



Monthly Yorkshire Ambulance Trust Board Integrated Performance Report

August 2014



Contents			
1	Executive Summary		
E1	Directors Exceptions - Overall	3.3	Safety - Infection Prevention and Control
1.1	2014-15 Business Plan Objectives	3.4	Safety - New Incidents Reported & Rate Based
1.2	Contractual Compliance	3.5	Safety - Patient Related Incidents & Rate Based
		3.6	Safety - Medication Related Incidents & Morphine Related Incidents
2	Performance	3.7	Safety - Staff related Incidents & Rate Based
2a	A&E Performance	3.8	Safety - RIDDOR reportable Incidents
E2	Directors Exceptions	3.9	Safety - SUI Incidents by area
C1	Directors Comments - A&E Performance	3.10	Safeguarding Children and Vulnerable Adults
CQ1	A&E CQUINS	3.12	Clinical Audit
CQ2	CQUIN 6 - Red Performance by CCG	3.13	Patient Experience & Involvement - Complaints, Concerns, Comments & Compliments A&E / EOC
2.1	Total Demand & Resource Hours	3.14	Patient Experience & Involvement - Complaints, Concerns & Compliments PTS
2.2	Cat R1 8 Minute Performance & Cat R2 8 Minute Performance	3.15	Patient Experience & Involvement - Complaints, Concerns & Compliments 111
2.3	Cat R1 & R2 - 8 Minute Performance & 19 Minute Performance	3.16	Patient Experience & Involvement - Complaints & Concerns response times
2.3a	Category RED & GREEN - RRV Time waiting for back up	3.17	Patient Experience - A & E Survey
2.4	Operational Delivery Model	3.18	Patient Experience - PTS Survey
2.4a	Operational Delivery Model	3.19	Care Quality Commission and Other Registration Legislation Standards
2.5	Demand and Performance by CCG & CBU (Responses)	3.20	Information Governance
2.6	Resilience	4	Workforce
E3	Directors Exceptions - AQI	4.1	Workforce Scorecard
2.7	Ambulance Quality Indicators Summary	4.2	Staff in Post by Band
2b	PTS Performance	4.3	Ethnicity & Age/Gender Profile
E4	Directors Exceptions - PTS	4.4	Age & Gender Profile
C2	Directors Comments on Actual Performance	4.5	Age & Gender Profile
CQ3	PTS CQUINS	4.6	Sickness Absence
2.8	PTS Demand	4.7	Sickness Absence
2.9	PTS Performance - Arrival KPI 1	4.8	Occupational Health
2.10	PTS Performance - Arrival KPI 2	4.5	Overtime, Vacancies & Turnover
2.11	PTS Performance - Departure KPI 3	4.10	Learning & Development
2.12	PTS Performance - Departure KPI 4	5	Finance
2.13	PTS Performance - West Renal KPI's	5.1	Financial Performance Overview
2.14	Abortive Journeys	5.2	Monitor Financial Risk Rating
2.15	PTS Call Answering Performance	5.3	Director's Commentary
2c	NHS 111 Performance	5.4	Statement of Comprehensive Income
E5	Directors Exceptions - 111	5.5	A&E Contracting
2.16	NHS 111 Performance	5.6	Income & Expenditure Forecast
2d	Support Services Performance	5.7	CIP Delivery
2.17	ICT Summary	5.8	Statement of Financial Position
2.18	ICT Summary (cont'd)	5.9	Debtors and Payments
2.19	Estates and Procurement	5.10	Financial Risks
2.20	Fleet	5.11	Cash Flow
3	Quality Analysis	5.12	Hospital Handover Cost
E6	Directors Exceptions		
C3	Directors Comments - Quality		
3.1	Quality Summary		
3.2	Service Transformation Programme		



