## Corporate Risk Register: Operations (November 2025)

	Title	WHAT (IF THEN)	SO WHAT (RESULTING IN)			Risk Owner	ship		Initial	Current				
ID				Risk Ownership	BAF Risk(s)	Directorate	Area	Risk Owner	Risk Reviewed Date	Next Review Date		Grading	Target Grading	WHAT NEXT?
559	PTS Contract	IF a procurement process is commenced for PTS contracts (including any challenge against PSR - direct award scheme) and a formal tender process is commenced THEN the contract(s) may be lost and awarded to competitors by September 2025	<b>RESULTING IN</b> significant financial impact by loss of income and associated costs, loss of staff and reputational risk.	Finance and Performance	3. 10.	Operations	PTS	Chris Dexter	10/11/2025	08/12/2025	12	15	8	Action: Ongoing work with contracts and procurement. H & NY outstanding and awaiting details from ICB.
662	PTS Contingency File	IF the Trust and Microsoft ceases to support Macros and VBA's to allow PTS contingency files to function in the event of the loss of cleric THEN business continuity plans are unable to be implemented	<b>RESULTING IN</b> patient journeys being compromised, failure to meet contractual obligations and reputational damage.	Finance and Performance	3	Operations	PTS	Chris Dexter	27/10/2025	28/11/2025	12	16	4	Action: Red risk recorded on BC temperature check. Work underway to conduct exercise and identify further gaps with support of ICT.
433	EOC call handling workforce capacity	IF there are sustained increases in call volume, duplicate calls and failure to meet requirements for staffing numbers, THEN EOC staff will not be able to allocate resources in a timely manner	<b>RESULTING IN</b> delayed response times to answer and respond to emergency calls with potential for harm to patients	Finance and Performance	1. 8.	Operations	Remote Care/ EOC	Julia Nixon/ Claire Lindsay	01/09/2025	18/12/2025	25			Action: Approx 50 CH's below plan due to pathways delivery, overtime and on day management oversight as immediate mitigations.  Ongoing work on capacity demand modelling and recruitment trajectories.
509	EOC Duplicate Call Process	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	1. 14.	Operations	Remote Care/ EOC	Julia Nixon/ Claire Lindsay	01/09/2025	18/12/2025	15	15	5	Testing attempted multiple times and failed. Action: Escalated to ICT and supporting ongoing work to identify solution with MIS.
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	5	Operations	Central Services	Liz Eastwood	31/10/2025	31/01/2026	15	15	3	Action: Learning from MAN inquiry identified gaps. Work currently underway for specialist provision in the East and national CBRN decontamination vehicles and equipment.
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	5	Operations	Central Services	Liz Eastwood	31/10/2025	31/01/2026	12	12	3	Action: Review of table top exercises for non-specialist staff. Added to RGG agenda to regularly review and support.
579	National HART training courses	IF NARU is unable to schedule and run courses THEN YAS will then 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	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.	People	5	Operations	Central Services	Liz Eastwood	29/09/2025	21/11/2025	12	12		Action: New starters within emergency capabilities unit undergoing training. Awaiting 2026 training dates.
652	Commander Training Compliance	IF YAS do not ensure that commanders are compliant with their training and CPD THEN there may be occasions when commanders are operating at incidents who are not competent of safe to do so	<b>RESULTING IN</b> unsafe systems of work for staff and that incident and / or inappropriate command decisions that could lead to patient harm.	People	5	Operations	Central Services	Liz Eastwood	29/09/2025	19/12/2025	12			Action: 4 day command course from April 2025, review of attendance forecast underway to ensure expected numbers are met.
672	Insufficient capability for mass communication in	IF the trust does not have a robust and reliable methodology to support two way communication with large groups of people in the event of a major, critical or other serious incident  THEN there will be delays to the mobilisation of the	RESULTING IN potential adverse impact on the outcome of patients due to delayed treatment and	People	5	Operations	Central Services	Liz Eastwood	03/07/2025	30/09/2025	12	12	3	Action: 2 providers identified and work underway with project group. Awaiting confirmation if Trust can apply to obtain direct

