:00** |
| **Location** | **Humberside Fire & Rescue Service Headquarters, Summergroves Way, Hull, HU4 7BB** |

| Item Number | Item | Page Number | Lead | Decision required |
|---|---|---|---|---|
| 4 | External Audit Completion Report 2025/26<br><br>It was agreed by the Chair for the item be treated as urgent in order that the Committee can pre-scrutinise the Accounts prior to receipt by the Fire Authority and help inform its decision. | 1 - 50 | Forvis Mazars | To receive and make any recommendations to the Fire Authority |
| 5 | External Audit Annual Report 2025/26<br><br>It was agreed by the Chair for the item be treated as urgent in order that the Committee can pre-scrutinise the Accounts prior to receipt by the Fire Authority and help inform its decision. | 51 - 75 | Forvis Mazars | To receive and make any recommendations to the Fire Authority |



# Audit Completion Report

# Humberside Fire Authority

## Year ended 31 March 2026

5 November 2026

forvis mazars

Members of the Humberside Fire Authority and Governance, Audit and Scrutiny Committee
Humberside Fire and Rescue Headquarters
Summergroves Way
Hull
HU4 7BB

5 November 2026

Dear Committee members

I am pleased to present our Audit Completion Report ("ACR") for Humberside Fire Authority for the year ended 31 March 2026. The purpose of this report is to summarise our audit findings and conclusions.

This report is intended solely for Those Charged with Governance for the purpose of communicating certain matters that, in our professional judgement, are relevant to your oversight of the financial reporting process.

We appreciate the courtesy and co-operation extended to us by Humberside Fire Authority throughout our audit. We would be happy to discuss the contents of this report, or any other matters regarding our audit, with you in more detail.

Yours faithfully,

Signed by:
Nicola Hallas
25CD54C8EEA14C6...
Nicola Hallas

**Forvis Mazars LLP**

Leeds

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# 01

# Executive Summary

# Executive summary

## Scope

We have been engaged to audit the financial statements of Humberside Fire Authority for the year ended 31 March 2026 which are prepared in accordance with the 2025/26 Code of Practice on Local Authority Accounting.

We have conducted our audit in accordance with International Standards on Auditing (UK) ('ISAs'), relevant ethical and professional standards, our own audit methodology and an accordance with the Code of Audit Practice.

## Audit status

Our audit procedures are progressing in line with our agreed timeline.

Please refer to the *'Status of our audit'* section for a list of audit matters outstanding at the date of this report. We will provide an update to you on completion of those outstanding matters by way of a follow up letter.

## Areas of focus and audit approach, and significant findings

We have not made any changes to our initial risk assessment and planned audit approach that was communicated to you in our Audit Strategy Memorandum.

Our significant risks and other areas of focus are set out in the *'Audit approach and risk summary'* section, with a summary of our audit approach over those areas. Significant findings from our audit are set out in the *'Significant findings'* section.

## Audit misstatements

A summary of the adjusted and unadjusted misstatements above our reporting threshold we have identified to date is set out in the *'Summary of misstatements'* section.

## Significant control deficiencies

We did not identify any significant deficiencies in internal control.

The non-significant control observations that we have identified to date are set out in *'Appendix A: Internal control conclusions'*.

## Audit opinion

At the time of issuing this report and subject to the satisfactory conclusion of our remaining audit work, we anticipate issuing an unqualified opinion, without modification, as set out in Appendix C.

## Value for Money

We anticipate having no significant weaknesses in arrangements to report in relation to the arrangements that the Authority has in place to secure economy, efficiency and effectiveness in its use of resources. Further details have been provided in the *'Value for Money'* section of this report.

## Wider reporting powers

Local Audit and Accountability Act 2014 ('the 2014 Act') requires us to give an elector, or any representative of the elector, the opportunity to question us about the accounting records of the Authority and to consider any objection made to the accounts. No such questions have been raised.

## Qualitative aspects of the Authority's accounting practices

We have reviewed the Authority's accounting policies and disclosures and conclude that they comply with the 2025/26 Code of Practice on Local Authority Accounting, appropriately tailored to the Authority's circumstances.

Draft accounts were received from the Authority on 30 June 2026 and were of a good quality. Supporting work papers were of a good quality enabling the audit team to progress the audit with no significant difficulties.

# Executive summary

## Significant matters discussed with management

During our audit, we discussed the following significant matters with management:

**Land and Buildings Valuations including indexation:**

- During the audit, management confirmed that, following changes to the CIPFA Code, the Authority has revised its approach to property valuations and have followed the prescribed quinquennial valuation cycle. Assets that were previously subject to annual valuation based on materiality have been revalued in the current year as part of the transition to the revised approach. In future years, these assets will not be subject to annual revaluation and will instead be indexed between formal valuations in accordance with the Code. Our conclusions on the audit work are detailed in Section 04.

**Fire Fighters Pension Scheme- Use of provisional pension valuation data (IAS19)**

- We discussed with management the use of provisional membership data by the Government Actuary's Department (GAD) in preparing the Authority's 2025/26 IAS 19 pension disclosures, as validation of the 31 March 2024 valuation data had not been completed at the reporting date. We challenged management on the potential impact of the outstanding data checks and sought confirmation from GAD regarding the implications for the pension liability and related disclosures. We have received appropriate assurance from GAD that the data validation process is well advanced and, based on work completed to date, they do not expect the completion of the outstanding checks to result in a material impact on the 2025/26 IAS 19 disclosures. The disclosure within the financial statements fairly reflects the position.

## Significant difficulties during the audit

We encountered no significant difficulties during our audit and had no significant disagreements with management. There was effective co-operation and communication between Forvis Mazars, management, and you during our audit. All requested information and explanations were provided to us.

# 02

## Status of the audit

# Status of our audit

Our audit work is progressing in line with the plan. There are currently no matters of which we are aware that would require modification of our audit opinion, subject to the satisfactory resolution of the outstanding matters set out below.

| Item outstanding | Action to resolve | Forvis Mazars | Those Charged With Governance | Management |
|---|---|---|---|---|
| Net defined benefit Pension- Local government pension scheme. | We are awaiting assurance from the pension fund auditor for the Local Government Pension Scheme. The pension fund audit is still in progress, which means that we are unable to conclude our work to address the significant risk in respect of the defined benefit pension liability valuation at this stage. We expect we will obtain the necessary assurance before the backstop date 31 January 2027 to be able to issue our final audit opinion. | 🔴 | | 🔴 |
| Net defined Benefit Pension –Fire Fighters Pension scheme. | We have a small number of queries outstanding as at the time of issuing this report in regard to membership data testing. | 🔴 | | 🔴 |
| PPE Land and Buildings Valuations | We are concluding our work on testing of land and buildings valuations and indexation. | 🟡 | | 🟡 |
| Related Parties | We are awaiting responses to the queries we have raised regarding the completeness of information disclosed in the accounts. | 🟡 | | 🟡 |
| Payroll | Our work is ongoing on testing additional earnings for the items selected in our sample. | 🟡 | | 🟡 |
| ITGC | User modification testing is ongoing at the time of drafting this report. | 🟢 | | 🟢 |
| Receivables | Work is ongoing to complete our consideration of the expected credit loss amount. | 🟡 | | 🟡 |
| Closing processes | We are in the process of completing our Internal review and closure processes. | 🟡 | | 🟡 |

| Likelihood to result in a material adjustment or significant change to disclosures | | | Value For Money |
|---|---|---|---|
| Likely | Potentially | Not considered likely | Work on VFM arrangements |
| 🔴 | 🟡 | 🟢 | 🔵 |

# Status of our audit

Our audit work is progressing in line with the plan. There are currently no matters of which we are aware that would require modification of our audit opinion, subject to the satisfactory resolution of the outstanding matters set out below.

| Item outstanding | Action to resolve | Forvis Mazars | Those Charged With Governance | Management |
|---|---|---|---|---|
| Whole of Government Accounts | We are awaiting group instructions from the National Audit Office. This may impact on the timing of issuing our audit certificate to formally conclude and close the audit. | ● | | |
| VFM | At the time of Issuing this report we have also issued our Draft Auditor's Annual Report which contains our VFM commentary. We will continue our assessment up to the date of the Audit Opinion on the financial statements. | ● | | |
| Subsequent events review | Completion of subsequent events review up to the date of signing the Audit Report | ● | | ● |
| Financial Statements | Awaiting receipt of approved and signed Financial statements from the Humberside Fire Authority | | ● | ● |
| Management Representation Letter | Awaiting receipt of the approved and signed Management representation letter. | | | ● |
| Audit Report | To be issued on receipt of the signed financial statements. | ● | | |

| Likelihood to result in a material adjustment or significant change to disclosures | | | Value For Money |
|---|---|---|---|
| Likely | Potentially | Not considered likely | Work on VFM arrangements |
| ● | ● | ● | ● |

# 03

## Audit approach and risk summary

# Audit approach and risk summary

## Changes to our audit approach

There have been no changes to the audit approach we communicated in our Audit Strategy Memorandum, issued on 25 June 2026.

## Materiality

Our provisional materiality at the planning stage of our audit was set at 2% of Gross revenue expenditure based on prior year financial statements.

Based on the final financial statement figures the basis of overall materiality we applied remained 2% of Gross revenue expenditure (final performance materiality £1,350k; final clearly trivial threshold: £50k).

