



Health and Safety Annual Report 2025 - 2026

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2025/26 Health and Safety Annual Report

1.0 INTRODUCTION

- 1.1 YAS is committed to ensuring the health, safety and welfare of all its staff and all those people who are affected by YAS activities and services. Legal responsibilities as an employer are set out in the Health & Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999. All relevant NHS requirements, guidelines and applicable regulations are taken into account.
- 1.2 Working together with all staff, YAS is committed to the effective management of health and safety in the workplace. The Trust's approach to Health and Safety is set out in the Health and Safety Policy and is delivered through the YAS health and safety management system.

2.0 LEGISLATION CHANGES, COMPLIANCE AND HEALTH AND SAFETY EXECUTIVE (HSE) ENFORCEMENT

- 2.1 During 2025 - 2026 there have been no significant changes to health and safety legislation affecting the Trust however, an external consultant was commissioned to build a YAS legal compliance register.
- 2.2 The register captures all existing H&S legislation that applies to YAS activities and once populated, will provide valuable oversight of organisational legal compliance. It will also inform the Trust's strategic H&S objectives over the coming years.
- 2.3 The legal register document has been finalised along with a route map document which will facilitate population of the register. The next step in the process is to create an action plan for those who will be assessing compliance, starting with Trust SMEs

3.0 UK AMBULANCE SECTOR HSE ENFORCEMENT ACTIVITIES

3.1 Management of Work-Related Stress

- 3.1.1 In April 2025, East of England Ambulance Service (EEAS) received a Notice of Contravention from the HSE regarding non-compliance with health and safety legislation relating to work-related stress risks.
- 3.1.2 The HSE was of the opinion that EEAS had breached the Management of Health and Safety at Work Regulations 1999: -

Regulation 3 – *Suitable and sufficient risk assessment of the risks to health and safety of employees at work*

Regulation 4 – *Any preventive and protective measures will use the principles specified in the regulations (avoid, adapt, instruct, priority to collective measures)*

Regulations 5 – *Appropriate arrangements for the effective planning, organisation, control, monitoring and review of the preventive and protective measures taking into account the nature of activities and the size of undertaking*

- 3.1.3 Evidence presented by HSE for the breach:

- 1) The EEAS stress risk assessment did not identify key risks and controls
- 2) The arrangements / measures in place for managing stress were ineffective

3) Existing stress management measures were not effectively monitored and reviewed

3.1.4 **HSE Guidance:** The HSE publish Stress Management Standards which cover 6 key areas of work design that, if not properly managed, are associated with poor health, lower productivity and increased accident and sickness absence rates.

3.1.5 Following the enforcement action at EEAS, an assessment was made of the current situation regarding stress management at YAS.

3.2 Learning for YAS:

Regulation 3

3.2.1 YAS does not have a suitable and sufficient risk assessment for work related stress (*Job specific H&S risk assessments already in place identify stress as a hazard for some roles but they do not contain the detail required by the HSE*).

Regulation 4

3.2.2 YAS stress management procedures do not focus on avoiding stress or prioritise collective protective measures. The Trust stress policy and guidance is based on the HSE guidance and includes a stress risk assessment process – but the main focus is when individual or team stress has occurred. Further work to target preventative interventions would strengthen the Trust position.

Regulation 5

3.2.3 YAS does not have appropriate arrangements for planning, organisation, control, monitoring and review of its control measures for stress.

3.2.4 In summary, YAS has lots in place to support staff who are dealing with stressful situations. Amongst many provisions there is an employee assistance program which provides talking therapy along with training for managers / self-help programs covering emotional wellbeing support. The YAS wellbeing team has recently reviewed the Trust's stress risk assessment process however, this is for use when an individual or team feels they are suffering from signs of stress. The focus of the HSE and related Health and Safety Legislation is on the prevention of organisational stress rather than what is being done to deal with individual / team stress cases.

3.2.5 Stress is a 10-year strategic objective for the HSE so will continue to be a long-term focus for regulatory inspection and enforcement. All UK organisations need to have an organisational risk assessment for stress that reflects the varying risks to different staff groups.

3.2.6 An action has been added to the 2026-2027 H&S work plan to complete an organisational stress risk assessment for YAS. A collaboration is in place between QI team, H&S team and Wellbeing team to establish suitable documentation and bring together relevant stakeholders for initial work before the end of Q3 2026-2027.

4.0 2025/26 HEALTH AND SAFETY INCIDENT REPORTING

4.1 Appendix 1 shows the number of staff affected incidents reported in 2025 – 2026 and a breakdown of the incident categories.

