



# Yorkshire Ambulance Service Quality Account 2016-2017



Yorkshire Ambulance Service works across Yorkshire. We cover 6,000 square miles and towns and cities where 5 million people live. We work with 23 **clinical commissioning groups**. We are the only healthcare provider that works all across Yorkshire.

We give people **urgent and emergency care**. We make sure that people get joined-up care from health services.

We employ over 5,000 people. We have over 1,200 volunteers.

This is the Easy Read version of our Quality Account for 2016-2017. To read the full version you can go [here](#).

In this document we will say

- what our purpose, vision and values are
- what we have achieved in the last year
- what patients think about us
- what our priorities are for this year.

Some of the words and terms in this document may be hard to understand. These are in **blue writing**. We have included a Glossary of the more difficult words and terms at the back of this document.





## Our Purpose, Vision and Values

Yorkshire Ambulance Service is there to save lives and make sure everyone in our communities receives the right care, whenever and wherever they need it.

Our vision is what we want to achieve. We want to be trusted as the best **urgent and emergency care** provider, with the best people and **partnerships** to deliver the best **outcomes** for patients.

Our values are what we are like and the way that we work.

- Working together for patients.
- Everyone counts.
- Commitment to quality of care.
- Always compassionate.
- Respect and dignity.
- Enhancing and improving lives.





Rod Barnes

## What did we achieve last year?

Our Chief Executive is called Rod Barnes. Rod said he is proud of Yorkshire Ambulance Service staff and what we have worked on in the last year.

Some of the big things we are proud of doing last year are

- Being one of the best ambulance services in the country for giving people care when they are suffering from **life-threatening emergencies**.
- The **Care Quality Commission (CQC)** reported on our work and said we have made improvements.
- The CQC report said we had done well in many areas of our work.
- We are working together to think about how we give **emergency and urgent care** in the best place at the right time for the patient.

Rod said that we know there are some things we need to work on

- More and more people need help and support from our health services. This year we have had to keep looking at how we work and what we need to do our work well to make sure we can help all the people who need us.
- We need to improve our **emergency response times**.





## Our priorities for the last year and what we achieved

Last year we had five priorities. These are the big things we wanted to work on and get better at.

Last year our priorities were

1. Improving **emergency response times**.
2. Making sure we work together across **the urgent and emergency care** system, especially for older patients, patients who are at the end of their lives and patients with mental health conditions.
3. Improving the outcome for patients with **cardiac arrest** and **sepsis**.
4. Improving the safety of patients especially moving patients safely, improving communication within the **Emergency Operations Centre** and improving the care of patients whose health is getting worse.
5. Improving the experience for children.

You can read how we did with these priorities in the next pages.

We have achieved some of the priorities and some of the priorities we have partly achieved. The priorities we achieved **are in green**. The priorities we have partly achieved **are in orange**.





## Priority 1

### Improving emergency ambulance response times

#### Partly Achieved

What we have done

- We now have more people who work for us on the frontline, these are our staff that work with people.
- We have new rotas, these are the plans of who is working and when to make sure we have the right people in the right place at the right time.
- We hope new staff and new rotas will help us to have better **response times** and improve transporting people to where they can get treatment.
- We have a new way of our leadership and management working.
- We have also been trying out a new way of handling 999 calls to make sure calls are dealt with in the right way, especially calls about **life-threatening** emergencies.





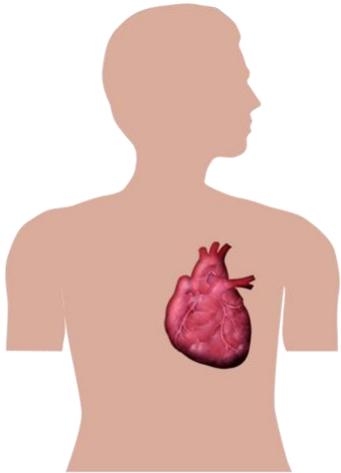
## Priority 2

**Making sure we work together across the urgent and emergency care system, especially for older patients, patients who are at the end of their lives and patients with mental health conditions**

### Achieved

What we have done

- We have improved the time it takes for us to respond to frail people and people who have had falls. We have worked with others to find out how we can improve care and support especially during the winter.
- We have set up end-of-life transport in Leeds working with a [hospice](#).
- We have online training for nurses and for staff who take 111 calls.
- Paramedics have had training from a hospice about end-of-life care.
- We are working with Public Health England and NHS England to improve mental health care.
- We have more [out-of-hours mental health nurses](#).
- We are working with police and other partners to make care given to people going through a [mental health crisis](#) better.



## Priority 3

### Improving patient outcomes with cardiac arrest and sepsis

#### Achieved

##### What we have done

- We have worked to make patient care better through the special red arrest team to patients in **cardiac arrest**.
- Our **clinical staff** have had extra training, including some of our paramedics working in rural areas.
- The red arrest team is now using different medicines, technology and tools. This is helping **clinical staff** to give the right care to people.
- We are using a new system to find out about patients whose health is getting worse and communicating with other healthcare workers.



