	Dist ID and Title	Dick Description /IE THEN DESILITING IN 'N		Risk Ow	nership		Grading Gra	Current	Target	Actions / Next Steps: Summary
	Risk ID and Title	Risk Description ('IF THEN RESULTING IN')	Board Committee	Directorate	Business Area	Risk Handler		Grading	Grading	
59	Avaya telephony platform	IF the current Avaya telephony platform is not replaced <b>THEN</b> there is an increasing risk that we will not be able to upgrade/expand the system AND the manufacturer/suppliers will be unable to provide support AND there is increased likelihood of system failure due to the age of the hardware <b>RESULTING IN</b> complete failure of telephony services, significant delays/impact on patient care and trust reputation	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	20	20		Business case to procure a new phone system. Work with BT to maintain the current system. Implement the Unified Communications project.
61	P58 - National Emergencey Services Mobile Communications programme delay	IF there are significant delays to the Emergency Services Mobile Communications Programme (ESMCP) national project as advised by the national team, THEN 240 YAS A&E vehicle MDTs will be in excess of 10 years old, meaning a potential for failure of the MDT's with no available replacement alternative RESULTING IN an impact for frontline operational staff who may not have access to a vehicle with a working MDT.	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	12	12	6	Review milestones of the national programme. Capital bid for additional MDT devices.
116	Unified Comms - Voice Comms	<b>IF</b> Voice Comms are not resourced accordingly <b>THEN</b> they may have insufficient capacity to adequately support the Unified Comms project <b>RESULTING IN</b> delays to complete activities	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	12	12		Identify resource requirements and confirm funding prior to recruitment.
120	COVID-19 Unified Comms COVID impact	IF the COVID pandemic continues and/or re-occurs <b>THEN</b> required resources (internal & external) may not be available to complete the outstanding phases <b>RESULTING IN</b> project delays	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	20	12	6	Actions identified and delivered via implementation project plan
128	Deployment of Devices	IF a suitable Mobile Data Management (MDM) solution is not implemented onto the Samsung A40 devices <b>THEN</b> this could delay the NMA Lite deployment of devices into operations <b>RESULTING IN</b> Delays to the Pilot phase initially and Go-Live.	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	12	12	6	Actions to be confirmed.
225	Unified Comms - Pilot software pre-tests	<b>IF</b> Pilot software pre-tests are not approved as fit for purpose <b>THEN</b> we would be unable to move into testing phase <b>RESULTING IN</b> delays to the UC project.	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	20	20	8	Multiple actions to resolve faults relating to (1) Pilot v2 - Installer; (2) Pilot v2 - AAD Phone; and (3) Pliot v2 - VPN
287	Management of IT Equipment	IF IT Equipment is not securely received into the Trust; accurately documented upon arrival; immediately asset tagged and recorded where required; and stored securely until issued for use THEN valuable equipment may go missing <b>RESULTING IN</b> financial loss; reputational loss; and an adverse impact on the Trust's ability to deliver an effective service.	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	12	12		Multiple actions relating to immediate improvements in receiving and storage of equipment, but also a proposed RPIW to develop longer term improvements.
231	EPR Phase 3: Yorkshire and Humber Care Record dependencies	IF there are delays in the delivery of Yorkshire and Humber Care Record projects, THEN this will impact on the deployment of YAS data sharing developments, RESULTING IN impact on planned timescales and benefits realisation.	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	12	12	8	Continue to engage closely with the YHCR programme and partner organisations. If delays occur with YHCR pilot use cases, consider refocussing the YAS ePR development schedule on other priority areas. Note that this is a risk to delivery of enhanced functionality, and not a risk to continuing use of the current product.
235	EPR Phase 3: Operational Engagement	IF the regional block on Operational secondments continues THEN it will not be possible to fill the Digital Paramedic Lead role RESULTING IN lack of resource and expertise to engage effectively with Operational staff to introduce and embed new ePR functionality and corresponding process change, potentially reducing benefits realisation.	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	12	12	12	Escalate the need for a Paramedic Digital Lead through TEG, and propose shielding staff could be used if staff on road are not available for secondment.

