



An Aspirant Foundation Trust

# Yorkshire Ambulance Service Annual Report 2011-12

Final Draft May 2012



# Annual Report 2011-12

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# Mission, Vision and Values (main heading)

### **Mission**

Saving lives, caring for you

### Vision

To provide an ambulance service for Yorkshire which is continuously improving patient care, high performing, always learning and delivers value for money.

### **Values**

Working together for patients

We work with others to give the best care we can

### Everyone counts

We act with openness, honesty and integrity – listening to and acting on feedback from patients, staff and partners

Commitment to quality of care
We always give the highest level of clinical care

Always compassionate

Our staff are professional, dedicated and caring

Respect and dignity
We treat everyone with dignity, courtesy and respect

Enhancing and improving lives
We continuously seek out improvements

# Introducing Yorkshire Ambulance Service (main heading)

### <insert map>

Yorkshire Ambulance Service NHS Trust (YAS) was established on 1 July 2006 when the county's three former services merged.

# We operate:

- two emergency operations centres in Wakefield and York where staff receive 999 calls and deploy the most appropriate response to meet patients' needs
- an accident and emergency service in response to 999 calls
- a non-emergency patient transport service which takes eligible patients to and from their hospital appointments
- a GP out-of-hours call handling service for some primary care trusts (PCTs) across Yorkshire and beyond.

We are led by a Trust Board which comprises a non-executive chairman, five non-executive directors, and six executive directors, including the chief executive.

As an integral part of the NHS in Yorkshire and the Humber, we work closely with hospitals, health trusts and healthcare professionals as well as the other emergency services.

We cover the whole of Yorkshire, from isolated moors and dales to urban areas, coastline and inner cities.

We employ 4,358\* staff, who together with over 1,160 volunteers, enable us to provide a 24-hour emergency and healthcare service to more than five million people. The largest proportion of staff, over 87%, are employed within the Operations Directorate which includes A&E, Patient Transport Service (PTS) and the Emergency Operations Centre (EOC).

\*4,358 is a headcount figure. It equates to 3,780 full-time equivalents.



## **Chairman's Introduction**

Welcome to Yorkshire Ambulance Service's 2011-12 Annual Report, Quality Accounts and Financial Summary which are our formal record of activity and developments. We hope they will give you a real understanding of how we have been caring for our patients and outline our future priorities.

2011-12 was another busy year for the service and we handled over 750,000 urgent and emergency calls, responded to over 631,000 incidents and made just under a million Patient Transport Service (PTS) journeys. We have seen improvements in the quality of care our staff provide for patients and enhanced our Clinical Leadership Framework to ensure that we are training the clinical managers of our future.

Our dedicated staff remain at the heart of our service and we were proud to introduce the *We Care Awards*, which saw over 100 staff nominated for going the extra mile for patients and who are shining examples of all that is excellent about the Trust. Colleagues celebrated their achievements from 2011-12 at a ceremony held in Leeds in April 2012. Together with the Long Service and Retirement Awards, they form part of the Trust's staff recognition approach. In July 2011 over 60 members of staff, who between them had clocked up over 1,600 years of service, were honoured at a ceremony held in Wetherby.

It was a year of celebration, as a number of frontline staff were recognised both inside and outside of the Trust for their vital contributions to patient care. You can read more about these achievements on pages x and y.

We have also seen real improvements in the quality of care we provide which continues to be recognised by those who use our services. Like all public sector organisations and the wider economy we have financial challenges to overcome and will need to work differently, delivering more with less and ensuring that we can continue to deliver high quality services within a reduced financial envelope. The NHS landscape is also changing, particularly in relation to commissioning arrangements, and we have had early engagement with our future commissioners – the Clinical Commissioning Groups (CCGs).

Towards the end of 2011-12 an important part of our work programme was to participate in the tendering process for the new NHS 111 service, where people will be able to telephone when they need urgent medical help or advice but it is not a life-threatening situation. At the time of writing we await the outcome of the Yorkshire and Humber bid.

Our journey to become a Foundation Trust (FT) is well underway. We held a public consultation from September to December 2011 and received 1,604 responses from staff and members of the public. This was an excellent response rate and we engaged with more stakeholders in this process than any other ambulance service. We will remain focused on our commitment to becoming Yorkshire Ambulance Service NHS Foundation Trust and recruiting members is a key priority for us in 2012-13.

In June 2011 we welcomed Elaine Bond to the Trust Board as Non-Executive Director and as 2011-12 drew to a close Nina Wrightson OBE retired as one of our longest-serving Non-Executive Directors. Nina has been with the Trust since its formation in 2006 and prior to this served on the Board of Tees, East and North Yorkshire Ambulance Service. We would like to thank Nina for her valued contribution over many years and the skills and knowledge she brought to the Trust.

The Appointments Commission has appointed Erfana Mahmood as Non-Executive Director and Mary Wareing as Non-Executive Director (Designate) for 2012-13 and three years thereafter. We are delighted to welcome them to the Trust.

I have just touched on some of the highlights of the past year but there is much more to read in the pages ahead and I hope that you enjoy finding out more about Yorkshire Ambulance Service and the tremendous work of our staff.

Della Cannings QPM Chairman



## **Chief Executive's Welcome**

I have now been with Yorkshire Ambulance Service for over a year and I am extremely proud of the progress and developments the Trust has made in that time. This is due to the commitment of our staff and their outstanding hard work and dedication in improving patient care and delivering a high quality service.

We are delighted to report that the Trust achieved the Red 8-minute response target of 75% to patients with life-threatening conditions at the end of 2011-12. We finished the year at 75.72%, which is two percentage points better than last year and clearly reflects the efforts of so many people across the Trust. This is an achievement that we are very pleased with and, more importantly, it shows that patient care is improving and we are reaching our most seriously ill and injured patients quicker than ever before. Building on this success and improvements in the quality of the services we provide is important for our future and I thank our people for their continued support, dedication and excellent teamwork.

We are also grateful for the continued support of our partners and during 2011-12 we have worked extensively with emergency service colleagues, NHS services and the voluntary sector. You can read more about partnership working on page z. In addition, we welcome the backing of our commissioners who have supported the improvements we have made and encouraged effective working relationships.

A suite of Ambulance Quality Indicators (AQIs) were introduced in April 2011 for ambulance services in England to measure the quality of outcomes from the care we provide to patients. The 11 AQIs are ambulance specific and provide a balance between the speed of response and clinical outcomes for patients. They are a vital indicator of how well we respond to patients' needs and how we maintain and improve standards of care, and are benchmarked monthly with all other ambulance services in England. The AQI dashboard provides us with an insight into where we need to focus our efforts to improve our services further.

The AQI information is available on our website: www.yas.nhs.uk

In the increasingly competitive Patient Transport Service (PTS) market, which saw the loss of the South Yorkshire renal transport contract in 2011-12, there is a significant amount of service improvement work being undertaken by the management team. We have embarked on a service transformation programme to provide a more patient-focused, efficient and improved service that meets our customers' expectations.