Section 1

Executive Summary



Yorkshire Ambulance Service - Executive Summary August 2014

Care Quality commission priorities	Safe	Effective	Caring	Well-led	Responsive
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Yorkshire Ambulance Service - Aims	Continuously improving patient care		Setting high standards of performance					Always learning				Spending public money wisely			
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2014-15 BUSINESS PLAN OBJECTIVES		Lead Director	Apr RAG	May RAG	Jun RAG	Jul RAG	Aug RAG	Sept RAG	Oct RAG	Nov RAG	Dec RAG	Jan RAG	Feb RAG	Mar RAG	Year End Forecast
Strategic Objectives															
1. Improve clinical outcomes for key conditions															
1a	Improve survival to discharge for cardiac arrest	Julian Mark	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
1b	Reduce mortality from major trauma	Julian Mark	AMBER	AMBER	AMBER	AMBER	GREEN								AMBER
1c	Training and supporting our staff	Ian Brandwood/ Steve Page	AMBER	GREEN	GREEN	GREEN	GREEN								GREEN
2. To deliver timely emergency and urgent care in the most appropriate setting															
2a	Reduce variability and deliver Red 1 and Red 2 targets on a consistent basis through implementation of new rotas	Ian Brandwood	AMBER	AMBER	AMBER	RED	RED								AMBER
2b	Increase non-conveyance rates	Ian Brandwood	AMBER	AMBER	AMBER	AMBER	AMBER								AMBER
2c	Building and maintaining successful partnerships including NHS 111	Rod Barnes	AMBER	AMBER	AMBER	GREEN	GREEN								GREEN
2d	Develop care pathways for specialist groups	Julian Mark	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
2e	Develop urgent care transport and inter-facility transport solutions	Ian Brandwood	AMBER	AMBER	AMBER	AMBER	AMBER								AMBER
2f	Expansion of community-based Emergency Care Practitioners and Advanced Paramedics	Julian Mark	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
2g	Continue the development and roll-out of ePRF and Paramedic Pathfinder	Rod Barnes	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
3. To provide clinically-effective services which exceed regulatory and legislative standards															
3a	Implement recommendations from the Francis Report, Keogh Review, Winterbourne View Review and Berwick Report.	Steve Page	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
3b	Improve performance in Ambulance Clinical Quality Indicators (ACQIs)	Julian Mark/Ian Brandwood	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
3c	Continued expansion of the Clinical Hub	Ian Brandwood	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
3d	Deliver Red 1 and Red 2 targets on a consistent basis through implementation of new rotas	Ian Brandwood	AMBER	AMBER	AMBER	RED	RED								AMBER
4. To provide services which exceed patient and Commissioners' expectations															
4a	Improve patient involvement and experience	Steve Page	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
4b	Develop services in partnership with others	Steve Page	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
5. To develop culture, systems and processes to support continuous improvement and innovation															
5a	Ensure our fleet and estates meet the needs of a modern service through development of a Hub and Spoke and Make Ready business model	Rod Barnes	GREEN	GREEN	RED	AMBER	AMBER								GREEN
5b	Implementation of Service Line Management	Rod Barnes	AMBER	AMBER	RED	RED	AMBER								AMBER
6. To create, attract and retain an enhanced and skilled workforce to meet service needs now and in the future															
6a	Staff engagement including listening to staff with a focus on embedding our values and objectives and incorporating feedback received	Ian Brandwood	AMBER	AMBER	AMBER	AMBER	AMBER								AMBER
6b	Support clinical staff development through the introduction of a new clinical leadership and supervision model	Ian Brandwood	AMBER	AMBER	AMBER	AMBER	AMBER								AMBER
7. To be at the forefront of healthcare resilience and public health improvement															
7a	Improving engagement with patients, the public, clinical commissioning groups and other key stakeholders	Steve Page	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
7b	Finalisation of new HART facility	Rod Barnes	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
7c	Introduction of YAS Forum	David Whiting/ Anne Allen	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
8. To provide cost-effective services that contribute to the objectives of the wider health economy															
8a	Deliver cost improvement programmes	Rod Barnes	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
8b	Improve financial performance	Rod Barnes	GREEN	GREEN	GREEN	AMBER	AMBER								AMBER
8c	Monitor sustainability of service lines	Rod Barnes	AMBER	AMBER	AMBER	AMBER	AMBER								AMBER
8d	Drive forward whole-system efficiencies	Rod Barnes	AMBER	AMBER	AMBER	GREEN	GREEN								GREEN