The specific materiality level we set for Senior officer remuneration including exit packages was £5k.

| | 2025-26 per Final Accounts £'000s | 2025-26 per Audit Strategy Memorandum £'000s |
|---|---|---|
| Overall materiality | £1,688 | £1,650 |
| Performance materiality | £1,350 | £1,320 |
| Clearly trivial | £50 | £49 |
| Specific materiality on Senior officer's remuneration including exit packages. | £5 | £5 |

# Audit approach and risk summary

| | Audit risk/ key area of judgement | Fraud risk | Judgement | Error | Substantive audit procedures | Tests of controls | Misstatement identified | Control recommendations | Conclusion | Page ref to finding |
|---|---|---|---|---|---|---|---|---|---|---|
| Significant risks | Management override of controls | ● | ● | ○ | ● | ○ | ○ | ○ | Based on the work performed we have no matters to report. | 14 |
| | Net Defined Benefit liability valuation | ○ | ● | ● | ● | ○ | ○ | ○ | We are still concluding our work on this area refer to the section titled ‘Status of our audit’ for more details. | 15 |
| | Valuation of Land and Buildings including Right of use Assets | ○ | ● | ● | ● | ○ | ○ | ○ | We are still concluding our work in this area - refer to the section titled ‘Status of our audit’ for more details. | 16 |

# 04

# Significant findings

# Significant findings

The significant findings from our audit include our conclusions regarding the significant risks we identified and other key areas of judgement, which are set out in this section.

## Significant risks

| | |
|---|---|
| **Management Override of Controls** | **Description of the risk**<br><br>Management at various levels within an organisation are in a unique position to perpetrate fraud because of their ability to manipulate accounting records and prepare fraudulent financial statements by overriding controls that otherwise appear to be operating effectively.<br><br>Due to the unpredictable way in which such override could occur, we are required by auditing standards to identify a significant risk of management override of controls on our audit. |
| | **How we addressed this risk**<br>We addressed this risk through performing audit work over:<br>• Accounting estimates impacting amounts included in the financial statements;<br>• Consideration of identified significant transactions outside the normal course of business or otherwise unusual; and<br>• Journal entries recorded in the general ledger and other adjustments made in preparation of the financial statements. |
| | **Audit conclusion**<br>Our audit work has provided the assurance we sought and has not identified any material issues to bring to your attention. |

# Significant findings

| | |
|---|---|
| **Net Defined benefit liability valuation** | **Description of the risk**<br>The net pension asset/liability represents a material value within the Authority's balance sheet. The Authority's employees are members of the Local Government Pension Scheme and the Firefighters' Pension Fund, with the pension asset/liability determined using actuarial valuations of the respective schemes.<br>The valuation of Pension schemes relies on a number of assumptions, most notably around the actuarial assumptions and actuarial methodology which results in the Authority's overall valuation. There are financial and demographic assumptions used in the calculation, such as the discount rate, inflation rates and mortality rates. The assumptions should also reflect the profile of the Authority's employees and should be based on appropriate data. The basis of the assumptions is derived on a consistent basis year to year, updated to reflect any changes.<br>There is a risk that the assumptions and methodology used in valuing the pension obligation are not reasonable or appropriate to the Authority's circumstances. This could have a material impact on the net pension asset/liability in 2025/26. |
| | **How we addressed this**<br>• evaluated the competency, objectivity and independence of the scheme actuaries;<br>• liaised with the auditor of the East Riding Pension Fund to gain assurance over the design and implementation of controls in place to ensure data provided to the actuary by the pension fund for the purposes of the IAS 19 valuation is complete and accurate;<br>• reviewed a summary of the work performed by the East Riding Pension Fund auditor on the Pension Fund investment assets, and evaluating whether the outcome of their work would affect our consideration of the Authority's share of Pension Fund assets;<br>• obtained assurance from the Pension Fund auditor in relation to the data used for the triennial valuation;<br>• reviewed membership data and test samples for the Firefighters' Pension Scheme;<br>• reviewed the appropriateness of the pension asset/liability valuation methodologies applied by the actuaries and the key assumptions included within the valuations. This will include comparing them to expected ranges, utilising information from the consulting actuary engaged by the National Audit Office; and<br>• agreed the data in the IAS 19 valuation reports provided by the actuaries for accounting purposes to the pension accounting entries and disclosures in the financial statements. |
| | **Audit conclusion**<br>Our work on this significant risk remains on going. There are no significant matters to bring to your attention form the work performed to date. |

# Significant findings

| | |
|---|---|
| **Valuation of Land and Buildings including Right of use assets.** | **Description of the risk**<br>The financial statements contain material entries on the Balance Sheet as well as material disclosure notes in relation to the Authority's holding of land and buildings.<br><br>Although the Authority engages a valuation expert to provide information on valuations, there remains a high degree of estimation uncertainty associated with the revaluation of land and buildings due to the significant judgements and number of variables involved.<br><br>In 2025/26, the Code requires Authorities to apply an indexation to assets in the years between professional valuations in order to consider the relative change in value between valuations. The Code has not mandated the use of any particular index and it will require management's judgement to provide a reasonable estimate of the movement in value.<br><br>We have therefore identified the valuation of land and buildings to be an area of significant risk. |
| | **How we addressed this**<br>• Liaised with management to update our understanding on the approach taken by the Authority in its valuation of land and buildings.<br><br>For assets that have been revalued in the year we:<br>• Assessed the scope of terms of engagement of the valuer;<br>• Assessed the competence, skills and objectivity of the valuer;<br><br>For a sample of valuations, we:<br>- tested the accuracy of the data used in the valuations;<br>- challenged the assumptions applied by the valuer and the Authority; and<br>- reviewed the appropriateness of the valuation methodology used.<br><br>For assets that have been indexed in year we:<br>• gained an understanding of the approach taken by the Authority;<br>• assessed the relevance of the indices used; and<br>• considered the reasonableness of these indices. |
| | **Audit conclusion**<br><br>Our work in this area remains in progress.<br><br>From the work performed, we have identified one internal control recommendation - see Appendix A for further details. |

# Significant findings

## Wider responsibilities

Our powers and responsibilities under the 2014 Act are broad and include the ability to:

- issue a report in the public interest;
- make statutory recommendations that must be considered and responded to publicly;
- apply to the court for a declaration that an item of account is contrary to law; and
- issue an advisory notice under schedule 8 of the 2014 Act.

We have not exercised any of these powers as part of our 2025/26 audit.

The 2014 Act also gives rights to local electors and other parties, such as the right to ask questions of the auditor and the right to make an objection to an item of account. No such objections have been raised.

# 05

## Significant control deficiencies

# Significant control deficiencies

As part of our audit, we obtained an understanding of the Authority's internal control environment and control activities relevant to the preparation of the financial statements, which was sufficient to plan our audit and determine the nature, timing, and extent of our audit procedures. Although our audit was not designed to express an opinion on the effectiveness of the Authority's internal controls, we are required to communicate to you any significant deficiencies in internal controls that we identified in during our audit.

## Deficiencies in internal control

A deficiency in internal control exists if:

- A control is designed, implemented, or operated in such a way that it is unable to prevent, detect, and/ or correct potential misstatements in the financial statements; or
- A control that is necessary to prevent, detect, and/ or correct misstatements in the financial statements on a timely basis is missing.

The purpose of our audit was to express an opinion on the financial statements. As part of our audit, we have considered the Authority's internal controls relevant to the preparation of the financial statements to design audit procedures to allow us to express an opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Authority's internal controls or to identify any significant deficiencies in their design or operation.

The matters reported in this section of our report are limited to those deficiencies and other control recommendations that we have identified during our normal audit procedures and which we consider to be of sufficient importance to merit being reported.

If we had performed more extensive procedures on internal control, we might have identified more deficiencies to report or concluded that some of the reported deficiencies need not in fact have been reported.

Our comments in this section should not be regarded as a comprehensive record of all deficiencies that may exist or improvements that could be made.

## Significant deficiencies in internal control

A significant deficiency in internal control is one which, in our professional judgement, has the potential for financial loss, damage to reputation, or a loss of information which may have implications on the achievement of business strategic objectives. Our view is that observations categorised as a significant deficiency is of sufficient importance to merit your attention.

The significant deficiencies in the Authority's internal controls that we have identified as at the date of this report are in set out on the following pages.

## Other observations

We also record our observations on the Authority's internal controls where, in our professional judgement, there is a need to strengthen internal control or enhance business efficiency that do not constitute significant deficiencies in internal control but which we view as being important for consideration by management.

The other control deficiencies that we have identified as at the date of this report are set out in *'Appendix A: Internal control conclusions'*.

# Significant control deficiencies

## Significant deficiencies in internal control

In our view, the deficiencies in internal control set out in this section result in a potential for financial loss, damage to reputation, or a loss of information. This may have implications for the achievement of business strategic objectives. Our recommendations should be considered for immediate action.

| Failure to Identify Material Debit Balance Within Creditors at Year End |
| --- |
| **Description of deficiency**<br>The controls over the year-end financial close process did not operate effectively to ensure all material journals were posted and significant balances within trade and other payables were reviewed for completeness and appropriate classification. As a result, an unposted pension journal led to a material balance being incorrectly presented within creditors |
| **Potential effects**<br>Financial statement balances may be misstated and omitted journals or unusual balances may not be identified through the year-end financial reporting process. |
| **Recommendation**<br>Management should strengthen the year-end financial reporting process by ensuring that all material journals are prepared, reviewed and posted prior to ledger close. A documented review of significant and unusual account balances should also be performed to identify potential misstatements or misclassifications before the financial statements are finalised. |
| **Management response**<br>The year-end closedown process will be strengthened to ensure that all material journals are prepared, reviewed and posted before the ledger is closed. A documented review of significant and unusual balances will also be introduced, including debit balances within creditors and credit balances within debtors, to identify any omissions or potential misclassifications before the financial statements are finalised. These arrangements will be implemented for the 2026/27 year-end closedown. |

# 06

## Summary of misstatements

# Summary of misstatements

## Unadjusted misstatements

Our overall materiality, performance materiality, and clearly trivial (reporting) threshold were reported in our Audit Summary Memorandum, issued on 24 June 2026. Any subsequent changes to those figures are set out in the *'Executive summary'* section of this report.

We identified no misstatements above our reporting threshold, or that we deem to be material by nature, as at the date of this report which were not adjusted.

