



Report Title	Corporate Risk: Quarterly Report	
Author	David O'Brien, Director of Corporate Services and Company Secretary Levi MacInnes, Risk and Assurance Manager	
Accountable Director	David O'Brien, Director of Corporate Services and Company Secretary	
Previous committees/groups	Risk and Assurance Group: February, March and April 2025 Trust Executive Group, 07 May 2025 Assurance and Risk Committee, 29 April 2025	
Recommended action(s)	Assurance	
Purpose of the paper	To provide a quarterly update on material changes to corporate risks during 2024/25 Q4.	
Executive Summary		
<p><b>1. Three new corporate risks have been opened:</b></p> <ul style="list-style-type: none"><li>• Risk 677: Exporting to PDF of CAD incident logs (15, High Risk). This risk is now closed following mitigation.</li><li>• Risk 678: Trade Union engagement with workforce policies (12, Moderate Risk)</li><li>• Risk 633: Fleet Availability – North and East (16, High Risk)</li></ul> <p><b>2. One corporate risk has been escalated:</b></p> <ul style="list-style-type: none"><li>• Risk 669: Associate Ambulance Practitioner (AAP) Apprentices past planned end date (PPED) (escalated from 12 to 16).</li></ul> <p><b>3. Seven corporate risks have been de-escalated and a further three have been closed.</b></p> <ul style="list-style-type: none"><li>• Details of these are in the report</li></ul> <p><b>4. Two areas of emerging risk are reported:</b></p> <ol style="list-style-type: none"><li>1. Electric Vehicle (EV) charging points.</li><li>2. Intelligent Routing Platform (IRP) loss of central funding.</li></ol>		
Recommendation(s)	The Board of Directors notes the position regarding corporate risks and identifies any areas for further information and assurance	
Link to Board Assurance Framework Risks (board and level 2 committees only)	All BAF strategic risks	

**Board of Directors (in Public)**  
**22 May 2025**  
**Corporate Risk: Quarterly Report**

**1. PURPOSE**

- 1.1 This paper provides assurance to the Board of Directors regarding developments in corporate risk during the 2024/25 Q4. The report focuses on:
- Material changes to risks captured in the Corporate Risk Register
  - Areas of emerging risk.
- 1.2 This risk report is prepared as part of the quarterly cycle of risk assurance for the Trust Board, the Board assurance committees, and the Audit and Risk Committee.

**2. CONTEXT**

- 2.1 Risk is inherent in all Trust activities. Risk management is everybody's business. Failure to manage risk well could lead to harm to patients, staff or others, loss or damage to the Trust's reputation and assets, financial loss, and potential for complaints, litigation, and adverse publicity. Effective risk management is essential at all levels and across all activities of the organisation to support safe and high-quality service delivery and pro-active planning for Trust development.
- 2.2 An important element of the Trust's risk management arrangements is regular reporting to governance bodies and management groups, including the Board and its committees, of current corporate risks, changes in corporate risk exposures, and areas of emerging corporate risk.

**3. CORPORATE RISKS**

- 3.1 The Corporate Risk Register is reviewed by the Risk and Assurance Group (RAG) monthly. It comprises all risks that have a current risk score of **12 or above** (based on the criteria found in the Trust's risk evaluation matrix). The Corporate Risk Register for April 2025 is issued separately as supporting material for this meeting.
- 3.2 The greatest corporate risk is as follows:
- Risk 623: Hospital Handover (South) – 25 (high risk)

Note that this risk has been reviewed by the service area and recommended for reduction to a score of '20'. This recommendation was endorsed by the Risk and Assurance Group at its meeting held on 12 May 2025. This will be reported to TEG for confirmation, and is referenced here as a provisional reduction.

## **NEW CORPORATE RISKS**

- 3.2 During 2024/25 Q4 three new corporate risks were opened. However, one of these, Risk 677 concerning Computer Aided Dispatch (CAD) incident logs, was subsequently mitigated and closed:
- Risk 677: Exporting of CAD incident logs (15, High Risk) [since closed]
  - Risk 678: Trade Union engagement with workforce policies (12, Moderate Risk)
  - Risk 633: Fleet Availability – North and East (16, High Risk)
- 3.4 **Appendix A** presents more detailed information about these risks.