Early Warning Indicators		Key			Page	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	
		Green	Amber	Red														
A&E	Red 1 Performance	>=75%	-	<75%	2.2	↓	↓	↓	↓	↓								
	Red 2 Performance				2.2	↓	↓	↓	↓	↓								
	Red 19 Performance	>=95%	-	<95%	2.3	↓	↓	↓	↓	↓								
	Time to Treatment 50% (YTD) *	Ranked within the top 4 nationally	Ranked between 5 and 7 nationally	Ranked 8 and above nationally	2.7	↔	↓	↓	↓	↓								
	Recontact 24 hours on scene (YTD) *				2.7	↑	↔	↑	↑	↑								
	Complaints (% Rate)	<0.125%	Between 0.125% & 0.174%	>0.175%	3.13	↓	↓	↑	↑	↑								
EOC	Time to answer 50% (YTD) *				2.7	↓	↔	↔	↔	↑								
	Time to answer 95% (YTD) *				2.7	↓	↔	↔	↑	↑								
	Abandoned calls (YTD) *				2.7	↑	↓	↔	↔	↓								
	Recontact 24 hours telephone (YTD) *				2.7	↑	↑	↔	↔	↓								
PTS	PTS Arriving on time for their appointment (KPI 2) <i>Refer tab 2.10 for Red RAG Status</i>	0 or 1 out of 4 Consortia with Red RAG Status	2 out of 4 Consortia with Red RAG Status	3 or more Consortia with Red RAG Status	2.10	↔	↔	↔	↔	↔								
	PTS Collected within 90 minutes (Planned Journeys) (KPI 3) <i>Refer tab 2.11 for Red RAG Status</i>				2.11	↔	↓	↔	↔	↔								
	Complaints (% Rate)	<0.125%	Between 0.125% & 0.174%	>0.175%	3.14	↓	↓	↑	↑	↓								
	ALL	Serious Incidents	0	-	1	3.9	↔	↑	↓	↑	↔							
Incidents and near misses (% Rate)		<0.225%	Between 0.125% & 0.174%	>0.275%	3.4	↓	↓	↑	↑	↑								
Sickness / Absence		<=5%	-	>=5%	4.6	↓	↑	↑	↓	↑								
Statutory and Mandatory Training		>=90%	-	<90%	4.10	↑	↑	↑	↓	↑								
PDR Compliance		>=75%	-	>75%	4.10	↓	↑	↓	↑	↓								

* The Ambulance Quality Indicators YTD figures are from the previous months due to the date of publication.
**EWI Arrows: The arrow is based on the performance, up being improved monthly performance. The colour is based on how YAS performs against the target

CONTRACTUAL COMPLIANCE 2013 - 14 - Definitions: Contractual Indicators presented are those to which non compliance would result in the issuing of a formal contractual performance notice

A & E

National Specified Events

75% of RED Calls within 8 mins

95% of RED Calls within 19 mins

April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Year End
RED	RED	RED	RED	RED								AMBER
GREEN	GREEN	GREEN	GREEN	GREEN								GREEN

Local Quality Requirements

Satisfaction of Providers obligations under each handover

Safeguarding Adults & Children

April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Year End
GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
GREEN	GREEN	GREEN	GREEN	GREEN								GREEN

Exception Report - Never Events

Never events are defined as 'serious, largely preventable patient safety incidents that should not occur if the available preventative measures have been implemented by healthcare providers'.

