Yorkshire Ambulance Service - Executive Summary

			Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Year End
2013-14 F	BUSINESS PLAN OBJECTIVES	Lead Director	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	Forecast
KPI	Description														
Strategic G	oal - Continuously Improving Patient Care														
1	Improve consistency in delivery of Red performance every day of the week, throughout the year, across the Yorkshire and the Humber region, including rural areas underpinned by developing a new rota model for the A&E service.	Michael Fox-Davies	GREEN	GREEN	GREEN	GREEN	AMBER								GREEN
2	Development of Clinical Hub – increase the rate of non-conveyance through increasing the numbers of patients treated in their own homes and not conveyed to an Emergency Department.	Michael Fox-Davies	GREEN	GREEN	GREEN	GREEN	AMBER								GREEN
3	To reduce mortality from major trauma and improve survival to discharge for pre-hospital Cardiac Arrest.	Julian Mark	RED	RED	AMBER	AMBER	AMBER								AMBER
4	Deliver all CQUIN targets across both our PTS and A&E service.	Rod Barnes / Michael Fox-Davies	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
Strategic G	oal - High Performing														
5	Deliver Red 1 mandatory target through the implementation of the Red 1 action plan.	Michael Fox-Davies	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
6	To provide clinically effective care with improvements in Ambulance Quality Indicators and Clinical Performance Indicator measures.	Julian Mark / David Williams	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
7	Improve the quality of our PTS performance – continue to improve PTS performance against contractual Key Performance Indicators through delivering the PTS transformation project.	Rod Barnes	RED	RED	RED	RED	AMBER								GREEN
8	Embed the new NHS 111 service across Yorkshire and the Humber, Bassetlaw, North Lincolnshire and North East Lincolnshire and deliver against the required contractual call response times.	Steve Page	RED	RED	AMBER	AMBER	AMBER								GREEN
Strategic G	oal - Always Learning														
9	Achieve FT status by the end of 2013-14.	David Whiting	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
10	Reduce the number of patient complaints through improving and investing in the quality of services	Julian Mark / Rod Barnes	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
11	Improve utilisation and support the development of the DoS to enable clinicians and staff in our EOC to guide them to the most appropriate service or advice.	Julian Mark	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
12	Phased roll-out of Service Line Management and service transformation skills across the Trust.	Rod Barnes / Steve Page	AMBER	AMBER	AMBER	AMBER	AMBER								GREEN
Strategic G	oal - Provider of choice in a competitive environment and deliver value for money			_	_		_	_	_	_	_				
13	Deliver cost improvement plans which will also lead to a reduction in our national reference cost position and an improved financial surplus.	Rod Barnes	AMBER	AMBER	AMBER	AMBER	AMBER								GREEN
14	Reduce rates of staff sickness including procurement of Occupational Health services to deliver improvement in sickness rates.	Nick Cook	RED	RED	AMBER	AMBER	RED								GREEN
15	Delivery of emergency and urgent care developments and solutions including areas for development such as telehealth and telecare.	Julian Mark / Rod Barnes	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
16	Develop and commence roll-out of ECS.	Rod Barnes / Michael Fox-Davies	AMBER	AMBER	AMBER	GREEN	AMBER								GREEN

NHS Performance Framework - Current Assessment					
Service Performance		GREEN			
Finance		GREEN			
CQC		GREEN			

Early Wa	arning Indicators EWI	Page	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
	Red 1 Performance	2.2	1	\Rightarrow	\Rightarrow	1	\Leftrightarrow							
	Red 2 Performance	2.2	1	\Rightarrow	\Leftrightarrow	1	(
A&E	Red 19 Performance	2.3	\	\Rightarrow	\Rightarrow	‡	\Leftrightarrow						Feb N	
ACE	Time to Treatment 50% (YTD) *	2.7	\Rightarrow	\Rightarrow	\Rightarrow		\Leftrightarrow							
	Recontact 24 hours on scene (YTD) *	2.7		\		1								
	Complaints	3.13	₩		1	1	1							
	Time to answer 50% (YTD) *	2.7	\(*	\Rightarrow	(\Rightarrow							
EOC	Time to answer 95% (YTD) *	2.7	\Leftrightarrow	•		1	1							
EUC	Abandoned calls (YTD) *	2.7				<u> </u>	\Rightarrow							
	Recontact 24 hours telephone (YTD) *	2.7		1	\Rightarrow	1	\Rightarrow							
	PTS Arriving on time for their appointment	2.9	1	1		*	1							
PTS	PTS Departing within 60mins of ready time	2.10	1	4	•	*	←							
	Complaints	3.14	4	\Leftrightarrow	4	1	4							
	Serious Incidents	3.9	\Rightarrow	1	1	1	1							
	Incidents and near misses	3.4		1	1	4	<u></u>							
ALL	Sickness / Absence	4.4			<u></u>	\Leftrightarrow	•							
	Statutory and Mandatory Training	4.3			\Leftrightarrow	\	\Leftrightarrow							
	PDR Compliance	4.3												

^{*} The Ambulance Quality Indicators YTD figures are from the previous months due to the date of publication.

Co	m	m	er	nts	

KPI	RAG	Page	
1	AMBER	Comments E1	
2	AMBER	2.4a	
3	AMBER	Comments E2	
5	AMBER	Comments C1	
7	AMBER	Comments E3	
8	AMBER	Comments 2.16	
12	AMBER	Comments 3.2	
13	AMBER	Section 5	
14	RED	Comments E5	
16	AMBER		