	Risk Description ('IF THEN RESULTING IN')		Ris	k Ownersh	ip		Initial	Current	Target Grading	Actions / Next Steps: Summary
Risk ID and Title		Risk Ownership	Directorate	Business Area	Risk Handler	Review Date	Grading	Grading		
456 Phishing Emails	COURT OF PORCOMMORAL PESTIL LINICE AT MARAY LACE AT INTALIACTUAL PRANCEIV	Finance and Performance	Intormation	ICT	Ola Zahran	31/07/2023	12	12		IT continue to monitor cyber threats as part of BAU - Trust utilises NHSDigital Microsoft Defender with Advanced Threat Protection (ATP) Solution.
457 Denial of Service	IF the Trust is subject to a Distributed Denial of Service (DDoS) attack THEN digital services could be disrupted by the infrastructure being overwhelmed with a flood of internet traffic RESULTING IN ; possible impact or shutdown to a number of our online services and websites, temporary and possibly permanent loss of web services, financial loss associated with remediation efforts and damage to the Trust's reputation.	Finance and Performance	Chief Information Officer	ICT	Ola Zahran	15/09/2023	12	12	3	IT continue to monitor cyber threats as part of BAU - NHSDigital Secure boundary service subscribed and implemented. An internal fire wall is also in place to protect from any internal attacks.
	IF KCOM process with the date of 6th March to cease all ISDN lines, THEN YAS may not have transferred fully from the KCOM ISDN lines to SIP lines RESULTING IN a loss of service to both primary 999 and 111 and all outbound calls	Finance and Performance	Chief Information Officer	ICT	Ola Zahran	09/07/2023	25	12	5	Migration to CIP now complete and have resilience in York and Rotherham, awaiting circuits to be installed in Wakefield, however those calls would be routed through York and Rotherham.
P106 - ePR Phase 3. 394 Clinical product owner and clinical safety officer role	IF there is no capacity within the Trust to provide clinical ownership and input for the YAS ePR application and no assigned Clinical Safety Officer THEN it may not be possible to confirm clinical requirements for new functionality and obtain clinical safety sign-off RESULTING in delay or cessation of new functionality release.	Finance and Performance	Chief Information Officer	ICT	Ola Zahran	31/01/2024	16	12	4	Weekly review has been put in place with the Deputy Medical Director as mitigation to provide the clinical steer required. Two clinical safety role job descriptions have been revised, reviewed at banding panel and resubmitted. Awaiting updates from clinical team on progress.
542 High Risk Vulnerabilities	IF a threat actor can successfully exploit a vulnerability THEN they could gain unauthorised access to a system or information RESULTING IN a potential to further damage the Trust ICT environment, reputational damage and operational consequences	Finance and Performance	Chief Information Officer	ICT	Ola Zahran	31/07/2023	12	12	4	PEN test report actions (80 total) to be reviewed and actioned.
568 Telephony Issue	IF there is a call into EOC or IUC that is silent, THEN there will be a delay in speaking to the patient as the Trust will have to call them back, RESULTING IN an increased risk that the condition of the patient may worsen during that time, and the Trust could suffer reputational damage.	Finance and Performance	Intormation	ICT	Ola Zahran	25/08/2023	12	12	4	BT to determine faults, two immediately addressed and reduced the number of silent calls. Process implemented within EOC, IUC and PTS for recognising and calling back.
377 Mandate Fraud	IF fraudsters are able to introduce false information into our procure-to-pay processes THEN funds may be transferred to the wrong bank account RESULTING IN in financial loss.	Finance and Performance	Finance	Finance	Kathryn Vause	29/02/2024	12	12		Multiple processes in place to mitigate against mandate fraud. Additional SOP to be created for supplier set up and amendment requests.
Trust BPPC Performance NHSE Escalation	IF the Trust does not turn around payment to suppliers in a timely manner, THEN we will not meet the required target of paying 95% of invoices within 30 days which will RESULT in increased monitoring from NHSI, increased reputational damage and the possibility that critical goods or services required on a day to day be withdrawn.	Finance and Performance	Finance	Finance	Kathryn Vause	31/10/2023	12	12	6	Purchase to pay system development and training within Finance and with Directors to implement more effective ways of working.