4.2 The top 2 reported incidents for staff affected have been consistent over the year and relate to moving and handling and violence and aggression. Infection prevention and

control reports have seen an increase from last year, now joining the top 3 staff affected incident types.

- 4.3 Violence and aggression is the most commonly reported staff affected incident type whilst moving and handling is the most commonly recorded “harm caused” incident with an average 80% of all moving and handling incidents resulting in harm caused rising to 90% of moving and handling incidents affecting staff. Slip, trip and falls also have a high level of harm associated though lower numbers reported overall.
- 4.4 Staff affected H&S incidents have increased over the past year which is broadly in line with all incidents for the Trust. A significant increase in reporting was seen at the start of 2024-2025, and a gradual rise has been evident overall since with the last two quarters of 2025-2026 above the upper limit.
- 4.5 This pattern is most closely replicated in the graphs showing violence and aggression and IPC incidents suggesting that they are primary reasons for the increase. Slip, trip and falls has shown little variation over time and moving and handling, whilst it also saw the increase at the beginning of 2024-2025 and an overall rise to the end of 2025-2026, it shows a differing pattern.
- 4.6 Incident investigation and analysis work is required to better understand these changes. Whilst themes and trends are currently identified from incident data, deeper understanding can be achieved through more frequent incident investigation by SMEs. This type of work is currently very limited due to the resources available in the H&S team. The restructure of the H&S team and the addition of a new Head of IPC will facilitate more investigation work which will help the Trust to better understand what is happening.

5.0 REPORTING OF INJURIES, DISEASES AND DANGEROUS OCCURRENCES REGULATIONS (RIDDOR)

- 5.1 Health & Safety related incidents that fall into certain categories are required to be reported to the HSE under RIDDOR legislation.
- 5.2 These incidents are mainly made up of accidents where a member of staff has suffered harm (moderate grading) and been absent from work for over 7 days or has suffered a specified injury such as a broken bone. These reports also include where a patient has been injured in YAS care and taken to A&E for treatment.
- 5.3 Appendix 1 also shows RIDDOR reports for 2025 / 2026 and a breakdown of the incident types.
- 5.4 In terms of RIDDOR reports made over 2025/2026 for YAS, they fall into the following categories:

Specified Injury (broken bones)	6
Over 7-day absence	54
Dangerous occurrence	2
Total	62

- 5.5 All RIDDOR reports were for staff affected. There were no RIDDOR reports made for patients.
- 5.6 The RIDDOR incident figures show that the highest number are relating to staff from injuries sustained during moving and handling or as a result of slips, trips and falls.

- 5.7 Wider learning from RIDDOR incidents is carried out at local health and safety groups where all RIDDOR reported incidents are discussed.
- 5.8 RIDDOR reports have to be made to the HSE within certain timescales depending on the type of incident. Deaths and specified injuries must be reported immediately with over 7 day absence injuries reported within 15 days of the incident.
- 5.9 The RIDDOR timescales graph at Appendix 3 shows how the Trust has met these requirements over 2025-2026 with the vast majority of reports not being within timescales.
- 5.10 The reasons for not meeting the timescale requirements are multiple including incidents not being reported in a timely manner and difficulties in identifying those that meet RIDDOR requirements due to the need to cross reference with absence data at the appropriate time. Current processes rely on incidents being flagged at Datix quality checking - which occurs within 2-3 days of reporting - and through line manager investigation - which may take place after 15 days. Additionally, RIDDOR reports are submitted to the HSE in batches at the end of each month due to limited capacity in the H&S Team.
- 5.11 Improvement work for the RIDDOR process is planned for 2026-2027 which will include a refresh of the Datix quality checking element, line manager education and expansion of the H&S team so that reports can be submitted on a more frequent basis.

6.0 KEY PERFORMANCE INDICATORS 2025-26

- 6.1 The below KPIs are taken from the Trust's health and safety policy, and they form part of the "check" section of the Plan, Do, Check, Act health and safety management framework.

