NHS
Yorkshire
Ambulance Service
NHS Trust

Report Title	Corporate Risk: Quarterly Report
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Accountable Director	David O'Brien, Director of Corporate Services and Company Secretary
Previous committees/groups	Risk and Assurance Group (RAG): May, June, and July 2025 Trust Executive Group: 16 July 2025 Audit and Risk Committee: 22 July 2025 Board assurance committees: May, June, and July 2025
Recommended action(s)	The Board of Directors receives the report for assurance and identifies any areas that require further assurance
Purpose of the paper	To provide a quarterly update on material changes to corporate risks during 2025/26 Q1
Executive Summary	

1. Four new corporate risks have been opened:

- Risk 687: National Intelligent Routing Platform (15, High Risk)
- Risk 689: National Risk Register capability requirements and response (15, High Risk)
- Risk 688: West - Bradford Cat 2 90th Performance (12, Moderate Risk).
- Risk 579: National HART training courses (12, Moderate Risk)

2. Five risks have reduced in score but remain on the corporate risk register:

- Risk 623: Hospital Handover: South (reduced from 25 to 20).
- Risk 602: Hospital Handover: North and East (reduced from 20 to 12).
- Risk 616: Operational Performance: West (reduced from 15 to 12).
- Risk 603: Operational Performance: North and East (reduced from 16 to 12).
- Risk 626: Tactical Command Response: South (reduced from 16 to 12).

3. Three risks have been de-escalated from the corporate risk register:

- Risk 58: Retention of Staff in IUC/NHS111 (reduced from 12 to 8).
- Risk 678: Trade Union Engagement with Workforce Policies (reduced from 12 to 9).
- Risk 522: Trust Better Payment Practice Code Performance (reduced from 12 to 9)

4. Two risks have been closed:

- Risk 500: Triage system availability in the event of a cyber attack
- Risk 545: Out of Area Calls - Isle of Wight

The corporate risk registers for July 2025 are enclosed in the pack of supporting documents for the meeting.

Recommendation(s)	1. The Board notes the position regarding corporate risks 2. The Board identifies areas that require further assurance
Link to Board Assurance Framework Risks (board and level 2 committees only)	All BAF strategic risks

Corporate Risk: Quarterly Report

1.   PURPOSE

1.1   This paper provides assurance to the Board of Directors regarding developments in corporate risk during the 2025/26 Q1. The report covers newly opened corporate risks and changes to existing corporate risks, including the closure of risks.

2.0   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 assurance reporting to governance bodies and management groups of current corporate risks, changes in corporate risk exposures, and areas of emerging corporate risk. This report is prepared as part of the quarterly cycle of risk management assurance for the Board of Directors. Equivalent risk management assurance reports are also presented to the Trust Executive Group, the Board's assurance committees, and the Audit and Risk Committee.

2.3   The Trust's corporate risks are reviewed and moderated by the Risk and Assurance Group (RAG) which meets monthly. The corporate risk registers comprise all risks that have a current risk score of **12 or above** (based on the 5x5 likelihood and impact matrix and supporting evaluation criteria found in the Trust's risk management framework). The corporate risk registers for July 2025 are issued separately as supporting material for this meeting.

3   NEW CORPORATE RISKS

3.1   During the period covered by this report four new corporate risks were opened:

- Risk 687: National Intelligent Routing Platform (IRP) (15, High Risk)
- Risk 689: National Risk Register: Capability Requirements and Response (15, High Risk)
- Risk 688: West - Bradford Category 2 90th Percentile Performance (12, Moderate Risk).
- Risk 579: Hazardous Area Response Team (HART): National Training Courses (12, Moderate Risk)

3.2   **Appendix A** presents more detailed information about each of these risks and the initial mitigations proposed for managing these.

