



<b>Trust Board Meeting</b>				31 July 2012	
<b>Title</b>	Chief Executive's Report			<b>Paper Ref</b>	5.
<b>PURPOSE (X)</b>	<b>Information</b>		<b>Strategic Objective</b>	<b>Business Plan Objective</b>	
<b>Approval</b>	<b>Decision</b>				
<b>Assurance</b>	X	<b>Discussion</b>	Quality		
<b>Purpose of the paper</b>	This report is to give the Board assurance on the activity of the Trust Executive Group (TEG) from 19 May 2012 to 20 July 2012.				
<b>Recommendation</b>	It is recommended that the Board agrees it has sufficient assurance on the activities of the Trust Executive Group during this period.				
<b>Author</b>	David Whiting, Chief Executive	<b>Accountable Director</b>		David Whiting Chief Executive	
<b>RISK ASSESSMENT</b>				<b>Yes</b>	<b>No</b>
<b>Changes to the Corporate Risk Register and/or Board Assurance Framework</b>					X
<b>Resource Implications</b>					X
<b>Legal implications</b>					X
<b>ASSURANCE/COMPLIANCE</b>					
<b>CQC Registration Outcome(s)</b>	<b>Auditors' Local Evaluation</b>		<b>NHSLA Risk Management Standards for Ambulance Trusts</b>		
	4.2, 5.1		1		

## **Report from the Trust Executive Group (TEG)**

### **1. Purpose**

- 1.1 This report is to give the Board assurance on the activity of the Executive Team and Trust Executive Group (TEG) from 18 March 2012 to 20 July 2012. This report includes a briefing from each of the Executive Directors on key issues in their directorate during the reporting period.

### **2. Business Planning & Delivery**

- 2.1 The Ambulance Clinical Quality Indicators (ACQIs), published in July 2012, cover the period including May 2012 for the more process related indicators, and also covering the clinical outcome based indicators up to the month of February 2012. Reviewing the more process related indicators for the first 2 months of this year, Yorkshire Ambulance Service (YAS) performance remains strong in relation to 999 Time to Answer, Time to Treatment (upper quartile for all 3 measures), and upper quartile for Red 19 (formally referred to as Category A19, response time for a conveying resource). In 2012/13, YAS continues to do less well with regards to calls being Resolved by Telephone – 5% average compared to ambulance average of 5.6%, and Non A&E (conveyance to hospital) – 24.2% compared to the ambulance average of 35%. Re-contact 24hrs Telephone remained above average at 28.9% compared to the ambulance average of 14%. Further analysis is being undertaken to understand this differential.
- 2.2 The latest ACQI report for February 2012 in relation to the clinical outcome based indicators has shown consistency in our Return of Spontaneous Circulation following cardiac arrest (ROSC) figures, and Survival to Discharge for the patient group where the cardiac arrest was cardiac related (Utstein group). The year to date position is 36.0% for ROSC, and a Survival to Discharge rate of 20.5%.
- 2.3 In relation to the other clinical outcome based indicators, YAS has performed positively in the Stroke and Heart Attack (STEMI) indicators, achieving 74.7% for the STEMI – Care indicator, and 83.6% for the STEMI-150minute indicator. Similarly for Stroke, YAS has achieved 95.3% for the Stroke – Care indicator, and 72.3% for the Stroke – 60 minute indicator. Achievement in these indicators has exceeded the national ambulance year to date average.
- 2.4 Emergency & urgent activity is 4.9% above plan during quarter 1 of 2012/13. Despite this increase, Red 8 minute performance has remained strong throughout quarter 1, exceeding the plan (national target 75%) for April (77.5%), May (77.2%) and June (80.5%). The year to date (YTD) position for Red 8 performance at the end of June was 78.2%, the highest YTD position of all English ambulance trusts. Red 19minute performance was also stable, with a YTD position of 98% at the end of June 2012.