Counter Fraud Risk - 503 entitlement to pay and enhancements	IF an employee is paid for hours they have not worked or for enhancements they are not due THEN they will receive payments to which they are not entitled and which potentially constitute fraud, RESULTING IN financial loss to the Trust and potential criminal investigations.	Finance and Performance	Finance	Payroll	Kathryn Vause	30/09/2022	15	15	4	Finance to fully review the risk and determine mitigating actions.

	Risk Description ('IF THEN RESULTING IN')	Risk Ownership						Current	Target	
Risk ID and Title		Risk Ownership	Directorate	Business Area	Risk Handler	Review Date	Grading	Grading	Grading	Actions / Next Steps: Summary
Counter Fraud Risk -	TOR Which they are helpd hald by the Trilet Led' cickhece, hald absences, clichension		Finance	Payroll	Kathryn Vause	30/09/2022	12	12	4	Finance to fully review the risk and determine mitigating actions.
502 unsolicited and malicious	IF an employee responds to fraudulent unsolicited emails THEN this could lead to a data breach or allow malicious software to be deployed on Trust infrastructure RESULTING IN fraudulent activity (e.g. ransom demands), loss of money, loss of intellectual property, damage to reputation, and disruption of operational activities.	Finance and Performance	Chief Information Officer	ICT	Kathryn Vause	30/09/2022	20	20	4	Finance to fully review the risk and determine mitigating actions.
Counter Fraud Risk -bribery	IF an individual is obtains a contract with the organisation through offering a bribe or colluding with a member of staff involved in the tender process THEN a supplier might illegitimately be awarded contracts, or be enabled to suppy substandard goods or services RESULTING IN loss of contract value / failure to achieve contract benefits and potential financial costs to the Trust	Finance and	Finance	Procurement	Kathryn Vause	30/09/2022	12	12	4	Finance to fully review the risk and determine mitigating actions.
560 Capital Departmental Expenditure Limit	IF the CDEL (Capital Departmental Expenditure Limit) is not sufficient the Trust may not be able to proceed with all planned asset acquisitions (including fleet, estates, medical equipment and ICT) THEN the Trust will need to reprioritise the capital plan and make decisions about which schemes to pursue or abandon, RESULTING in inefficiency leading to increased revenue costs, patient harm if equipment fails or contributes to delayed response, inability to meet performance objectives (e.g. improving Cat 2 performance), and reputational damage.		Finance	Finance	Kathryn Vause	29/06/2023	16	16		Trust has set out capital planning requirements in 23/24 capital plan. Awaiting allocation to determine actions if required.
561 CDEL Lease Notification	IF the CDEL (Capital Departmental Expenditure Limit) is not notified in a timely way THEN the Trust may have already committed to lease agreements and so risk breaching the CDEL, RESULTING in failure to meet the statutory duty to remain within financial limits, increased scrutiny and oversight from NHSE, loss of management controls, requirement to manage CDEL at ICB level (other Trusts may need to scale back their capital plans to offset our overspends), reduction to funding in future years, and reputational damage.	Finance and Performance	Finance	Finance	Kathryn Vause	30/06/2023	16	16	4	Awaiting allocation to determine actions if required.
559 PTS Contracts	IF multiple PTS contracts are required to go through a procurement process and subsequently to tender THEN the contracts may be lost and awarded to outside competitors within the next 12-24 months RESULTING IN significant financial impact by loss of income and associated costs, loss of staff and reputational risk.	Finance and Performance	PTS	PTS	Chris Dexter	27/09/2023	12	12	8	Head of Contracts involved in support of the risk. Awaiting confirmation/guidance as to what is required from the Trust with regards to tender.
1988 - Obligations to furnish police with driver details upon demand	offence under Section 172 of the Boad Troffic Act 1000 DESULTING IN the Chief	People	Finance	Fleet	Jeff Gott	31/08/2023	12	15	4	Currently 1250 vehicles in the Trust with no process/ system to determine who is driving. Finance secured for telematics project to deliver driver ID implementation into vehicles. Unknown timescales for completion.