## Priority 4

Improving the safety of patients especially moving patients safely, improving communication within the **Emergency Operations Centre** and improving the care of patients whose health is deteriorating

### Achieved

What we have done

- We have a programme of work called Sign Up to Safety on how we can keep our patients safe.
- The Sign Up to Safety roadshow has been held at all Emergency Departments across Yorkshire giving staff up-to-date information.
- At the **Emergency Operations Centre** there has been a new way of working to make communication better.
- We have a new way of working with patients with **mobility needs** so they receive the right care at the right time in the best way for them.
- We have also looked at and checked the education and training for staff, the equipment that is used and we have a new way of looking at the risks for people who may need special equipment.



## Priority 5

### Improving the experience for children

#### Partly Achieved

#### What we have done

- It is important for clinicians who work with children to be trained. Over the past year we have held events across the region and have a new way of working that has helped clinicians to become more confident in treating children.
- We have checked the [clinical equipment](#) used to treat children.
- A new [harness system](#) for children is now on all ambulances to make sure children can travel safely and comfortably to hospital.
- We will continue to work together to try new things and improve the care we deliver to children.



## Patient Experience Feedback



We know it is important to listen to what the people we work for have said about the care they have got from us in the last year.

Here is what some of our patients have said.

“I have been and am still grateful for this service. I live alone with no relatives nearby. I am just pleased for someone to help me.” (PTS)

“Huge thanks to the call taker, emergency responder and two paramedics on the ambulance who came out in response to my call. We waited less than 30 minutes in the early hours of a Saturday morning. The treatment we received was tip-top; these guys all need medals!” (A&E)



I had to make three phone calls to 999 to get an ambulance. The first two I was told to wait up to an hour for a phone call; in the meantime nearly passing out from the pain. I was in a lot of pain suffering from severe acute inflammation of the appendix with adhesions. I literally had to tell them I had problems breathing the third time to get medical attention. This is absolutely disgusting.” (A&E)

“The paramedic was fantastic, couldn't have been more reassuring. It was also brilliant that he was able to do the stitches within the home to save a trip to the A&E.” (A&E)



## Priorities for 2017-2018

This year we have four priorities. These are the big things we want to work on and get better at this year.

### Priority 1

**Improving emergency ambulance response times for patients.**

We want to make sure we deliver the right care, in the right place and at the right time. We are working towards the response time of 8 minutes for people with **life threatening conditions**.



### Priority 2

**Work together across the urgent and emergency care system, especially on care closer to home and getting better at sharing information.**

We will make sure our staff have the right skills and knowledge to give the right care in the right place first time. We will work closely with local health and social care teams to keep and develop **care pathways** for patients whose care should come from somewhere else other than the emergency services.



### Priority 3

#### **Keep ways for patients to feed back to make sure we learn more.**

We will work to improve the experience of patients by checking and looking into feedback and by involving patients. We will create ways for people to give us feedback so that we can learn from our work.

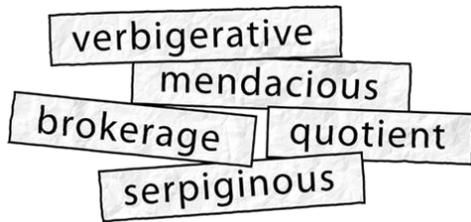
### Priority 4

#### **We will develop a **care pathway** which makes sure we give the right care to patients who have suffered a **stroke**.**

We are looking to work with partners to develop a **stroke care pathway** which will make sure people receive good care all throughout their time with health services. This will help to make sure people have good **outcomes**.



## Glossary



**Cardiac arrest:** is a serious illness when someone's heart stops pumping blood around their body.

**Care Quality Commission (CQC):** check services like GPs, hospitals and care homes to make sure they are giving good health and social care to people.

**Care Pathways:** is the plan for how to care for a person who has had illness or injury over time and in different places whilst they are getting better.

**Clinical Commissioning Groups (CCGs):** are a group that buy health services for people in a local area. There are 200 CCGs across the country.

**Clinical equipment:** are the different tools that are used to look after and treat a patient, for example a stethoscope or a needle.

**Clinical staff:** are the people who look after and give treatment to people who are ill.

**Emergency Operations Centre:** is where people who handle 999 calls work. They let ambulances and other emergency services know about the emergency.





**Emergency response times:** is how long it takes for an ambulance to reach where an emergency has taken place. When someone's life is in danger the time it should take an ambulance is 8 minutes or less.

**Harness:** is a set of straps which can be attached to a person to keep them secure and safe.

**Hospice:** is a place where people who are dying due to illnesses get care and support during the end of their lives.

**Life-threatening conditions:** is when someone has an illness or an injury that is very dangerous and there may be a risk of the person dying. People who have life-threatening conditions very often need to be in hospital.

**Mental health crisis:** is when someone may feel like they are not coping well with their mental health. For example, a person might feel like they want to kill or hurt themselves.

**Mobility needs:** is when a person may not be able to move their bodies freely or easily. For example, people who may need to use a wheelchair.

**Outcomes:** are a change in the health of a person after they have had care or support from a health service. An outcome could be good like a person getting better, or not good like a person getting more ill or dying.

**Out-of-hours mental health nurses:** are nurses that are available to help people during the part of the day when other services are usually closed.



**Partnership:** is when people or groups of people work together.

**Sepsis:** is a serious illness, it is an infection which causes someone's organs to stop working.

**Stroke:** is a serious illness that occurs when the blood to a part of a person's brain is cut off.

**Urgent and emergency care:** is the care that helps when someone has had an unexpected injury or illness. For example, if someone has an injury after a car accident ambulance staff will care for them and will take them to the Accident and Emergency part of a hospital to get further care.

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