- 2.5 The Trust is also exceeding the national 75% Red 8 minute target for 4 of the 5 PCT clusters at the end of quarter 1, Hull & East Yorkshire 81.4%, Calderdale, Kirklees & Wakefield 79.0%, Airedale, Bradford & Leeds 77.9%, and South Yorkshire 79.4%. There has been an improvement in North Yorkshire from the quarter 4 position, achieving 73.2% in quarter 1.
- 2.6 Contractual key performance indicators (KPIs) in Patient Transport Services (PTS) have continued to improve throughout quarter 1. The PTS management team is continuing to work with Unipart to implement the service improvement plan for South Yorkshire with an aim of completing the work by September 2012. The second phase of work has commenced, with a diagnostic process taking place in the Hull and East Riding area, followed shortly by a similar process in North Yorkshire. It is expected that the final diagnostic process will take place in West Yorkshire later this year, with an aim of completing all of the transformational work by the end of March 2013.

### **3. Business Planning / Policy Development**

- 3.1 During this period the Trust Executive Group (TEG) have reviewed progress in a number of areas pertaining to service quality and patient safety, including the weekly Quality Compliance Report, Historical Due Diligence (HDD1) action plan, Quality Governance action plan, and A&E and PTS Performance. Additionally, TEG has reviewed progress with a number of business cases, including estates strategy, clinical hub and Emergency Care Solution (ECS) / electronic Patient Report Form. The Executive team also reviewed the Trust strategic objectives, key business risks, Board Assurance Framework (BAF), operational workforce plans, downside scenarios/mitigations, and CIP business cases.
- 3.2 During May, June and early July, TEG also received reports and papers relating to Bright Ideas (staff suggestion scheme), Transformation programme, staff survey, admin review, and a range of operational initiatives including Static Medical Units, Red Triage and plans for the coming Xmas and New Year period, including lessons learned in 2011/12.
- 3.3 The key focus of TEG time has been spent on finalising the long term Cost Improvement Plan (CIP), Quality Impact Assessments (QIA), and developing version C of the Integrated Business Plan (IBP), and associated Long Term Financial Model (LTFM).
- 3.4 The Trust is entering the next phase of its Foundation Trust application, with the Historic Due Diligence – Phase 2 (HDD2) assessment, and Board Governance Memorandum (BGM) assessment both taking place from the 23 July 2012.
- 3.5 Ernst & Young will be conducting the BGM process and Alvarez & Marsal undertaking the HDD phase 2 process, culminating in the board observation at the Public Board meeting on the 31 July 2012. Feedback reports from both organisations will be received in early/mid August prior to the formal SHA Board to Board meeting with North of England SHA on the 21 August 2012.

The Trust expects to enter the Department of Health assessment stage in October, and be ready to enter the final Monitor assessment stage in the new calendar year.

- 3.6 The Trust and its 111 partner Local Care Direct (LCD) have been successful in being identified as the preferred provider of the 111 service from the 12 March 2013. Discussions are underway with commissioners to prepare and sign the 111 contract. This is tremendous news, and provides the Trust with an opportunity to improve the access, quality and coordination of urgent care across Yorkshire & Humber.
- 3.7 As part of the Olympic celebrations, the Olympic Torch Relay passed through Yorkshire and Humber between the dates of 18<sup>th</sup> June to 20<sup>th</sup> June, and 24<sup>th</sup> June to 26<sup>th</sup> June 2012. During this period, the Yorkshire Ambulance Service (YAS) provided medical support for the Torch Relay through the Hazardous Area Response Team (HART). Despite challenging weather and intense public support throughout the route, the YAS stage of the event passed without incident.
- 3.8 On the 23 July, the staff providing pre planned support to the games will travel to London for their final training and familiarisation prior to the opening ceremony on Friday 27 July. We will be providing clinical staff and event commanders for both the Olympic and Paralympic events.

## **4.0 Executive Team Reports**

### **4.1 Chief Executive**

- The Chief Executive and Executive Directors have continued to hold meetings with commissioners, meeting Hull Clinical Commissioning Group (CCG) leads/Chairman, and PCT cluster Chief Executives Group to discuss future commissioning arrangements and our Integrated Business Plan and Foundation trust progress.
- Paul Birkett-Wendes, the new Executive Director of Operations, joined the organisation on the 4 June 2012.
- During this period, the Chief Executive attended a range of internal events, including the Keighley and Dewsbury Continual Professional Development (CPD) events in June and July, and visits to Hull, Goole, Leeds and Bradford stations.
- The Chief Executive and Executive Director of Operations have begun a series of manager and staff briefings across the region to outline the Trust's strategy, future plans and Foundation Trust application.
- The Chief Executive and Chairman hosted Non-Executive Director events for candidates looking to apply for the vacant NED position, and an event for NHS Trusts to raise awareness and understanding of what the ambulance does and could do differently with partners in the future.
- The Chief Executive and Chairman also attended the opening of the Northern Airbase for Yorkshire Air Ambulance (YAA) in July, with the Duke of York as guest of honour. This provides an ideal base from which YAA can more easily cover the North and East of the Y&H region.