3.3   RISKS REDUCED BUT REMAINING ON THE CORPORATE RISK REGISTER

3.3.1 During the period covered by this report five risks were reduced in score but these remain on the corporate risk register. Mitigation actions have reduced the level of risk exposure associated with these risks. However, despite the impact to date of the mitigations these risks remain above the corporate risk threshold

- Risk 623: Hospital Handover: South (reduced from 25 to 20).
- Risk 602: Hospital Handover: North and East (reduced from 20 to 12).
- Risk 616: Operational Performance: West (reduced from 15 to 12).
- Risk 603: Operational Performance: North and East (reduced from 16 to 12).
- Risk 626: Tactical Command Response: South (reduced from 16 to 12).

3.3.2 **Appendix B** presents more detailed information about these risks and the ongoing mitigation actions in place to reduce the risk exposures.

3.4   RISKS DE-ESCALATED FROM THE CORPORATE RISK REGISTER

3.4.1 During the period covered by this report three risks were de-escalated from the corporate risk register. These risks have been mitigated such that the risk exposure is below the corporate risk threshold. However, these risks remain open and will be managed via local risk registers:

- Risk 58: Retention of Staff in IUC/NHS111 (reduced from 12 to 8).
- Risk 678: Trade Union Engagement with Workforce Policies (reduced from 12 to 9).
- Risk 522: Trust Better Payment Practice Code Performance (reduced from 12 to 9)

3.4.2 **Appendix D** presents more detailed information about these risks and the ongoing mitigation actions in place to reduce the risk exposures. .

3.5   CLOSED RISKS

3.5.1 During the period covered by this report two corporate risks were closed. These risks have been either terminated entirely or have been mitigated to a sufficiently low level to allow the residual risk to tolerated as part of business as usual.

- Risk 500: Triage system availability in the event of a cyber attack
- Risk 545: Out of Area Calls - Isle of Wight

3.5.2 **Appendix D** presents more detailed information about these closed risks and the rationale for their closure

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 notes the Q1 position regarding corporate risks.

6.2   The Board identifies any areas that require further assurance.

SUPPORTING INFORMATION

In this report

Appendix A: New Corporate Risks
Appendix B: Corporate Risks that have reduced in score but remain as Corporate Risks
Appendix C: De-escalated Corporate Risks
Appendix D: Closed Corporate Risks

Circulated for Information

Corporate Risk Register – Non-Operations: July 2025
Corporate Risk Register - Operations: July 2025

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Director of Corporate Services and Company Secretary

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Risk and Assurance Manager

July 2025

APPENDIX A: NEW CORPORATE RISKS

NEW CORPORATE RISK 1	
Reference	Risk 687
Title	National Intelligent Routing Platform (IRP)
Committee	Finance and Performance Committee
Directorate	Operations
Business Area	Remote Patient Care / Emergency Operations Centre
Risk Owner	Julia Nixon / Claire Lindsay
BAF Links	1. Deliver a timely response to patients 2. Provide access to appropriate care
Context	The Intelligent Routing Platform (IRP) automatically redirects 999 calls to another trust if the local ambulance service is subject to high demand. The removal of IRP eliminates a key system-level safeguard, reducing flexibility to manage surges and placing greater pressure on individual Emergency Operating Centres. Withdrawal of the IRP presents elevated risk to emergency call handling and patient safety.

Opening Score	Current Score	Target Score
15 (High Risk)	15 (High Risk)	5 (Low Risk)

FULL RISK DESCRIPTION		
WHAT	If…	The national Intelligent Routing Platform is discontinued
	Then…	Patient safety is at risk due to delays in call answering in the Emergency Operations Centre
SO WHAT	Resulting in…	Delays to call answer times, and potential harm to patients by delays in critical advice and dispatch of ambulances
WHAT NEXT	Key Mitigation Actions	Immediate escalation to NHSE with support of all Ambulance Trusts and currently exploring a collective solution. Review within EOC to plan and prepare for the loss of IRP.

