

ID	Title	Approval status	Directorate	Business Area	Handler	Risk source	Risk Type	Risk Subtype	Description	Controls in place	Adequacy of controls	Gap in controls	Actions	Risk level (initial)	Rating (initial)	Risk level (current)	Rating (current)	Risk level (Target)	Rating (Target)	Opened (date risk identified)	Review date	Closed date
People & Engagement																						
426		In holding area, awaiting review	People & Engagement	Human Resources	Sally Peart	Internal business review	Operational Risk	Human Resources	Confidentiality due to the HR Team being located in an open plan office environment in close proximity to other departments. Numerous confidential discussions relating to individual employees take place on a daily basis and employees and visitors to the department are able to hear the content of these discussions.	1) Staff who have access to work mobiles may relocate to an office when having some discussions of a highly sensitive nature however this is not always possible.	Inadequate	1) It is rarely possible for staff to source other offices to hold confidential discussions. 2) Move to a more confidential office space is outstanding and has been delayed.	1) Attempt to secure dedicated office space for HR staff to hold more sensitive discussions in the interim, however this would only enable minimum control with the number of HR staff working in open plan. 2) Accelerate the move over to Springhill 1.	High Risk	15	High Risk	15	Low Risk	3	10/07/2014		
112	Technician to Paramedic conversion courses	Being reviewed	People & Engagement	Organisational Effectiveness and Education	Shelagh OLeary	Risk assessment	Strategic Risk	Financial	Places on Technician to Paramedic conversion courses are not being fully utilised. These places are fully funded but this funding is finite in that it cannot be rolled over if capacity is not fully utilised, financial risk.	1. Significant advertising is taking place in advance of the courses 2. OSCE preparation workshops are being offered 3. Locality Managers are having 1:1's with Technicians to discuss available options	Adequate	1. Clinical Supervisors need to be utilised to review skill gaps with Technicians 2. Concerns in relation to OSCE preparation needs to be reviewed and addressed	1. Clinical Supervisors to prioritise skill gap review with technicians 2. Ongoing communication to take place when concerns are identified, information to continue to be made available to Technicians well in advance of the OSCE courses, Further joint statements to be issued from management and UNISON	Moderate Risk	12	Moderate Risk	12	Low Risk	4	01/05/2013	18/07/2014	
110	Accommodation for training	Being reviewed	People & Engagement	Organisational Effectiveness and Education	Shelagh OLeary	Risk assessment	Strategic Risk	Estates and facilities	A business case was submitted in the financial year 2012-13 and this is still awaiting approval for the acquisition of a single site Learning Academy to replace the current 3 ageing sites. The business case was rejected by the Trust Board and is in the process of being redeveloped, risk to non compliance with training requirements.	3 sites currently being operated in York, Doncaster and Wakefield	Adequate	1. The current training sites are in a state of disrepair and are not fit for high quality educational provision 2. The lease for the Burn Hall site is due to expire on 31st March 2014 3. Geographical separation of the 3 sites is not ideal for shared learning or consistency in delivery	1. Business case under development to review departmental requirements for educational provision 2. Ongoing negotiations regarding lease of Burn Hall 3. Standards and consistency within Leadership and Learning and Education and Standards are monitored by the management team and feedback evaluated.	Moderate Risk	9	Moderate Risk	12	Low Risk	3	01/05/2013	20/06/2014	
421	Adverse publicity from Trade Unions	In holding area, awaiting review	People & Engagement	Human Resources	Elaine Gibson	Internal business review	Strategic Risk	Adverse Publicity & Reputation	Risk of adverse publicity and reputation as a result of Trade Union action in relation the use of double Emergency Care Assistant (ECA) crews.	1. Regular liaison with Trade Unions. 2. Regular update briefings to YAS staff. 3. Performance Recovery Plan in place.	Adequate	1. Potential for further action to be taken by Trade Unions which could affect the Trust adversely.	1a. Continue to liaise with Unions and staff as appropriate to ensure concerns are dealt with in a timely manner. 1b. Regular monitoring of press activity to ensure appropriate reporting of information and appropriate Trust responses where necessary.	High Risk	15	High Risk	15	Low Risk	6	17/06/2014	25/07/2014	