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241	Voice Recorder Failure	IF Voice Recorder fails in anyway due to aging hardware and end of life software THEN parts of the organisation would not have the facility to record and/or replay conversations held over the telephone specifically in EOC, 111 and PTS RESULTING IN breach of contract to records telephone calls	Finance and Investment	Chief Information Officer	ICT	Ola Zahran	12	12		Under the terms of the renewed contract (October 2019) the supplier, Sinclair, will continue to support the Voice Recorder product until the new Unified Comms solution is in place
16	Redactions of data disclosure made to police forces	IF documents disclosed to police forces by YAS are not redacted of third party information THEN there is the potential that third party information would be visible in court proceedings which are extremely removed from their original purpose RESULTING IN regulatory, financial and litigation penalties brought against the Trust.	Both	Corporate Affairs	Legal	Benjamin Cowell	12	12		Proposal for additional resource within the Legal Services department to assist with redaction and also FOI administration which would free up the Legal Services Coordinator (Disclosure) to review the c.1500 requests per annum.
47	Trust Board representation	IF the Trust does not ensure board representation across all ethnicities <b>THEN</b> the Trust will be unable to demonstrate compliance with the WRES standards <b>RESULTING IN</b> race inequality at board level.	Quality	Corporate Affairs	Regulatory Compliance	Amanda Wilcock	12	12	8	Develop a working group across YAS to develop a programme for the appointment of Non-Executive Associate Director with a focus on attracting candidates that met the representation of the communities we serve.
34	Section 172 Road Traffic Act 1988 - Obligations to furnish police with driver details upon demand	IF a driver of any vehicle owned and/or operated by YAS can't be readily identified at the time of a moving traffic offence <b>THEN</b> the Trust will be guilty of an offence under Section 172 of the Road Traffic Act 1988 <b>RESULTING IN</b> the Chief Executive as responsible officer will be summonsed to court for the offence with negative financial and reputational impact.	Both	Finance	Fleet	Jeff Gott	12	12		Create a robust pool car policy, with accountable persons for all Trust pool cars. Ensure an accounatble person is identified with contact details on each and every Trust vehicle record, include hired vehicles. Explore use of telematics for identifying vehicle location and drivers.
19	Vehicle familiarisation training	IF YAS does not provide documentary evidence of all aspects of vehicle familiarisation training including staff members present, learning objectives and dates/times/vehicles THEN the Trust does not have a safe system of work as outlined in Health and Safety at Work legislation RESULTING IN regulatory action and increased litigation against the Trust with severe financial implications.	Both	Finance	Fleet	Jeff Gott	15	15	6	Ensure all Trust vehicles have a suitable vehicle manual detailing the relevant familiarisation checks. Develop appropriate training material to address Vehicle Familiarisation across YAS. Develop short video materials linked into ESR as a core competency for all staff involved in working on vehicles.
39	Tranman system	IF the new Tranman system does not seamlessly interface with Purchase to Pay(P2P) THEN work orders raised by Fleet will not transfer to Oracle RESULTING IN the delay of payment to suppliers due to the inefficiency of manual input by Fleet and Finance colleagues.	Both	Finance	Fleet	Jeff Gott	8	12	8	Progress updates on Tranman Interface Implementation
43	Falsified Medicines Directive legislation	<b>IF</b> YAS do not implement systems to deliver Falsified Medicines Directive legislation requirements <b>THEN</b> the Trust will not be able to scan medicines on receipt in Procurement <b>RESULTING IN</b> failure to identify falsified drugs and non-adherence to legislation	Both	Finance	Procurement	Matt Barker	12	12		Falsified medicines - scanning system option. Explore options for medicines scanning system to comply with FMD Legislation.
62	Climate Change	<b>IF</b> Climate Change occurs <b>THEN</b> extreme weather events (heatwaves, cold waves, flooding, flash floods, droughts) and sea level rise will occur <b>RESULTING IN</b> multiple implications for the Trust.	Both	Finance	Estates and Facilities	Alexis Percival	15	15	12	Sustainable Development Management Plan. Flood Risk Assessment. Climate Change Adaptation Plan. Assessment of operational and supply-chain business continuity.