## **CORPORATE RISKS THAT HAVE BEEN ESCALATED ON THE CORPORATE RISK REGISTER**

- 3.5 One existing corporate risk has been increased:
- Risk 669: Associate Ambulance Practitioner (AAP) apprentices passed planned end date (increased from 12 to 16).
- 3.6 **Appendix B** presents more detailed information about this risk.

## **RISKS REDUCED BUT REMAINING ON THE CORPORATE RISK REGISTER**

- 3.7 Two risks have been reduced in score but remain on the Corporate Risk Register:
- Risk 602: Hospital Handover - North and East (reduced from 25 to 20).
  - Risk 603: Operational Performance – North and East (reduced from 20 to 16).
- 3.8 **Appendix C** presents more detailed information about the above risks.

## **RISKS DE-ESCALATED FROM THE CORPORATE RISK REGISTER**

- 3.9 Seven risks have been de-escalated from the Corporate Risk Register. These remain open and will be managed via local risk registers:
- Risk 564: Right Care Right Person (reduced from 12 to 8).
  - Risk 666: Delayed ICB approval of Patient Transport Service eligibility criteria (reduced from 15 to 10).
  - Risk 54: Clinical Capacity NHS 111/IUC (reduced from 16 to 8).
  - Risk 367: Health Advisor Recruitment - IUC/NHS111 (reduced from 12 to 8).
  - Risk 432: 4C and PALS Demand (reduced from 16 to 8).
  - Risk 591: Finance Team Resources (reduced from 16 to 9).
  - Risk 619: Adhering to medicines processes – North and East (reduced from 15 to 10).

3.10 **Appendix D** presents more detailed information about these risks.

## **CLOSED RISKS**

3.11 Three corporate risks have been closed:

- Risk 538: Clinical record data loss – ‘process flows’ system
- Risk 673: Removing Non-Essential PTS SC Activity in Humber and North Yorkshire
- Risk 677: Exporting of CAD incident logs.

3.12 **Appendix E** presents more detailed information about these closed risks.

## **EMERGING RISKS**

3.13 The following areas of emerging risk have been identified:

### 1. Electric Vehicle (EV) charging points

An emerging risk has been identified with regards to EV charging points across the Trust. Whilst the Trust has adequate capacity currently available for existing fleet, there is a potential risk that as the EV fleet increases in line with sustainability requirements we will not be able to adequately charge the fleet. An assessment is underway by Estates and Fleet to determine expected numbers of fleet and the plan for increasing charging facilities.

### 2. Intelligent Routing Platform (IRP) central funding

The intelligent routing platform is used across the ambulance sector to ensure that during periods of heightened demand calls are re-routed to an alternative ambulance service to handle calls. This is a control to manage the risk of failure to answer 999 calls in a timely manner.

This platform is currently centrally funded (NHS England) however the funding is expected to be discontinued during 2025/2026. Absence of the IRP is likely to create delays to call handling and response times during periods of high demand. This presents risks to patient safety and patient experience.

This emergent risk has now been opened as a new corporate risk. The initial score for this risk was moderated by Risk and Assurance Group on 12 May: it has been opened as a ‘15’ (high risk). This will be reported to TEG for confirmation.

## **4. FINANCIAL IMPLICATIONS**

- 4.1 This report has no direct financial implications.

## **5. RISK**

- 5.1 Failure to identify and manage strategic risks in a timely and appropriate manner could prevent the Trust from achieving its strategic objectives.
- 5.2 Failure to identify and manage operational risks in a timely and appropriate manner could prevent service lines and support functions from achieving their objectives.
- 5.3 Failure to demonstrate suitably robust and effective risk management arrangements could have an adverse impact on the Trust's reputation and could attract regulatory attention.