We are also continuing with some exciting clinical developments relating to major trauma, which is part of a national initiative to improve clinical outcomes for patients suffering from major trauma. The roll-out of the Major Trauma Triage Tool has begun, helping our clinical staff to quickly identify those patients who require specialist care. As part of this we have invested in a range of clinical equipment and drugs to ensure our clinicians can provide the highest standards of trauma care. It is a very significant step forward and we believe this will contribute to saving over 200 more lives each year. Following consultation with staff, we have introduced clinical supervisor and clinical development manager roles as part of a new Clinical Leadership Framework, which will help to further enhance our quality of clinical

practice, provide clinical support and leadership to our staff and improve outcomes for patients.

We have been developing our five-year Integrated Business Plan that sets our direction for the future. It will ensure that we are a stable, efficient organisation with a strong focus on quality and safety and with patients at the centre of our plans. In moving to Foundation Trust status, we are looking for our patients, staff and communities to have a greater say in how we shape services for the future and benefit the communities we serve.

This year presents us with fresh and exciting challenges and opportunities to develop and further improve services for our patients.

David Whiting Chief Executive



# Performance (main heading)

# **Accident and Emergency (A&E) Operations**

Further improvements were made to our emergency response times in 2011-12 and Trust-wide we achieved the Red 8-minute response target of 75% so we are now reaching our most seriously ill and injured patients quicker than we ever have before.

It has been a busy year with our clinical staff responding to over 631,000 incidents across the region which is an increase of almost 2.47% on 2010-11.

In addition to response times, we have seen real improvements in the quality of care we provide and this has been recognised by those who commission our services. The Ambulance Quality Indicators, introduced in April 2011, focus on the quality of care we deliver and patients' experiences and are evidence of the improvements we have made.

# Developments in the treatment of major trauma

There have been some exciting developments in the clinical management of major trauma patients this year, which are part of a national initiative.

We have led on the new Yorkshire and the Humber major trauma system which allows our ambulance clinicians to convey patients with potentially major life-threatening or multiple injuries directly to hospitals providing specialist care.

Our clinicians have new equipment, drugs and processes to follow and this is raising the standard of care for major trauma patients before they reach hospital. It's a very significant step forward and we believe that it will help us to save up to 200 more lives a year and reduce the risk of disability.

From April 2012 we have also introduced a senior paramedic role in our emergency operations centre managing major trauma across the region and linking with other pre-hospital systems and emergency departments. In addition, the development of critical care paramedics is being piloted through two of our paramedic aircrew on the Yorkshire Air Ambulance.

In 2012 we are rolling out a new drug called tranexamic acid (TXA) which our paramedics will use for patients who have potentially life-threatening bleeding. The pilot roll-out started with our Hazardous Area Response Team (HART) and our aircrew paramedics prior to being circulated more widely across the Trust.

# **New Clinical Leadership Framework**

Following consultation with our staff, the Trust has introduced new roles of clinical supervisor and clinical development manager as part of a new Clinical Leadership Framework. Moving forward, this network of clinical leaders will help to further enhance our clinical practice, improve patient outcomes and deliver greater consistency of staff supervision and leadership. It also provides our clinical staff with clear career progression opportunities as the new clinical supervisors and clinical development managers will become the future senior managers and senior clinicians in the Trust.

### **Police and Paramedic Schemes**

The late-night pairing of a paramedic and a police officer in towns and cities across

the region continues to be an effective initiative which helps to ease the pressures placed on the police and ambulance services.

It provides a quick response to people with alcohol-related illnesses and injuries and those calling for police assistance in the city centre night spots during weekend and bank holiday evenings, a time when traditionally 999 calls to both services are high.

The joint approach can have an instant impact because while police are dealing with any anti-social behaviour, crime and disorder the paramedic can safely enter the environment and provide early medical assessment and treatment to those who are injured.

Schemes are up and running in Leeds, Sheffield, Rotherham, Barnsley, Doncaster, Hull and York.

### **Awards**

Our staff are very dedicated and the Trust has been delighted that a number of frontline clinicians have been recognised for their exemplary contributions to patient care during 2011-12. Some of these are highlighted below:

Paramedic **Michelle Ping** was named Reservist of the Year at *The Sun*-sponsored Military Awards for her bravery in rescuing a wounded soldier while under Taliban fire in Afghanistan.

The Royal Naval Reserve Air Branch Reservist won the title for climbing onto a roof under a hail of bullets to reach Highlander Craig Paterson, 22, who had been shot in the head. Michelle was stationed with the Fourth Battalion Royal Regiment of Scotland - the Highlanders - as part of her tour of duty in Helmand Province, when the incident happened.

Her brave actions have also led to her receiving the top military honour of being Mentioned in Despatches - the oldest form of recognition of gallantry within the UK armed forces.

Brave Paramedic **Pete Cownley** and Emergency Medical Technician **Richard Mitchell f**rom Rotherham were named as finalists for Daybreak's Emergency
Services Award as part of the Daily Mirror's Pride of Britain Awards in October 2011.

They put themselves in grave danger to save the lives of two strangers trapped in a burning car. First on scene at a car crash in Rotherham, our clinicians were faced with a horrific scene where two cars had collided and one had burst into flames. With no regard for their own safety, they raced to the burning, smoke-filled car, where two people were trapped unconscious.

Richard dragged the driver to safety while Pete struggled to free the second occupant through the passenger door. They then administered emergency treatment at the roadside until assistance arrived. The vehicle was completely destroyed by the flames before the fire and rescue service arrived.

**Cathryn James**, Clinical Pathways Advisor and Emergency Care Practitioner, has won a number of awards for her work to provide a more appropriate response to patients who have used a personal alarm to call for help.

In July 2011, Cathryn received a £5,000 bursary award for the scheme after receiving the NHS Clinical Leaders Network (CLN) - AquA Henderson Quality First Prize Award at the CLN congress in London. She was also a finalist in the Software and Telehealth category at the seventh annual Medipex NHS Innovation Awards in September 2011.

In September 2011, she was also presented with a Leeds City Council Partnership Award for the joint work she did with the council on the scheme which enables non-clinical monitoring staff at Sheffield's City Wide Care Alarms and Leeds Care Ring to speak to YAS clinical advisors working in the Emergency Operations Centre who then carry out a telephone assessment of the patient. This has helped to reduce the number of inappropriate emergency ambulance responses and ensure the most appropriate care is arranged or advised for the patient.

Head of Emergency Operations (Hull and East Riding) **Mark Inman** and Community Paramedic **Pete Shaw** have each received High Sheriff's Awards for their exceptional services to the community.

Mark was recognised for his commitment to the Life-Cycle initiative over the last ten years, initially as York's first cycling paramedic and now as a manager.

Pete was honoured for his efforts in setting up seven Community First Responder schemes in the Yorkshire Dales and also for the development of his community paramedic role at Leyburn Medical Practice. As part of the role, which is unique to Leyburn, Pete responds to emergency calls as well as being able to see and treat walk-in minor injury and illness cases.