62 Climate Change	IF Climate Change continues to occur THEN extreme weather events (heatwaves, cold waves, flooding, flash floods, droughts) and sea level rise will occur RESULTING IN multiple implications for the Trust.	Finance and Performance	Finance	Estates and Facilities	Alexis Percival	01/11/2023	15	15	12	Sustainable Development Management Plan. Flood Risk Assessment. Climate Change Adaptation Plan. Assessment of operational and supply-chain business continuity.

			Ris	sk Ownersh	nip		Initial	Current	Target	
Risk ID and Title	Risk Description ('IF THEN RESULTING IN')	Risk Ownership	Directorate	Business Area	Risk Handler	Review Date	Grading	Grading	Grading	Actions / Next Steps: Summary
511 Availability of EFF Funding for Estates	IF there is insufficient capital & revenue funding to maintain, modernise and/or expand the existing estate THEN all services will struggle to operate out of some sites RESULTING IN not being able to effectively deliver services in some localities.	Finance and Performance	Finance	Estates and Facilities	Glenn Adams	s 17/08/2022	15	15	6	Estates strategy to be delivered late 2023, this will outline a proposal for works required and sites to expand or remove. Funding required to be determined as part of this and determine level of risk should this be insufficient.
68 Deep Clean Tablet System	IF the in-house development of the Deep Clean tablet-based monitoring system is not made available THEN the Ancillary Services Team will be required to continue to work in accordance with departmental Business Continuity plan RESULTING IN additional work for the team, increased risk with manual processes to track vehicle Deep Clean schedules and recording of Deep Clean compliance.	Finance and Performance	Finance	Ancillary	Andrew Hunter	02/10/2023	12	12		Work underway with ICT to explore software development and/or procurement of electronic system to mitigate risk of manual process.
290 Fire Doors	IF the fire doors continue to be propped open on ambulance stations THEN in the event of a fire this will be accelerated RESULTING IN potential adverse outcome to premises and staff safety and the Trust at risk of being in contravention of fire safety legislation.		Finance	Estates and Facilities	Stuart Craft	28/04/2023	12	12	6	Options are currently being reviewed including door guards or devices as part of fire alarm system. Funding unavailable currently, therefore staff briefs continue to remind staff fire doors are to remain closed as an immediate measure.
Clinical Capacity NHS 111/IUC	IF the Trust is unable to recruit and retain sufficient clinical staffing capacity THEN there is a risk to the delivery of clinical advice in appropriate timescales RESULTING IN a risk of not being able to deliver NHS 111 First	People	IUC	NHS 111	Andrew Cooke	01/09/2023	12	20	6	Recruitment and retention as part of IUC long term plan including the recruitment of international nurses. Beginning May 23 with 3 nurses, increase throughout the year to reach 15 positions filled.
58 Culture / retention in NHS 111	IF the Trust is unable to address the current cultural issues within the NHS 111 call centres THEN 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.	People	IUC	NHS 111	Andrew Cooke	29/09/2023	12	12	6	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. To continue throughout financial year and monitor impact.
367 Unable to recruit Health Advisors	IF the Trust is unable to recruit Health Advisors as per the Business Plan THEN it will not have sufficient staff to meet the demand RESULTING in low performance and poor patient experience	People	IUC	NHS 111	Andrew Cooke	01/09/2023	8	12	6	Assessments are scheduled monthly inline with business plan. Large attrition, failures and people leaving at around 50% with HA starting. 70/30 split for agency v permanent staff with a plan to retain suitable agency staff after 13 weeks.
I SCK OF AFFACTIVE SECTIONALLY	IF social distancing requirements and staff absence levels continue at the current rate, THEN supervising and supporting staff across a wider estate will become more difficult, RESULTING IN ineffective and untimely supervision and support of staff.	People	IUC	NHS 111	Andrew Cooke	29/09/2023	15	12	6	The position has improved in relation to opportunities presented around estates, room layouts and recruitment of Team Leaders. Ongoing monitoring.
40 Non conveyance decisions	IF there is inadequate structured assessment with unclear decision making and a failure to adhere to Montgomery principles in consenting the patient for discharge with poor safety netting, THEN a discharge or acceptance of refusal decision may be made inappropriately RESULTING IN potential for adverse patient outcome	Quality	Medical	Clinical	Steven Dykes	29/02/2024	15	12	8	Included in new clinical refresher, focussing on assessment and decision making with case studies. To continue monitoring effectiveness as part of the long-term objectives, Further mitigation, in terms of reducing the risk, will be based on the result seen from incidents.