# Summary of misstatements

## Adjusted misstatements

The misstatements in the table below have been adjusted by management. We report all individual misstatements above our reporting threshold that we identify during our audit and which management had adjusted and any other misstatements we believe you should be made aware of.

| Adjusted misstatements | | Comprehensive Income and Expenditure Statement | | Pension Fund | | Balance Sheet | |
|---|---|---|---|---|---|---|---|
| **Description** | **Nature** | **Dr (£ '000)** | **Cr (£ '000)** | **DR (£'000)** | **CR (£'000)** | **Dr (£ '000)** | **Cr (£ '000)** |
| DR - Short term debtors | Actual | | | | | 1,720 | |
| DR – Expenditure | | 3 | | | | | |
| DR - Pension payable | | | | 457 | | | |
| DR Reserves | | | | | | 3 | |
| CR –Pension Income | | | | | 457 | | |
| CR - Short Term Creditors | | | | | | | 1,723 |
| Being the correcting journal to post the Month 12 pensions file that was missed during the Financial statement closing process. | | | | | | | |
| **Aggregate effect of adjusted misstatements** | | **3** | **0** | **457** | **457** | **1,723** | **1,723** |

# Summary of misstatements

## Disclosure misstatements

We identified the following disclosure misstatements during our audit that have been corrected by management:

- **Note 1 – Accounting policies** - The Note has been updated to remove policies considered not material to the Authority.
- **Note 4 – Pensions** - a footnote has been added to explain the amounts going through Other Comprehensive income for the Fire Fighters Pension scheme.
- **Note 7 – Reserves held by the Authority -** The narrative for Useable Earmarked reserves has been updated to align figures with current year.
- **Note 15 – Officers emoluments –** The Note has been updated as the totals for the pension contributions columns were not arithmetically correct and the total amount differed to the elements in the table by £177k.
- **Note 15 – Officers emoluments -** The Note has been updated as the employee remuneration banding disclosure omitted one operational employee from the operational and overall totals.
- **Note 16 – Contingent liabilities** – The Note has been updated to disclose a contingent liability relating to the Matthews options for the Fire Fighters Pension scheme.
- The following Statements and Notes have had changes based on the material adjustment made – see page 23
    - Movement in reserves statement
    - Note 2 – Expenditure and Funding analysis
    - Note 9 – Other creditors and debtors
    - Pension Fund Account
- There have also been some minor presentational amendments to the financial statements.

We have not identified any disclosure misstatements, above our reporting threshold that have not been corrected by management

# 07

# Fraud considerations

# Fraud considerations

We have a responsibility to plan and perform our audit to obtain reasonable assurance that the financial statements are free from material misstatement, whether due to fraud or error.

## Your responsibilities

Management has primary responsibility for the prevention and detection of fraud. It is important that management, with your oversight, place a strong emphasis on fraud prevention, which may reduce opportunities for fraud to take place, and fraud deterrence, which could persuade individuals not to commit fraud because of the likelihood of detection and punishment. This involves a commitment to creating a culture of honesty and ethical behaviour which is reinforced by your active oversight.

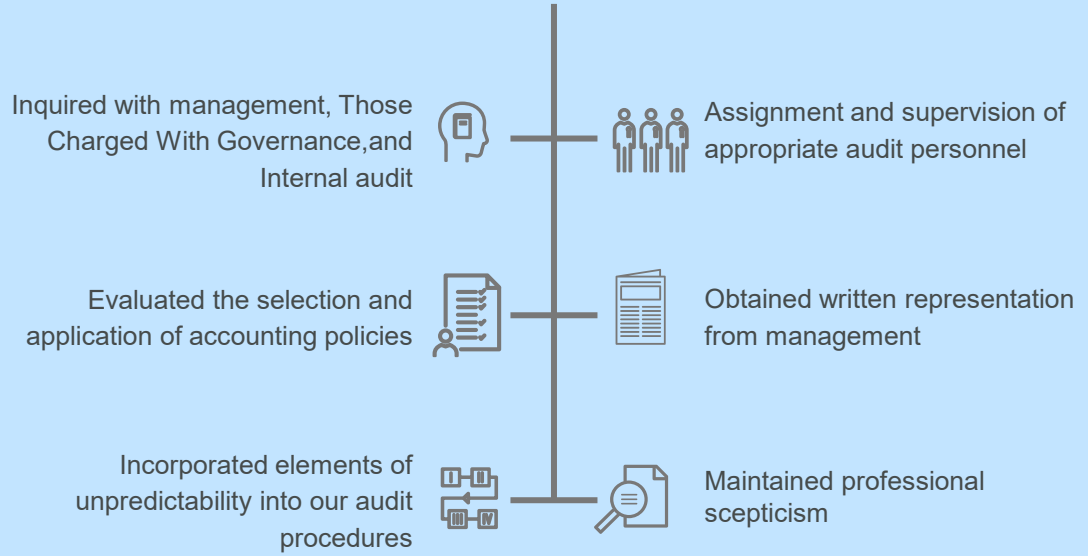
## Our responsibilities

We have a responsibility for obtaining reasonable assurance that the financial statements taken as a whole are free from material misstatement, whether due to fraud or error. The distinguishing factor between fraud and error is whether the underlying action that results in a misstatement is intentional or unintentional. Two types of intentional misstatements are relevant to us – misstatements resulting from fraudulent financial reporting, and misstatements resulting from the misappropriation of assets.

## ISA presumed fraud risks

As set out in the *'Audit approach and risk summary'* section, the risk of fraud in management override of controls] was identified as a significant risk

### Our overall approach to fraud




### Our overall conclusion

We did not identify any actual or suspected fraud involving management, employees with significant roles in internal control or others, where the fraud resulted in a material misstatement in the financial statements.

# 08

## Value for Money

# Value for Money

## Approach to Value for Money

We are required to form a view as to whether the Authority has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources. The NAO issues guidance to auditors that underpins the work we are required to carry out in order to form our view and sets out the overall criterion and sub-criteria that we are required to consider.

We have undertaken our value for money (VFM) work under the 2024 Code of Audit Practice ('the Code'). Our responsibility remains to be satisfied that the Authority has proper arrangements in place, and to report in the auditor's report where we are not satisfied that arrangements are in place. Where we have issued a recommendation in relation to a significant weaknesses this indicates we are not satisfied that arrangements are in place. Separately we provide a commentary on the Authority 's arrangements in the Auditor's Annual Report.

The Code requires us to issue our Auditor's Annual Report for the year ending 31st March 2026 to you in draft by the 30th November 2026. This is required whether our audit is complete or not. Should our work not be complete, we will report the status of our work and any findings to up to that point (and since the issue of our previous Auditor's Annual Report).

The Code requires us to structure our commentary to report under three specified criteria:

- **Financial sustainability** - How the Authority plans and manages its resources to ensure it can continue to deliver its services;
- **Governance** - How the Authority ensures that it makes informed decisions and properly manages its risks; and
- **Improving economy, efficiency and effectiveness** - How the Authority uses information about its costs and performance to improve the way it manages and delivers its services

At the planning stage of the audit, we undertake work to understand the arrangements that the Authority has in place under each of the reporting criteria and we identify risks of significant weaknesses in those arrangements. Although we describe this work as planning work, we keep our understanding of arrangements under review and update our risk assessment throughout the audit to reflect emerging issues that may suggest significant weaknesses in arrangements exist.

Where our risk-based procedures identify actual significant weaknesses in arrangements we are required to report these and make recommendations for improvement. Where such significant weaknesses are identified, we report these in the audit report by exception. We will also highlight emerging issues or other matters that do not represent significant weaknesses but still require attention from the Authority.

The primary output of our work on the Authority arrangements is the commentary on those arrangements that forms part of the Auditor's Annual Report. This commentary will provide a summary of the work we have undertaken and our judgements against each of the specified reporting criteria. We intend to issue the Auditor's Annual Report by 30 November 2026.

## Status of our work

We have not yet finalised our work in respect of the Authority's arrangements for the year ended 31 March 2026. Based on the current work we have done we have not identified any significant weaknesses in arrangements that would require us to make a recommendation. Our draft audit report at Appendix C confirms that we have no matters to report in respect of significant weaknesses at this stage. Our commentary on the Authority's arrangements has been provided in the Draft Auditor's Annual Report. We will issue our final commentary together with the final Audit opinion.

# Appendices

A: Internal control conclusions

B: Draft management representation letter

C: Draft audit report

D: Confirmation of our independence

E: Other communications

# Appendix A: Internal control conclusions

## Other deficiencies in internal control

This Appendix sets out the internal control observations that we have identified as at the date of this report. These control observations are not, in our view, significant control deficiencies but will be/ have been reported to management directly and are included in this report for your information. In our view, there is a need to address the deficiencies in internal control set out in this section to strengthen internal control or enhance business efficiency. Our recommendations should be actioned by management in the near future.

| ITGC - Change Management |
| --- |
| **Description of deficiency**<br>Changes and updates to the Aptos finance system are not supported by formally documented change requests, evidence of initiation, or documented approval. Management confirmed that system changes are discussed and agreed verbally during meetings, for which no formal minutes or records are maintained. As a result, there is no documented audit trail demonstrating who requested, reviewed, or approved changes prior to implementation. |
| **Potential effects**<br>In the absence of a documented record of authorised change requests and approval there is an increased risk that unauthorised changes could be implemented without detection and reduces accountability over changes affecting the integrity and accuracy of financial and system information. |
| **Recommendation**<br>Management should ensure that system change records include details of the individual requesting or initiating the change, together with the date of the request and evidence of approval where appropriate. |
| **Management response**<br>A formal record of changes to the Aptos finance system will be maintained going forward. This will record the nature of the change, the individual requesting or initiating the change, the date of the request and evidence of appropriate review and approval prior to implementation.<br>This will formalise the existing change management arrangements and provide a clear audit trail demonstrating that system changes have been appropriately authorised. |