## **6. RECOMMENDATIONS**

- 6.1 The Board of Directors is asked to note the current position regarding corporate risks and to identify any areas for further information or assurance.

## **SUPPORTING INFORMATION**

### **In this report**

**Appendix A:** New Corporate Risks

**Appendix B:** Corporate Risks that have escalated in score.

**Appendix C:** Corporate Risks that have reduced in score but remain as Corporate Risks

**Appendix D:** De-escalated Corporate Risks

**Appendix E:** Closed Corporate Risks

### **Circulated for Information**

**Non-Operations Corporate Risk Register**

**Operations Corporate Risk Register**

**David O'Brien**

Director of Corporate Services and Company Secretary

**Levi MacInnes**

Risk and Assurance Manager

May 2025

## APPENDIX A: NEW CORPORATE RISKS

NEW CORPORATE RISK 1		
Reference	Risk 677	
Title	Exporting of incident logs from the Computer Aided Dispatch (CAD) system	
Committee	Quality Committee	
Directorate	Chief Executive Services	
Business Area	Legal Services	
Risk Owner	Benjamin Cowell	
BAF Links	10: Act as a collaborative, integral, and influential system partner.	
Context	<p>This risk was raised in March as the sequence of events from the Computer Aided Dispatch system was unable to be downloaded. This was impacting adversely on the ability of the Trust to provide internal and external stakeholders (for instance, police and coroners) with timely information as evidence for investigations and court proceedings.</p> <p>A solution was subsequently identified and the risk was terminated</p>	
Opening Score		Current Score
15 (Moderate Risk)		Closed
		Target Score
		3 (Low Risk)
FULL RISK DESCRIPTION		
WHAT	If...	The incumbent errors which prevent the exporting to PDF of Computer Aided Dispatch (CAD) incident logs continue
	Then...	Requests for disclosure from Legal Services will begin to stockpile and urgent disclosures to HM Coroner and the police will be prevented
SO WHAT	Resulting in...	Potential regulatory / statutory action being brought against YAS, along with reputational matters.
WHAT NEXT	Key Mitigation Actions	ICT identified a solution, and the issue is now resolved.

NEW CORPORATE RISK 2		
Reference	Risk 678	
Title	Trade Union engagement with workforce policies	
Committee	People and Culture Committee	
Directorate	People and Organisational Development	
Business Area	People and Organisational Development	
Risk Owner	Suzanne Hartshorne, Deputy Director of People and Organisational Development	
BAF Links	6: Develop and sustain an open and positive workplace culture 7: Support staff health and well-being effectively	
Context	<p>Trade unions have declined to participate in workforce policy discussions and the review / development of policies are paused.</p> <p>Policy approvals via the Clinical Governance and Strategic Health and Safety continues with support of Trade Unions.</p>	
Opening Score		Current Score
12 (Moderate Risk)		3 (Low Risk)
FULL RISK DESCRIPTION		
WHAT	If...	The Trust fails to resolve a dispute with the trade unions
	Then...	Workforce policies will not be approved or developed in partnership
SO WHAT	Resulting in...	Workforce policies potentially being non-compliant and/or causing operational issues.
WHAT NEXT	Key Mitigation Actions	Issue escalated to Senior Executive Level and ongoing communications with Trade Unions underway.

NEW CORPORATE RISK 3		
Reference	Risk 633	
Title	Fleet Availability – North and East	
Committee	Finance and Performance	
Directorate	Operations	
Business Area	Operations – North & East	
Risk Owner	Jeevan Gill, Director of Partnerships and Operations (H&EY)	
BAF Links	1: Deliver a timely response to patients	
Context	The risk had previously been recorded on the local register and was graded as 9 (moderate). This risk has since been escalated as fleet availability in North and East deteriorated during the period January to March. On-day vehicle availability dropped below 75% throughout February and long/complex Vehicle Off Road cases are continuing to impact availability.	
Opening Score	Current Score	Target Score
9 (Moderate Risk)	16 (High Risk)	5 (Low Risk)
FULL RISK DESCRIPTION		
WHAT	If...	There are not enough ambulance resources available to transport patients to ED,
	Then...	There will be delays in patients receiving definitive treatment
SO WHAT	Resulting in...	Delayed response and potential harm to patient.
WHAT NEXT	Key Mitigation Actions	Ongoing work with fleet to support availability. Expecting five new vehicles to be delivered within area to increase fleet numbers.