Comments
Nothing to Report

GREEN	Fully Completed / Appropriate actions taken
AMBER	Delivery at risk
RED	Milestone not achieved

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

Monitor Risk Ratings (Quarterly)

Finance							
Quarter 1		Quarter 2		Quarter 3		Quarter 4	
Highest Risk			Lowest Risk	Highest Risk		Lowest Risk	Highest Risk

Governance			
Quarter 1	Quarter 2	Quarter 3	Quarter 4

Monitor Governance Rating Key

Likely or actual significant breach of terms of authorisation	Breach of terms of authorisation	Limited concerns surrounding terms of authorisation	No Material concern

*Where the circles are filled this indicates YAS current position



Section 2

Performance





Section 2a

A&E Performance



Directors Exceptions

RAG	Page Ref No	No of months Exception	Exception	Actions required to put back on track	Who	When	Year end Risk Level
RED	2.2	5/5	RED 1 Performance	Slight improvement in August to 71.33% (+2%). Actions being developed as part of the Operational Improvement Group focusing on Demand, Resources and Efficiency. Red demand remaining high.	Executive Director of Operations	Oct-14	AMBER
RED	2.2	5/5	RED 2 Performance	Slight improvement in August to 69.58% (+0.5%). Actions being developed as part of the Operational Improvement Group focusing on Demand, Resources and Efficiency. Red demand remaining high.	Executive Director of Operations	Oct-14	AMBER
RED	2.5	5/5	Green 1 Performance	Improvement in August to 72.35% (+3%). Improvements will form part of work of the Operational Improvement Group. The improvement in this area has been supported by increased St Johns support	Executive Director of Operations	Oct-14	GREEN
RED	2.5	1/5	Green 2 Performance	Improvement in August to 81.16% (+7.11%). Improvements will form part of work of the Operational Improvement Group. The improvement in this area has been supported by increased St Johns support	Interim Executive Director of Operations	Mar-15	GREEN
RED	CQ1	2/5	CQUIN delivery	All CQUIN schedules are currently on track for delivery with the exception of the underperforming CCGs which are a part of the Operations Delivery Plan. The Q1 reports were submitted on 25 July 2014 and subsequent queries have been responded to. Awaiting confirmation of final Q1 payments.	Interim Executive Director of Operations	Mar-15	AMBER

Directors Comments on Actual Performance**A&E Performance****Business Continuity:**

- Paper to TMG update on Exercise Jackdaw
- 2 Planning meetings for Exercise Jackdaw
- PTS Bid for Resilience and Business Continuity for Derbyshire
- NDM for Exercise Jackdaw part 2
- DPI Inspection at Leeds Festival Sunday (24th August)

BC plans issued:

- Corporate Communications
- Clinical
- Standards and Compliance

Resilience:

EDL demonstration for national EDL event on 9th August in Batley, West Yorkshire completed successfully. Planning underway for EDL in Rotherham on 13th September 2014.

Planning for UKIP National Conference in Doncaster commenced with South Yorkshire Partners.

Plans and risk assessments prepared for Unison Industrial Action.

Plans and risk assessments completed for Unite days of Action 29th August and for September 2nd 2014.

Delivery of new equipment and training packages for all frontline A&E staff relating to the Ebola threat now in progress in line with national guidance. Work ongoing Sheffield teaching Hospitals who are now our primary partner for Category 4 diseases e.g. Ebola, Lassa Fever.

Training:

- NDM Course x1
- JESIP Validation Exercise x1
- JESIP Control Room Manager Supervisor Course x1

CONTRACTUAL COMPLIANCE 2014 - 15 - Definitions: Contractual Indicators presented are those to which non compliance would result in the issuing of a formal contractual performance notice