Business Development																						
262	Contract management	Being reviewed	Finance and Performance	Business Development	Catherine Balazs	Internal business review	Strategic Risk	Financial	Adverse impact on finances due to ineffective contract management through lack of capacity within the Business Development team	1. Standing Financial Instructions in place 2. Weekly review of tenders within the wider external market 3. Business Development Manager in post for one year (ends Sept 2014) to provide some capacity. 4. Weekly meetings with Exec Director of F&P to update on progress. 5. Monthly meetings with key Ops Directors/contract leads to ensure progress. 6. Robust process in place for contract management. 7. Regular contract performance review meetings with commissioners and DoF/Ops lead to ensure more robust contract management 8. Regular meetings with finance team (Income and Expenditure)	Adequate	1. Lack of capacity to cross cover all contracts due to the number of commissioners externally each contract is linked to.	1a. Review the Business Development structure and review of the one year fixed term role and whether to extend beyond September 2014. 1b. Work with Service Transformation Programme Team to manage tender and bid writing processes to ensure these are done efficiently and effectively.	Moderate Risk	12	Moderate Risk	12	Low Risk	4	01/03/2012	27/06/2014	
261	Business tendering	Being reviewed	Finance and Performance	Business Development	Catherine Balazs	Internal business review, Legislative requirement	Strategic Risk	Financial	Adverse impact on financial service delivery due to competitive tendering and potential loss of associated business.	1. Major tender assurance process 2. Finance and Investment Committee scrutiny 3. TEG review 4. SMG review Weekly review of tenders within the wider external market	Adequate	1. External meetings with commissioners/urgent care boards due to the high number of meetings, means that information collation, and intelligence around risks to core business is difficult to manage.	1a) Improve Commissioner and YAS communications 1b) New process for reviewing potential tender opportunities (partly implemented). 1c) Ensure that all Associate Directors and 'Head's of' are aware and complying with the Major Tender Assurance process. 1d) Re-introduction of the Intelligence Register to store centrally all information on threats and new service developments (partly implemented). 1e) Develop Business Intelligence 'drop in' sessions to work with all service lines to gather key contracting information (partly implemented).	High Risk	20	Moderate Risk	12	Moderate Risk	8	13/03/2013	31/05/2014	
Resilience & Special Operations																						

227	CBRN SORT Training	Being reviewed	Operations	Resilience and Special Services	Russell Hobbs	Legislative requirement	Operational Risk	Capacity	If we do not provide adequate training for SORT Teams and maintain numbers of trained staff (requirement to have 200 trained staff) then this may result in reduced numbers of SORT available and potential impact on standard of care delivered due to skill fade.	1. ECA training and awareness of CBRN. 2. HART are decon trained 3. Included in training programme for 2014/5 for refreshers and new starters. Programme commences June 2014.	Adequate	No current gaps in controls however risk will remain open until training programme underway and assurance provided.	Monitor training programme delivery and effectiveness.	Moderate Risk	12	Moderate Risk	12	Low Risk	4	12/09/2013	31/07/2014	
327	MTFA Training	Being reviewed	Operations	Resilience and Special Services	Russell Hobbs	Legislative requirement, Regulatory body	Operational Risk	Regulatory compliance	If we do not release staff for MTFA training then this may lead to ineffective scene management.	1. Ad hoc training when staff available to attend on days off. 2. HART Team MTFA training ongoing 3. TEG approved MTFA training programme for 2014/15.	Adequate	Following TEG approval of training programme, no further gaps identified however risk will remain live until training has began.		Moderate Risk	12	Moderate Risk	12	Low Risk	4	24/12/2013	31/07/2014	