64	Fleet lone working	IF provisions are not in place to maintain the safety of lone workers in the Fleet Team THEN staff will be unable to raise the alarm in the event of accident, injury or incident RESULTING IN failure to comply with Health and Safety Legislation	Quality	Finance	Fleet	Jeff Gott	12	12	3	Develop Fleet lone worker procedures as part of the Trust lone worker guidance. Explore technology devices to allow workers to raise an alarm.
67	Vehicle availability for A&E including 4x4 capability	IF vehicle availability does not meet A&E rota requirements THEN staff will be on shift without a vehicle RESULTING IN lack of utilisation of rota'd staff and inefficient use of resources	Quality	Finance	Fleet	Jeff Gott	12	12	3	Plan for vehicle capacity to support events

				Risk Ov	nership		Initial	Current	Target	Actions / Next Steps: Summary
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236	Percentage of Fleet Available for AVP	IF there are insufficient A&E and PTS vehicles available to take off the road without affecting operational performance <b>THEN</b> the AVP system will not be able to operate <b>RESULTING IN</b> the inability to realise AVP benefits.	Both	Finance	Fleet	Jeff Gott	12	12	6	Vehicle numbers for future modelling need to be determined to allow ring-fencing for AVP to maximise efficiencies. <b>Note that one reason for lower numbers of vehicles in AVP is the deployment of vehicle cleaners at Emergency Departments as part of the COVID response activity.</b>
84	Operational estate suitability	IF the estate cannot be modernised and/or expanded THEN A&E/PTS will struggle to operate out of some sites <b>RESULTING IN</b> not being able to effectively deliver services in some localities	Both	Finance	Estates and Facilities	tbc	16	12	8	Ensure there is an approved Estates Strategy that identifies the functionality and condition of the operational estate, strategic objectives and proposals to address any identified issues. Ensure Estate Strategy links to Hub and Spoke proposals.
89	Counter fraud, bribery and corruption	IF Counter Fraud arrangements are not managed and documented appropriately THEM the Trust will be open to acts of fraud and deemed to be non-compliant against the Counter Fraud Standards RESULTING IN the potential for financial loss and reputational loss.	Finance and Investment	Finance	Finnce	Perry Duke	12	12	4	Adherence to and self-assessment against the standards issued by the NHSCFA. Counter Fraud annual work plan. Counter Fraud SME input via internal audit contract.
290	NEW Fire Doors	IF the fire doors continue to be propped open on ambulance stations <b>THEN</b> in the event of a fire this will be accelerated <b>RESULTING IN</b> potential adverse outcome to premises and staff safety. YAS also risk being in contravention of the fire safety act.	Both	Finance	Estates and Facilities	David Sanderson	12	12	6	Options are currently being reviewed and associated costings to determine appropriate actions.
179	Clinical Waste Contract	<b>IF</b> the clinical waste contract does not fulfil its obligations <b>THEN</b> YAS cannot manage clinical waste correctly <b>RESULTING IN</b> non- compliance with regulation.	Both	Finance	Estates and Facilities	David Sanderson	9	9	9	Monitor performance in delivering to the contractual requirements. Review the contract. The COVID vaccination programme has also been considered and will have less than a 2% impact on total waste collections; however this has been factored into the vaccination project risks.
54	Clinical Capacity NHS 111/IUC	<b>IF</b> we are unable to recruit and retain sufficient clinical staffing capacity <b>THEN</b> there is a risk to the delivery of clinical advice in appropriate timescales <b>RESULTING IN</b> a risk of not being able to deliver NHS 111 First	Quality	IUC	NHS 111	Mark Leese	12	16	6	Pandemic IUC plan enables wider Trust clinical support during peak demand. Short term recruitment attraction strategy. Longer term strategy through Clinical People Plan as part of IUEC programme
58	Culture / retention in NHS 111	IF we are unable to address the current cultural issues within the NHS111 call centres <b>THEN</b> staff will not see NHS 111 as a desirable place to work RESULTING IN high levels of sickness and attrition with loss of experienced and trained staff.	Quality	IUC	NHS 111	Mark Leese	12	12	6	Cultural review in NHS 111. Health and well being initiatives introduced. Environmental improvements planned and started include height adjustable desks, new carpets decoration, new kitchen improvements in the training area.