### **A&E Performance**

We received 751,910 urgent and emergency calls in 2011-12, an average of over 2,050 calls a day. We responded to a total of 631,113 incidents of which 252,619 were categorised as immediately life-threatening.

	Target	2010-11	2011-12	Percentage Point
				Change
Red 8-minute response	75%	73.72%	75.72%	+2.00
(previously Category A 8 minute				
response)				
Red 19-minute response	95%	97.38%	97.94%	+0.56
(previously Category A 19 minute				
response)				
Green 1 response (previously	95%	93.69%	N/A	N/A
Category B 19 minute response)				

# Calling for Medical Help - What Happens Behind the Scenes

The first point of contact for anyone needing to use our 999 service is one of the emergency operations centres in Wakefield or York.

Staff are on hand to deploy the most appropriate response to best meet patients' needs and they play a vital role in providing calm reassurance and advice over the telephone to people who are often anxious and distressed.

During 2011-12 there have been a number of developments in our 999 emergency operations centres:

- Further improvements in the time it takes to answer an emergency call and dispatch an ambulance from 107 seconds to 95 seconds.
- New mapping on mobile data terminals which are used to pass details of jobs to ambulance clinicians and record response times.
- We have taken on Airwave digital radio which is a significant improvement on the previous analogue system.
- A dispatch bay reconfiguration in York has balanced out the responsibility for ambulance resources and a similar reconfiguration will also take place in Wakefield.
- Ongoing recruitment and training of staff.
- We have continued to deliver the GP Out-of-hours service for Primary Care Trusts (PCTs) in Hull, East Riding, North Yorkshire and Gateshead.

# **Emergency Planning** (main heading)

The last twelve months have seen many developments within the Resilience and Special Services department, formerly known as Emergency Preparedness.

As well as the continuation of work to provide advice and support to teams throughout the Trust on issues that may potentially impact on local communities, plans and systems have been refined and work has been carried out to acquire new equipment and deliver additional training.

Despite the winter period being milder than that of previous years, the Trust still encountered challenges as a result of adverse weather (eg snow in March) and seasonal ill health. We had sound plans in place, incorporating learning from previous years, which meant that we were well prepared for all eventualities.

In light of incidents both within and outside the UK, such as the Cumbrian shootings and bombings/shootings in Norway, the Resilience and Special Services team has continued to ensure that YAS is aware of the threats and risks posed and is prepared with the knowledge, skills and equipment to deal with such events should they arise.

Building on the growing knowledge and experience we have within the team we have embarked on a programme of reviewing our current plans and guidance to streamline both so that they are more accessible and user friendly. We are also looking to refresh the information we provide to colleagues and invest in the education of the Resilience and Special Services team by a Certificate in Resilience Management in partnership with Leeds University.

Training for all staff and managers across the Trust remains a priority to ensure we are ready for any major disasters. It has been a real challenge to balance training needs against daily operational demands, but we have devised innovative ways of delivering training through e-learning programs, including a module on 'Managing Incidents with Multiple Casualties'.

We have invested in the education of managers and specialist resources to ensure we can work closely with our emergency service and healthcare partners in the event of a mass casualty situation. We have staff trained in the appropriate use of personal protective equipment (PPE) for such events. We have also developed and are currently rolling out a bespoke course, in partnership with South Yorkshire Police, which delivers training to ensure that our commanders are competent in making effective decisions based on sound intelligence and judgement. We remain committed to working alongside our partners and being actively involved in multiagency table-top and practical training exercises, several of which have been successfully completed in 2011-12.

Other projects that are ongoing include the development of a pre-hospital/mobile hospital teams capability and an Advanced Casualty Clearing Station to hold seriously injured casualties near to a scene whilst the wider health community can mobilise an effective response to deal with a large influx of casualties.

We have also been involved in supporting the 2012 Olympic Games, with preplanned aid and the torch relay journey through our county.

# Patient Transport Service (main heading)

Our Patient Transport Service (PTS) is the second largest ambulance provider of non-emergency transport in the UK. We provide transport for people who are unable to use public or other transport due to their medical condition and include those:

- attending hospital outpatient clinics
- being admitted to or discharged from hospital wards
- needing life-saving treatments such as chemotherapy or renal dialysis.

In the increasingly competitive PTS market, which saw the loss of the South Yorkshire renal transport contract in 2011, there is a significant amount of work to be done in transforming the service to ensure we are more patient-focused.

Against this backdrop, it was a busy year for PTS where we undertook 962,499 journeys and have been working hard to embed the four major contracts we have with our primary care trust (PCT) commissioners - which focus on the experience of patients and delivering a high quality, credible service.

Last year, we faced a number of challenges and, even though we experienced a milder winter than 2010-11, we made it a priority to ensure that our renal and oncology patients' treatment was not interrupted during cold snaps or the Christmas period. PTS provides valuable resilience and good patient care and has the ability to provide patients and hospitals with the reassurance that we will do everything we can to ensure patients get urgent treatment, whatever conditions we are faced with.

During 2011-12 there were a number of significant changes and improvements made in PTS:

- We were named Employer of the Year in the NHS Yorkshire and the Humber Apprenticeship Awards 2011.
- So far, 66 apprentices have completed the Apprenticeship Programme with the Trust and a further 22 apprentices are due to complete their training by August and November 2012. Twelve new operational apprentices started their training in February 2012 and 10 new apprentices started in communications in April 2012.
- We employed 33 new PTS staff and 41 apprentices in 2011-12 and we have 758 PTS staff in total (WTE).
- The introduction of voice-call recording for quality purposes has enabled our communications centre teams to provide valuable feedback to our call handling teams and improve callers' experiences.
- Expanding the use of touch-screen technology to allow call handling and dispatch operators to function more quickly and effectively has benefitted service users and patients.
- We have reviewed our volunteer services to ensure they are fit for purpose, streamlining working practices across PTS to ensure consistency in all areas.
- We have introduced eligibility screening for patients in North and East Yorkshire.
- We appointed a Head of PTS and Heads of Service to strengthen the PTS management team and ensure that we have the capacity to deliver an effective service.

Following discussions with our commissioners, staff and patients, the Trust Executive Group arranged for external consultants to work with the YAS team to support the service transformation programme which is focused on improving our PTS to make it work more efficiently and effectively.

### Plans for 2012-13 include:

- upgrading our Personal Digital Assistant (PDA) units to ensure we continue to capture accurate patient journey time data
- looking to increase the number of volunteers supporting PTS by embarking on a recruitment campaign in spring 2012
- working with volunteer organisations and community groups who provide patient transport
- undertaking a pilot scheme of PTS volunteers working in hospitals to assist PTS patients
- continuing to support and develop our PTS Apprenticeship Programme and act as Ambassadors for Apprenticeships promoting them in other ambulance services and businesses across England
- developing access to our services by increasing the number of service-users booking transport online.

PTS will continue to focus on financial resilience in 2012-13 and ensure we use our resources wisely. We aim to consider making further cost efficiencies whilst providing a high quality service for patients.

