

Report Title	Winter Strategic Approach 2026/27 and Winter Tactical Plan
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Accountable Director	Deputy Chief Executive and Chief Operating Officer
Lead Board Committee	Finance and Performance Committee
Previous groups	Operational Delivery Group Operational Leadership Group Trust Executive Group (2 September 2026) Finance & Performance Committee (17 September 2026)
Recommended action	Assurance and approval
Purpose of the paper	To provide the horizon scan, strategic risk assessment and Tactical Winter plan to respond to the identified risks.
Executive Summary	
The Winter Strategic Approach 2026/27 sets out a forward-looking assessment for the six-month period from October 2026 through to the end of March 2027. It draws on available intelligence and data to shape the strategic direction YAS will take to reduce and manage risks during this period. This assessment has highlighted the principal risks and pressures the Trust will need to manage over the winter timeframe. These include shifts in demand patterns, as well as broader risks that may impact operational delivery and essential support services during winter. Another important factor is the substantial change programme currently taking place across the NHS, including within YAS. This is expected to affect both the planning assumptions and the response arrangements needed for winter 2026/27. The Winter Tactical Plan 2026/27 has been produced following this horizon scan and is centred around three core areas: - Preparation – activity completed ahead of winter to build resilience and strengthen the Trust’s ability to respond effectively throughout the winter period. - Response – tactical surge arrangements that can be deployed to help the Trust manage increased demand across all areas of service. - Recovery – restoring normal operating models and capturing learning from the actions implemented during the winter period. - The plan will be exercised through a wider Yorkshire and Humber event on Thursday 17 September and amended where necessary following this test. The tactical plan is designed to remain a live document, with review points built into each phase and revisions made as required. Updates will be reported to TEG. Both the plan and the strategic assessment have been considered against the NHS England Board Assurance Statement, which has been ratified by TEG prior to presentation to Trust Board.	

Recommendation(s)	To review and approve the 2026/27 Winter Strategic Approach To review and approve the 2026/27 Winter Tactical Plan To review and approve the Board Assurance Statement
Link to Board Assurance Framework Risks (board and board assurance committees only)	1. Deliver a timely response to patients. 7. Support staff health and well-being effectively. 10. Act as a collaborative, integral, and influential system partner.

Winter Strategic Approach 2026/27 and Winter Tactical Plan

1 INTRODUCTION

- 1.1 NHS England requires the Trust to produce a Winter Plan that provides assurance on how operational resilience will be maintained throughout the 2026/27 winter period. To support this requirement, Yorkshire Ambulance Service (YAS) prepared a Winter Strategic Approach covering October 2026 to March 2027. This has been approved by the Trust Executive Group (TEG).
- 1.2 In addition, a Winter Tactical Plan has been produced under the coordination of the Operational Delivery Group (ODG). Each of the service lines have contributed to this and conducted a check challenge process at the ODG. The Trust's plans have also been reviewed against the attached Board Assurance Statement criteria.
- 1.3 There are a number of engagement events in September led by NHS England which will give the trust the opportunity to test the winter plan. Learning from these events will be incorporated into the plans prior to submission to Trust Board.
- 1.4 Members of the Board are asked to:
 - To review and **approve** the 2026/27 **Winter Strategic Approach**
 - To review and **approve** the 2026/27 **Winter Tactical Plan**
 - To review and **approve** the **Board Assurance Statement**.

2. WINTER STRATEGIC ASSESSMENT

- 2.1 The Winter Strategic Assessment 2026/27 provides a forward-looking overview of the risks and challenges the Trust was expected to manage during the winter period. This has been reviewed at ODG and The Operational Leadership Group (OLG) and then ratified by the TEG (Appendix A).
- 2.2 The assessment has been updated using refreshed capacity and demand forecasts for each service line. This modelling will be reviewed and updated throughout the period to support tactical planning and inform the operational response.
- 2.3 The guidance letter from NHS England in July reminded ambulance Trusts to:
 - Plan to deliver the 2026/27 Category 2 response time trajectory, maximising hear and treat, see and treat and referral into alternatives to ED, to reduce conveyance rates.
 - Work with acute partners to deliver 15-minute handovers, with none exceeding the 45-minute maximum.

3. WINTER TACTICAL PLAN

- 3.1 A Winter Tactical Plan has been developed to address the risks identified across the winter period and approved by the TEG. The plan is structured around three core areas: preparation, response and recovery.(Appendix B)
- 3.2 **Preparation:** This section sets out the principal activities being completed ahead of winter to strengthen resilience and support service delivery throughout the period.

These include commitments within the Trust's Business Plan and other key developments that services are due to deliver before winter.