299	111 First National mandate to validate 999/ED Online cases through NCAS (national covid CAS)	IF there is a lack of clinical resource due to the inconsistent provision through NCAS to validate onlinbe dispositions for 999 cat 3and 4 and ED THEN YAS IUC could become the default service for this validation RESULTING IN Patient delays, longer clinical queues with associated clinical risks and poor patient experience	Quality	IUC	NHS 111	Eithne Cummins	20	12	3	Beyond the scope of YAS / IUC as this development ias managed through NHSE . YAS attempting to influence and support NHS E in this area.
283	Excessive Demand	IF demand into IUC exceeds assumptions on NHS 111 First and ceiling levels through Covid THEN excess demand will put significant pressure on the service RESULTING IN patient calls being unanswered and patients making alternative arrangements such as phoning 999 or presenting at EDs	Quality	IUC	NHS 111	Keeley Townend	16	16	8	IUC Business plan in place for Ceiling & NHS 111 First demand levels. Recruitment plans to meet capacity. Pandemic IUC Plan to increase support at peak i.e Service Advisors / Trust clinical support. NHS England strategy to stand up Covid Response Service (CRS). Commissioner briefing of demand risk and NHS England tracking of demand

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221	111 First: Unified Comms homeworking solution	IF the clinical Homeworker solution is not available and fully deployed to clinical advisors THEN the service will have a reduce clinical capacity and RESULTING IN not being able to deliver a safe service	Both	IUC	NHS 111	Bob Sunley	16	12	5	Unified Comms implementation plan. Demo kits requested to trial ahead of formal testing. User acceptance testing and actions resulting from this. IUC support to ICT for rollout of solution to clinicians if required.
222	<b>111 First</b> : Unified Comms go-live delay	IF go-live for Unified Comms is significantly delayed <b>THEN</b> the expansion of the 111 capacity could not proceed due to the lack of technical infrastructure <b>RESULTING IN</b> recruited staff not able to handle the 111 First demand.	Both	IUC	NHS 111	Bob Sunley	16	12	8	Unified Comms implementation plan. Request details from ICT on the possibility of expanding on the current infrastructure for up to 60 Call centre positions across both 111 call centres. Continue to monitor plans and progress for Go Live vs the launch of 111 First
302	NEW Social distancing space in Call Flex	IF the lack of space in Call Flex in order to reduce side by side working other than at peak times remains, THEN there will be limited opportunity to space staff without remodeling the ground floor in Call Flex to reduce contact points (welfare facilities etc.). RESULTING IN estates work lasting 4-5 months and the service line and Trust accepting the need to aknowledge the increased periods of side by side working remain during these changes.	Both	IUC	NHS111	Bob Sunley	15	15	6	Full desk screening implemented. Additional temporary space utilised on the ground floor. Longer term solution via estates strategy
305	NEW Pulse Oximetry Roll Out	IF there is no coordination of the roll out of community based Pulse Oximetry THEN the demand will not be managed RESULTING IN overwhelming clinical resources.	Quality	IUC	NHS111	Bob Sunley	12	12	4	Modelling the roll-out to understand potential scale and impact. Training and updating of processes to handle incoming demand
306	NEW National changes to DoS on ED DoS returns	<b>IF</b> national changes to DoS on ED returns are not accurate <b>THEN</b> it would mean patients not being referred to the correct service <b>RESULTING IN</b> patients being referred to services that do not meet their needs.	Quality	IUC	NHS111	Bob Sunley	12	12	6	Raise awareness amongst local commissioners / ICS partners
182	IUC 111 average call handling time	IF the Average Handling Time does not reduce from it current 545 seconds to the contracted funding level of 501 <b>THEN</b> the slower process time affects the call answer performance <b>RESULTING IN</b> a need to increase staffing levels of around 15 to 20 and an impact on the 111 First Programme	Both	IUC	NHS 111	Keeley Townend	16	16	8	Initial BI analysis completed and now further information required from Adastra to break down the AHT to demographics and NHS pathways triage. Contacted NHS England and NHS Pathways for insights into why the call length has increased, nationally its 596 and thought to be linked to the new Covid pathways
107	COVID-19 - Community First Responders supporting Patient Transport Services	IF the Trust Community First Responders who are currently supporting Patient Transport Services are required to resume their normal workplace THEN the Trust PTS would be unable to continue to support A&E activity RESULTING IN reduced staffing resource, impacting on service delivery and patient care.	Quality	IUC	PTS	Chris Dexter	16	16	4	Further PTS Bank recruitment. VCS recruitment and on- boarding. Additional Sub-contractor resources required. Managing PTS capacity across Healthcare systems – dialogue and actions underway with ICS / Acutes.