KPIs	KPI met:
The key elements of the of the Trust's health and safety management system are listed below along with the actions / conditions that show the Trust has the element in place as required by the health and safety policy.	Yes / No / Partial
Plan	
• H&S Policy is up to date and available to all staff via the intranet	Yes
• H&S policy is up to date and signed by Chief Executive	Yes
• H&S policies and procedures are in date	Partial <i>9 out of 10 in date</i>
• Policies, Procedures and Standard Operating Procedures (SOPs) are available to staff via the intranet	Yes
• Health and safety risk register is up to date	Yes
• Annual Health and Safety work plan is in place	Yes
Do	
• Health and Safety Risk assessment procedure is up to date	Yes

Health and Safety Training has been delivered in line with Trust targets (<i>to be monitored through YAS Academy</i>)	Partial see H&S training below
Health and Safety Manager has Chartered Safety and Health Professional status	Yes
Strategic Health and Safety Group has met quarterly	Yes
Local health and safety committees / groups have met quarterly	Yes
H&S committees / groups and subject specific groups have employee representatives included in their Terms of Reference	Yes
Check	
Health and Safety work plan has been reviewed at each quarterly strategic H&S Group meeting	Yes
Health and Safety Risk Register has been reviewed at each quarterly strategic H&S Group	Yes
Health and Safety Highlight report has been submitted to TEG and People Committee quarterly	Yes
Premise inspections have been complete via I4I process annually	Yes
Health surveillance has been provided in line with risk assessment	Yes
Quarterly incident reports submitted to strategic H&S Group	Yes
Quarterly incident reports submitted to Local H&S committees / groups	Yes
Subject specific monitoring reports submitted to strategic H&S Group e.g., Health and Wellbeing, Violence and aggression, Estate's compliance etc.	Yes
Act	
Completion of Annual Health and Safety report for strategic H&S Group	Yes
Annual Health and Safety report presented to TEG and People Committee	Yes

7.0 DELIVERY OF WORK PLAN FOR 2025-26

7.1 Health and Safety Training

- 7.1.1 The Trust's health and safety training needs analysis is based on NHS employer's guidance "*Health and Safety Competences for NHS Managers*". Work has been on-going for some time to deliver the necessary training with requirements for senior and line manager groups included in the Trust training plan.
- 7.1.2 Good progress was made in 2025 – 2026 with the engagement of an external company to provide Institution of Occupational Safety and Health (IOSH) accredited health and safety training. Delivery commenced in November with three IOSH Managing Safely courses, two IOSH Safety for Senior Executives courses, and four IOSH Principles of Safety Management in Healthcare courses complete by end of Q4. 52 members of staff were trained in total including 11 senior managers and a selection of Team Leader/ managers from PTS, RPC, Fleet, Estates and Procurement.

- 7.1.3 More courses were planned for the year including the start of a 3 year roll out for 999 Team Leaders however, the full programme of courses was not delivered, and no 999 Team Leaders attended the training. The requirement has therefore been carried over into the next annual training plan. As this is a recurring situation for the Trust, health and safety training provision will undergo a review in 2026/2027.
- 7.1.4 Within the Quality and Professional Standards Directorate, a number of SME colleagues have been placed on a NEBOSH General Certificate training course. This is an entry level H&S qualification which teaches core workplace risk management and safety principles. The aim of the training is to bridge specialist subject knowledge with legal H&S requirements and practices.

7.2 Moving and Handling

- 7.2.1 Moving and handling (M&H) is consistently one of the Trust's highest reported incident types and one of the Trust's objectives is to reduce the incidence of musculoskeletal (MSK) injury among the workforce.
- 7.2.2 To support this, the Trust's Moving and Handling Group continued to meet throughout 2025 –2026 bringing together relevant departments to work on various issues. Another function of the group is to help progress the moving and handling workplan which is over-seen by the Trust's subject matter expert (SME) for moving and handling.
- 7.2.3 Progress with the plan has been made in 2025 – 2026 on several key elements including the review of the Trust's M&H training provision. Delivery commenced of the new training program which is based on the Northeast Ambulance Services M&H training strategy and is supported by new internal governance meetings which bring together Academy Educators and Trust SMEs. This will ensure continuous improvement for the training provision. Following on from this, work has begun to review the frequency of the moving and handling training refresh period in order to bring it in line with other NHS ambulance trusts. This will be reviewed at Essential Learning Oversight Group (ELOG) and appropriate recommendations for change made from there.
- 7.2.4 A number of new M&H equipment trials have also taken place as part of the Trust's focus on the prevention of incidents and injuries. The successful trial of a new carry chair led to the purchase and roll out of the Ferno Power track chair across the PTS service line. Further trials are planned for next financial year as M&H forms a key component of the Trust Business Plan Priority on Staff Absence. With the support of the Quality Improvement Team the Trust will be trialing a 'Back-Track' device having been identified within 2025-26 and a trial start date planned for September 2026. An alternative to current equipment (ProMove) was also identified through equipment demonstrations at moving and handling group, with plans to trial this once samples are available from the supplier.
- 7.2.5 Another key part of SME work for moving and handling is the assessment of new vehicles. A recent example being the new 999 electric vehicle where a risk assessment identified issues with the loading and unloading of patients into the vehicle. The issues were resolved with the identification of alternative moving and handling equipment for the task and the recommendation of specific training requirements for the new methods and equipment.