We will invest in our vehicles to make sure we have a modern well-functioning fleet that supports good quality care for the people of Yorkshire and resilience for our 999 colleagues.

We are aware that there are still concerns around patient delays that need to be eliminated and we are working hard with our teams to do this. It is really important

that we reduce long waits for patients after difficult treatments and our own staff are only too aware of the impact this has on patients and we are all determined to make improvements.

Patient Transport Service Performance:

We made 962,499 journeys transporting patients to and from hospital and treatment centre appointments. [This repeated line will appear in a separate box as per last year's Annual Report]



# Our Fleet and Equipment (main heading)

We have continued to invest in our fleet and equipment to ensure we can provide the best clinical care and efficient and comfortable transport for all our patients, whatever their needs.

During 2011-12, the Trust purchased:

- 29 new ambulances fully kitted with medical equipment
- 10 specialist 4x4 ambulances for use in rural locations across our region including medical equipment
- 106 rapid response vehicles
- 16 PTS single wheelchair vehicles
- 11 PTS stretcher vehicles
- 15 defibrillators
- 117 suction units.

During 2012-13 we will be developing a single specification vehicle conversion ambulance for YAS which will help to deliver both financial and environmental savings.



# Our Staff (main heading)

The people who make up YAS are vital to the delivery of high quality care, good patient experiences and improved health outcomes. The way in which our staff and volunteers are led, managed and developed is extremely important to us and to the standard of care that we provide.

During the last 12 months, we have taken significant steps to refocus and reframe our approach to people management and development, as set out in our new Workforce Strategy *YAS People*. This new strategy ensures that we will continue to recruit, retain, develop, engage, reward and recognise the right people, with the right skills, in the right roles, at the right time to deliver the YAS vision, mission and values. In particular, *YAS People* will ensure that we are an organisation that has staff who are:

- well led, well managed and well developed
- sustainably high performing, patient focused, adaptable and flexible
- able to adopt and deliver an ethos of 'right first time, every time'
- well educated, skilled and trained to provide safe, high quality, clinically effective and patient-focused care
- reflective of the communities the Trust serves and celebrate the benefits that difference can make to creating healthy teams
- self-aware, innovative and creative
- professional at all times
- ambassadors in the community and at work and are respected for their individual and collective contributions.

Our work underpinning the YAS People strategy has meant that, during the last year, we have continued to invest significantly in the development of our people through the delivery of a broad range of statutory and mandatory training, access to continuous professional development (CPD) opportunities and through the roll out of skills-based training, such as our new trauma equipment. We have also continued to partner closely with a range of universities, including Sheffield Hallam, Teesside and Bradford Universities.

Our work to improve equality of opportunity and celebrate the diversity of our workforce and the communities that we serve, has significantly improved with the publication of our first Single Equality Scheme and the establishment of a number of staff support networks for people within our workforce from minority groups. We remain a 'two tick' employer, accredited by Job Centre Plus, for our approach to guaranteeing interviews for people with disabilities who meet the essential requirements for our roles. We have also continued to attract and recruit staff into a range of roles during the last year and our work to support young people into employment achieved notable success when our approach to apprenticeships achieved the Employer of the Year Award in the NHS Yorkshire and the Humber Apprenticeship Awards 2011.

Managing attendance and ensuring our people are properly supported and productive remains a key challenge and priority for us, which we continue to proactively address in partnership with our recognised trade unions and occupational health providers. We were especially proud that our approach to managing health

and wellbeing in the workplace led to the Trust being a shortlisted finalist for the Chartered Institute of Personnel and Development (CIPD) People Management Awards in 2011.

Following the progress made during the last year, we recognise that we have a firm foundation from which to further develop our people to deliver even higher standards of service to the public.

### Recruitment

During the period of 1 April 2011 to 31 March 2012, the Trust recruited 247 new members of staff. Of these 175 joined the Operations Directorate – 20 in the Emergency Operations Centre (EOC), 78 in the Patient Transport Service (PTS) and the remaining 77 within our A&E service.\*

# **Long Service Awards**

A Long Service and Retirement Awards ceremony was held in July 2011 to recognise the dedication and commitment of 60 members of staff who had collectively clocked up over 1,600 years of service between them.

Individuals who had reached their 20, 30 and 40 years of service, as well as those who had retired after a long career with the ambulance service, were honoured at the event at Wetherby Racecourse. The event also honoured staff who received the Queen's Long Service and Good Conduct Medal for 20 years' exemplary frontline emergency service.

The Queen's Representative, Deputy Lieutenant of West Yorkshire Stanley M. Hardy Esq. presented the awards alongside our Chief Executive David Whiting and Vice Chair Pat Drake.

## We Care Awards

This year saw the first ever YAS We Care Staff Awards, which were held in April 2012 to mark the achievements of our staff during 2011-12 and recognise those who go the extra mile for patients and colleagues.

There were eight award categories that staff could nominate their colleagues for, including two special awards; 'Team of the Year' Award and 'Trust Board Choice' Award.

Over 100 staff were nominated for the various awards and were honoured at the Awards Ceremony which took place in Leeds.

### Sickness Absence

The table below shows the overall sickness absence figures for each month of 2011-12 for comparison with 2010-11.

During the past year our employee health and wellbeing programme has continued to develop. An internal staff intranet portal was established providing staff with information on benefits, discounts and health and wellbeing advice. Staff have been encouraged to develop health and wellbeing groups at a local level, with examples of good practice being identified expertly within our emergency operations centres.

<sup>\*</sup>This information is usually presented in a pie chart.

A review of our progress against the stress management action plan produced in 2010 showed that considerable work had taken place to address issues raised by staff through the stress audit and focus groups. This review, and analysis of the Staff Survey data from 2011, will now inform our forward-looking action plan as we continue to manage and improve the wellbeing of our staff.



	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2010- 11	5.50%	5.31%	5.15%	5.36%	5.76%	5.44%	5.61%	5.93%	6.85%	6.84%	5.67%	5.30%
2011- 12	5.27%	4.94%	4.98%	5.54%	5.49%	5.45%	5.62%	6.57%	6.55%	6.29%	6.33%	6.40%
+/-	-0.23%	-0.37%	-0.17%	0.18%	-0.27%	0.01%	0.01%	0.64%	-0.3%	-0.55%	0.66%	1.1%

Workplace health and the wellbeing of our staff is a high priority for the Trust, as is our need to reduce levels of sickness absence to improve our productivity and the quality of service we provide to the public. To ensure that we actively reduce levels of sickness absence in the coming year, the Trust will:

- target interventions by both line managers and HR professionals to those areas where sickness absence is the highest
- target training for line managers to ensure that they manage sickness issues fairly, but robustly and hold them to account for the performance of their teams in this respect
- tender for consistent occupational health service provision which is focused upon supporting the Trust as an employer and provides active interventions to enable the earlier return to work for staff who have been absent due to illness
- provide a 24/7 employee assistance programme to enable staff to access professional support, such as counselling, when they need it.