294	NEW Reduction in Outpatient PTS capacity to support A&E operations	IF PTS continue to provide up to 45 staff to support A&E with no additional sub-contractor provision, or funding; THEN capacity to deliver outpatient transport will be severely impacted RESULTING IN high likelihood of patients missing appointments, potential for deterioration in patient experience, well-being and health, resulting in adverse publicity and poor repute within the system as a PTS provider. This will be compounded by the planned drive to target the backlog of outpatient appointments and elective care by accelerating volumes in third/private sector.	Quality	IUC	PTS	Chris Dexter	12	12	4	Review underway and will update the group accordingly.
40	Non conveyance decisions	<b>IF</b> there is inadequate history taking and decision making <b>THEN</b> a non conveyance decision may be made inappropriately <b>RESULTING IN</b> potential for adverse patient outcome	Quality	Medical	Clinical	Julian Mark	15	15	15	Develop clinical supervision model. Develop safe discharge and referrals checklist. Half-day on annual clinical refresher - assessment, documentation and non-conveyance. Review of Paramedic Pathfinder useage. Awareness campaign about the importance of care planning and providing safety netting advice when discharging care on scene
106	Resuscitation training and competency	IF there is a failure to deliver training and assess that all front line clinicians are adequately trained and competent to deliver basic life support and delivery of safe and effective defibrillation on a regular basis THEN inadequate resuscitation may be provided during cardiac arrest RESULTING IN patient harm or death.	Quality	Medical	Clinical	Steven Dykes	16	15	5	Discuss output of recent Incident Response Group meeting in relation to case reviews.

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17	Handover of critical risk information	IF critical risk information is not provided from EOC to A&E crews via CAD in a timely manner, THEN crews will not necessarily be able to provide the best or safest response, RESULTING IN the potential for increased harm to both staff and patients.	Quality	Operations	EOC	Will Colam- Ainsworth	12	12	4	Explore systems options to improve the sending and displaying of alerts, and provide a warning system to dispatchers and EMD that warning messages need to be sent. Raise awareness and clarification amongst EOC staff regarding the importance of sending warning messages.
35	Hospital handover monitoring	IF there are hospital handover delays a <b>THEN</b> ambulance crews will be unavailable to respond to emergency calls <b>RESULTING IN</b> delayed response times to emergency calls with potential for harm to patients	Quality	Operations	A&E Ops	Stephen Segasby	16	16		Specific focus on handover delays at the Northern General Hospital (Sheffield) and Scarborough Hospital sites.
37	<ul> <li>Paramedic workforce supply</li> </ul>	IF other healthcare providers continue to recruit and retain paramedics <b>THEN</b> there is a risk to the future sustainability of the YAS paramedic workforce <b>RESULTING IN</b> workforce shortages and inability to meet demand, impacting on performance and patient care.	Quality	Operations	A&E Ops	Stephen Segasby	20	16	6	Understand the needs of the system and implications of NHS long term plan which requires paramedic workforce within primary care. Develop system partnership working to progress rotational paramedic model to ensure it fits Ambulance Trust and Primary Care Trust needs
44	Clinical supervisor job evaluation	<b>IF</b> the result of the clinical supervisor job evaluation process does not result in a rebanding <b>THEN</b> there is a risk of industrial action <b>RESULTING IN</b> reduced staffing and detrimental impact on employee relations.	Quality	Operations	A&E Ops	Suzanne Hartshorne	12	12	4	YAS to continue to be represented at national forums to monitor ongoing progress with the national job evaluation process. Continue to engage with union representatives as part of the ongoing national job evaluation.