## APPENDIX B: EXISTING CORPORATE RISKS THAT HAVE BEEN ESCALATED TO A HIGHER SCORE

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
669	Associate Ambulance Practitioner (AAP) Apprentices past the planned end date (PPED).	People and OD	IF the percentage of AAP Apprentices going past their planned end date remains above 15%,  THEN the Trust will remain non-compliant with the Education and Skills Funding Agency (ESFA)	RESULTING IN reclaimed levy payments and inability to register further apprentices	12	16	The percentage of staff now past the planned end date has increased to around 30%.	Appetite/Target:	4
								Working group established to determine long-term actions to reduce the percentage outstanding.	

## APPENDIX C: CORPORATE RISKS THAT HAVE REDUCED BUT REMAIN ON THE CORPORATE RISK REGISTER

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
602	Hospital Handover: North and East	Ops – N&E	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	25	20	Significant improvements seen following the implementation of Transfer of Care (ToC) protocols at Hull Royal Infirmary  York and Scarborough still seeing delays impacting overall H&E area and therefore risk remains high.	Appetite/Target:	6
								York has also introduced ToC and expects this to also make an impact. However, this is still new and are yet to determine impact. This will possibly reduce the risk further.  Note that ToC implementation is not wholly in the control of YAS and this has implications for residual risk exposures.	
603	Operational Performance: North and East	Ops – N&E	IF there is an increase in demand/Acuity split across the A&E Operations service  THEN there may be excessive response times	RESULTING IN a potential risk to patient safety	20	16	Improvements in demand and response seen as winter pressures reduced.  The introduction of Transfer of Care (ToC) has contributed to reduced handover delays and improved response times.	Appetite/Target:	6
								Ongoing implementation of ToC across N&E to be monitored.  Note that ToC implementation is not wholly in the control of YAS and this has implications for residual risk exposures	

## APPENDIX D: RISKS THAT HAVE BEEN DE-ESCALATED FROM THE CORPORATE RISK REGISTER

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
564	Right Care Right Person	A&E Ops	<p>IF Police forces fail to work collaboratively with the Trust to implement the Right Care Right Person operational model in a proportionate and sustainable way</p> <p>THEN Police forces fail to work collaboratively with the Trust to implement the Right Care Right Person operational model in a proportionate and sustainable way</p>	<p>RESULTING IN Increased demand on EOC, IUC and operational crews.</p> <p>Increased potential for physical or psychological harm to Trust staff.</p> <p>Reputational risk arising from the Trust being involved in a disproportionate number of Coroners' investigations.</p>	12	8	<p>No incidents reported for number of months therefore likelihood reduced.</p> <p>Trust approval of updated question set, and proposal of welfare calls through card 32 now live and data analysis of outcomes identified further improvements.</p>	Appetite/Target	3
666	Delayed ICB approval of PTS eligibility criteria	PTS	<p>IF local decision-making processes around the implementation of NHS England's revised eligibility criteria for non-emergency patient transport services are not aligned across the three ICBs (NHS Humber and North Yorkshire ICB, NHS West Yorkshire ICB and NHS South Yorkshire ICB)</p> <p>THEN there may be a delay to full implementation of the criteria which will mean that the number of non-eligible patient journey will not reduce as planned</p>	<p>RESULTING IN a failure to achieve the anticipated in-year efficiencies for financial year 2025-26.</p>	15	10	<p>Each ICB has agreed and approved a project mobilisation date of 01/04/2025.</p> <p>Plan presented to TEG and now approved.</p>	Appetite/Target	5