It is a formal requirement\* that public bodies report sickness absence data and this is reported on a calendar year basis (January - December 2011) from a number of sources\*\*. NHS national sickness absence figures for 2011 show that the Trust had 3,800 full-time equivalent staff in post, which equated to 855,000 available hours. The days lost to sickness were 49,065 which gives a sickness percentage of 5.7% and an average sickness per employee of 12.9 days.

<sup>\*</sup> Treasury Financial Reporting Manual (FReM)

<sup>\*\*</sup> the Information Centre sickness absence publications and iView workforce staff in post, sourced from the electronic staff record (ESR) data warehouse.

# **Keeping Staff Safe**

All our staff have the right to a healthy and safe working environment. This is why we exercise zero tolerance in relation to violent or aggressive behaviour, whether they are physical or verbal, and we encourage staff to report such incidents so the appropriate action can be taken.

Our staff were subjected to 320 recorded incidents involving physical and verbal abuse between 1 April 2011 and 31 March 2012, compared to 290 during the previous year. This increase may be attributable to increased awareness amongst staff and the encouragement they receive to report incidents.

During 2011-12 there were 17 successful prosecutions as a result of assaults on staff which resulted in sanctions ranging from fines and police cautions through to community service and prison sentences.



# **Listening to Staff**

YAS believes in two-way communication with its staff. Information is disseminated to staff through various methods of communication, including filming key messages and making them available to staff via the intranet. We recognise the importance of staff being able to express their views, raise concerns, offer ideas for improvement and engage in decisions which affect them. Our weekly *Operational Update* communication includes an interactive Q&A section for staff, enabling them to find answers to questions beyond their immediate line manager or department.

Senior executives and managers actively participate in our 'Listening Watch' programme, which involves visiting various locations to speak to staff, listen to their issues and concerns and capture ideas for improvements. At a local level, we operate a 'Station Surgery' initiative which allows staff to meet with their locality managers on a regular basis. We also operate fleet open days to give staff the opportunity to be involved in decisions around our investment in vehicles.

However, we are not complacent and we have future plans to expand these initiatives even further with the launch of our 'Bright Ideas' suggestion scheme in 2012-13.

YAS undertakes an annual NHS Staff Survey to gather the views and opinions of staff about a range of issues affecting their working lives. In the 2011-12 the response rate was 55% compared with 57% in 2010.

When comparing our scores to the national average for other ambulance trusts the highest ranking scores are listed below:

- 5% fewer respondents said that they had witnessed potentially harmful errors, near misses or incidents in the month prior to the survey.
- 5% fewer respondents reported experiencing harassment, bullying or abuse from other staff in the previous 12 months.
- 5% more respondents reported receiving job-relevant training, learning or development in the previous 12 months.
- 9% more respondents, who had attended an appraisal in the previous 12 months, said they had received personal development plans.

Our lowest ranking scores compared to other ambulance trusts are listed below:

- 8% fewer respondents reported being able to contribute towards improvements at work.
- On a scale of one to five, respondents rated support from immediate managers at three, 0.21 lower than the national average.
- 4% fewer respondents reported using flexible-working options.
- 4% fewer respondents reported good communication between senior management and staff.

These findings will now help to shape our activity over the coming months, with the aim of continuing to improve the work experience of our staff.

# **Supporting Staff**

YAS provides a confidential occupational health service for our workforce in order to promote and maintain the physical, mental and social wellbeing of our staff. Services include:

- pre-employment health checks
- health promotion activities
- immunisation programmes
- support for staff recovering from ill-health
- fitness services
- counselling services.

The Trust also provides training for staff and managers in areas such as stress management and works in partnership with managers to measure episodes of absence and return-to-work support for staff.

Additionally, the Employee Health and Wellbeing programme provides advice and resources to support staff, both in their personal and working lives; tangible benefits are offered through the programme such as discounts on gym membership and car breakdown cover. This programme achieved a finalist place in the health and wellbeing category of the Chartered Institute of Personnel and Development (CIPD) People Management Awards in October 2011.

YAS is committed to providing all staff with annual personal development reviews in order to identify where further development and support is required, and to ensure they have the skills, knowledge and resources to meet the challenges faced in their roles.

# **Equality and Diversity**

To ensure the Trust continues to comply with equalities legislation (Equality Act 2010) and create an organisation that embraces the benefits of diversity, many pieces of work have been completed including:

- Publishing a Single Equality Scheme, which has led to:
  - an appointment of an executive lead for equality on the YAS Board
  - a new Equality Impact Assessment tool to ensure YAS does not discriminate against minority groups
  - 138 Patient Transport Service staff and 21 student paramedics receiving equality, diversity, dignity and respect training
  - retaining the 'two tick' disability symbol, which is awarded by Job Centre Plus to employers who are positive about employing people with disabilities
  - the formation of a Lesbian, Gay, Bisexual and Transgender staff support network.
- Publishing public sector equality duties, which includes:
  - staff data
  - patient data
  - information on how YAS aims to move towards the Equality Delivery System.

YAS is using the NHS Equality Delivery System as a tool to effectively meet the requirements of the Equality Act 2010. This system will assist YAS to continually make improvements in delivering care services and fair employment to all sections of the community.



# Training (main heading)

# **Leadership and Management Development**

The Trust is continuing to develop leaders and managers, with 20 of our leaders and future leaders having completed management courses and 34 others starting the programmes this year. Approximately 100 team leaders and managers will have completed an Introduction to Coaching course and a course to provide a consistent development programme to support over 160 clinical supervisors as they lead their teams in improving patient care. Looking forward, these programmes will continue to help leaders and managers as they and their staff improve the service.

# **Apprenticeships at YAS**

YAS has been named Employer of the Year in the NHS Yorkshire and the Humber Apprenticeship Awards 2011.

The award is in recognition of our commitment to developing a wide range of apprenticeship schemes where individuals receive full basic training, on-the-job mentorship, learn job-specific skills and gain a range of qualifications from within an Apprenticeship Programme.

NHS Yorkshire and the Humber ran the award scheme which aims to recognise NHS organisations/employers who have embraced the use of apprenticeships within their organisation. Awards were presented at a ceremony on 16 September 2011 in Leeds.

Many of the apprentices work in the road operations and communications divisions of our Patient Transport Service (PTS), which offers great prospects for a future career with the ambulance service. The Apprenticeship Programme achievement rate within YAS is 90% compared to the national average of 63%.

### **Learning Technology**

YAS continues to develop and modernise the provision of education and training by converting traditional tutor-led classroom training into flexible modular online elearning via 'YAS 247', the Trust's virtual learning environment. One of the first courses to be produced was on Stroke/Transient Ischaemic Attack (TIA) which includes a series of video podcasts, links to key documents, examples of patient experience videos, stroke pathway information, patient report form completion and an online evaluation.

Staff are encouraged to undertake a full range of online learning and a total of 1,293 e-learning modules have been completed on the National Learning Management System this year. A total of 232 staff have also undertaken basic IT training to support their use of online learning.

## **Commercial Training**

The YAS Commercial Training department is expanding both its portfolio of training provision and range of clients throughout the private and public sector. It is set to increase turnover for the third consecutive year, despite a very challenging commercial environment.