- The Chief Executive attended a further Clinical Leadership Induction Programme in Leeds for Clinical Supervisors, and attended the Annual Community First Responder Awards Ceremony for South Yorkshire, which was held at Doncaster Racecourse.
- The Chief Executive has also met a number of key stakeholders and partners during the last period to discuss YAS plans and service delivery, including St John Ambulance, Yorkshire Air Ambulance, and John Lawlor, CEO Airedale, Bradford & Leeds PCT cluster.

## **4.2 Clinical Directorate**

- Recruited a lead Major Trauma Clinical Triage Co-ordinator to liaise with the Yorkshire & Humber Public Health Observatory to ensure efficient and appropriate data collection and information sharing across the regional Major Trauma Network.
- YAS has hosted the regional Medical Emergency Response Incident Team (MERIT) 'train the trainer' sessions.
- Resuscitation Council (UK) Immediate Life Support (ILS) courses are being delivered to clinicians across the Trust. To date, more than 120 have been trained. In addition, refreshers on End of Life care and DNACPR are being delivered as part of the training.
- Our Urgent Care Nurse and one of our Clinical Pathways Advisors presented at the Regional End of Life Group, and a YAS Task and Finish Group has been established to develop appropriate systems for end of life care involving YAS clinicians.
- Funding has been secured from the SHA for a poster campaign highlighting DNACPR to GPs, nurses and relatives in September 2012.
- Further End of Life referral pathways have been introduced in the East Riding, commencing 16<sup>th</sup> July 2012.
- Further Mental Health referral pathways have been introduced in Calderdale, Wakefield and Kirklees for urgent care.
- A falls referral pathway has been established in Sheffield.
- Further work with CCGs, and representation on the regional long term conditions workstream, to develop more appropriate pathways of care.
- Cathryn James presented 'Developing multi-disciplinary working within commissioning' at the National Commissioning Show in London and Angela Harris attended the 'Top 60 Leaders' event to create a culture of leadership & innovation in the NHS.

## **4.3 Standards and Compliance**

- YAS has been confirmed as the preferred bidder for the regional 111 service. The work of the project team is now focusing on the implementation plan, including recruitment to key posts, preparing staff training plans, securing new premises and essential IT and communications equipment.
- The Quality Committee received an initial report on the clinical governance and quality aspects of the proposed 111 service and will focus on this in detail in the September meeting.

- Implementation of the new software for management of incidents, complaints, claims, risk and assurance processes has now commenced. This is beginning with training for key staff during July on the Covalent assurance software.
- Updated performance dashboards have been developed by Management Information in partnership with the Operations Directorate and Business Development teams to support Directorate and Locality level performance management processes.
- Considerable work has been undertaken by the Standards and Compliance and Clinical Directorate teams assess the quality impact of the cost improvement schemes, and to identify appropriate mitigations for any related risks.
- Work is continuing on establishment of the Service Transformation Programme. The Programme Manager is now in post and the first Transformation Programme Group meeting was held on 19 June. Tracking of agreed project milestones for all key developments is now under way.

#### **4.4 Operations Directorate**

- After the first quarter of 12/13 YAS is the leading ambulance service in terms of combined RED performance nationwide (YTD 78.2%) this is a considerable improvement on past performance. This period has also included the Jubilee weekend celebrations where a significant contingent was sent to support LAS, the Olympic Torch relay passing through the region and an increase in demand of over 5%.
- Work to reconfigure the Emergency Operations Centres has begun with the appointment of a new EOC Locality Director, Ben Holdaway, currently Deputy Director of Operations at East Midlands Ambulance Service. A widely respected EOC leader, his introduction from the 3 September 2012 will be a significant step forward in the reorganisation of the EOC management, call taking, dispatching and Clinical Hub to address a number of underlying issues.
- The PTS Transformation project continues to be stable, with the Unipart work now into the implementation phase in the South and the diagnostics commenced in the East. Unipart have been tasked to understand cost pressures and review current budget arrangements to ensure that this business significantly reduces current costs.
- The Health Gold Cell was opened officially on the 5 July 2012 by Kathryn Riddle, Chairman of NHS North of England. This was an important development in our aspiration to become a dominant regional organisation, and confirms our position as a leading resilience organisation. The Gold Cell is now fully operational and ready to respond to a major incident and will be live throughout the Olympic Games.