7.3 Violence Prevention and Reduction

- 7.3.1 During 2025 – 2026 a new violence prevention lead joined the Trust. Initial work included stabilising the existing VPR team and reviewing process, in particular around incidents. Key strategic priorities have been reviewed and new ones established in order to move away from the reactive model of management to a more proactive approach. Body worn cameras and data management were key issues identified for improvement.
- 7.3.2 It has been agreed to adopt the same training model for VPR as is being used for moving and handling in order to minimise costs. Work is on going to ensure the necessary governance is in place to achieve this.
- 7.3.3 A new training needs analysis has been started using data gathered from within the Trust to inform the next training cycle. The aim is to make YAS training courses more bespoke towards ambulance V&A risks and focus on prevention.
- 7.3.4 The body worn camera project has also been reviewed and reasons for low usage investigated. This has included investigations into using smaller cameras.
- 7.3.5 Significant improvements have been made to incident reporting structures including a re-design of the VPR BI dashboard which gives clearer insights into where incident are occurring and the categories. Datix categories have also been reviewed to bring more clarity to reporting which will also support a more preventative approach to VPR.

7.4 Slips, Trips and Falls

- 7.4.1 Slips, trips and falls are a standing item on the work plan as they account for a significant proportion of injuries to staff.
- 7.4.2 Throughout 2025 – 2026 YAS has continued to consider improvements to its boot provision through the Uniform and Personal Protective Equipment (PPE) Steering Group, participating in activities with boot manufacturers to better understand ambulance service needs. New vehicle risk assessments continue to be performed with slip, trips and falls a key consideration during design, a recent example being the new 999 electric vehicle where a risk assessment identified the need for improvements to the access / egress.

7.5 Health and Safety Risk Assessments

- 7.5.1 The Trust has a health and safety risk assessment process in place however, few managers are equipped with the necessary skills to carry out a suitable and sufficient health and safety risk assessment and therefore the process is not embedded in the Trust.
- 7.5.2 This skills gap is being addressed through the IOSH health and safety courses and some progress was made with this in 25/26 however, only certain management groups are currently receiving training.
- 7.5.3 A substantial number of the Trust's health and safety risk assessments remain overdue for review. A 360 internal audit of the YAS H&S risk assessment process in October 2024 identified a number of important actions needed to bring the Trust's H&S risk assessments back in line with legislative requirements. These actions primarily centre around better governance of the process as a key finding of the audit

was that the Trust lacks a robust framework to support health and safety risk assessments.

- 7.5.4 Work was undertaken in 25/26 to fully address the audit findings and, whilst progress has been slower than expected, much has been done to address the issues.

8.0 KEY HEALTH AND SAFETY RISKS

- 8.1 The Health and Safety Work plan is aligned with key health and safety risks and therefore, the subjects discussed above are captured on the health and safety risk register which is reviewed quarterly at the strategic Health and Safety group. The risks capture the implications of not making sufficient progress with the H&S workplan.

- 8.2 Appendix 2 has details of the risk descriptions.

8.3 Corporate level H&S risks in 25-26

188 – Health and Safety Training for Middle Managers
Amber – Moderate – 12 – (CRR)

195 – Health and Safety Training for Senior Managers
Amber – Moderate – 12 – (CRR)

187 – Moving and Handling Activities
Amber - Moderate – 12 – (CRR)

Risk 194 – Implementation of Health and Safety Risk Assessment Process
Amber – Moderate – 12 (CRR)

8.4 New H&S risk added in 25-26

Risk 709 – Stress Risk Assessment
Amber – Moderate – 9

8.5 H&S Risk Progress Highlights for 25-26

- 8.5.1 Risk 347 – Attending Incidents Near Water
Red – High – 15 (CRR)

Good progress made with provisions. Implementation group (led by EPRR) have overseen the purchase of life jackets and throw lines, a roll out plan and a SOP. The first phase of the TL training has now commenced in the areas where incidents near water are more frequently occurring.