49	Calderdale Huddersfield reconfiguration - centralising frail elderly and cardiorespiratory	IF YAS does not have accurate information to prepare for implementation of Calderdale and Huddersfield reconfiguration arrangements THEN this may impact on performance, create resource drift, increase transfer time and IFTs RESULTING IN potential for adverse patient outcome and failure to meet national response targets	Both	Operations	A&E Ops	Stephen Segasby	12	12		Audit of PCRs to establish under the new arrangement where the patient would have been conveyed to. Work with CHFT to understand pathways for different scenarios and support modelling of impacts.
52	Friarage reconfiguration of services	IF the proposal to decommission services at Friarage Hospital is implemented <b>THEN</b> there will be a delayed response to patients with life-threatening and time critical conditions <b>RESULTING IN</b> adverse patient outcome, an increase in complaints and serious incidents, negative impact on performance and reputation	Both	Operations	A&E Ops	Stephen Segasby	20	20	12	Complete a Quality Impact Assessment for Friarage. Manage patient experience supported by collaborative public messages.
79	S136 hidden demand	IF Yorkshire Police force areas began to adhere to nationally agreed guidance for the transport of people detained under S136 of the MHA (1983) which states that the ambulance service should be responsible for transporting patients who are detained under S136 to a place of safety and that this work should be prioritised and the response should be a Catagory 2 ambulance response under ARP. THEN Yorkshire Ambulance Service would see an increase of circa 2000 Cat 2 patients across our 4 force area	Quality	Operations	A&E Ops	Stephen Segasby	9	12		YAS MH business case being developed which includes options for transport of patients detained under S136. Lead Nurse and Specialist Development Nurse to attend any relevant MH system meeting to ensure discussions around transport of S136 patients is considered and any change in police management of these patients is highlighted early
82	COVID-19 - Impacts of COVID-19 on EOC and 999 Service Delivery	IF demand on EOC and 999 continues to escalate as a direct result of the Covid-19 incident THEN the Trust will be unable to maintain an adequate response either by telephony or face to face RESULTING IN potential for delays to patient care, patient harm and reputational damage due to inability to respond.	Both	Operations	A&E Ops	Stephen Segasby	20	12	6	Corporate Executive co-ordination cell to support business critical function (temporary arrangement). Gold Cell - 09.30 daily multi-service incident meeting across EOC, 111, PTS and all corporate support services. TEG - daily Trust Executive Group meeting.
10	COVID-19 Impact of COVID-19 response on core governance and compliance functions	IF the Trust does not ensure an appropriate Recovery Plan from the Covid-19 response THEN a number of core functions will not be achieved RESULTING IN non-compliance with regulations, education and training provision and the wider Trust strategy and business plan.	Both	Operations	EPRR	Jeevan Gill	16	16	4	Recovery Cell' to co-ordinate recovery / reset planning, based on four themes (Patients, People, Organisation, System). Ensure as part of the Trust Recovery phase the Trust captures learning at all service levels as part of the debrief exercise to influence future planning

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105	Operational performance	<b>IF</b> there continues to be increased demand across the A&E Operations service THEN there may be excessive response times <b>RESULTING IN</b> a potential risk to patient safety	Quality	Operations	A&E Ops	Stephen Segasby	16	12	5	Implement Requirements of ARP. Monitor tail of performance.
108	Communication of key information between Integrated Urgent Care (IUC) and Emergency Operations Centre (EOC)	IF communication of key information from Integrated Urgent Care (IUC) and Emergency Operations Centre (EOC) to the frontline 999 clinician fail to be provided THEN there is potential for the clinician to formulate an incorrect management plan RESULTING IN delays in care and potential for patient harm and uncoordinated care.	Quality	Operations	A&E Ops	Stephen Segasby	12	12	4	Actions to be confirmed.