	Risk Description ('IF THEN RESULTING IN')		Ris	k Ownersh				Current	Target	
Risk ID and Title		Risk Ownership	Directorate	Business Area	Risk Handler	Review Date	Grading	Grading	Grading	Actions / Next Steps: Summary
357 Maternity Care	IF YAS Clinicians do not receive adequate maternity training, clinical supervision and support when caring for maternity patients and new born babies THEN maternity patients and new born babies may receive poor quality care RESUTLING IN poor outcomes.	Quality	Medical	Clinical	Steven Dykes	29/02/2024	12	12	4	A maternity plan is in place and part of that is also to produce a 5-year maternity strategy. One of the main elements is PrOMPT (Practical Obstetric Multi-Professional Training). Exploring plans to also become a centre for delivery to delivered as part of an additional one-day clinical training for all clinical staff.
404 Clinical Effectiveness	IF the Head of Clinical Effectiveness function is not filled THEN there is a lack of representation at National Clinical Quality Group and a lack of capacity to develop and maintain the clinical audit plan and respond to the emerging needs of the organisation RESULTING IN an inability to influence the development of relevant clinical quality indicators, an inability to provide assurance to the Board and wider stakeholders on the delivery of safe and effective healthcare and an adverse effect on our ability to continuously improve clinical care.	Quality	Medical	Clinical	Steven Dykes	01/10/2023	12	12	3	Head of Research undertaking part of the role. Portfolio review will determine how all previous duties will be fullfilled.
Health IT Clinical Safety 508 requirement DCB0129 and DCB016	IF Health IT Clinical Safety requirement DCB0129 and DCB0160 is not implemented and resourced sufficiently THEN the Trust will not be compliant which is mandatory under the Health and Social care Act 2012 RESULTING IN Risk to patient safety and non compliance with statutory requirement.	Quality	Medical	Clinical	Steven Dykes	01/10/2023	12	12	4	This is a legal requirement, options are being explored and solutions to be presented to the Trust.
Clinical record data loss - 'process flows' system	IF 'process flows' system used to scan and verity patient paper records is not accurately recording/storing data and does not have continued development by the software provider, THEN there is a risk of clinical data loss and the recording of incorrect information, and a risk to the security of the data as the software becomes more vulnerable to hacking etc RESULTING IN significant impact to clinical audit and information governance requirements with the potential of financial and Trust implications	Quality	Medical	Clinical	Steven Dykes	28/07/2023	12	16	3	System provider initially to find solution with scanning accuracy. Confirmation there will be no solution provided and no further updates and system to become obsolete.
433 EOC workforce capacity	IF there are sustained increases in call volume THEN EOC staff will not be able to allocate resources in a timely manner RESULTING IN delayed response times to emergency calls with potential for harm to patients	People	Operations	ECC	Claire Lindsay	30/09/2023	25	20	4	Plan in place for Q1/Q2 to significantly increase EMD staffing and front load in the year.
EOC Not calling back 436 dropped calls from mobile phone numbers	IF the current call demand continues at the predicted rate and leads to an inability to answer calls THEN the Trust will continue the agreed process of not returning dropped calls from mobile telephone numbers RESULTING IN potential patient harm	Finance and Performance	()narations	EOC	Claire Lindsay	30/09/2023	15	15	5	Process in place and is dependent on demand and staffing. Plan in place for Q1/Q2 to significantly increase EMD staffing that will contribute to likelihood of risk occurrence.
No triage system to triage calls for call handlers and clinicians in the event of a cyber attack	IF there was a cyber attack resulting in EOC losing access to systems due to ICT taking all systems down THEN EOC would have to rely on paper management but would not allow full triage and assignment of categories to calls or triage of calls by clinicians (due to the complexities of the triage systems and usually using a stand alone triage system) RESULTING IN an inability to triage patients effectively which could potentially lead to patient harm.	Finance and Performance	Operations	EOC	Claire Lindsay	14/08/2023	15	15	5	ICT to explore alternate options as part of risk mitigation. BC plan to include paper based approach, cards to be updated and rolled out. Unknown timeframe.