- 8.5.2 Risk 723 – Safety Team Capacity
Amber - Moderate – 12 (CRR)

Funding has been secured to expand the Trust H&S function including recruitment of additional health and safety specialists and a dedicated Head of Health and Safety leadership role.

9.0 PRIORITIES FOR 2026 - 2027

- 9.1 For the coming year, there will be a focus on continuing with delivery of the IOSH Health and Safety training program alongside a review to address the recurrent issues

of non-delivery to 999 Team Leaders. The arrangements put in place to ensure the Trust's senior management are fully compliant with the IOSH accredited training will be completed and will include bespoke training for NEDs.

- 9.2 The delivery of the training program is essential to ensure the continued effective functioning of the Trust's health and safety management system and further reduce the health and safety skills gap, in particular in relation to health and safety risk assessment.
- 9.3 Work will also continue with regards to the internal audit findings on YAS H&S risk assessment processes with an aim to meet the audit deadline of 31st October 2026.
- 9.4 Significant work is also planned in relation to the Trust's health and safety management system with the addition of key assurance processes – a H&S legal register and YAS H&S hazard register – which will enable the Trust to have better oversight of organisational H&S risk, compliance and performance.
- 9.5 Improvement work will also continue within the H&S function with the restructure of the health and safety team and planned increases in specialist resources supporting the Trust.
- 9.5 A leadership structure has been developed which includes a new dedicated Head of H&S role. This role will be the Trust's nominated competent person for H&S and will provide qualified knowledge, guidance and direction at a more visible and senior level. The role will also provide dedicated senior leadership to the H&S function enabling better integration into the Trust's strategic activities.
- 9.7 The H&S function will also be expanded with the addition of more H&S specialists. These H&S manager roles will provide dedicated support to business areas ensuring that H&S is brought front and centre and there are the right arrangements in place to support all areas of the Trust.

9.8 Overview - Priorities for 2026 – 2027

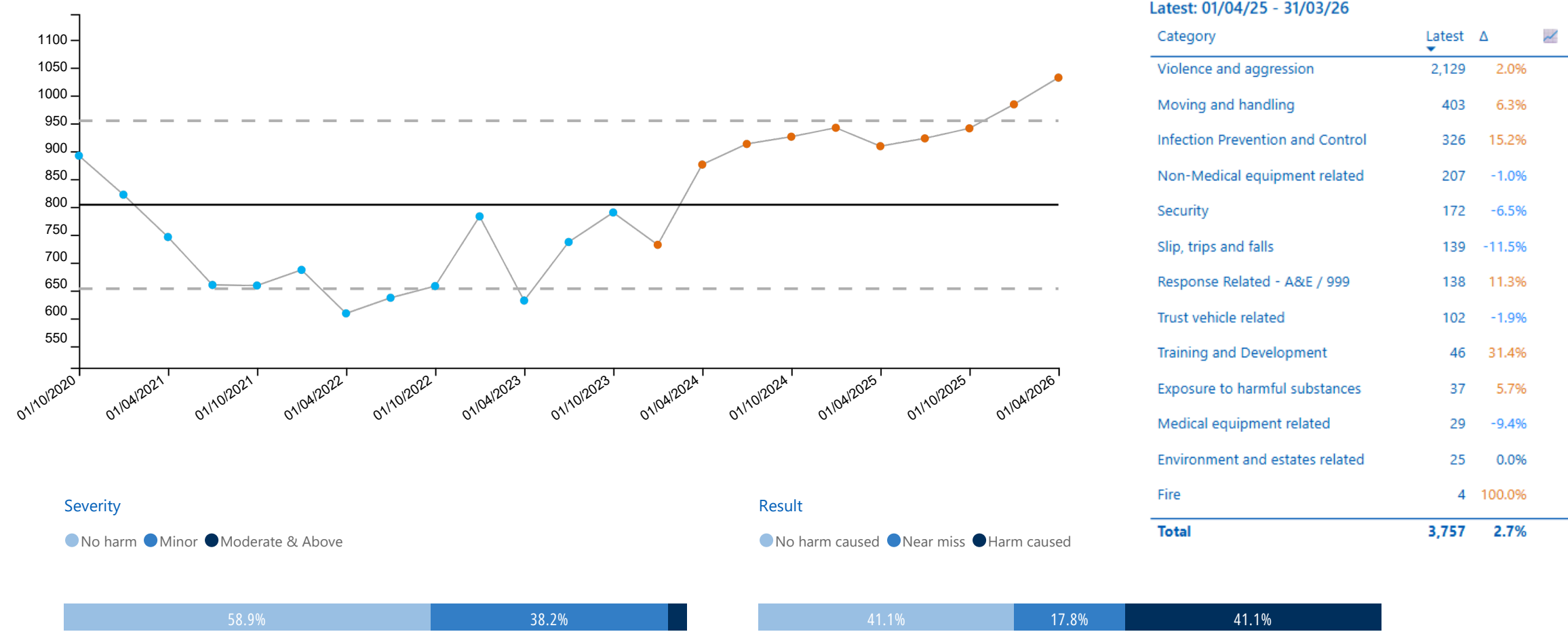
To help reduce staff injuries within our workforce relating to moving and handling and support the Trust's MSK reduction workstream
Identify work related stress within the Trust through a process of risk assessment and support the Trust's Mental Health and Wellbeing workstream
To improve health and safety knowledge / awareness through training with a particular focus on risk assessment skills for managers and team leaders
Implement a new health and safety risk assessment process to include standardised forms and digital storage
Achieve compliance with internal audit recommendations to improve the Trust's H&S risk assessment process
Complete a re-structure of the health and safety team and successfully recruit to new H&S specialist posts
Establish a YAS health and safety hazard register
Establish a YAS health and safety legal register