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	incident	wider trust response and the notification and coordination of the response with system partners	care.						Julo					awalu.
689	National Risk Register capability requirements and response	IF we do not adequately identify and record our 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 (NRR)	RESULTING IN failure to comply with the Civil Contingencies Act 2004 and EPRR Core Standards with increased risk of patient and staff harm.	People	5	Operations	Central Services	Liz Eastwood	26/09/2025	30/11/2025	15	15	5	Action: EPRR team conducting a capability gap analysis to understand the extent of those gaps with regards to risk to the Trust.  Ongoing review within RGG.
696	Reduced Strategic Commander Capacity and Experience to fulfil 24/7 rota	IF the current and future proposed strategic commander capacity remains at 50% of qualified, experienced variategic commanders due to the current and potential future impact of the proposed leadership review THEN there will be insufficient competent commander capacity to maintain a 24/7 rota	RESULTING IN the potential impact of harm to both patients and staff, breach of compliance against the core standards and significant reputational risk both with partners in the event of an incident inquiry.	People	5	Operations	Central Services	Liz Eastwood	23/10/2025	30/11/2025	20	20	5	Action: Final restructure roles with Head of positions remaining. Awaiting ACOO interviews to take place to the reassess gaps within the structure.
626	South - Tactical Command Response	IF tactical commanders cannot arrive a major incident in reasonable time  THEN there will not be an adequate command structure in place	<b>RESULTING</b> in reputational damage, patient harm and risk to staff safety.	Finance and Performance	5	Operations	South	Adam Layland	29/10/2025	29/01/2026	15	12		Action: Additional resilience is in place for the Tactical Command Response rota.
623	<b>South</b> - 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	1. 2. 3. 10.	Operations	South	Adam Layland	29/10/2025	28/11/2025	25	15	5	Action: Ongoing monitoring of handovers following the implementation of ToC SOP.
602	<b>N&amp;E</b> - Hospital Handover	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	1. 2. 3. 10.	Operations	North & East	Nick Smith	14/10/2025	28/11/2025	25	12		Action: ToC SOP implemented within N&E. Ongoing monitoring especially as we enter winter pressures.
627	<b>South</b> - Operational Demand	IF operational resources available are outweighed by demand and/or acuity in South Yorkshire THEN there may be excessive response times to patients.	RESULTING IN potential harm to patients, decreased staff morale, increase threat of violence or aggression to staff, an increase in handover delays due to acuity levels, and deterioration of operational performance.	Finance and Performance	1. 2. 3. 10.	Operations	South	Adam Layland	29/10/2025	30/01/2026	20	15	5	Action: Planning review underway to support capacity and expected demand.
616	West - Operational Performance	IF there is an increase in demand/Acuity in West Yorkshire THEN there may be excessive response times	RESULTING IN patient harm	Finance and Performance	1. 2. 3. 10.	Operations	West	Rachel Gillot	27/10/2025	02/12/2025	15	12		Action: Transfer of Care SOP implemented. Ongoing monitoring especially as we enter winter pressures.
603	<b>N&amp;E</b> - Operational Performance	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	Finance and Performance	1. 2. 3. 10.	Operations	North & East	Nick Smith	14/10/2025	28/11/2025	16	12		Actions: Roll out of Transfer of Care SOP seen improvement in handovers. However, other factors to consider such as fleet availibility, absractions etc. contributing to overall performance.
624	South - Adhering to medicines process	IF clinicians do not adhere to the POM pouch process at the start and end of shift and undertake three monthly POM audits  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	4	Operations	South	Adam Layland	29/10/2025	30/01/2026	15	15	5	Action: Quality, Governance and Assurance Manager now in place. Review of all issues reported to determine next steps.

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613	West - Implementation of POM pouches and trial of Medicines Management App		RESULTING IN compromised patient care including harm to patients and potential fatalities and Trust Wide roll out won't be possible	Quality	4	Operations	West	Rachel Gillot	27/10/2025	02/12/2025	12			Action: Updated process rolled out in some areas within West and seeing improvement. Continue roll out to remaining areas in the new financial year.
625	South - Lack of adherence to control drug documentation requirements		RESULTING IN an inability to account for loss in a timely manner, and possible staff or patient harm.	Quality	4	Operations	South	Adam Layland	29/10/2025	30/01/2026	15	15		Action: Quality, Governance and Assurance Manager now in place. App still not fully embedded which will support assurance.
663	<b>N&amp;E</b> - Fleet Availability	IF there are not enough ambulance resources available to transport patients to ED, THEN there will be delays in patients receiving definitive treatment	<b>RESULTING IN</b> delayed response and potential harm to patient.	Finance and Performance	1	Operations	North & East	Nick Smith	14/11/2025	28/11/2025	9	16		Action: Ongoing work with Fleet - 5 vehicles expected for delivery.  Operational areas also with fleet risk - South (10).
695	Flexibility to increase resources	IF there is insufficient funds and/or flexibility over overtime allocation across the clinical workforce to ensure an effective and responsive service to patient need THEN the service may be unable to maintain adequate operational cover, including the availability of specialist practitioners,	RESULTING IN reduced service resilience, limited access to advanced clinical care for high-acuity patients, increased pressure on core staff, and a negative impact on patient safety, staff wellbeing, and overall system performance.	Finance and Performance	5	Operations	All Areas	Nick Smith	10/11/2025	31/12/2025	16	16	4	Due to current financial pressures and a limited budget, funding for overtime is increasingly restricted. This reduces our resilience and ability to fill staffing gaps at short notice, maintain specialist clinical cover, or respond effectively to surges in demand.