180	A&E Operations Staffing Capacity	IF the budgeted number of FTE is not able to be achieved through recruitment (as a consequence of Covid-19) THEN there will be a significant shortfall in available resource hours from November 2020 until the end of March 2021 RESULTING IN reduced response times to incidents	Quality	Operations	A&E Ops	Stephen Segasby	20	20	12	Increased use of overtime Increased training capacity Use of alternative providers Reduce demand
288	National Security Risk Assessment	IF those risks in the National Security Risk Assessment (NSRA) that directly affect the Trust are not reviewed; scrutinised against YAS plans and guidance; and mitigated as much as practicable, THEN the Trust would be failing to undertake its statutory duties as a Category One Responder and open to criticism in the event of external scrutiny, RESULTING IN potential criminal charges; financial loss; reputational loss; and an adverse impact on the Trust's ability to deliver an effective service.	Both	Operations	A&E Ops	Jeevan Gill	12	12	8	Undertake a systematic review of the 72 risks in the National Security Risk Assessment and assess the Trust's position in relation to these.
9	EU Exit	<b>IF</b> the EU Exit proceeds as a 'no deal' <b>THEN</b> YAS plans for continuity of business as usual could be impacted <b>RESULTING IN</b> potential for disruption to patient care.	Both	QGPA	Performance Assurance and Risk		12	12	12	Review all EU Exit plans in light of emerging government strategy
285	NEW Paediatric liaison / children frequent caller project	IF this project does not exist THEN YAS will be unable to share valuable safeguarding information in line with the Children Act 1989 for frequently calling children RESULTING IN potential adverse outcome of children and young people.	Quality	QGPA	Quality and Safety	Clare Ashby	12	15	4	All options currently being reviewed to determine appropriate actions.
21	Conflict Resolution Training provision	IF Conflict Resolution Training is not delivered in line with the risk-based assessment THEN staff may not be adequately trained in order to de-escalate or manage violence and aggression RESULTING IN potential for physical or psychological injury to staff	Quality	QGPA	Performance Assurance and Risk	Steve Page	12	12	3	Review and refresh existing CRT packages. Develop and launch new CRT packages for other staff groups and volunteers. Include CRT in the Trust's training needs analysis.
22	Availability of CCTV for pursuance of sanctions	IF CCTV is not readily available <b>THEN</b> investigations cannot be comprehensively conducted <b>RESULTING IN</b> failure to impose sanctions and redress	Quality	QGPA	Performance Assurance and Risk		12	12	3	Extend staff groups who can retrieve and view CCTV footage (e.g. Fleet; ROC). Upgrade CCTV hardware and software. Evaluate CCTV provision for premises. Develop SOP for health checks of vehicle CCTV. Bodycam national pilot.
28	Management of paper records within YAS	IF HR/Departmental paper files being held on YAS premises continue to be held in unsecure cabinets and locations <b>THEN</b> the Trust will not be complaint with Data Protection regulations <b>RESULTING IN</b> the potential for unauthorised access, inability to locate files to comply with SARs or investigations and potential for the Trust to be fined by the ICO.	Both	QGPA	Performance Assurance and Risk	Helen Hartland	12	12	4	All paper records held across YAS premises to be brought to one location to ensure access is restricted and that no further paper files are created. Paper records reviewed to establish their retention requirements. Retained documents to be scanned and stored digitally. Risk to be reviewed at IG Working Group in November.
30	Annual data security (IG) training of all staff	<b>IF</b> YAS staff do not complete annual Data Security Awareness (IG) training <b>THEN</b> this is a breach of statutory duties <b>RESULTING IN</b> potential for increased data breaches and non-compliance with the DSP Toolkit mandatory assertion.	Quality	QGPA	Performance Assurance and Risk	Helen Hartland	12	12	3	Work with Education and Training Team to launch e-learning on the new ESR/OLM learning platform. Weekly monitoring of uptake of IG training by staff. Staff communications to support completion of IG training.

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41	Premises security	IF YAS premises are not adequately protected by an appropriate level of security THEN staff and assets will be vulnerable RESULTING IN the potential for physical harm; financial loss; reputational loss; and an adverse impact on the Trust's ability to deliver an effective service.	Both	QGPA	Performance Assurance and Risk	Steve Page	12	12	12	Develop a business case for the upgrade/replacement of the Trust's access control and CCTV System. LSMS to complete site security inspections to mitigate risks as far as possible within current arrangments. LSMS to consult with Estates to incorporate into planned refurbishment work.s
42	Violence and aggression	IF YAS staff are not adequately protected against acts of violence and aggression THEN there is a potential for staff to be seriously injured RESULTING IN the potential for physical harm; financial loss; and reputational loss.	Both	QGPA	Performance Assurance and Risk	Steve Page	12	12		Safety guidelines and training. Dynamic risk assessment and joint decision-making model. Management of incidents and serious incidents. Support for criminal convictions. Data flagging. Safer Responding Group.