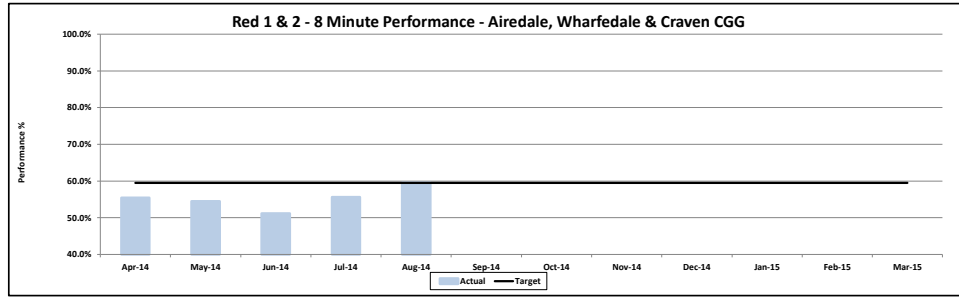
A & E CQUINS

	Goal weighting (% of CQUIN scheme available)	Expected Financial Value of Goal	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Year End
1. (1.1) Right Care, Right Place - Frequent Callers	10.00%	£395,164	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
1. (1.2) Right Care Right Place - North & East Yorkshire ECP Scheme	10.00%	£395,164	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
1. (1.3) Right Care Right Place - South Yorkshire Re-contact Rates	10.00%	£395,164	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
1. (1.4) Right Care Right Place - West Yorkshire Paramedic Pathfinder	10.00%	£395,164	GREEN	GREEN	GREEN	AMBER	GREEN								GREEN
2. Underperforming CCG's - Red Performance	43.00%	£1,699,206	AMBER	AMBER	AMBER	RED	RED								AMBER
3. Improving Patient Safety & Reducing Harm	7.00%	£276,615	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
4. (4.1) Friends & Family Implementation of Staff FFT - NHS Trusts only	3.00%	£118,549	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
4. (4.2) Friends & Family Early Implementation	4.00%	£158,066	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
4. (4.3) Friends & Family Phased Expansion	3.00%	£118,549	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN
TOTAL	100.00%	£3,951,641													

GREEN	Fully Completed / Appropriate actions taken
AMBER	Delivery at risk
RED	Milestone not achieved

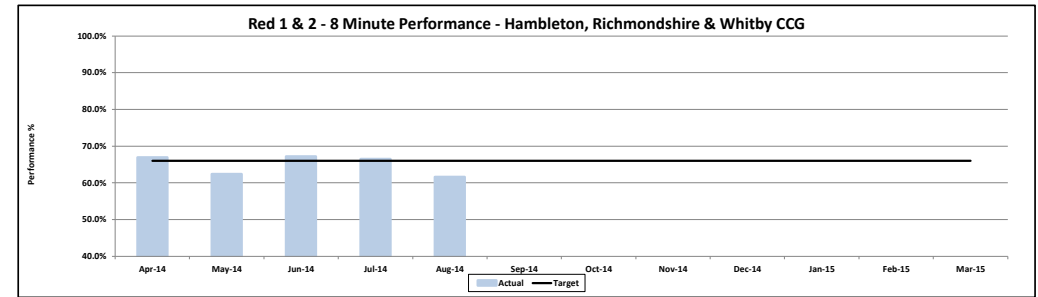
Comments
The training for Paramedic Pathfinder for West Yorkshire is being reconsidered to enable timely delivery. The underperforming CCGs are a part of the Operations Delivery Plan. The Q1 report was submitted 25 July 2014 and feedback from the CQC is due 11 August 2014.

CQUIN 2 - Red Performance by CCG

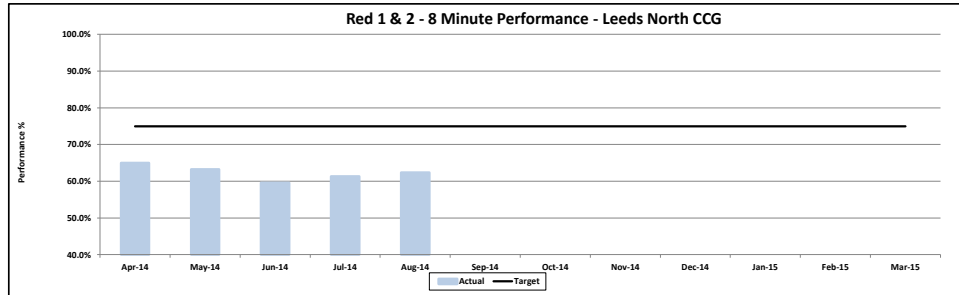


Airedale, Wharfedale & Craven CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%
Actual	55.4%	54.5%	51.2%	55.6%	59.5%								55.2%