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
367	Health Advisor Recruitment - IUC/NHS111	Remote Care / IUC	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	12	8	Attrition showing signs of improvement and are currently on track for overall headcount requirements.  Further reductions in use of agency staff also contributing to risk de-escalation.	Appetite/Target	6
								The risk will be managed via the local risk register to review the efficacy of measures.	
432	4C and PALS Demand	Patient Relations	IF the Trust do not manage existing incoming demand of 4C and PALS enquiries and continue receiving them at current levels  THEN the patient relations and wider Trust capacity to support the investigations and responses will see further delays	RESULTING IN failing to meet statutory requirements for responses, increased involvement in complaint handling by external bodies (media, CQC, MP's, HCPC & PHSO) therefore risk to reputational damage, financial risk, and increased workloads Trust wide. Additionally not dealing with cases delays the identification of issues and learning further impacting patient safety.	16	8	Patient Relations Manager now in post and caseloads continue to decrease. Overall caseload remains static for last 3 months at around 300 cases.	Appetite/Target:	4
								Ongoing monitoring of caseloads.  Complaint response times in the 25/26 business plan priorities and therefore further actions to improve risk.	

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
591	Finance Team Resources	Finance	<p>IF the Finance team are unable to recruit substantively to all vacant posts</p> <p>THEN the team will be unable to undertake the appropriate activities to ensure sound financial governance</p>	<p>RESULTING IN inability to meet statutory and internal reporting deadlines, inability to produce accurate and timely information e.g. payroll processing, internal reports and year end accounts, failure to meet statutory financial duties, qualification of audited accounts, reputational damage.</p>	16	9	Successful recruitment to four posts increasing the resources and therefore capacity.	Appetite/Target	4
								Recruitment to continue for outstanding vacancies.	
619	North and East - Adhering to medicines processes	Ops – N&E	<p>IF clinicians do not adhere to the POM pouch process at the start and end of shift and undertake three monthly POM audits</p> <p>THEN life-saving medicines may not be available at the point of need</p>	<p>RESULTING IN compromised patient care including harm to patients and potential fatalities.</p>	15	10	App rolled out and an increase in compliance achieved. Risk likelihood therefore decreased.	Appetite/Target	4
								Ongoing monitoring of compliance with a view to reduce the risk further.	

## APPENDIX E: CORPORATE RISKS THAT HAVE BEEN CLOSED

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
538	Clinical record data loss - 'process flows' system.	Clinical	<p>IF the 'process flows' system used to scan and verify patient paper records is not accurately recording/storing data, does not have continued development by the software provider.</p> <p>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</p>	RESULTING IN significant impact to clinical audit and information governance requirements with the potential of financial and Trust implications	12	3>	<p>New contract established September 2024.</p> <p>The new software and scanning solution are now in place and old software decommissioned. Risk therefore mitigated.</p>	Appetite/Target	3
673	Removing Non-Essential PTS SC Activity in Humber and North Yorkshire	PTS	<p>IF journeys are withdrawn for all patients who would normally be eligible to travel with us via standard car (SC), and who are not travelling to essential clinics,</p> <p>THEN patients, carers, NHS Acute Trusts and other stakeholders are likely to be highly dissatisfied as some patients may be unwilling or unable to attend their appointments by other means and this could be viewed as impacting on a patient's care.</p>	RESULTING IN an increased number of complaints received, the potential for media interest, and a significant reputational risk for the Trust.	15	5>	The withdrawal of eligible standard car journeys is no longer being considered for implementation. Risk is therefore terminated.	Appetite/Target	5

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
677	Exporting of CAD incident logs	Legal Services	IF The incumbent errors which prevent the exporting to PDF of Computer Aided Dispatch (CAD) incident logs continue,  THEN Requests for disclosure within the three portfolios within Legal Services will begin to stockpile and urgent disclosures to HM Coroner and the police will be prevented	RESULTING IN Potential regulatory / statutory action being brought against YAS, along with reputational matters.	15	3>	Solution found, therefore risk terminated.	Appetite/Target	3
								Risk Closed	