NEW CORPORATE RISK 2	
Reference	Risk 689
Title	National Risk Register: Capability Requirements and Response
Committee	Finance and Performance Committee
Directorate	Operations
Business Area	Central Services
Risk Owner	Liz Eastwood
BAF Links	5. Develop and maintain effective emergency preparedness, resilience, and response arrangements.
Context	Following publication by the government of the updated National Risk Register (associated with emergency planning, preparedness and response) a full assessment of the Trust's capability and response arrangements is required to identify gaps in these, to evaluate any residual risk to the Trust, and to identify mitigating actions. This risk is recorded as an umbrella risk for now while the specific risks to the Trust are fully identified and assessed.

Opening Score	Current Score	Target Score
15 (High Risk)	15 (High Risk)	5 (Low Risk)

FULL RISK DESCRIPTION		
WHAT	If…	The Trust does not adequately identify and record its capability requirements and response arrangements
	Then…	The Trust may not be able to respond to major events such as terrorist attacks etc. recorded on the national risk register.
SO WHAT	Resulting in…	Failure to comply with the Civil Contingencies Act 2004 and EPRR Core Standards with increased risk of patient and staff harm.
WHAT NEXT	Key Mitigation Actions	The EPRR team are conducting a capability gap analysis to identify the Trust's position and develop actions to address gaps. The progress of this work and any new risks identified as a result will be reported to the Resilience Governance Group and escalated through the Trust's governance structure as appropriate.

NEW CORPORATE RISK 3	
Reference	Risk 688
Title	West - Bradford Cat 2 90th Performance
Committee	Finance and Performance Committee
Directorate	Operations
Business Area	A&E Operations: West
Risk Owner	Rachel Gillot
BAF Links	1. Deliver a timely response to patients 2. Provide access to appropriate care 3. Support patient flow across the urgent and emergency care system 10. Act as a collaborative, integral, and influential system partner.
Context	The national Ambulance Response Programme standards state that the target response time for the 90th percentile of Category 2 calls is 40 minutes. In Bradford, the Trust has been consistently reporting an average of 60 minutes or more. This is excessive in comparison to the other areas. Contributing factors include crew availability, capacity to meet demand, availability of alternative pathways, and wider health inequalities in Bradford.

Opening Score	Current Score	Target Score
12 (Moderate Risk)	12 (Moderate Risk)	4 (Low Risk)

FULL RISK DESCRIPTION		
WHAT	If…	The Trust continues to not achieve the target 40-minute response for Category 2 90th percentile
	Then…	There are potentially excessive delays in response to patients and the commencement of care
SO WHAT	Resulting in…	Poorer clinical outcomes and increased patient harm.
WHAT NEXT	Key Mitigation Actions	Multidisciplinary team review of potential causes held; limited options for specific immediate mitigation actions. Rota review for Bradford operational teams: similar rota reviews have resulted in improved response times in other areas, Remote patient care review underway to support the management of demand.

NEW CORPORATE RISK 4	
Reference	Risk 579
Title	National Hazardous Area Response Team (HART) Training Courses
Committee	People Committee
Directorate	Operations
Business Area	Central Services
Risk Owner	Liz Eastwood
BAF Links	5. Develop and maintain effective emergency preparedness, resilience, and response arrangements.
Context	This risk was previously recorded on the local risk register with a score of 9, just below the threshold of corporate risk. The rationale for the escalation of the risk to 12 is that the national training courses are currently paused with no timeframe for re-commencement.

Opening Score	Current Score	Target Score
12 (Moderate Risk)	12 (Moderate Risk)	3 (Low Risk)

FULL RISK DESCRIPTION		
WHAT	If…	The National Ambulance Resilience Unit (NARU) is unable to schedule and run courses
	Then…	The Trust will be unable to recruit and train HART paramedics in order to backfill shortfalls in staffing, address training needs or achieve the proposed HART uplift in team members
SO WHAT	Resulting in…	A lack of HART staff within the department to be able to sustain a safe system of work and be compliant with the national interoperability core standards. This would result in a risk to patients, staff, and reputational risk to the Trust.
WHAT NEXT	Key Mitigation Actions	Provision of HART training is beyond the direct control of the Trust which makes it difficult for the Trust to mitigate the risk directly.