Note: Further details regarding workplans and risks associate with the management of Violence and Aggression are included in other board level reports.

All Incidents for the Trust



Staff Related Health and Safety Incidents



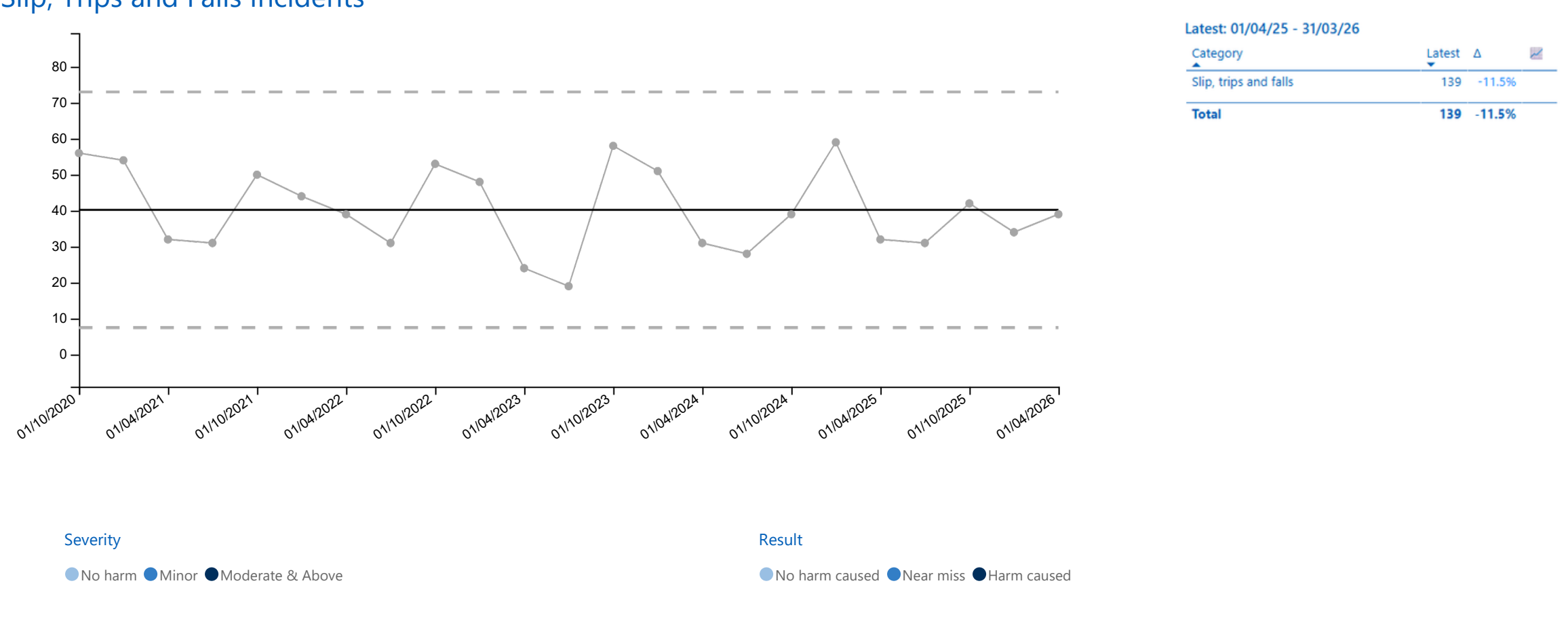
Moving and Handling Incidents



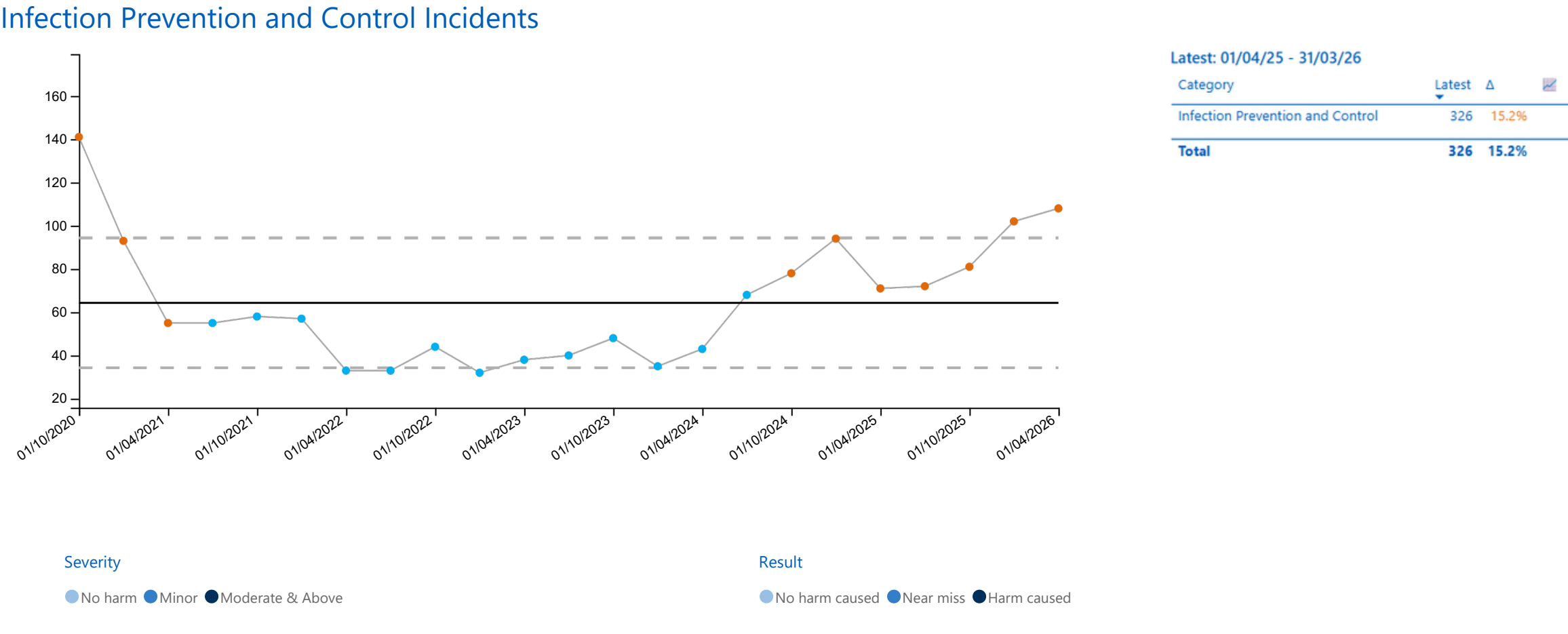
Violence and Aggression Incidents



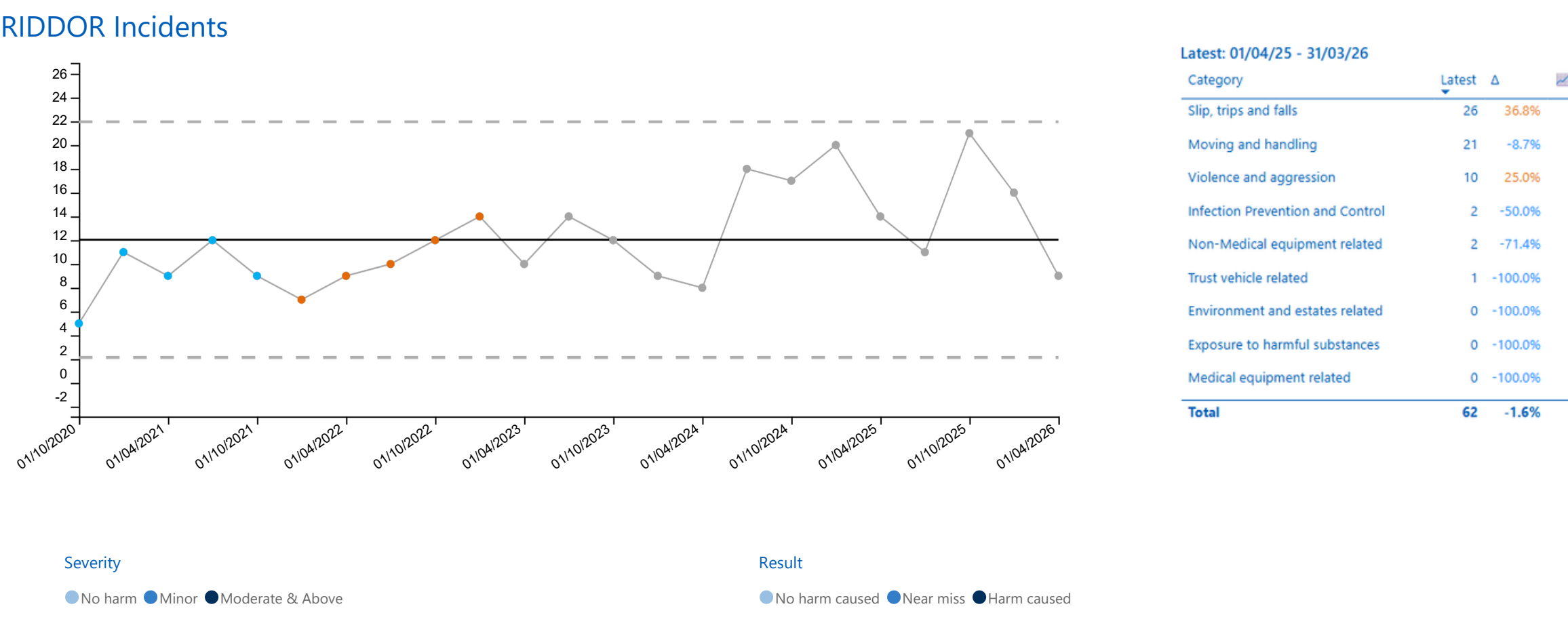
Slip, Trips and Falls Incidents



Infection Prevention and Control Incidents



RIDDOR Incidents



Appendix 2 – Key Health and Safety Risks

188 – Health and Safety Training for Middle Managers

Amber – Moderate – 12 – (CRR)

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 non-compliance with health and safety legislation.

195 – Health and Safety Training for Senior Managers

Amber – Moderate – 12 – (CRR)

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.

187 – Moving and Handling Activities

Amber - Moderate – 12 – (CRR)