# Appendix A: Internal control conclusions

## Other deficiencies in internal control -continued

| Nil Net Book Value (NBV) Assets |
|---|
| **Description of deficiency** |
| As part of the review of assets held with a nil NBV, we identified assets with a total gross historical cost of £6.319m that were fully depreciated as at 31 March 2026 but remained in operational use. Much of the balance relates to Operational Vehicles (£6.070m).<br><br>Sample testing confirmed that the selected assets remained in active use at the year end despite having a net book value of £nil. This suggests that the useful economic lives currently assigned to certain assets may not reflect their actual period of use and that the Authority's process for reviewing useful lives may not be operating effectively. |
| **Potential effects** |
| Useful economic lives may be underestimated, resulting in depreciation being charged over a shorter period than the assets' actual operational lives. This may lead to the overstatement of gross cost and accumulated depreciation balances and distort the timing of depreciation charges recognised in the financial statements. |
| **Recommendation** |
| Management should review the useful economic lives assigned to operational vehicles to ensure depreciation is charged over a period that reflects the assets' expected consumption of economic benefits. |
| **Management response** |
| The Authority undertook a review during the 2025/26 closedown process of the remaining useful lives of assets that would otherwise become fully depreciated during the year. This review identified a number of operational vehicles that were expected to remain in service beyond their existing accounting useful lives. However, the outcome of this review was not subsequently reflected in the fixed asset register.<br><br>Management will ensure that the outcome of future useful-life reviews is appropriately reflected in the fixed asset register where a revision to an asset's expected useful life is identified. The 2026/27 review will also reconsider the remaining useful lives of operational vehicles still in use at nil NBV, taking account of their condition, usage and expected replacement dates. |

# Appendix A: Internal control conclusions

## Other deficiencies in internal control -continued

| Land and Buildings floor areas used in valuation |
| --- |
| **Description of deficiency**<br>For several assets tested as part of our valuations work, the floor areas used by the valuer differed from those recorded in the Authority's asset records, indicating that discrepancies between valuation data and underlying asset records had not been identified and resolved. Whilst the differences identified were not material to the valuation, inaccuracies in asset data increase the risk of valuation errors. |
| **Potential effects**<br>Inaccurate or inconsistent asset data may result in valuation inaccuracies and increase the risk that errors in property valuations are not identified and corrected in a timely manner. |
| **Recommendation**<br>Management should review property data by periodically validating key asset information and reconciling any differences identified between Authority records and the valuer's records. |
| **Management response**<br>Arrangements will be put in place to ensure the most up to date floor plans are used by the valuers. |

# Appendix A: Internal control conclusions

## Follow up on previous internal control points

We set out below an update on internal control points raised in prior periods.

**Related Parties.**

- We raised a control recommendation in 2024/25 in regard to related party declarations that were not received for several members. Our work is ongoing in regard to Related parties, we have not yet issued a conclusion on this matter.

# Appendix B: Draft management representation letter

Forvis Mazars
5th Floor
3 Wellington Place
Leeds
LS1 4AP

[Date]

Dear Nicola,

**Humberside Fire Authority - Audit for Year Ended 31 March 2026**

This representation letter is provided in connection with your audit of the financial statements of Humberside Fire Authority for the year ended 31 March 2026 for the purpose of expressing an opinion as to whether the financial statements give a true and fair view in accordance with the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom 2025/26 (the Code), and applicable law.

I confirm that the following representations are made on the basis of enquiries of management and staff with relevant knowledge and experience (and, where appropriate, inspection of supporting documentation) sufficient to satisfy myself that I can properly make each of the following representations to you.

**My responsibility for the financial statements and accounting information**

I believe that I have fulfilled my responsibilities for the true and fair presentation and preparation of the financial statements in accordance with the Code, as amended by applicable law.

**My responsibility to provide and disclose relevant information**

I have provided you with:

- access to all information of which I am aware that is relevant to the preparation of the financial statements such as records, documentation and other material;
- additional information that you have requested from us for the purpose of the audit; and
- unrestricted access to individuals within the Authority you determined it was necessary to contact in order to obtain audit evidence.

I confirm as Executive Director of Finance/S151 officer that I have taken all the necessary steps to make me aware of any relevant audit information and to establish that you, as auditors, are aware of this information.

As far as I am aware there is no relevant audit information of which you, as auditors, are unaware.

I confirm that there is no information provided to you as part of the audit that I consider legally privileged.

# Appendix B: Draft management representation letter

**Accounting records**

I confirm that all transactions that have a material effect on the financial statements have been recorded in the accounting records and are reflected in the financial statements. All other records and related information, including minutes of all Authority and committee meetings, have been made available to you.

**Accounting policies**

I confirm that I have reviewed the accounting policies applied during the year in accordance with International Accounting Standard 8 and consider these policies to faithfully represent the effects of transactions, other events or conditions on the Authority's financial position, financial performance and cash flows.

**Accounting estimates, including those measured at current and fair value.**

I confirm that the methods, significant assumptions and the data used by the Authority in making the accounting estimates, including those measured at current and fair value, are appropriate to achieve recognition, measurement or disclosure that is in accordance with the applicable financial reporting framework.

I confirm:

- that the significant judgments made in making the accounting estimates have taken into account all relevant information of which management is aware;
- the consistency and appropriateness in the selection or application of the methods, assumptions and data used by management in making the accounting estimates;
- that the assumptions appropriately reflect management's intent and ability to carry out specific courses of action on behalf of the entity, when relevant to the accounting estimates and disclosures;
- that disclosures related to accounting estimates, including disclosures describing estimation uncertainty, are complete and are reasonable in the context of the applicable financial reporting framework;
- that appropriate specialized skills or expertise has been applied in making the accounting estimates;
- that no subsequent event requires adjustment to the accounting estimates and related disclosures included in the financial statements;
- that when accounting estimates are not recognised or disclosed in the financial statements, about the appropriateness of management's decision, that the recognition or disclosure criteria of the applicable financial reporting framework have not been met.

# Appendix B: Draft management representation letter

**Contingencies**

There are no material contingent losses including pending or potential litigation that should be accrued where:

- information presently available indicates that it is probable that an asset has been impaired or a liability had been incurred at the balance sheet date; and
- the amount of the loss can be reasonably estimated.

There are no material contingent losses that should be disclosed where, although either or both the conditions specified above are not met, there is a reasonable possibility that a loss, or a loss greater than that accrued, may have been incurred at the balance sheet date.

There are no contingent gains which should be disclosed.

All material matters, including unasserted claims, that may result in litigation against the Authority have been brought to your attention. All known actual or possible litigation and claims whose effects should be considered when preparing the financial statements have been disclosed to you and accounted for and disclosed in accordance with the Code, as amended by applicable law.

**Laws and regulations**

I confirm that I have disclosed to you all those events of which I am aware which involve known or suspected non-compliance with laws and regulations, together with the actual or contingent consequences which may arise therefrom.

The Authority has complied with all aspects of contractual agreements that would have a material effect on the accounts in the event of non-compliance.

**Fraud and error**

I acknowledge my responsibility as Executive Director of Finance / s151 Officer for the design, implementation and maintenance of internal control to prevent and detect fraud and error and I believe I have appropriately fulfilled those responsibilities.

I have disclosed to you:

- all the results of my assessment of the risk that the financial statements may be materially misstated as a result of fraud;
- all knowledge of fraud or suspected fraud affecting the Authority involving:
    - management and those charged with governance;
    - employees who have significant roles in internal control; and
    - others where fraud could have a material effect on the financial statements.

I have disclosed to you all information in relation to any allegations of fraud, or suspected fraud, affecting the Authority's financial statements communicated by employees, former employees, analysts, regulators or others.

# Appendix B: Draft management representation letter

**Related party transactions**
I confirm that all related party relationships, transactions and balances, have been appropriately accounted for and disclosed in accordance with the requirements of the Code, as amended applicable law.

I have disclosed to you the identity of the Authority's related parties and all related party relationships and transactions of which I am aware.

**Impairment review**
To the best of my knowledge, there is nothing to indicate that there is a permanent reduction in the recoverable amount of the property, plant and equipment and intangible assets below their carrying value at the balance sheet date. An impairment review is therefore not considered necessary.

**Charges on assets**
All the Authority's assets are free from any charges exercisable by third parties except as disclosed within the financial statements.

**Future commitments**
The Authority has no plans, intentions or commitments that may materially affect the carrying value or classification of assets and liabilities or give rise to additional liabilities.

**Subsequent events**
I confirm all events subsequent to the date of the financial statements and for which the Code, as amended by applicable law, require adjustment or disclosure have been adjusted or disclosed.

Should further material events occur after the date of this letter which may necessitate revision of the figures included in the financial statements or inclusion of a note thereto, I will advise you accordingly.

# Appendix B: Draft management representation letter

**Going concern**
To the best of my knowledge there is nothing to indicate that the Authority will not continue as a going concern in the foreseeable future. The period to which I have paid particular attention in assessing the appropriateness of the going concern basis is not less than twelve months from the date of approval of the accounts.

**Annual Governance Statement**
I am satisfied that the Annual Governance Statement (AGS) fairly reflects the Authority's risk assurance and governance framework and I confirm that I am not aware of any significant risks that are not disclosed within the AGS.

**Narrative Report**
The disclosures within the Narrative Report fairly reflect my understanding of the Authority's financial and operating performance over the period covered by the financial statements.

**Unadjusted misstatements**
I confirm that the effects of the uncorrected misstatements are immaterial, both individually and in aggregate, to the financial statements as a whole. A list of the uncorrected misstatements is attached to this letter as an Appendix. Please make sure the appendix is attached to the letter and not cross-referenced to the appendix in the ACR.

**Prior period adjustments**
No prior period adjustments or restatements have been identified or made within the financial statements for the year.

**Arrangements to achieve economy, effectiveness and efficiency in Use of Resources (Value for Money arrangements)**
I confirm that I have disclosed to you all findings and correspondence from regulators for previous and ongoing inspections of which I am aware. In addition, I have disclosed to you any other information that would be considered relevant to your work on value for money arrangements.