#### **4.5 Workforce & Strategy Directorate**

- The Workforce & Strategy Directorate restructuring process is continuing with the next phase of changes having been launched or due to launch by the start of August 2012.
- As a part of the restructuring, high calibre appointments have now been made to both the Associate Director of Organisational Effectiveness & Education and Associate Director of Human Resources roles. Both appointees are expected to take up post in the next couple of months.
- During August, both Gill Moss and Glynis Learmonth will be leaving the Trust following the deletion of the two Assistant Director of Organisational Development roles as part of the Directorate restructure. Their individual contributions since the formation of YAS have been appreciated and valued. Both are wished well for the future.
- The Deputy CEO/Director of Workforce & Strategy has now assumed executive sponsorship for work to improve sickness/absence management across the whole organisation, and a range of new interventions are being introduced, including long term absence management reviews.
- The Directorate has been continuing to extensively support Operations with the modelling of the 5 year workforce plan, along with the provision of formal advice and guidance on the legality and deliverability of proposed changes.
- The Occupational Health tendering process for a Trust wide provider is now underway and will be reported separately to the Board as the procurement progresses.
- Site visits to potential locations for a single hub 'learning academy' for YAS are underway and a preferred site has been identified, subject to the business case and benefits to be achieved

#### **4.6 Finance & Performance Directorate**

The Finance & Performance Directorate has been working on a number of key priorities in Quarter 1, including:-

- Annual Accounts were completed and submitted in June ahead of national timescales. The accounts were commended by External Audit for the quality of working papers and accuracy of the statements.
- The Long Term Financial Model has been updated for the latest cost improvement and activity assumptions ahead of submission to Alvarez & Marsal, and the Strategic Health Authority ahead of the second stage of Historical Due Diligence (HDD2).
- The Finance Department has recently appointed three graduate Finance Trainees to enhance support to service lines and corporate functions, and advertised for the posts of Financial Planning Manager and Project Accountant to strengthen its middle management tier. Interviews for these posts will take place in early August and complete the last two elements of the Finance restrict.

- The Executive Director of Finance and Performance and finance leads have been working with colleagues in Standards and Compliance and key managers across directorates to complete and quality impact assess the five year Cost Improvement Plan
- The Estates team have successfully concluded the purchase of Springhill 1 and 2 and have begun planning for building adaptations to accommodate 111 and improve energy efficiency. A property has been identified in the Rotherham Dearne Valley to accommodate the 111 South Yorkshire call centre and facilitate co-location of other Trust services. Work is also proceeding in parallel to identify a site for the new HART/operations facility. A search of possible sites is being carried out in South Leeds /M621 area.
- Fleet have begun an internal review of workshop efficiency and vehicle availability aligned to the PTS Unipart project. The work will initially review the efficiency and throughput of the Europa workshop in Sheffield, on-call arrangements and out of hours provision. A new Fleet strategy is being drafted to incorporate plans to move to a more energy efficient fleet, reduce the number of management and support vehicles and improve the take-up of commercial opportunities.
- The Business Development team have been leading on development of the latest version of the Integrated Business Plan, working with executive /senior leads to review and update each chapter.
- ICT are carrying out pre-requisite work for 111 and are preparing for the replacement of the Uninterruptable Power Supply (UPS) at Springhill on the 24th and 25th July. A telephone switch upgrade to Springhill is also being carried out in early August.
- Work to finish Commissioning the ICT element of the Gold Cell was completed on the 6<sup>th</sup> July 2012 and the facilities have now been handed over to Emergency Planning.

## **5. Recommendation**

- 5.1 It is recommended that the Board agree that it has sufficient assurance on the activities Trust Executive Group during this period.