Risk & Safety																						
313	Health and safety policy	Being reviewed	Standards and Compliance	Risk and Safety	Shelley Jackson	Incidents, Internal business review, Legislative requirement	Strategic Risk	Health and safety	Risk of harm to staff and litigation due to existing Health and Safety policy and associated guidance requiring updates as some areas need development to prevent injury and loss.	1. Existing Health and safety policy and associated procedures 2. Health and safety and quality Committees review 3. Policy review group 4. Process for policy update in line with Policy on Policies	Adequate	1. Existing Policy does not cover necessary topics such as DSE, Risk Assessment Process and Procedures, Working at Height, Coshh. The policy and arrangements in place with regard to PPE selection and use, Manual Handling, Contractor Management, Working Time, Selection of Vehicles and Equipment, Accident Investigation, Access to Health and Safety Information are not adequate. 2. Lack of designated resource to assist in delivery of updating policies and procedures.	1. a) Amend policy in line with Trust Policy for procedural documents to include updating the H&S requirements. 1.b) Develop an implemented approach to agreed policy and guidance. 2. Agreement at RAG Feb 2014 that SSM would support H&S manager.	High Risk	16	Moderate Risk	12	Low Risk	6	14/11/2013	22/07/2014	
330	Incident investigation	Being reviewed	Standards and Compliance	Risk and Safety	Shelley Jackson	Incidents, Internal business review	Operational Risk	Health and safety	Risk of harm/injury and litigation due to failure to follow existing incident investigation process leading to incident recurrence.	1. Health & Safety Policy 2. Established Datix incident reporting and investigation system. 3. Overdue incident reports to local managers for action. 4. Risk and safety team support to managers. 5. 2013-14 backlog cleared by R&S Team to support management teams. 6. Re-launch of Datix planned for April 2014 with updates to system to make it more user friendly.	Adequate	1. Managers are not consistently completing timely investigation. 2. Lack of accountability for completion of investigation. 3. Lack of H&S incident reporting data. 4. Lack of clear guidance on how to complete investigations.	1. R&S team to continue to engage with local managers to complete timely investigations. 2 & 3. Operational management structures to hold managers to account, via Dashboards. 4. Standard form developed to be added to Datix to assist managers when completing investigations.	Moderate Risk	12	Moderate Risk	12	Low Risk	4	08/01/2014	22/07/2014	
133	Moving and handling	Being reviewed	Standards and Compliance	Risk and Safety	Shelley Jackson	Internal business review	Operational Risk	Regulatory compliance	Risk of harm to patients and staff and potential financial loss due to non-compliance with Manual Handling Regulations when moving patients on carry chairs.	1. Compact 2 carry chair currently used 2. Moving and handling training for relevant staff 3. Mangar elk lifting cushions available on all stations 4. Standard moving and handling equipment available on all vehicles	Adequate	1. Carry Chair purchasing not fully completed.	1. Purchase of a new carry chair with extending handle and track (funding agreed for 2013 / 2014 - purchased and phased roll out commenced).	Moderate Risk	12	Moderate Risk	12	Low Risk	4	09/09/2013	22/07/2014	
126	Risk assessment	Being reviewed	Standards and Compliance	Risk and Safety	Shelley Jackson	Claims, Incidents, Internal business review, Legislative requirement	Operational Risk	Health and safety	Inconsistent Health & Safety risk assessment process leading to risk of loss, injury and litigation.	1. Some Health & Safety risk assessments completed 2. Inspections for Improvement schedule in place 3. Health & Safety Committee reporting and monitoring 4. Staff side H&S reps in place and working for R&S team 1 day per week on operational risk assessments. 5. Commenced risk assessment project. 6. Additional staff member recruited 2 days per week to work on risk assessments.	Adequate	1. Improved risk assessments and process to be developed. 2. Dynamic Risk Assessment packs are to be developed.	1. a) Develop risk assessment proformas and guidance. 1.b) Implement risk assessment recording procedure. 2. Develop Dynamic Risk Assessment packs for vehicles in partnership with staff side.	Moderate Risk	12	Moderate Risk	12	Low Risk	4	09/09/2013	22/07/2014	