Their portfolio is largely made up of small and medium sized enterprises, however this year the department has successfully led a consortium of NHS Ambulance

Service Commercial Training providers to secure the consortia's first national contract for first aid training.

Profits made by the department are re-invested directly into public education and community engagement activities which are actively coordinated by the department.

# **Public Education and Community Engagement**

Innovative public education materials have been funded and developed by the Commercial Training department to support school and community visits that teach young people about:

- appropriate use of 999 emergency services
- how to act in the event of an emergency
- the provision and importance of high quality chest compressions in cardiac arrest
- safety and security
- health and fitness.

At the end of 2011-12 the Commercial Training department and other staff across the Trust will have delivered educational programmes to over 50 schools in the region.

In 2012-13 the department will play a leading role in the development of the Trust's Public Education and Community Engagement Strategy that will foster and enhance links with the communities we serve.

# Partnership Working (main heading)

We continue to work very closely with a number of partners, including other emergency services, NHS services and volunteers, and very much appreciate their support.

# **Community Resilience**

The Community Resilience department identifies potential Community First Responder (CFR) locations and volunteers to assist patients who suffer life-threatening illness such as stroke, heart attacks, breathing difficulties and cardiac arrest. CFRs provide care until the arrival of an ambulance response and attend local emergency calls to patients who may have collapsed or have other potentially life-threatening conditions.

The department engages with other stakeholders and partner organisations such as the British Heart Foundation (BHF), mountain rescue services, HM Coastguard, lifeguards, Cave Rescue and Humber Rescue to assist in local community resilience where YAS may have challenges in reaching and retrieving patients in remote areas and difficult terrain.

By the end of December 2011 we had 3,961 volunteer responders across Yorkshire who belong to 391 CFR, co-responder and static-site schemes (a static site is defined as a place with high footfall but doesn't move, eg a railway station, airport, bus station or shopping centre). This increased the number of volunteers in 2011 by 605 and the number of active schemes by 54.

The community-based volunteers have attended over 8,840 incidents during 2011, an increase of 2,800 on last year. Their quick response means they are on hand in the vital first few minutes of an emergency to provide life-saving treatment.

Partnership working arrangements have continued with mountain rescue services, HM Coastguard on the East Coast and many police custody suites which now have access to an Automated External Defibrillator (AED). The East Riding of Yorkshire saw a significant increase in recruitment in the latter part of last year with an additional 52 volunteers supporting areas such as Withernsea, Hedon and Hornsea.

### **Educational Links - British Heart Foundation**

The Community Resilience department has links to its communities through its BHF-funded Community Resuscitation Development Officer (CRDO). This has enabled a total of 1,373 certified students, covering a diverse group of individuals such as drug or alcohol-related students, individuals with learning needs, disabilities and autism, to learn basic life support (BLS) skills. Furthermore, our relationship with Heartstart (through our BHF partner) has seen significant additional training and education in BLS.

# **BASICS Doctors**

YAS continues to support 44 British Association for Immediate Care (BASICS) doctors who provide support to ambulance clinicians at serious road traffic accidents and other trauma incidents across the region. We are looking forward to developing this valued service in the year ahead, particularly across South Yorkshire.

### Yorkshire Air Ambulance

YAS continues to work in partnership with the Yorkshire Air Ambulance (YAA) charity to provide paramedics for an airborne response to emergencies. The two YAA helicopters are based at Leeds Bradford International Airport and Topcliffe, North Yorkshire.

# Frequent Callers' Project

The Trust's Frequent Callers' Project has now been running for three years and works in partnership with all 12 primary care trusts (PCTs) in the Yorkshire and Humber area.

The project identifies frequent callers to the emergency ambulance service who require help but not necessarily assistance from our A&E crews. We work closely with PCTs to identify issues with frequent callers and takes steps to put alternative pathways in place. This means that the callers are able to gain access to more appropriate services which for some, will be a personal care package or assistance from a community-based team.

A review of the results for 2011-12 indicates that the project has reduced the call volume expected from frequent callers by 41% across the Trust and helped to reduce the burden on the 999 system.

# Our Estate (main heading)

The YAS Estates department is responsible for the maintenance and repairs of a vast number of electrical, mechanical items and buildings across the Trust's 62 ambulance stations, 11 fleet care vehicle workshops, 19 PTS patient reception centres (PRCs), 32 five-star standby sites, four training facilities, the Hazardous Area Response Team (HART), Resilience Operational Support Unit (OSU) and six support/administration facilities.

As well as responding to maintenance/repair requests, the Estates department is responsible for installation works and also for carrying out the Trust's Estates Capital Plan.

# **Estates 2011-12**

In 2011-12 there has been further capital expenditure on large-scale projects that have significantly helped to reduce the Trust's energy bills and also improve the working environment for staff. These included:

- a full refurbishment of Halifax Ambulance Station which took place in 2011 and consisted of fully replacing the station roof, the heating system and all the lighting, installing a new fire alarm system, replacing the tarmac driveway, full decoration throughout including the garage, replacing fuel tanks and installing perimeter fencing
- replacement of roofs at Longley and Rotherham ambulance stations.

Other successful projects completed during the year include the following:

- Installation of a new fire alarm system at Leeds and Thirsk ambulance stations.
- Installation of additional internal/external vehicle charging points at various ambulance stations.

In 2011-12 the Estates department has continued to reduce the Trust's energy bills and also make site-working environments better by including them in its plans. This included the following:

- Installation of a new heating system at Harrogate and Brighouse ambulance stations.
- Refurbishment of Bradford Ambulance Station, including the creation of a 'make ready' area where ambulances are prepared by trained ancillary staff for crews at the start of each shift. This includes re-fuelling and replenishing consumables.
- Refurbishment of Leeds Ambulance Station's offices and garage.
- Installation of new fuel tanks and pumps at various ambulance stations in West Yorkshire.

Due to the delay in the sale of Bramham Ambulance Station, a decision was made to demolish the building to prevent vandalism, make the site safe and assist with security which took place in May 2011.

Other successful projects completed during the year include:

- installation of two 'launch pads' at Menston and Huddersfield ambulance stations for ambulance crews to park their emergency vehicles to enable them to respond more quickly to 999 calls.
- installation of a new fire alarm system at the York Emergency Operations Centre (EOC).

Looking forward, the Estates department's capital expenditure for 2012-13 includes the following:

- Various station upgrades at Bridlington, Driffield, Harrogate, Hoyland, Leeds, Settle and Whitby ambulance stations.
- Replacement of two uninterrupted power supplies (UPS) at Trust Headquarters, Wakefield.
- Completion of the refurbishment of Bradford Ambulance Station that began in 2011-12.
- Completion of the Gold Cell Command Centre in the former nursery at Trust Headquarters, Wakefield.

# **How We Work (main heading)**

# **Openness and Accountability Statement**

The Trust complies with the NHS Code of Practice on Openness and has various channels through which the public can obtain information about its activities.

We are committed to sharing information within the framework of the Freedom of Information Act 2000 and all public documents are available on request.