Yours faithfully,

Executive Director of Finance/ s151 officer

Date: XXXX

# Appendix C: Draft audit report

## Independent auditor’s report to the members of Humberside Fire Authority

### Report on the audit of the financial statements

#### Opinion on the financial statements

We have audited the financial statements of Humberside Fire Authority (“the Authority”) for the year ended 31 March 2026, which comprise the Movement in Reserves Statement, Comprehensive Income and Expenditure Statement, the Balance Sheet, the Cash Flow Statement, Fire Fighters Pension Fund Account and notes to the financial statements, including material accounting policy information.

The financial reporting framework that has been applied in their preparation is applicable law and the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom 2025/26.

In our opinion, the financial statements:

- give a true and fair view of the financial position of the Authority as at 31st March 2026 and of its expenditure and income for the year then ended; and
- have been properly prepared in accordance with the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom 2025/26.

#### Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the “Auditor’s responsibilities for the audit of the financial statements” section of our report. We are independent of the Authority in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC’s Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Executive Director of Finance’s use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, and taking into account the requirements of the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom 2025/26, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Authority's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Executive Director of Finance with respect to going concern are described in the relevant sections of this report.

# Appendix C: Draft audit report

## Other information

The other information comprises the Annual Governance Statement and information included in the Statement of Accounts, other than the financial statements and our auditor's report thereon. The Executive Director of Finance is responsible for the other information. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements, or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

## Responsibilities of the Executive Director of Finance for the financial statements

As explained more fully in the Statement of the Executive Director of Finance's Responsibilities, the Executive Director of Finance is responsible for the preparation of the Statement of Accounts, which includes the financial statements, in accordance with proper practices as set out in the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom 2025/26, and for being satisfied that they give a true and fair view. The Executive Director of Finance is also responsible for such internal control as the Executive Director of Finance determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

The Executive Director of Finance is required to comply with the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom 2025/26 and prepare the financial statements on a going concern basis on the assumption that the functions of the Authority will continue in operational existence for the foreseeable future. The Executive Director of Finance is responsible for assessing each year whether or not it is appropriate for the Authority to prepare its accounts on the going concern basis and disclosing, as applicable, matters related to going concern.

# Appendix C: Draft audit report

## Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below.
Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud.

Based on our understanding of the Authority we considered those laws and regulations that have a direct effect on the preparation of the financial statements, such as the Local Government Act 2003 (and associated regulations made under section 21), the Local Government Finance Acts of 1988, 1992 and 2012, Local Audit and Accountability Act 2014 and Accounts and Audit Regulations 2015.
We also considered that non-compliance with the following laws and regulations might have a material effect on the financial statements: Fire and rescue services Act 2004, Fire Safety Act 2021, Policing and Crime Act 2017 and the Civil contingencies Act 2004.

To help us identify instances of non-compliance with these laws and regulations, and in identifying and assessing the risks of material misstatement in respect to non-compliance, our procedures included, but were not limited to :

- gaining an understanding of the legal and regulatory framework applicable to the Authority, the environment in which it operates, and the structure of the Authority, and considering the risk of acts by the Authority which were contrary to the applicable laws and regulations, including fraud;
- inquiring with management and the Humberside Fire Authority Committee, as to whether the Authority is in compliance with laws and regulations, and discussing their policies and procedures regarding compliance with laws and regulations;
- inspecting correspondence, if any, with relevant licensing or regulatory authorities;
- reviewing relevant meeting minutes in the year;
- communicating identified laws and regulations throughout our engagement team and remaining alert to any indications of non-compliance throughout our audit; and
- considering the risk of acts by the Authority which were contrary to applicable laws and regulations, including fraud.

# Appendix C: Draft audit report

In addition, we evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls) and determined that the principal risks were related to posting manual journal entries to manipulate financial performance, management bias through judgements and assumptions in significant accounting estimates.

Our audit procedures in relation to fraud included but were not limited to :

- making enquiries of management, Head of Internal Audit and the Humberside Fire Authority Committee on whether they had knowledge of any actual, suspected or alleged fraud;
- gaining an understanding of the internal controls established to mitigate risks related to fraud;
- discussing amongst the engagement team the risks of fraud; and
- addressing the risks of fraud through management override of controls by performing journal entry testing.

There are inherent limitations in the audit procedures described above and the primary responsibility for the prevention and detection of irregularities including fraud, rests with both management and the Humberside Fire Authority Committee.
As with any audit, there remained a risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls.

We are also required to conclude on whether the Executive Director of Finance's use of the going concern basis of accounting in the preparation of the financial statements is appropriate. We performed our work in accordance with Practice Note 10: Audit of financial statements and regularity of public sector bodies in the United Kingdom, (Revised 2024) and Supplementary Guidance Note 01, issued by the National Audit Office in November 2024.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at **www.frc.org.uk/auditorsresponsibilities**. This description forms part of our auditor's report.

# Appendix C: Draft audit report

## Report on the Authority's arrangements for securing economy, efficiency, and effectiveness in its use of resources

### Matter on which we are required to report by exception

We are required to report to you if, in our view we are not satisfied that the Authority has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources for the year ended 31 March 2026.

We have nothing to report in this respect.

### Responsibilities of the Authority

The Authority is responsible for putting in place proper arrangements to secure economy, efficiency, and effectiveness in the Authority's use of resources, to ensure proper stewardship and governance, and to review regularly the adequacy and effectiveness of these arrangements.

### Auditor's responsibilities for the review of arrangements for securing economy, efficiency, and effectiveness in the use of resources

We are required under Section 20(1)(c) of the Local Audit and Accountability Act 2014 to satisfy ourselves that the Authority has made proper arrangements for securing economy, efficiency, and effectiveness in its use of resources. We are not required to consider, nor have we considered, whether all aspects of the Authority's arrangements for securing economy, efficiency, and effectiveness in its use of resources are operating effectively.

We have undertaken our work in accordance with the Code of Audit Practice, having regard to the guidance issued by the Comptroller and Auditor General in March 2026.

### Matters on which we are required to report by exception under the Code of Audit Practice

We are required by the Code of Audit Practice to report to you if:
we issue a report in the public interest under section 24 of the Local Audit and Accountability Act 2014;
we make a recommendation under section 24 of the Local Audit and Accountability Act 2014; or
we exercise any other special powers of the auditor under sections 28, 29 or 31 of the Local Audit and Accountability Act 2014.

We have nothing to report in these respects.

### Use of the audit report

This report is made solely to the members of Humberside Fire Authority, as a body, in accordance with part 5 of the Local Audit and Accountability Act 2014 and the Statement of Responsibilities of Auditors and Audited Bodies published by Public Sector Audit Appointments Limited. Our audit work has been undertaken so that we might state to the members of the Authority those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the members of the Authority, as a body, for our audit work, for this report, or for the opinions we have formed.

# Appendix C: Draft audit report

## Use of the audit report

This report is made solely to the members of Humberside Fire Authority, as a body, in accordance with part 5 of the Local Audit and Accountability Act 2014 and the Statement of Responsibilities of Auditors and Audited Bodies published by Public Sector Audit Appointments Limited. Our audit work has been undertaken so that we might state to the members of the Authority those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the members of the Authority, as a body, for our audit work, for this report, or for the opinions we have formed.

## Delay in certification of completion of the audit

We cannot formally conclude the audit and issue an audit certificate until the National Audit Office has communicated the work we are required to undertake as component auditors for the Whole of Government Accounts.

[Signature]

Key Audit Partner
For and on behalf of Forvis Mazars LLP (Local Auditor)

5th Floor
3 Wellington Place
Leeds

[Date]

# Appendix D: Confirmation of our independence

We communicate any matters which we believe may have a bearing on the independence or the objectivity of Forvis Mazars LLP and the audit team. As part of our ongoing risk assessment, we monitor our relationships with you to identify any new actual or perceived threats to our independence within the regulatory or professional requirements governing us as your auditors.

We remain available to the Those Charged with Governance to discuss any matters relating to our independence, should such a discussion be required.

## Confirmation of independence

We confirm that the firm, Forvis Mazars LLP, and all covered persons remain independent of Humberside Fire Authority in accordance with the requirements of the FRC Ethical Standard.

## Relationships disclosure

A review of relationships between the firm, covered persons, and Humberside Fire Authority, including its directors, senior management, affiliates, and connected parties, has identified no matters that bear on our integrity, objectivity, or independence during the engagement period.

## Non-audit and additional services

The firm has not provided any non-audit or additional services to Humberside Fire Authority or its affiliates during the relevant period, and no fees have been charged in respect of such services.

# Appendix D: Confirmation of our independence

**Use of experts**

We have used the work of external experts in the following area(s) of our audit:

- Valuation of the Defined benefit pension assets and liabilities  -PWC, consulting actuary.

We confirm that we have received a confirmation from the external expert regarding their independence.