150	Inappropriate Storage/Retention of Confidential Paper-Based Records	Being reviewed	Standards and Compliance	Risk and Safety	Caroline Squires	Internal business review	Operational Risk	Information governance	Breach of the Data Protection Act due to theft or inappropriate access to identifiable information stored on YAS premises (secure and insecure).	1. IAO role is responsible for records management in their area. 2. Revised Records Management Policy setting out expectations in relation to management and storage of records. 3. CINTAS Storage company is used to archive records in a secure environment. 4. Records Amnesty.	Adequate	1. Doncaster Ambulance Station Records Store contains thousands of records. 2. Records possibly held insecurely across and remainder of the YAS estate.	1. Co-ordinate and plan removal of records from Doncaster AS records store (By end July 2014) 2a. Repeat again and respond to records amnesty - relevant departments asked to securely dispose of/move to CINTAS store. (By end Sept 2014 - ongoing). 2b. Identify via I4I process insecure records in YAS premises and ensure destruction/removal to CINTAS (By end Sept 2014 - ongoing).	Moderate Risk	12	Moderate Risk	12	Low Risk	4	09/09/2013	30/09/2014	
Support Services																						
70	Vehicle Cleaning	Being reviewed	Finance and Performance	Support Services	Mark Inman	Legislative requirement, Regulatory body	Operational Risk	Regulatory compliance	Risk of A&E vehicle cleaning being non-compliant with CQC requirements in North & East Yorkshire following audit results published in February and March.	weekly monitoring IPC Audit reports I4I inspections to monitor Within N&EY, crews are responsible for cleaning vehicles themselves.	Adequate	1. Lack of availability of crews to clean vehicles themselves within the affected areas. 2. A&E vehicle checks not being conducted on as many vehicles as required by the Clinical Supervisors due to possible lack of availability.	1. Issue to be raised with Head of Operations and potential options considered to address the issue. 2. Process for audits to be reinforced to management teams to ensure compliance.	High Risk	16	Moderate Risk	12	Low Risk	4	02/07/2012	30/04/2014	

350	Laundry budget	Being reviewed	Finance and Performance	Support Services	David Hill	Internal business review	Operational Risk	Financial	Risk of laundry budget being exceeded in 14/15 by 100% following review.	Current budget in place covers contractor Goodman Sparks.	Adequate	1. No processes in place to manage or audit the numbers of blankets, sheets, pillowcases, etc which are being 'swapped out' or taken from Acute Trusts.	1a. Meetings underway with Acute Trusts and within Support Services (in conjunction with Finance) to identify appropriate ways to manage this. Appropriate actions to be taken following the meetings and updates to be reported to relevant groups.	Moderate Risk	12	Moderate Risk	12	Low Risk	4	26/02/2014	31/07/2014	
A&E Operations																						
372	N&E DMA RRV Review	Being reviewed	Operations	A&E Operations	Mark Inman	Self audit	Operational Risk	Patient harm	If there is not balanced cover of Double Crewed Ambulances (DCAs) and Rapid Response Vehicles (RRVs) within North Yorkshire this could lead to affected performance and subsequently patient care.	1.Operational redesign rotas implemented 2.N&E DMA/RRV review working group	Adequate	1. Failure to understand RRV and DCA requirement within the area in order to align service provision.	1a. Working group to gather data to evidence the concerns raised. 1b. Request overtime for additional DCA cover in York. 1c. Understand the current shortfalls in provision across the region and take necessary steps to escalate this and to ensure service provision is closer aligned to need.	Moderate Risk	12	Moderate Risk	12	Low Risk	6	26/03/2014	01/05/2014	