We hold a Trust Board meeting in public every two months and our Annual General Meeting is held in September each year. These meetings are open to the public with specific time set aside for questions.

We always welcome comments about our service so we can continue to improve and members of the public who have a compliment, concern, complaint or comment should not hesitate to contact us.

# **Environmental Policy**

YAS aims to ensure that our buildings and all goods and services we buy are manufactured, delivered, used and managed at the end of their useful life in an environmentally and socially acceptable way. YAS is committed to reducing the carbon footprint of its buildings, fleet and staff whilst not compromising the core work of the emergency service.

The Trust's Carbon Management Plan, which is consistent with local and national healthcare strategies, sets out the Trust's long-term commitment to sustainable reductions of our CO<sub>2</sub> emissions and reducing the Trust's carbon footprint. Many of the measures identified to reduce CO<sub>2</sub> emissions will deliver ongoing financial savings from reduced costs associated with utilities, transport and waste. These can be reinvested into YAS to support further carbon reduction measures and make further long-term cost savings as well as maintain a more sustainable ambulance service for the future.

In 2010, the Carbon Management Plan was drawn up by the Carbon Management team to identify and highlight areas of YAS which can reduce carbon emissions as well as make significant cost savings. This report is annually updated and the plan identifies CO<sub>2</sub> savings to be made within Estates, IT and Fleet departments. YAS has pledged to reduce its carbon footprint by 30% by 2015 based on the 2007 baseline.

The Trust's carbon footprint has been measured in line with the Carbon Trust methodology and the baseline results are shown below:

YAS Carbon Footprint Calculation							
The carbon footprint for 2011-12 is estimated to be 17,500 tonnes of CO <sub>2</sub>							
Year Total CO <sub>2</sub> Emission (tonnes)		Emissions from building (tonnes) Emissions from transport (tonnes)		Emissions per employee (tonnes)	% change		
2007-08	16,531	5,553	10,856	4.88	0%		
2008-09	16,831	4,929	11,745	4.97	2%		
2009-10	17,257	5,707	11,345	4.35	4%		
2010-11	16,330	5,104	10,961	3.65	-1%		

YAS has won many awards in recognition of our carbon reduction work carried out during the year including winner of the People and Environment Achievement Business Awards 2012, EST Fleet Heroes Award for Leadership 2011, Business Green Sustainability Team of the Year 2011 and we were also runners-up of the Emergency Services Awards 2011.

# **Looking Forward to 2012-13**

In addition to our focus on carbon, we are also committed to reducing wider environmental and social impacts associated with the procurement of goods and services. This is set out in our policies on sustainable procurement.

# Yorkshire Ambulance Service Sustainability Report 2011-12

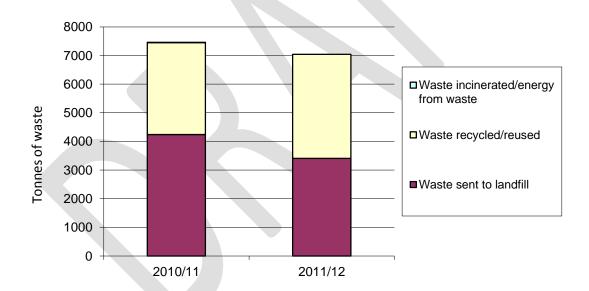
The NHS Sustainable Development Unit (SDU), along with colleagues from the Department of Health, has developed a standard reporting template for NHS organisations which form the basis for their Sustainability Report (SR). This is in line with data requirements in the HM Treasury's Financial Reporting Manual.

The NHS aims to reduce its carbon footprint by 10% between 2009 and 2015 and YAS is aiming to reduce our carbon footprint by 32% during this time period. Reducing the amount of energy used in our organisation contributed to this goal. There is also a financial benefit which comes from reducing our energy bill.

We have incorporated the following points in our SR:

- By reducing our energy costs by 15% in 2011-12, we saved the equivalent of 192 automated external defibrillators (AEDs).
- We have put plans in place to reduce our carbon emissions and improve our environmental sustainability, and over the next ten years we expect to save £1.3million as a result of these measures.
- In 2011, we recycled 226 tonnes of waste, which is 43% of the total waste we produce. We do not currently generate any energy and renewable energy represents 0.0% of our total energy use. We have not as yet made arrangements to purchase electricity generated from renewable sources.
- The Carbon Reduction Commitment (CRC) Energy Efficiency Scheme is a mandatory scheme aimed at improving energy efficiency and cutting emissions in large public and private sector organisations. As we do not qualify for the scheme, our gross expenditure during 2011-12 was £0.

- During 2011-12 our fuel expenditure was £7.2 million against £6.3 million in 2010-11. Most of the increase is due to increases in international fuel prices and the Trust is continuing to implement ways of reducing fuel use through purchasing more fuel-efficient vehicles and driver training. We have also piloted the use of an electrical vehicle in our Patient Transport Service.
- The Trust has a Board level lead for sustainability. However, sustainability issues, such as carbon reduction, are not currently included in the job descriptions of all staff.
- Our staff energy awareness campaign is ongoing throughout 2012-13.
- NHS organisations have a statutory duty to assess the risk posed by climate change and the Trust is considering the potential need to adapt the organisation's activities, buildings and estates in line with this policy. This will pose a challenge to both service delivery and infrastructure in the future.
- Sustainability issues are included in the Trust's analysis of risks facing the organisation. Risk assessments, including the quantification and prioritisation of risk, are an important part of managing complex organisations.
- The Trust has a Sustainable Transport Plan, which considers what steps are needed and are appropriate to reduce or change travel patterns.
- Our expenditure on clinical and non-clinical waste in the last two years was incurred as follows: [this information will be shown in graph format in the final report]



### **Information Governance**

YAS aims to ensure that the personal data it holds is accurate and held securely in accordance with the appropriate legislation and standards outlined in the NHS Information Governance Toolkit.

Since September 2011 the responsibility for reporting events involving the potential loss of personal data to the Information Governance Group and Senior Information Risk Owner has been passed to the Legal Services Manager and Deputy Medical Director (acting on behalf of the Medical Director as Caldicott Guardian).

Summary of personal data-related incidents from September 2011 to the end of January 2012						
Category	Nature of Incident	Total				
IV	Unauthorised disclosure	One				
III	Insecure disposal of inadequately protected electronic equipment, devices or paper documents	Nil				
II	Loss of inadequately protected electronic equipment, devices or paper documents from outside secured NHS premises	7				
	Loss of inadequate protected electronic equipment, devices or paper documents from secured NHS premises	Nil				

Reports relating to the events are analysed to ensure that appropriate measures have been taken to secure any potential losses and organisational learning reported to the Information Governance Group.

The Senior Information Risk Owner for YAS during 2011-12 was Steve Page, our Director of Standards and Compliance.