	IF EOC staff continue to duplicate jobs without sufficient checks to ensure they are true duplicates THEN there is a risk calls may be closed inappropriately meaning patients may be awaiting an ambulance response which has now been closed on the CAD system, RESULTING in increased exposure to patients and potential harm	Finance and Performance	Operations	EOC	Claire Lindsay	31/08/2023	15	15	5	Long term mitigation includes CAD function that will provide a system solution to all duplicate calls.

	Risk Description ('IF THEN RESULTING IN')		Ris	k Ownersh			Initial	Current	Target	Actions / Next Steps: Summary
Risk ID and Title		Risk Ownership	Directorate	Business Area	Risk Handler	Review Date	Grading	Grading	Grading	
35 Hospital handover monitoring	IF there are hospital handover delays THEN ambulance crews will be unavailable to respond to emergency calls RESULTING IN delayed response times to emergency calls with potential for harm to patients	Finance and Performance	Operations	A&E Ops	Jackie Cole	30/11/2023	16	25	4	Post Handover Delays workstream as part of 23/24 Business Plan. Ongoing monitoring of the risk as part of the delivery.
105 Operational performance	IF there is an increase in demand across the A&E Operations service THEN there may be excessive response times RESULTING IN a potential risk to patient safety	Finance and Performance	Operations	A&E Ops	Jackie Cole	31/07/2023	16	12	5	Workstreams linked to Hear and Treat, additional staffing and increasing clinicians in EOC contribute to reducing the likelihood of risk occurrence.
406 Medicines Checks	IF clinicians do not check medicines pouches at the start of shift THEN life-saving medicines may not be available at the point of need RESULTING IN compromised patient care including harm to patients and potential fatalities.	Quality	Operations	A&E Ops	Jackie Cole	30/09/2023	15	15	5	Work underway within operations to determine gaps and improvements required. Further mitigations to be determined.
471 Operational Compliance - Road Traffic Act (RTA)	IF A&E Operations do not implement protocols/measures to achieve RTA compliance THEN A&E Crews not following these guidelines maybe in breach of the RTA introduced in 2018 RESULTING IN Financial impact and reputational damage	Finance and Performance	Operations	A&E Ops	Jackie Cole	31/10/2023	16	12	4	Rollout of MDVS across patch expected completion October. South and West complete therefore likelihood of risk occurrence lowered.
180 A&E Operations Staffing Resource	IF the budgeted number of FTE is not able to be achieved through recruitment THEN there will be a significant shortfall in available resource hours to respond to patients RESULTING IN reduced response times to incidents.	People	Operations	A&E Ops	Jackie Cole	31/10/2023	20	12	6	Recruitment plan in place, achieving good levels. Likelihood of risk occurrence reducted.
Right Care, Right Person: Demand	IF police forces do not implement Right Care Right Person operational models in an appropriate and proportionate manner THEN significant volumes of inappropriate calls could be directed by the police to the Trust RESULTING IN additional and often inappropriate demand on the Emergency Operations Centre and on ambulance crews	Finance and Performance		A&E Ops	Jackie Cole	31/10/2023	12	12	3	Working group to develop the mitigations.
421 Computer Aided Dispatch Issue	IF the CAD does not contain up to date information regarding SORT trained staff THEN EOC may dispatch staff who are not adequately trained or available to respond to an incident in a SORT capacity RESULTING IN a direct impact on the organisations ability to release and make available within 10 minutes of PLATO being declared in line with core standards, and also a delay in the mobilisation of SORT staff to a CBRN/HAZMAT incident	Finance and Performance	Operations	A&E Ops	Jackie Cole	31/10/2023	20	12	1	A&E Ops to update RAG. Description changed to only include SORT and not AIT.
338 Initial Operational Response (IOR) Training	IF IOR training is not undertaken by >/=95% of operational and call-handling staff THEN YAS will be non-compliant with Standard B:13 RESULTING IN a lack of awareness of the appropriate initial action to be taken in the event of a chemical incident.	People	Operations	A&E Ops	Jackie Cole	31/10/2023	12	12	1	New package from NARU. To update YAS package in response. Compliance will then be at 0% upon go live.