45	Subject matter expertise for manual handling	IF we do not have adequate subject matter expertise for the topic of moving and handling <b>THEN</b> there is risk of inadequate training, support and guidance for staff <b>RESULTING IN</b> potential harm to staff and patients.	Quality	QGPA	Quality and Safety	Iffa Settle		20	4	SME input and review of training provision across the Trust to ensure appropriate guidance and support is available to staff for the safe movement of patients. Procurement of Subject Matter Expertise for manual handling.
28	COVID - Trust Hygiene and Social Distancing Requirements	IF Trust hygiene and social distancing arrangements are not rigorously maintained in line with national guidance <b>THEN</b> there is heightened risk of transmission between individuals and significant outbreaks of infection within the workplace <b>RESULTING IN</b> (a) Reduced staffing capacity due to illness and self-isolation requirements (b) Erosion of service provision and performance standards, and (c) Potential adverse impact on staff morale, reputation, and regulatory compliance	Quality	QGPA	IPC	Clare Ashby	20	20	8	Comprehensive action plan to follow required guidance, covering: working patterns; premises layout and access; premises and equipment hygiene; staff hygiene; use of technology; targeted staff welfare; communications.
18	Cumulative effect of repeated moving and handling	IF the Trust does not consider the frequency, weight and forces involved in moving and handling tasks THEN staff may experience the cumulative effect of repeated actions RESULTING IN musculoskeletal injury	Quality	QGPA	Health and Safety	Shelley Jackson	12	15	3	Partnership working with Health and Safety Executive and National Ambulance Risk and Safety Forum on reduction of MSK injuries. Reduce weight of bags. Defibrillator replacement to consider weight. Vehicle design group to consider moving and handling risk
18	Health and Safety training for middle managers	IF the Trust's middle management do not receive formal health and safety training, THEN the Trust will be unable to effectively maintain its health and safety management system, RESULTING IN an increase in health and safety incidents and the multifarious potential adverse impacts associated with these	Quality	QGPA	Health and Safety	Shelley Jackson	12	12	3	Develop non-accredited H&S training for managers not included in the IOSH accredited training. Middle managers (e.g. Locality Managers to be provided with appropriate IOSH* accredited H&S training or equivalent. Review impact of new H&S sentencing guidelines on the Trust.
36	Impact of calculation of holiday pay to include regular overtime in remuneration	IF holiday pay calculations requires inclusion of overtime as part of normal remuneration THEN YAS would be required to address the financial impact of implementing this legislation RESULTING IN a financial cost to the organisation	Finance and Investment	Workforce and OD	Human Resources	Suzanne Hartshorne	16	16	8	A stay has been awarded on the Trust's claims pending the outcome of an application for appeal to the Supreme Court on Flowers v East of England Ambulance Service
50	Immunity screening and vaccination and health surveillance	<b>IF</b> YAS staff are not comprehensively screened and immunised by OH <b>THEN</b> they may contract and spread infectious diseases <b>RESULTING IN</b> potential harm to staff and patients	Quality	Workforce and OD	Human Resources	Helen Houghton	12	12	4	Send out clinical alert regarding measles outbreak and importance of MMR vaccine. Fleet staff require health surveillance renewed annually. PAM ongoing reconciliation of immunisations and recall for vaccine delivery as required. Review of Occupational Health contract provision.
99	COVID-19 - Staff physical and mental wellbeing during COVID-19 response	IF Yorkshire Ambulance Service doesn't provide appropriate resources to promote staff wellbeing THEN the Trust may encounter increased sickness both Covid related but also related to stress and anxiety, recruitment and retention issues RESULTING IN staff resourcing issues and reputational damage.	Quality	Worforce and OD	Human Resources	Helen Houghton	16	12	4	Multiple actions regarding staff mental and physical well being, bereavement services, infection prevention advice and guidance, workplace safety, home working safety and good practice, communications and engagement, support and wellbeing of high risk groups.