## **Corporate Communications**

The Corporate Communications team has continued to raise the profile of the ambulance service through the media and trade press and, as part of our ongoing drive to reduce the number of inappropriate 999 calls to the service, has launched various campaigns to encourage appropriate use of the emergency service. At Christmas, traditionally the service's busiest time of year, we launched a campaign entitled '999 for Emergencies Only' which ran alongside an appeal for responsible drinking over the festive period. Overall it received widespread media coverage including broadcasts on radio stations and televised news programmes.

In addition to this, various seasonal public health campaigns ran throughout the year such as our appeal during the summer months for people to be safe around open

water when, typically, there is an increase in people requiring ambulance assistance after getting into trouble whilst swimming in lakes, rivers and reservoirs.

The team has continued to produce a wide range of internal bulletins for staff and this year introduced a system to colour code operational and clinical alerts to encourage better understanding amongst staff about the importance of messages.

A new publication, 'YAS Stakeholder eNews', has been developed which is a monthly electronic bulletin for our key stakeholders to keep them up-to-date on Trust developments, achievements, performance and campaigns.

Training initiatives have been supported with literature and materials produced by the team including a Safeguarding Level 2 distance learning resource and a second statutory and mandatory training workbook.

The Trust's name 'Yorkshire Ambulance Service' appeared on media websites, in newspapers and trade press and on radio and television news programmes on 1,674 occasions. 49.97% (911 items) of the overall coverage was analysed as favourable, 28.03% (511 items) neutral and 22% (401 items) negative in tone. Favourable coverage is estimated to have an average PR value of £882,402.

Working alongside the Resilience and Special Services team, communications handling plans have been prepared for major events including as the national day of industrial action which was held in November 2011 and the forthcoming London 2012 Olympic Games Torch Relay which passes through Yorkshire.

### Trust Board 2011-12

Chairman - Della Cannings QPM

Chief Executive – David Whiting

Deputy Chief Executive and Director of Workforce and Strategy - Stephen Moir

Executive Director of Finance and Performance – Rod Barnes

**Executive Director of Standards and Compliance – Steve Page** 

Executive Medical Director – Dr Alison Walker

**Executive Director of Operations –** David Williams (acting) *This role was held by* Sarah Fatchett from 3 November 2008 until 1 January 2012 when David Williams took over on a temporary basis until the arrival of Paul Birkett-Wendes in June 2012.

### Non-executive Directors 2011-12

Nina Wrightson held the post of Non-executive Director with YAS from 1 July 2006 - 31 March 2012.

Richard Roxburgh

Roger Holmes CB

### Elaine Bond

### Patricia Drake

# **Non-Executive Directors 2011-12**

As members of the Trust Board, non-executive directors oversee the delivery of ambulance services for the local community and help ensure the best use of financial resources to maximise benefits for patients. They also contribute to plans to improve and develop services which meet the area's particular needs. A non-executive director is accountable to the Secretary of State. They are expected to hold the executives to account, to use their skills and experience to help the Board as it develops health strategies, and ensure the delivery of high quality services to patients. They are lay people drawn from the community served by the Trust.

In addition to their attendance at Trust Board meetings, the Non-Executive Directors chair Tier 1 committees as described on page a.

The appointment of non-executive directors is made in accordance with the Office of the Commissioner for Public Appointments' (OCPA) Code of Practice. The Appointments Commission is the independent organisation responsible, on behalf of the Secretary of State, for appointing chairs and non-executive directors to NHS organisations, including strategic health authorities, primary care trusts, ambulance trusts, mental health trusts and hospital trusts. The Appointments Commission ensures that the public appointment process is open, fair and impartial and that appointments are based solely on merit.

**Nina Wrightson OBE** is a Chartered Safety Practitioner and a former Chairman of the British Safety Council. She was Risk Management Director for Northern Foods plc and has also worked for the Health and Safety Executive, the Government Office for Yorkshire and the Humber and Nestle Rowntree. Nina is also a board member of the NHS Litigation Authority.

Nina occupied this post from 1 August 2006 until 31 March 2012.

**Richard Roxburgh** is a fellow chartered management accountant with extensive financial and commercial experience. Former roles include Finance and Commercial Director with Arriva Trains Wales and Finance Director with Arriva Trains North. Earlier career experience includes senior financial positions with BT Cellnet (now O<sub>2</sub>) and BT Business Division throughout the UK.

**Roger Holmes CB** is a former Chief Executive of St John Ambulance and a current council member of the South and West Yorkshire branch. Roger has held senior posts in the Department of Trade and Industry and a number of large commercial organisations, including Dunlop and the Chloride Group where he was a main board director and the Royal Mint where he was Chief Executive.

**Elaine Bond** has extensive commercial experience of developing strategies from major restructuring initiatives. She is experienced in improving efficiency in manufacturing, logistics and supply chains. She was previously Group Operations Director at UK Greetings Ltd, a leading designer, manufacturer and supplier of greetings cards and related stationery products.

**Patricia Drake** has extensive experience in the NHS from her role as the Assistant Chief Nurse at Bradford Teaching Hospitals NHS Foundation Trust before she retired in 2006. She is currently the Director of Innovate and Develop Ltd, Vice Chair of Locala and a Justice of the Peace in Calderdale.

Erfana Mahmood [details to be added]

Mary Wareing [details to be added]



# **Trust Board - Declaration of Interests**

Name	Nature of Interest	Organisation			
Della Cannings QPM Director		Association of Ambulance Chief Executives			
	Deputy Chairman (up to December 2011)	National Information Governance Board for Health and Social Care			
	Chairman (up to December 2011)	Independent Advisory Panel - Army Foundation College (Harrogate)			
	Member	Lord Chancellor's Advisory Committee for West Yorkshire (Calderdale and Kirklees Sub Committee)			
Roger Holmes	Council Member	St John Ambulance (South and West Yorkshire)			
Nina Wrightson	Non-Executive	NHS Litigation Authority			
(Occupied this post from 1 July 2006 until 31 March 2012)	Director				
Patricia Drake	Director	Innovate and Develop Ltd			
	Chair	Artworks Creative Communities			
Elaine Bond	Non-Executive Director	International Greetings PLC			

# **Trust Board and Committee Membership**

All Trust Board members and Non-executive Directors attend the bi-monthly Trust Board meeting held in public and the monthly private Trust Board meeting.

Other Tier 1 committees at the Trust are detailed below:

Committee	Quality Committee	Audit Committee	Finance and Investment Committee	Charitable Funds Committee	Remuneration and Terms of Service Committee
Membership	<ul> <li>Three non-executive directors</li> <li>Executive Director of Standards and Compliance</li> <li>Executive Medical Director</li> <li>Executive Director of Workforce and Strategy</li> <li>Executive Director of Operations</li> </ul>	<ul> <li>All non-executive directors</li> <li>Executive Director of Finance</li> <li>Executive Director of Standards and Compliance</li> </ul>	<ul> <li>Three non-executive directors</li> <li>Chief Executive</li> <li>Director of Finance</li> <li>Executive Director responsible for business development</li> </ul>	<ul> <li>Two non-executive directors</li> <li>Executive Director of Finance</li> </ul>	<ul><li>All non-executive directors</li><li>Chairman</li></ul>