# Appendix E: Other communications

| Other communication | | Response |
|---|---|---|
|  | **Compliance with Laws and Regulations** | We have not identified any significant matters involving actual or suspected non-compliance with laws and regulations.<br>We will obtain written representations from management that all known instances of non-compliance or suspected non-compliance with laws and regulations whose effects should be considered when preparing financial statements have been disclosed. |
|  | **External confirmations** | We did not experience any issues with respect to obtaining external confirmations. |
|  | **Related parties** | We have no matters to report based on the work performed to date, our work on related parties remains in progress. See section 2- Status of the audit.<br>We will obtain written representations from management confirming that:<br>a. they have disclosed to us the identity of related parties and all the related party relationships and transactions of which they are aware; and<br>b. they have appropriately accounted for and disclosed such relationships and transactions in accordance with the requirements of the applicable financial reporting framework. |
|  | **Going Concern** | We have not identified any evidence to cause us to disagree with the Executive Director of Finance / S151 Officer that the Authority will be a going concern, and therefore we have not identified any evidence to cause us to consider that the use of the going concern assumption in preparation of the financial statements is not appropriate.<br>We will obtain written representations from management, confirming that all relevant information covering a period of at least 12 months from the date of approval of the financial statements has been taken into account in assessing the appropriateness of the going concern basis of preparation of the financial statements. |

# Appendix E: Other communications

| Other communication | | Response |
|---|---|---|
|  | **Subsequent events** | We are required to obtain evidence about whether events occurring between the date of the financial statements and the date of the auditor's report that require adjustment of, or disclosure in, the financial statements are appropriately reflected in those financial statements in accordance with the applicable financial reporting framework.<br><br>We will obtain written representations from management that all events occurring subsequent to the date of the financial statements and for which the applicable financial reporting framework requires adjustment or disclosure have been adjusted or disclosed. |
|  | **Matters related to fraud** | Our audit was designed to obtain reasonable assurance whether the financial statements as a whole are free from material misstatement due to fraud. Please refer to the section titled 'Fraud considerations' for our fraud considerations and conclusion.<br><br>We will obtain written representations from management and, where appropriate, Those Charged with Governance, confirming that<br><br>a. they acknowledge their responsibility for the design, implementation and maintenance of internal control to prevent and detect fraud;<br><br>b. they have disclosed to the auditor the results of management's assessment of the risk that the financial statements may be materially misstated as a result of fraud;<br><br>c. they have disclosed to the auditor their knowledge of fraud or suspected fraud affecting the Authority involving:<br><br>i. management;<br><br>ii. employees who have significant roles in internal control; or<br><br>iii. others where the fraud could have a material effect on the financial statements; and<br><br>d. they have disclosed to the auditor their knowledge of any allegations of fraud, or suspected fraud, affecting the entity's financial statements communicated by employees, former employees, analysts, regulators or others. |

# Appendix E: Other communications

| Other communication | | Response |
|---|---|---|
|  | **System of Quality Management** | To address the requirements of ISQM (UK) 1, our firm's System of Quality Management team completes, as part of an ongoing and iterative process, a number of key steps to assess and conclude on our firm's System of Quality Management, including:<br>• Ensuring there is an appropriate assignment of responsibilities under ISQM (UK) 1 and across Leadership<br>• Establishing and reviewing quality objectives each year, ensuring ISQM (UK) 1 objectives align with our firm's strategies and priorities<br>• Identifying, reviewing, and updating quality risks each quarter, taking into consideration a number of input sources (such as FRC / ICAEW review findings, internal monitoring findings, findings from our firm's root cause analysis and remediation functions, etc.)<br>• Identifying, designing, and implementing responses as part of the process to strengthen our firm's internal control environment and overall quality<br>• Evaluating responses and remediating control gaps or deficiencies<br>We perform an evaluation of our system of quality management on an annual basis. We publish the details of our annual evaluation, and our conclusion, in our Transparency Report, which can be accessed on our website at: https://www.forvismazars.com/uk/en/who-we-are/corporate-publications/transparency-reports. |

# Contact

## Forvis Mazars

**Nicola Hallas**
Key Audit Partner
Tel: +44 (0)113 394 5331
Nicola.Hallas@mazars.co.uk

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# Draft Auditor's Annual Report

## Humberside Fire Authority

### Year ended 31 March 2026

5 November 2026

forvis mazars

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**02** Audit of the financial statements

**03** Commentary on VFM arrangements

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# 01

# Introduction

# Introduction

## Purpose of the Auditor's Annual Report

Our Auditor's Annual Report (AAR) summarises the work we have undertaken as the auditor for Humberside Fire Authority ('the Authority) for the year ended 31 March 2026. Although this report is addressed to the Authority it is designed to be read by a wider audience including members of the public and other external stakeholders.

Our responsibilities are defined by the Local Audit and Accountability Act 2014 and the Code of Audit Practice ('the Code') issued by the National Audit Office ('the NAO'). The remaining sections of the AAR outline how we have discharged these responsibilities and the findings from our work. These are summarised below.



**Opinion on the financial statements**
We have not yet issued our audit report. Based on work to date we expect to issue an unqualified audit opinion on the financial.



**Reporting to the group auditor**
Our work has not yet been completed as we have not yet received group audit instruction from the NAO.



**Wider reporting responsibilities**
We have not reported any matters by exception and have not exercised our statutory powers as per the Local Audit and Accountability Act 2014.



**Value for Money arrangements**
We did not identify any significant weaknesses in the Authority's arrangements to secure economy, efficiency and effectiveness in its use of resources. Section 3 provides our commentary on the Authority's arrangements.

# 02

# Audit of the financial statements

# Audit of the financial statements

## Our audit of the financial statements

Our audit was conducted in accordance with the requirements of the Code, and International Standards on Auditing (UK) ("ISAs"). The purpose of our audit is to provide reasonable assurance to users that the financial statements are free from material error. We do this by expressing an opinion on whether the statements are prepared, in all material respects, in line with the financial reporting framework applicable to the Authority and whether they give a true and fair view of the Authority's financial position as at 31 March 2026 and of its financial performance for the year then ended. We have not yet issued our audit report, based on work completed to date we expect to issue an unqualified opinion on the financial statements for the year ended 31 March 2026.

## Other reporting responsibilities

| Reporting responsibility | Outcome |
|---|---|
| **Narrative Report** | We did not identify any significant inconsistencies between the content of the Narrative Report and our knowledge of the Authority. |
| **Annual Governance Statement** | We did not identify any matters where, in our opinion, the Governance Statement did not comply with the Delivering Good Governance in Local Government: addendum guidance issued by CIPFA/Solace.<br><br>We also did not identify any matters where, in our opinion, the Governance Statement is misleading or is not consistent with our knowledge of the Authority and other information of which we are aware from our audit of the financial statements. |

# 03

# Our work on Value for Money arrangements

# VFM arrangements

## Overall Summary



# VFM arrangements – Overall summary

## Approach to Value for Money arrangements work

We are required to consider whether the Authority has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources. The NAO issues guidance to auditors that underpins the work we are required to carry out and sets out the reporting criteria that we are required to consider. The reporting criteria are:



**Financial sustainability** - How the Authority plans and manages its resources to ensure it can continue to deliver its services.



**Governance** - How the Authority ensures that it makes informed decisions and properly manages its risks.



**Improving economy, efficiency and effectiveness** - How the Authority uses information about its costs and performance to improve the way it manages and delivers its services.

Our work is carried out in three main phases.

## Phase 1 - Planning and risk assessment

At the planning stage of the audit, we undertake work so we can understand the arrangements that the Authority has in place under each of the reporting criteria; as part of this work we may identify risks of significant weaknesses in those arrangements.

We obtain our understanding of arrangements for each of the specified reporting criteria using a variety of information sources which may include:

- NAO guidance and supporting information
- Information from internal and external sources including regulators
- Knowledge from previous audits and other audit work undertaken in the year
- Interviews and discussions with staff and directors

Although we describe this work as planning work, we keep our understanding of arrangements under review and update our risk assessment throughout the audit to reflect emerging issues that may suggest there are further risks of significant weaknesses.

We outline the risks that we have identified and the work we have done to address those risks on page 16.

## Phase 2 - Additional risk-based procedures and evaluation

Where we identify risks of significant weaknesses in arrangements, we design a programme of work to enable us to decide whether there are actual significant weaknesses in arrangements. We use our professional judgement and have regard to guidance issued by the NAO in determining the extent to which an identified weakness is significant.

# VFM arrangements – Overall summary

**Phase 3 - Reporting the outcomes of our work and our recommendations**

We are required to provide a summary of the work we have undertaken and the judgments we have reached against each of the specified reporting criteria in this Auditor's Annual Report. We do this as part of our Commentary on VFM arrangements which we set out for each criteria later in this section.

We also make recommendations where we identify weaknesses in arrangements or other matters that require attention from the Authority. We refer to two distinct types of recommendation throughout the remainder of this report:

- **Recommendations arising from significant weaknesses in arrangements -** We make these recommendations for improvement where we have identified a significant weakness in the Authority's arrangements for securing economy, efficiency and effectiveness in its use of resources. Where such significant weaknesses in arrangements are identified, we report these (and our associated recommendations) at any point during the course of the audit.
- **Other recommendations -** We make other recommendations when we identify areas for potential improvement or weaknesses in arrangements which we do not consider to be significant, but which still require action to be taken.

The table on the following page summarises the outcomes of our work against each reporting criteria, including whether we have identified any significant weaknesses in arrangements or made other recommendations.

# VFM arrangements – Overall summary

## Overall summary by reporting criteria

| Reporting criteria | Commentary page reference | Identified risks of significant weakness? | Actual significant weaknesses identified? | Other recommendations made? |
|---|---|---|---|---|
| Financial sustainability | 12 | No | No | No |
| Governance | 15 | No | No | No |
| Improving economy, efficiency and effectiveness | 19 | No | No | No |

# VFM arrangements

## Financial Sustainability

How the body plans and manages its resources to ensure it can continue to deliver its services



# VFM arrangements – Financial Sustainability

## Risks of significant weaknesses in arrangements in relation to Financial Sustainability

We have not identified any risks of significant weaknesses in arrangements.

## Overall commentary on Financial Sustainability

### Overall responsibilities for financial governance

We have confirmed the Authority's governance framework has not significantly changed during the year and continues to include regular reporting to the Authority and the Governance, Audit and Scrutiny Committee (GAS), including the Annual Governance Statement and the Annual Report and Accounts for 2025/26.

Our review of minutes and attendance of meetings confirms that the Authority has set strategic aims and objectives, approved budgets and monitored financial performance against budgets and plans. Our review confirmed the Authority receives assurance on aspects of financial management and operational performance through reports to the GAS Committee.