346	Paramedic (Band 5) Vacancies - Operations Hull & ER	Being reviewed	Operations	A&E Operations	Andrew Pippin	Self audit	Operational Risk	Clinical	Introduction of the new operational rotas has increased vacancy for band 5 Paramedics. In total there are 27 vacancies throughout the CBU, this leaves several core rota lines vacant and doesn't enable us to fill planned core operational shifts as per operational requirements. This leaves staffing short and may impact our ability to fill core shift fill and match appropriate resourcing to meet operational demand to maintain RED 8 performance.	1. Relief Capacity to Fill Some Core Shifts 2. Overtime Budget to Fill Some Core Shifts 3. External Advert to Recruit Paramedics 4. 4 band 3 ECA's currently on student Paramedic programmes to fill 4 vacancies once qualified 5. Weekly updates being reported to Senior Ops Team Meeting.	Adequate	1. Relief capacity can't fill all core shift abstraction due to vacancy, relief also has to back fill other abstraction such as sickness, training and annual leave 2. Overtime budget does not guarantee that staff will uptake o/t availability, neither does the budget enable all vacant shifts to be covered 3. External advert for recruiting Paramedics is unlikely to cover many of the band 5 vacancies and is not a reliable mitigation 4. Currently only 4 staff on Paramedic training programmes, still leaving 23 vacancies if those staff qualify as Paramedics, further this is a long term outcome due to length of training programme	1. Relief capacity is utilised fully by resource department 2. Overtime is directed into areas of less resourcing capacity and times where there is historical high demand 3. External recruitment advert is out via YAS recruitment team 4. Staff on training programme as planned	High Risk	16	Moderate Risk	12	Low Risk	6	21/02/2014	21/04/2014	
375	RED CQUIN	Being reviewed	Operations	A&E Operations	Paul Mudd	Internal business review	Operational Risk	Financial	The new RED improvement CQUIN for the WY underperforming CCG's has been set at 59.5% for AWC and 75% for NL. These are challenging targets given the outturn for 2013/14. There is a risk that these improvements will not be achieved	Performance Improvement plan Targeted overtime expenditure CPAD roll out Paramedic Pathfinder Assessment tool roll out in WY	Adequate	1) Limited overtime budget 2) The new rotas were not designed to give such a large improvement at an individual CCG level 3) Increase in demand will make the targets even more challenging 4) No agreement in place for crews to make direct contact with patient's GP's in-hours using a by-pass number 5) Number of vacancies still to be filled	1) Target overtime for these CCG area 2) Monitor/tweak rotas 3) Discuss demand management with CCG's 4) Discuss in-hours referrals with CCG 5) Recruit to fill vacancies	High Risk	16	Moderate Risk	12	Moderate Risk	12	03/04/2014	01/08/2014	
84	Release to Training	Being reviewed	Operations	A&E Operations	Paul Mudd	Internal audit	Operational Risk	Clinical	Potential for patient harm due to failure to release clinical staff for training leading to out of date skills and knowledge	Training plan includes prioritisation of bronze training for clinical supervisors. Clinical Supervisors have now received bronze commander training. Majority if training plan is now agreed and Resource and planning for release	Adequate	1. Inconsistent release of staff to training. 2013/14 the Trust concentrated on sending CS/Para's/Tech's, that had not been on a Clinical Update in the last 2 years, onto these training courses.	1a. Continue robust management of abstractions and monitoring compliance rates 1b. Use of new rota to target training on relief weeks 2. Training plan has been reviewed for 2014/15. Clinical Refreshers have now been extended to 18 months. This year there are 41 courses x 10 attendees = 410 training places. 29 Clinical Hub staff need to attend, therefore there are only 381 places available for the 640 staff that need to attend. Those not attending this year will be planned in for 2015/16.	Moderate Risk	8	Moderate Risk	12	Low Risk	4	08/08/2013	01/08/2014	
368	Service Reconfiguration	Being reviewed	Operations	A&E Operations	Hester Rowell	Internal business review	Operational Risk	Clinical	Risk of A&E operational pressure and lack of clarity on where to take patients for most appropriate care as a result of regional/local service reconfigurations and changed service models. This may also impact on contracting requirements.	Individual leads within A&E Operations, Clinical Directorate and Business Development represent YAS in reconfiguration meetings/working groups.	Adequate	Register of all reconfigurations across Yorkshire & Humber - reported to a senior management forum for assurance. Reconfiguration management process which links clinical, contracting and A&E operations.	Develop a reconfiguration register and agree where it is reported for assurance - and the escalation process for any gaps identified. Develop a reconfiguration decision-tree process for managers who may be representing YAS within different forums. This would identify who needs to be involved from Ops/clinical/business management at which stages.	Moderate Risk	12	Moderate Risk	12	Low Risk	6	25/03/2014	27/06/2014	