Out of area calls - Isle of Wight	IF out of area calls come in for the Isle of Wight THEN the system may not prompt to pass to that ambulance service RESULTING IN delay in response and potential patient harm	Finance and Performance	Operations	A&E Ops	Jackie Cole	30/09/2023	12	12	4	National solution being sought however unknown timescale.

			Ris	sk Ownersh	jp		Initial	Current	Target	
Risk ID and Title	Risk Description ('IF THEN RESULTING IN')	Risk Ownership	Directorate	Business Area	Risk Handler	Review Date	Grading	Grading	Grading	Actions / Next Steps: Summary
546 Radio Recordings	IF radio communications are not recorded or are intermittent THEN means we are unable to evidence what has / hasn't happened through audit RESULTING IN noncompliance with audits and damage to Trust reputation	Finance and Performance	Operations	A&E Ops	Jackie Cole	13/10/2023	12	12	3	ICT solution required and made aware. Mitigating actions yet to be determined.
548 Resilience of Tactical Command Rota	IF tactical commanders cannot arrive a major incident in reasonable time THEN there will not be an adequate command structure in place RESULTING in reputational damage, patient harm and risk to staff safety.	Finance and Performance	()narations	A&E Ops	Jackie Cole	e 30/09/223	12	12	4	Review of how TC is identified and mobilised, review alongside national guidance and the Manchester Arena reccomendations.
549 C1 Driver training for recruits	IF there is a delay to candidates getting their C1 provisional license THEN they cannot be booked onto a clinical training course and start employment with YAS RESULTING in not delivering the required staffing levels for A&E Operations this year (2023/24) which in turn will contribute to delayed response times for patients.	Finance and Performance	Operations	A&E Ops	Jackie Cole	e 30/09/2023	16	16	4	Delays in process are meaning delays in start dates and clinical training. Risk to achieving rectruiment trajectory for the Trust. DVLA liason underway.
555 Major Incident Capability	IF YAS do not ensure a sufficient capability to a major incident across the region, THEN there is potential for an inadequate response to a Major incident, RESULTING IN potential for the risk of further harm/death of the patients, failure to comply with the EPRR core standards and statutory requirements within the Civil Contingencies Act 2004 for all category 1 and 2 responders and significant damage to the reputation of the Trust.	People	Operations	A&E Ops	Jackie Cole	e 30/09/2023	15	15	-5	Review of current capability underway, identify gaps and propose uplift in resources.
556 Major Incident Exercising	IF YAS do not exercise specialist and non specialist staff on the response to a major incident, THEN there is potential for an inadequate response, RESULTING IN potential for the risk of further harm/death of the patients, failure to comply with the EPRR core standards and statutory requirements within the Civil Contingencies Act 2004 for all category 1 and 2 responders and significant damage to the reputation of the Trust.	People	Operations	A&E Ops	Jackie Cole	30/11/2023	12	12	3	Recomendations from the MAN enquiry report to exercise specialist and non-specialist staff. Trust to explore options and course of action moving forwards.
Continuous Improvement (Incidents & Exercises)	IF YAS do not ensure that lessons identified from live incidents and exercises are not captured and embedded, THEN there is potential for failure to make service improvements, RESULTING IN potential for the risk of avoidable harm/death of patients, failure to comply with the EPRR core standards and statutory requirements within the Civil Contingencies Act 2004 for all category 1 and 2 responders, recommendations from within the MAI report, increased financial costs and significant damage to the reputation of the Trust	People	Operations	A&E Ops	Jackie Cole	e 18/10/2023	12	12	6	Gaps in identifying and implementing lessons learned. Lead for continous improvement for EPRR currently building a system 'Lesson Flow' to record and implement actions. Review of debrief process as a Trust also underway.
Facilities at Manor Mill for the 360 Hazardous Area Response	IF there continues to be a lack of storage facility and room availability at Manor Mille for the Hazardous Area Response Team, THEN personal protective equipment will continue to be stored in the garage area and some capabilities will be unable to be delivered RESULTING IN a lack of national compliance against the NARU standards.	Finance and	INOCTOTIONS	A&E Ops	Jackie Cole	9 08/01/2024	9	12	3	Recorded 2021, recently escalated due to team size increase and therefore likelihood. Ongoing work with Estates to determine long term solution.