IF the trust does not have in place suitable and effective moving and handling controls - such as training and equipment - THEN avoidable moving and handling incidents will continue to occur RESULTING IN injuries to staff and patients.

Risk 194 – Implementation of Health and Safety Risk Assessment Process

Amber – Moderate – 12 (CRR)

IF the Trust does not fully implement its risk assessment procedure, THEN it will be non-compliant with health and safety legislation RESULTING IN poor defence of compensation claims and potential criminal charges.

New risk added in 25-26

Risk 709 – Stress Risk Assessment

Amber – Moderate – 9

IF the Trust does not have a suitable and sufficient health and safety risk assessment in place for work related stress THEN it will be non-compliant with the Management of Health and Safety at Work Regulations 1999 RESULTING IN potential intervention from the Health and Safety Executive and potentially poor health outcomes for staff

Risk Progress Highlights in 25-26

Risk 347 – Attending Incidents Near Water

Red – High – 15 (CRR)

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.

Risk 723 – Safety Team Capacity

Amber – Moderate – 12 (CRR)

IF the safety team remains at the current limited capacity to deliver core functions THEN the Trust may fail to meet regulatory and statutory requirements (including Health and Safety at Work etc. Act (1974); Management of Health and Safety at Work Regulations 1999 (Regulation 7); and Health and Social Care Act (2008) Code of Practice on the Prevention and Control of Infections and Related Guidance) RESULTING IN potential unsafe practices leading to regulator action including sanctions, financial penalties, prosecutions, and the potential harm to staff and patients safety.

Incidents by RIDDOR notified (Month and year) and Has this incident been reported to the HSE within the timescale?