74	Rise in demand affecting outturn in performance	Being reviewed	Operations	A&E Operations	Mark Inman	Incidents, Internal audit, Internal business review	Operational Risk	Financial	Demand rise in the CBU above that of contracted level impacting on CQUIN 6 (Red Performance), Rural CQUIN, and financial/reputational impact due to failure to perform and achieve performance.	1. Recruitment plan for full establishment 2. Abstractions managed within expected levels 3. Rota redesign the ultimate resolution together with stabilisation of the 111 service and OOH 4. Working with CCG's to improve on local delivery	Adequate	1. Rota redesign not providing changes to operational cover until January 2014 leaving little time for any affect on performance overall for the full year 2. CCG buy in inconsistent across the CBU with some being very inclusive and others not engaging resulting in limited buy in to change	1. Implement Operational redesign project 2. Complete CQUIN Projects driving changes and pushing through engaged CCG's to demonstrate good practice	Moderate Risk	12	Moderate Risk	12	Low Risk	4	01/07/2013	27/06/2014	

66	Rota and establishment misalignment	Being reviewed	Operations	A&E Operations	David Williams	Internal audit, Internal business review, Self audit	Operational Risk	Patient harm	Risk to patient safety due to increased demand and reduced performance across the A&E Operations service.	- Intense monitoring process in place - New rota patterns being reviewed following implementation in February - Review of flexible working planned for June 2014. - Other metrics are being monitored that are indicators of effective rotas for example, end of shift overruns, meal break allocation, performance delivery, other AQIs	Adequate	1. Inability to manage increase in demand at present time effectively with available resource.	1a. Recruitment underway across the Trust to cover vacancies. 1b. Weekly monitoring to take place to assess patient safety. 1c. Recovery plan to be implemented. 1d. Continued monitoring.	Moderate Risk	10	High Risk	15	Low Risk	1	07/11/2011	04/07/2014	
371	NY vacancies	Being reviewed	Operations	A&E Operations	Vince Larvin	Self audit	Operational Risk	Clinical	If there is not adequate resource cover for North Yorkshire, then this may result in performance being affected and in turn adverse clinical outcomes.	1.vacancies and skill required identified. 2.recruitment on going 3.use of overtime to fill gaps 4. redeployment of resources	Adequate	1. Lack of available resource to cover demand.	1a. Continue with recruitment to vacancies across the Trust. 1b. Continue to monitor the risk with weekly reports to Senior Ops Management Team to escalate any unresolved issues. 1c. Overtime currently being utilised to ensure shift fill.	Moderate Risk	12	Moderate Risk	12	Low Risk	6	26/03/2014	27/06/2014	
ICT																						
136	Satellite Navigation system updates	Being reviewed	Finance and Performance	ICT - Information Technology	Andrew McInnes	Incidents	Operational Risk	ICT	Risk of delayed response due to satellite navigation systems not having the most up to date addresses on them.	Entered onto Project Pipeline to be addressed in 2014/15 1. Updates currently take place every 2 years 2. Capital Bid submitted for 2014\15 3. Entered onto Project Pipeline for project to commence early 2014\15	Adequate	1. Frequency of updates (2 years) still poses a risk to the organisation.	1. To explore the option of more frequent updates and the associated implications of doing this.	Moderate Risk	12	Moderate Risk	12	Low Risk	4	09/09/2011	01/04/2014	
396	P11-YAS HART Project: Data Link	Being reviewed	Finance and Performance	ICT - Information Technology	Nick Smith	Internal audit	Project Risk	Supply/Procurement	Delays to the delivery of the data link of the new HART build due to delays in providing the BT POP to ensure the delivery of Virgin Media	Weekly Tracker Report produced weekly to monitor progress by Virgin Media, BT is a sub contractor of VM	Inadequate	1) No clear vision of a go live date by BT or Virgin Media	1) Escalated internally and contact Virgin Media to advise on sub contractor BT to identify dates for delivery	Moderate Risk	9	Moderate Risk	12	Low Risk	1	19/05/2014	01/08/2014	