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 THEN the Trust will not be complaint with Data Protection regulations RESULTING IN 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.	Quality	QGPA	Performance Assurance and Risk		s 31/10/2023	12	12	4	Reviewing alternate suppliers to reduce costs for records management.

	Risk Description ('IF THEN RESULTING IN')	Risk Ownership						Current	Target	
Risk ID and Title		Risk Ownership	Directorate	Business Area	Risk Handler	Review Date	Grading	Grading	Grading	Actions / Next Steps: Summary
42 Violence and aggression	IF YAS fails to be compliant according to the Violence Reduction Standard which provides individual key areas of violence reduction work THEN there is a potential for staff to be seriously injured whilst at work RESULTING IN the potential for physical harm, financial loss, decreasing morale and subsequently wellbeing from an organisational support perspective and organisational reputational risks, which will lead to loss of service provision.	Quality	QGPA	Performance Assurance and Risk	Kate Lawrance	07/11/2023	12	12		Violence Reduction Standard gaps being addressed. Strategy and Policy underway to address multiple gaps identified.
Joint Decision Model (JDM) training in EOC	IF the JDM training is not provided to Dispatch Leaders and Duty Managers within the EOC in a practical timeframe THEN frontline staff are going to feel pressurised to attend locations/ situations that they have dynamically risk assessed as being too much of a safety risk RESULTING IN poor communication between both parties, decrease in morale on both sides and potential for staff to be placed at significant risk of harm.	Quality	QGPA	Performance Assurance and Risk	Kate Lawrance	04/10/2023	12	12	4	JDM training within EOC commenced. Long term solution for new staff to be determined.
187 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	30/09/2023	12	15	2	Partnership working with Health and Safety Executive and National Ambulance Risk and Safety Forum on reduction of MSK injuries. Moving and Handling SME recruitment underway.
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	30/09/2023	12	12		Mitigation to include Trust training however funding unavailable. Risk assessment underway alongside Senior Management Training risk.
347 Attending Incidents on or near Water	IF the Trust does not provide adequate knowledge or training to support staff on or near water working THEN there is a potential for harm to patients and/or staff RESULTING in adverse patient outcome.	Quality	QGPA	Health and Safety	Shelley Jackson	30/09/2023	9	15		Work underway with resillience regarding the JOL action. Joint working group in place with Police and Fire Service to draft elearning.
195 Senior Management H&S	IF the Trust's senior management do not receive up to date health and safety training, THEN the Trust will be non-compliant with the requirements contained in the Management of Health and Safety at Work Regulations 1999, Regulation 13 which states that "health and safety training shall be repeated periodically where appropriate" RESULTING IN senior managers not having up to date health and safety knowledge at their disposal when making senior level decisions.	Quality	QGPA	Health and Safety	Shelley Jackson	01/10/2023	3	12	2	Recorded initially 2020. Over 6 years since TEG, TMG and TB received any formal H&S training. Exploration of IOSH accredited training to be delivered, timeframe unknown.
Resource provided to Trust 527 management of serious incidents	IF the Trust do not manage existing backlog of serious incidents and continue declaring them at current levels THEN the serious incident team and wider Trust capacity to support the investigations and responses will see further delays RESULTING IN failure to meet statutory requirements for serious incident management (SIF2015), increased involvement in complaint handling by external bodies (Media, CQC, Integrated Commissioning Boards, His Majesty's Coroner) therefore risk to reputational damage, financial risk associated with fines and penalties and increased workloads Trust wide. Additionally - delay and backlog hinders the identification of learning further impacting patient safety and impacts on the patient experience for families who are involved in the processes.	Quality	QGPA	Investigations & Learning	Dave Green Simon Davies	31/08/2023	16	16	4	Continous backlog of incidents. Recruitment of investigators to reduce this over Q1/Q2. New national framework (Autumn) expected to influence current backlog.