The role of the GAS committee includes:

- Providing independent assurance on governance arrangements;
- Overseeing risk management, internal controls and financial and operational performance;
- Reviewing financial reporting and audit matters;
- Considering significant financial and operational and material transaction risks and providing feedback and recommendations through the scrutiny programme.

Our review has not identified any matters to indicate a significant weakness in arrangements.

### How the Authority ensures that it identifies all the significant financial pressures that are relevant to its short and medium-term plans and builds these into them.

The Authority identifies financial pressures through its annual budget-setting process, Medium Term Resource Strategy (MTRS), budget monitoring arrangements and risk management processes. Budget preparation commences annually and incorporates known expenditure pressures, funding assumptions, inflationary impacts, pay awards and emerging operational requirements. The MTRS is reviewed annually and is underpinned by workforce planning, capital investment requirements and risks identified through the Community Risk Management Plan.

Our review of the MTRS, finance reports and committee papers identified that financial pressures had been incorporated into the Authority's planning assumptions. We also noted that the Authority undertakes sensitivity analysis to assess the impact of changes in key assumptions. Pay costs, which represent approximately 85% of net expenditure, are identified as a key financial sensitivity and the Authority has modelled the impact of changes in pay assumptions within its medium-term financial planning.

### How the Authority plans to bridge its funding gaps and identifies achievable savings

The Authority's MTRS identifies forecast funding gaps across the planning period and sets out the savings and other measures required to maintain a balanced financial position. Prior to savings delivery and the planned use of reserves, forecast funding gaps range from £0.1m to £3.0m over the period to 2030/31.

We reviewed the Authority's savings delivery arrangements and noted that planned savings were achieved in full during each year from 2021/22 to 2025/26. During 2025/26, the Authority achieved savings of approximately £0.8m against a target of £0.4m. We also reviewed Quarter 1 monitoring reports for 2026/27 and noted that the Authority had identified approximately £1.5m of savings against an annual target of £1.2m, of which approximately £1.0m were recurring in nature. The savings identified arose from budget challenge exercises, organisational reviews and vacancy management initiatives. These measures were developed in response to the anticipated reduction in funding arising from the Fair Funding Review, which is expected to reduce non-Council Tax funding by approximately £2.7m over the three years to 2028/29. The savings identified exceed the recurring savings requirement included within the MTRS for the period to 2028/29 and demonstrate proactive management of the forecast funding gap.

# VFM arrangements – Financial Sustainability

## Overall commentary on the Financial Sustainability reporting criteria – continued

### How the Authority plans finances to support the sustainable delivery of services in accordance with strategic and statutory priorities.

The Authority's financial planning arrangements are designed to support delivery of its strategic priorities and operational objectives. We reviewed the Authority's key financial and operational plans and noted that resource decisions continued to support agreed strategic priorities. During the year, the Authority continued to progress its approved Estates Capital Programme, which includes significant estate investment and rationalisation projects. We confirmed that the programme had been incorporated within the MTRS and that the associated funding requirements had been reflected within the Authority's medium-term financial plans. We also noted that the 2025/26 outturn position was stronger than forecast, with reserve utilisation significantly below budgeted levels.

### How the Authority ensures that its financial plan is consistent with other plans such as workforce, capital, investment and other operational planning which may include working with other local public bodies as part of a wider system.

The Authority develops its financial plans alongside its strategic, workforce and operational planning processes. The MTRS is underpinned by workforce planning, capital investment requirements and service priorities.

We reviewed the Community Risk Management Plan, Strategic Plan, Workforce Plan, Capital Programme and Medium Term Resource Strategy and found them to be aligned. Service priorities identified within the Community Risk Management Plan are reflected within workforce, capital and financial planning documents, with investment and resource decisions supporting agreed operational objectives. No significant inconsistencies were identified between the plans reviewed.

### How the Authority identifies and manages risks to financial resilience, including challenge of the assumptions underlying its plans

The Authority monitors financial resilience through budget monitoring, treasury management reporting, reserve monitoring and use of the CIPFA financial resilience indicators. The Authority also undertakes sensitivity analysis and scenario planning as part of its medium-term financial planning process.

We reviewed the six CIPFA financial resilience indicators reported within the MTRS. These indicators consider funding gaps, savings delivery, budgetary control, reserve levels, reliance on council tax funding and borrowing. Our review noted that the indicators did not identify any significant or unexpected deterioration in the Authority's financial resilience. The Authority has consistently delivered planned savings and maintained expenditure broadly in line with approved budgets.

We noted that the General Fund balance reduced to £5.805m at 31 March 2026, marginally below the Authority's risk-assessed prudent minimum level of £6.0m. Members subsequently approved a transfer from earmarked reserves and the latest MTRS forecasts that General Fund balances will remain above the prudent minimum level throughout the planning period.
We also reviewed treasury management reporting and borrowing forecasts. Borrowing is forecast to increase from £15.0m in 2025/26 to £24.0m by 2030/31 to support delivery of the approved capital programme. The associated financing costs and affordability implications have been incorporated into the Authority's medium-term financial plans and continue to be monitored through regular treasury management reporting to Members.

### Conclusion

Our work has not identified any evidence of a significant weakness in the Authority's arrangements in relation to financial sustainability reporting criteria.

# VFM arrangements

## Governance

How the body ensures that it makes informed decisions and properly manages its risks



# VFM arrangements – Governance

## Risks of significant weaknesses in arrangements in relation to Governance

We have not identified any risks of significant weaknesses in arrangements.

## Overall commentary on Governance

### How the body monitors and assesses risk and how the body gains assurance over the effective operation of internal controls, including arrangements to prevent and detect fraud

The Authority's risk management arrangements are supported by a Strategic Risk and Opportunity Register, with oversight provided through the Strategic Leadership Team. Our review of the Authority's Strategic Risk and Opportunity Register confirmed that it is actively maintained and updated. The register records strategic risks, associated mitigating actions and risk assessments, and demonstrates clear links to the Authority's Strategic Aims. Management confirmed that the Strategic Leadership Team reviews the register regularly and undertakes horizon scanning to identify emerging risks and opportunities. The GAS Committee is responsible for reviewing the effectiveness of the Authority's risk management framework and associated control environment. Internal audit services are provided by TIAA. The annual Internal Audit Plan and Head of Internal Audit Opinion are reviewed by GAS to ensure internal audit activity is aligned to the Authority's risks and priorities. The 2025/26 Internal Audit Plan was presented to GAS in February 2025 and progress against the Plan was reported throughout the year. The Head of Internal Audit Opinion was presented to GAS in July 2026 and concluded that the Authority has reasonable and effective risk management, control and governance processes in place.

Internal Audit completed ten assurance reviews during 2025/26. Of these, one received a No Assurance opinion, two received Limited Assurance opinions and the remaining reviews received either Reasonable or Substantial Assurance opinions. We reviewed the reports resulting in No Assurance and Limited Assurance opinions to assess whether the findings were indicative of significant weaknesses in the Authority's governance arrangements.

The No Assurance review related to monitoring working hours associated with secondary employment. We reviewed reports presented to GAS and the Fire Authority which set out management's proposed actions in response to the findings and recommendations. These actions were approved by Members, providing evidence that the matter had been recognised and was being actively addressed.

The two Limited Assurance reviews related to Joint Estates and Multi-Agency Training. We noted that recommendations arising from these reviews, together with management responses, were subject to oversight and challenge through the Authority's governance arrangements. Our review of the Service Improvement plan confirmed that actions relating to both reviews were marked complete as at 15 October 2026. We did not identify evidence that the findings represented wider weaknesses in governance arrangements.

Through our attendance at GAS meetings, we confirmed that Members challenge management on internal audit findings and, where appropriate, request attendance from management to discuss the actions being taken in response to recommendations. The Authority also has an Anti-Fraud and Corruption Policy in place and has outsourced local counter-fraud work to TIAA, who report progress through internal audit reporting arrangements. Based on our review, we identified no evidence of a significant weakness in the Authority's risk management and internal control arrangements.

### How the body approaches and carries out its annual budget setting process

The Authority's MTRS provides the financial framework for budget setting, financial planning and precept decisions. Budget preparation commences during the summer and is led by the Section 151 Officer in conjunction with the Strategic Leadership Team. Budget assumptions are updated for known changes in expenditure, funding, inflation and precept levels, whilst growth requirements, savings opportunities and financial risks are considered as part of the process.

The Authority approved a balanced budget for 2025/26 and the latest MTRS forecasts a balanced position over the medium term through a combination of planned savings, reserve utilisation and ongoing financial management actions. Our review of budget-setting documentation and committee reports identified no evidence of significant weaknesses in the Authority's budget-setting arrangements.

# VFM arrangements – Governance

## Overall commentary on the Governance reporting criteria – continued

### How the body ensures effective processes and systems are in place to ensure budgetary control; to communicate relevant, accurate and timely management information (including non-financial information where appropriate); supports its statutory financial reporting requirements; and ensures corrective action is taken where needed

Budget monitoring procedures are in place which define the responsibilities of budget holders and require explanations for significant budget variances. Budget holders have access to financial information throughout the year and formal monitoring arrangements are supported through regular reporting to Members.

We confirmed that quarterly finance and procurement reports, treasury management reports and forecast outturn reports were presented to both GAS and the Fire Authority throughout the year. These reports included analysis of financial performance against budget, movements in forecast positions, explanations of significant variances and updates on key financial risks and objectives. The quarterly and year-end reports provided evidence of ongoing financial monitoring and enabled Members to consider the actions being taken in response to emerging issues. Our review did not identify any evidence of significant weaknesses in the Authority's monitoring, reporting and budgetary control arrangements.

Our audit of the 2025/26 financial statements identified matters requiring amendment by management. These matters were addressed during the audit process and did not indicate a significant weakness in the Authority's arrangements for preparing financial information or financial statements.

The Authority's arrangements for performance management also support the communication of non-financial information. Performance is monitored against objectives established within the Community Risk Management Plan and reported regularly to Members. An Annual Performance Report is published each year and bi-annual performance reports are presented to the Fire Authority during the year to support accountability and oversight.