PTS																						
193	PTS Data Quality	Being reviewed	Finance and Performance	PTS (Patient Transport Services) - Operations	Amanda McInnes	Internal business review, Self audit	Operational Risk	Financial	Risk of loss of financial income through failure to collect data accurately through the front line systems	1. Clear instructions to staff regarding data definitions and use of Personal Digital Assistants (PDAs) 2. Communication and requirement to complete the '7 steps' time stamps clearly circulated and implemented 3. Paper back up systems in place for system failures 4. Routine audit reports from the system identifying gaps in data sets and inaccurate data entry 5. Robust audit trail and accounting system related to journeys undertaken outside of contract for which additional income can be recovered 6. PTS has gone 'paperless' for operations across the region from March 14 7. Formal Data Quality improvements agreed as part of the 2014-15 contracting round 8. Action plan produced linked to internal audit report recommendations	Adequate	1. Lack of assurance regarding the accuracy of the data quality collected 2. Lack of formal month end data closedown process resulting in retrospective data entry following report generation 3. Reported lack of functionality and operational confidence in the issued PDAs 4. Lack of assurance regarding the management actions taken as a consequence of the audit reporting	1a. Implementation of a PDA task and finish group as a sub group of the PTS systems work stream to take specific actions forward 2a. Develop and implement a formal month end closedown procedure to ensure data accuracy of month end contract reporting 2b. Promotion of and confirmation with staff as to the importance of accurate data collection 3a. PTS PDA task and finish group to identify the specific issues with PDA coverage, reliability and sat nav being reported by staff and develop / implement a formal action plan to resolve 3b. Review and amend the formal management process for maintenance and upgrade of PDAs 4a. Review of the current audit reports generated and circulated to the PTS management team 4b. Identify and confirm specific actions to resolve issues of non compliance with PTS managers 4c. Report progress through the PTS	High Risk	15	Moderate Risk	12	Low Risk	6	11/09/2013	19/09/2014	
Estates																						
54	Road surface - 3 sites	Being reviewed	Finance and Performance	Estates	Paul Farrell	Claims, Incidents	Operational Risk	Health and safety	Risk of harm due to degrading of road surfaces to such an extent that normal patch repairs are not adequate(Harrogate, Castleford, Gildersome).	1. Backlog maintenance program 2. Estates rationalisation (5 year plan) 3. Estates upgrades through the Board approved Capital program 4. Minor works annual program and continuous estates maintenance function	Adequate	1. Lack of protected resource to enable the work to be completed at this stage	1. Capital bids for funding to replace road surfaces submitted annually. Castleford bid successful for 2014, tender being "worked up". 2. Piece of work to be undertaken to understand the priority of the work that is required. Update to be provided to Steve Page April 2014. 3. patching at Gildersome and Harrogate, where possible, to reduce deep potholes in pedestrian walkways	Moderate Risk	12	Moderate Risk	12	Low Risk	4	05/08/2013	12/10/2014	
NHS111																						
348	WYUC On going funding for activity over contract	Being reviewed	Standards and Compliance	NHS 111	Keeley Townend	Internal audit	Operational Risk	Financial	Lack of recurrent increased funding for 2014/15 could put patient treatment at risks based upon evidence from incidents and complaints around delivery of care due to lack of clinical cover to meet demand	Negotiations with commissioners complete for 2014/15 working with WYUC to rework the current operational model to improve efficiency	Adequate	1. There is a need to understand WYUC pressures in their operating systems 2. No change to operating model at this time	1. NHS 111 staff able to access WYUC systemOne to monitor activity and workload pressures 2. Complete remodelling workshops with WYUC on service redesign	High Risk	16	Moderate Risk	12	Moderate Risk	8	25/02/2014	18/07/2014	