Domestic Abuse – response	IF the Trust response to domestic abuse is not reviewed to reflect the Domestic Abuse Bill 2021 and to incorporate the learning identified from internal and external review and audit, THEN YAS will be failing in its statutory duty to identify and support victims and perpetrators of domestic abuse. RESULTING IN ongoing patient harm and potential death due to lack of intervention and information sharing. For staff this will result in ongoing harm, potential death, being subject to punitive disciplinary and	Quality	QGPA	Safeguarding	Vicky Maxwell-	29/09/2023	15	15		Working group established, policy and training to be reviewed as part of mitigation of the risk. Specialist Domestic Abuse position funding secured for an 18

	Risk Description ('IF THEN RESULTING IN')	Risk Ownership Initial Current								
Risk ID and Title		Risk Ownership	Directorate	Business Area	Risk Handler	Review Date	Grading	Grading	Grading	Actions / Next Steps: Summary
	absence management processes instead of being supported to be safe in the workplace. Furthermore there is a financial impact/business continuity concern for the trust due to staff absence, poor performance in work, attrition for victims of domestic abuse.				HODSON					month project. JD to be determined and rectuitment to commence. Unknown timeline.
Capacity within the 447 Safeguarding team to deliver	IF the capacity of the safeguarding team remains as it is and if the increased service demand around statutory reviews, child deaths and social care enquiries for section 42 and section 47 remains THEN potential failure to meet these requirements will exist, RESULTING IN the Trust being unable to give assurance that it is meeting its statutory safeguarding obligations as a provider Trust, and will result in a delay in providing information and professional analysis and opinion to multi agency partners, with potential implications for patient safety and staff wellbeing	Quality	QGPA	Safeguarding	Vicky Maxwell- Hobson	05/12/2023	12	20	4	Sharp and consistent increase in safeguarding allegations in particularly around sexual misconduct has dramatically increased the need for safeguarding subject matter expertise and has created further pressure in respect of appropriately skilled staff.
	IF the management of safeguarding allegations against staff is inconsistent due to a lack of a standardised process THEN potential failure to identify and escalate incidents and concerns may exist RESULTING IN the Trust being unable to give assurance to the CCG and CQC that it is meeting its statutory obligations as a provider Trust, and delay in making timely risk assessments and action plans which will affect the safety of staff and patients.	Quality	QGPA	Safeguarding	Vicky Maxwell- Hobson	15/09/2023	12	16	6	Audit highlighted gaps and actions. Work underway to complete actions.
Child Protection Information	IF CP-IS system checking is not triggered at the point at which a child or pregnant woman accesses YAS via 999. THEN a timely alert will not be sent to the local authority who are managing the care plan nor will YAS be able to use this information to enhance their safeguarding assessment RESULTING IN increased risk for vulnerable unborns, children and young people.	Quality	QGPA	Safeguarding	Vicky Maxwell- Hobson	29/09/2023	9	16		System update expected 'summer'. Practitioners to continue manual searches in the interim.
Non-Covid YAS Sickness Absence	IF Non-Covid related sickness absence continues to rise and is not accurately recorded, managed and reported THEN the Trust may not fully understand interventions required and adequality plan the workforce to meet the demand RESULTING IN impact on service delivery.	People	Workforce and OD	Human Resources	Suzanne Hartshorne	31/10/2023	12	12	4	Operational efficiency sub-group in place to monitor project and absence.
	IF YAS staff are not comprehensively screened and immunised by OH THEN they may contract and spread infectious diseases RESULTING IN potential harm to staff and patients	People	Workforce and OD	Human Resources	Dawn Adam	s 01/10/2023	12	12	4	Work underway between Trust and Optima to contact outstanding staff members. Line manager engagement underway and legal advice sought regarding contractual obligations.
541 (Payment to substantive staff	IF a manual solution cannot be found to pay 250 substantive staff undertaking overtime on bank assignments THEN there is a risk of claims against the Trust for unlawful deduction of wages RESULTING in legal costs and reputational damage	People	Workforce and OD	Human Resources	Suzanne Hartshorne	31/12/2023	12	12	6	Initial payment made to bank staff in April pay. Longterm solution still required and agreement to be made with Unions regarding future payment dates.
567 Executive Team stability	IF the Trust does not recruit substantively to longstanding vacancies within the Executive Team, THEN the Trust may not have a stable senior leadership team RESULTING in potential criticism from the CQC under the Well-Led Domain.	People	Workforce and OD	Human Resources	Suzanne Hartshorne	31/12/2023	12	12	4	To be addressed as part of the Trust re-structure.