### How the body ensures it makes properly informed decisions, supported by appropriate evidence and allowing for challenge and transparency. This includes arrangements for effective challenge from those charged with governance/audit committee

The Authority has an established governance framework which is summarised within the Annual Governance Statement and set out in the Constitution. The Constitution is reviewed annually and includes a scheme of delegation which assigns responsibilities to the Strategic Leadership Team, the Fire Authority and its Committees. During 2025/26 the Authority continued to operate through the Fire Authority, Governance, Audit and Scrutiny Committee and Pension Board.

Terms of Reference are in place for the Authority's Committees and our review of committee papers confirmed that reports clearly set out the purpose of the report, key considerations, recommendations, financial implications and action points. Through our attendance at meetings and review of minutes, we observed evidence of challenge and scrutiny by Members.

Membership of GAS includes Independent Members who contribute additional skills and experience to the scrutiny process. We attended meetings held during the reporting period and found the Committee to be effective in providing challenge to management, internal audit and external audit. We observed Members requesting additional information, challenging assumptions and seeking assurance regarding management's response to identified issues.

The Authority publishes agendas and minutes of Fire Authority and GAS meetings on its website, supporting transparency and public accountability. The Constitution also includes arrangements for complaints and comments from members of the public.

Based on our review of Authority reports, committee papers and minutes, we identified no evidence of significant weaknesses in the Authority's arrangements for informed decision-making, challenge and transparency.

# VFM arrangements – Governance

## Overall commentary on the Governance reporting criteria – continued

### How the body ensures it makes properly informed decisions

Membership of the GAS Committee includes independent Members, who are recruited and trained to provide a range of skills and collectively provide effective scrutiny. We have attended the meetings held in the reporting period and deem them to be effective and well represented, and we have found that the Committee provided appropriate challenge to Management and Internal and External Audit. The Terms of Reference of the GAS Committee are detailed in the Constitution, and we have identified no evidence to indicate they are not being delivered.

The Authority publishes on its website minutes and agendas for all GAS Committee and Fire Authority meetings. This ensures transparency in decision-making and allows for public scrutiny as well. The Authority also has a documented procedure for complaints and comments from members of the public included within its Constitution.

We have reviewed Authority reports and minutes throughout the year and have not identified any evidence of a significant weaknesses in the arrangements outlined in this report.

### How the Authority monitors and ensures appropriate standards are met

The Authority's Constitution is reviewed annually with the latest review in September 2025. The Constitution sets out how the Authority operates, how decisions are made and the rules and procedures which are followed to ensure that these are efficient and transparent to local people.

The Constitution, Section 5, includes a Code of Conduct for Members and Officers. Several officers, by law, have specific duty to ensure that the Authority acts within the law and uses its resources wisely. These Officers include the Head of Paid Service, Monitoring Officer, and the Section 151 Officer. Based on review, we are not aware of any evidence that these roles are not being fulfilled throughout the reporting period.

A register of interests is maintained for Members and is available to view on the Authority's website.

Members are required to declare relevant interests, with declarations recorded and monitored through the Authority's governance arrangements. The financial statements also include disclosures relating to senior officers' remuneration and Members' allowances.

We have confirmed that contract procedures are in place and are designed to require procurement decisions to comply with appropriate standards. The Authority also has a contract register available to view on its website.

These arrangements promote transparency and accountability and support the Authority's wider governance framework.

### Conclusion

We have identified no evidence to indicate a significant weaknesses in the Authority's arrangements in relation to the governance reporting criteria.

# VFM arrangements

## Improving Economy, Efficiency and Effectiveness

How the body uses information about its costs and performance to improve the way it manages and delivers its services



# VFM arrangements – Improving Economy, Efficiency and Effectiveness

## Risks of significant weaknesses in arrangements in relation to Improving Economy, Efficiency and Effectiveness

We have not identified any risks of significant weaknesses in arrangements.

### Overall commentary on Improving Economy, Efficiency and Effectiveness

### How financial and performance information has been used to assess performance to identify areas for improvement

The Authority publishes an Annual Performance Report which provides an overview of performance against the objectives set out within its Community Risk Management Plan and Strategic Plan. The Authority also publishes an Annual Statement of Assurance, Annual Governance Statement and key financial planning documents, including the MTRS and Productivity and Efficiency Plan. These documents support the Authority's governance, performance management and strategic planning arrangements.

Through our attendance at GAS Committee (GAS) and Fire Authority meetings, together with our review of committee papers and minutes, we confirmed that performance information is reported and scrutinised regularly. Performance reports were considered by GAS and subsequently reported to the Fire Authority. We observed Members providing challenge to management on performance outcomes and receiving updates on actions being taken where improvements were required.
As part of our work, we compared the Authority's reported performance against available national and sector performance information. This comparison indicated that operational performance remained resilient despite increased incident demand. Whilst primary fires and accidental dwelling fires increased during the year, the Authority continued to achieve its emergency response standards and reported that the majority of its key performance measures were within established thresholds. Fire-related injuries and accidental dwelling fire fatalities also reduced compared with the previous year.

### How the body evaluates the services it provides to assess performance and identify areas for improvement

The Authority operates a structured scrutiny programme through GAS. During 2025/26, the Committee considered reviews covering Prevention Strategy, Protection Engagement, Joint Exercise Programme, the Manchester Arena Inquiry and Performance Development Reviews. These reviews were supported by defined scopes and reporting arrangements and demonstrated a risk-based approach to assessing service delivery and improvement activity. We observed Members providing appropriate challenge and oversight through this process.
The Authority maintains a Service Improvement Plan (SIP) which is used to record, manage, monitor and track actions arising from external inspections, national inquiries, internal audit reviews and other improvement activity. The SIP identifies responsible officers, target completion dates, progress updates and supporting evidence for each action. We reviewed the SIP and confirmed that it is actively maintained and monitored.

The Authority has completed actions arising from the Manchester Arena Inquiry and Grenfell Tower Inquiry Phase 1 recommendations, whilst actions relating to Grenfell Tower Inquiry Phase 2 recommendations continue to be monitored through the SIP. The Governance, Audit and Scrutiny Committee receives reports on progress against significant improvement actions. In addition, the SIP is used to monitor the implementation of internal audit recommendations and wider organisational improvement activity.

The Authority also demonstrates a commitment to organisational learning and continuous improvement through the use of debriefs, monitoring reviews and service improvement activity. Productivity and efficiency initiatives are monitored through strategic projects designed to support operational effectiveness and long-term service sustainability.

The HMICFRS conducts routine inspections of fire and rescue services focusing on the areas of Effectiveness, Efficiency and People. Following its most recent inspection, published in February 2025, the Authority was assessed as 'Outstanding' in two areas, 'Good' in eight areas and 'Adequate' in one area. Whilst changes to the inspection framework limit direct comparison with previous inspections, the results demonstrate that the Authority achieved a strong level of performance across the inspection criteria.

# VFM arrangements – Improving Economy, Efficiency and Effectiveness

## Overall commentary on the Improving Economy, Efficiency and Effectiveness reporting criteria – continued

### How the body ensures it delivers its role within significant partnerships and engages with stakeholders it has identified, in order to assess whether it is meeting its objectives

The Authority continues to utilise partnership working and collaborative arrangements to support efficiency, productivity and service delivery objectives. Key examples include shared fleet management through Emergency Services Fleet Management (Humberside) Ltd, the jointly governed Estates Service, shared Health and Safety resources and shared senior finance leadership arrangements with Humberside Police and the Office of the Police and Crime Commissioner.

Through our review of committee papers, strategic documents and internal audit reports, we confirmed that collaborative arrangements are subject to governance and oversight and that the Authority monitors the benefits arising from partnership activity. Reported benefits include reduced duplication, improved organisational resilience, procurement efficiencies, enhanced performance oversight and improved value for money.

The Authority also continues to assess opportunities for further collaboration where financial, operational or service delivery benefits can be demonstrated.

### Where the body commissions or procures services, how it assesses whether it is realising the expected benefits

The Authority receives regular finance and procurement reporting through its governance arrangements. We reviewed committee papers and noted evidence that procurement activity and collaborative procurement opportunities were subject to Member oversight and scrutiny through regular reporting. The Authority uses procurement and collaborative purchasing arrangements to support efficiency and value for money objectives. Through our review of committee papers, internal audit reports and procurement updates, we noted that arrangements are in place to monitor procurement activity and assess whether expected operational and financial benefits are being delivered. Examples identified included collaborative procurement and shared service arrangements designed to improve efficiency, resilience and value for money.

### Conclusion

We have not identified any evidence of a significant weaknesses in the Authority's arrangements in relation to the improving economy, efficiency and effectiveness reporting criteria

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# Other reporting responsibilities

# Other reporting responsibilities

## Wider reporting responsibilities

**Matters we report by exception**

The Local Audit and Accountability Act 2014 provides auditors with specific powers where matters come to our attention that, in their judgement, require specific reporting action to be taken. Auditors have the power to:

- issue a report in the public interest;
- make statutory recommendations that must be considered and responded to publicly;
- apply to the court for a declaration that an item of account is contrary to the law; and
- issue an advisory notice.

We have not exercised any of these statutory reporting powers. The 2014 Act also gives rights to local electors and other parties, such as the right to ask questions of the auditor and the right to make an objection to an item of account. We did not receive any such objections or questions.

## Reporting to the group auditor

**Whole of Government Accounts (WGA)**

The National Audit Office (NAO), as group auditor for the WGA, requires us to carry out work and provide a WGA Assurance Statement in respect of the Council's consolidation data. We have been unable to conclude our work as the NAO have not yet issued their Group Audit Instructions.

# Contact

## Forvis Mazars

**Nicola Hallas**
Key Audit Partner
Tel: +44 (0) 113 394 5331
Nicola.Hallas@mazars.co.uk

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