Liaison with the national team is ongoing to determine next steps and to obtain a timeframe for recommencing the training courses. |

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

Ref	Title	Area	WHAT	SO WHAT	Change From	Change To	Rationale	WHAT NEXT	
623	Hospital Handover: South	Ops – South	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	Transfer of Care has been successfully introduced in Sheffield, resulting in significant improvements in handover times.	Appetite/Target: Transfer of Care SOP continues to be rolled out in July / August and expected to contribute to reduced handover delays further.	6
616	Operational Performance: West	Ops - South	IF there is an increase in demand/Acuity in West Yorkshire THEN there may be excessive response times	RESULTING IN patient harm	15	12	Consistently reporting reduction in responses at scene, with better management of demand and improved performance overall.	Appetite/Target: Transfer of Care SOP to be rolled out in June / July to also support hospital handover and therefore operational performance.	6
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	16	12	Transfer of Care and reduced crew clear times have contributed to sustained improvement in response times	Appetite/Target: Monitoring and reporting to continue.	6

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
626	Tactical Command Response: South	Ops - South	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.	16	12	Greater resilience arrangements in place for the tactical command response.	Appetite/Target: On call policy to support future management of the risk.	6
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	20	12	Transfer of Care introduced in North Yorkshire (York, Scarborough, Harrogate) has resulted in sustained improvements in handover delays, adding to the improvements already seen in Hull	Appetite/Target: Monitoring and reporting to continue.	6

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

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
58	Retention of staff in IUC/NHS111	IUC	IF the Trust is unable to reduce the current level of turnover within IUC THEN there is a risk to service delivery, patient care and poor staff wellbeing	RESULTING IN poor patient experience and high levels of staff turnover and loss of experienced and trained staff.	12	8	Significant improvement in retention: the turnover rate has dropped by around 10% in the last 6 months. Budgeted 430 health advisors and we are close to required numbers.	Appetite/Target Continuous monitoring and recruitment to both ensure still meeting required levels whilst not exceeding the budget position.	3
678	Trade Union engagement with Workforce Policies	Workforce and OD	IF the Trust fails to resolve a dispute with the trade unions THEN workforce policies will not be approved or developed in partnership	RESULTING in workforce policies potentially being non-compliant or causing operational issues	12	9	Policy Development Group held in May to address urgent policy reviews. Five high priority policies have been approved to date. Expected to continue monthly.	Appetite/Target Ongoing engagement to ensure PDG / JSG staff side engagement.	5
522	Better Payment Practice Code Performance	Finance	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	RESULTING IN increased monitoring from NHSE, increased reputational damage and the possibility that critical goods or services required on a day to day be withdrawn.	12	9	Systems and processes implemented resulting in the 95% target being consistently reached for over a year.	Appetite/Target Ongoing monitoring and reporting.	6

APPENDIX D: CORPORATE RISKS THAT HAVE BEEN CLOSED

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
500	No triage system to triage calls for call handlers and clinicians in the event of a cyber attack	EOC	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 standalone triage system)	RESULTING IN an inability to triage patients effectively which could potentially lead to patient harm.	15	<5	As part of the move to NHS Pathways a new paper management process has been implemented ensuring the Trust can take calls in the event of a system failure / loss. This new process is included in Business Continuity plans, exercising rollout has begun and will continue over summer months. The risk is mitigated.	Appetite/Target Risk Closed.	5
545	Out of area calls - Isle of Wight	EOC	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	12	<4	Mapping updates on the system are now complete and tested, no issues identified. The risk is mitigated.	Appetite/Target Risk Closed.	4