- 3.3 Priority areas include initiatives to improve operational efficiency and maximise available clinical capacity during winter; delivery of a reduced training plan to minimise abstraction during periods of greatest pressure; recruitment of additional remote clinicians to increase hear-and-treat activity and pathway navigation; fleet replacement to reduce vehicle downtime; and implementation of sickness reduction and flu vaccination plans.
- 3.4 **Response:** This section describes the surge and escalation plans for each service line, which will be activated as required during periods of high demand. These plans complement the actions available through the Clinical Safety Plan (CSP) and the Resource Escalation Action Plan (REAP). Each service line presented its arrangements at a check-and-challenge session in August at the ODG and will continue to review these over the next few months. Winter planning will be on the agenda regularly over the response phase to ensure all leaders are kept abreast of issues. Items for escalation will go via the Operational Leadership Group(OLG) to TEG or on day via the Strategic commander to the Executive Director on call.
- 3.5 **Recovery:** This section focuses on the actions required to restore business-as-usual processes and ensure that learning from the winter response phase is captured. The lessons identified will inform planning for winter 2027/28.

4. EXTERNAL ASSURANCE

- 4.1 NHS England invited representative to attend a meeting on the 2nd of September 2026 to discuss a number of data tools to support assessment of winter plans against. This was attended by colleagues from across operations and the clinical directorate and the plans will be reviewed against any learning.
- 4.2 On 17 September 2026, senior representatives from each service lines and board will participate in an NHS England-coordinated exercise to test the robustness of the plans. These plans are shared with Board colleagues.
- 4.3 The Trust is required to submit a Winter Board Assurance Statement that assesses its winter plan against a defined set of criteria. The Trust's plans have been reviewed against these requirements, and responses are included in the attached framework document.(Appendix C)
- 4.4 Outstanding actions include completing a robust quality and equality impact assessment. This will be finalised before the plans are submitted to the Board, alongside confirmation that the Board is assured by the arrangements in place.
- 4.5 One area has been assessed as non-compliant with the Board Assurance Framework criterion: *'Processes are in place to provide overnight support for call handlers and clinicians to provide urgent in-home care for non-emergency, clinically assessed patients, with follow-up services available the next day'*.
- 4.6 This is the same non-compliant area as last year, colleagues in remote patient care are aware of this but it is unlikely that a resolution will be available prior to October.

5. FINANCIAL CONSIDERATIONS

- 5.1 No dedicated winter budget is available beyond the capacity plan, and no external funding is anticipated from NHS England. Any individual initiative requiring additional investment must therefore be funded from within the existing operational budget.

6.0 EQUALITY IMPLICATIONS

- 6.1 The Equality Impact Assessment identifies staff wellbeing and increased fatigue during the winter period as the principal areas of concern.
- 6.2 The winter strategic and tactical plans may place considerable pressure on the psychological wellbeing of staff, volunteers and learners. Prolonged operational demands, limited leave, and uncertainty arising from redeployment or rota changes could contribute to stress, fatigue and lower morale.
- 6.3 Repeated exposure to trauma, insufficient rest and postponed training may heighten the risk of burnout and leave learners feeling less prepared. The impact may be more pronounced for staff with existing mental health conditions or caring responsibilities, as well as new starters and volunteers who have limited access to formal wellbeing support.
- 6.4 Board members are asked to note that there are no plans to deploy welfare vehicles this year and it is hoped that timely rest breaks and end of shift finishes ensures staff are well rested. Supporting handover times will also reduce the chances of staff being delayed at hospital, however there is a residual risk that is not in our control as Emergency Departments usually face unprecedented demand during the winter period.

7.0 QUALITY IMPLICATIONS

- 7.1 The quality implications can be measured through our performance targets and response times, which are always a challenge over the key winter period. We also monitor patient safety incidents via the Datix reporting system and the level of patient harm caused by inaccessibility of available resources.
- 7.2 The Tactical Plan has been developed to mitigate these particular quality elements where possible. Unfortunately, delayed responses may still cause some patient harm.
- 7.3 Quality Impact Assessments are being developed and following the Trust approved processes for sign off.

8. RISKS

- 8.1 The seasonal planning approach is intended to minimise the likelihood of a significant adverse impact on operational performance. The risks addressed within the plan are recorded in the July 2026 Corporate Risk Register.
- 8.2 As part of the horizon scan the risks identified in the Winter Strategic Approach are pertaining to the following:
 - 1. Workforce Capacity and Availability
 - 2. Demand and Wider System Pressures
 - 3. Operational Efficiency and Service Delivery.

- 4. Environmental and Seasonal Factors
- 5. Strategic and Financial Context.

- 8.3 A number of interdependent risks exist across the three operational service lines; these have been recorded in the tactical plan and options considered to deal with these. ODG will maintain oversight of these risks and escalate them to TEG where necessary.

9. RECOMMENDATIONS

- 9.1 Review and **approve** the 2026/27 **Winter Strategic Approach**.
Review and **approve** the 2026/27 **Winter Tactical Plan**.
Review and **approve** the **Board Assurance Statement**.

10. SUPPORTING INFORMATION

- 10.1 This report is supported by the following papers:
 - Appendix A: Winter Strategic Approach 2026/27
 - Appendix B: Winter Tactical Plan 2026/27
 - Appendix C: Board Assurance Statement

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16 September 2026