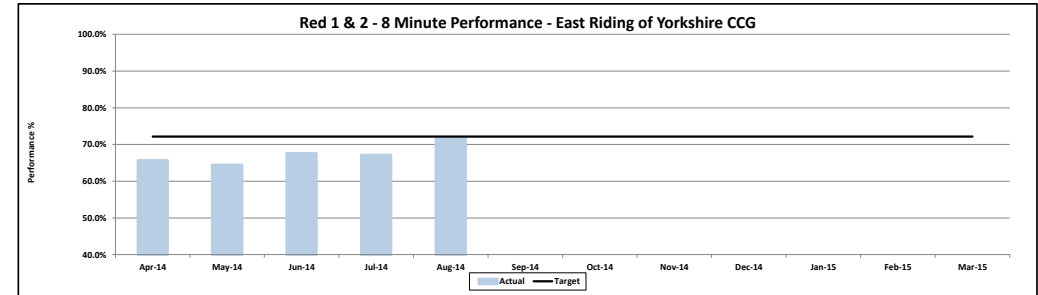
* Trajectory includes Cumbria CCG



Hambleton, Richmondshire & Whitby CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	66.0%	66.0%	66.0%	66.0%	66.0%	66.0%	66.0%	66.0%	66.0%	66.0%	66.0%	66.0%	66.0%
Actual	66.9%	62.4%	67.2%	66.5%	61.6%								64.9%

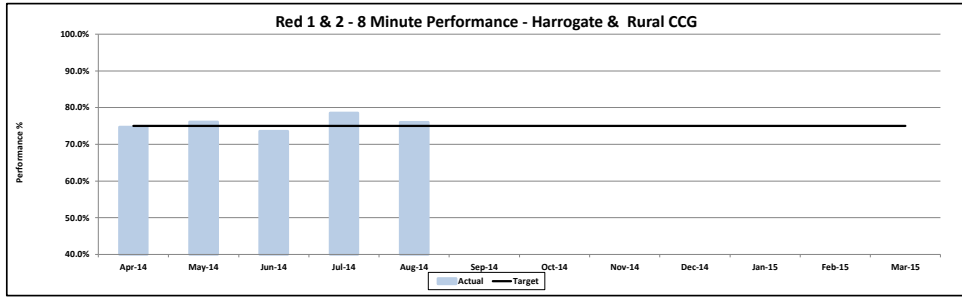


Leeds North CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual	65.0%	63.2%	59.6%	61.3%	62.4%								62.4%



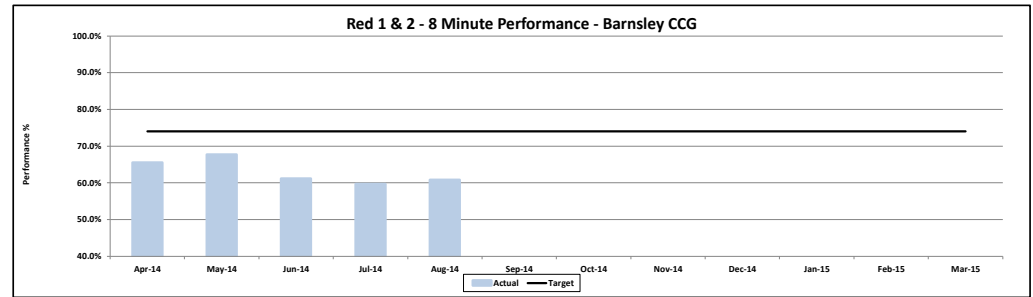
East Riding of Yorkshire CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%
Actual	65.7%	64.5%	67.6%	67.2%	71.9%								67.4%

CQUIN 2 - Red Performance by CCG

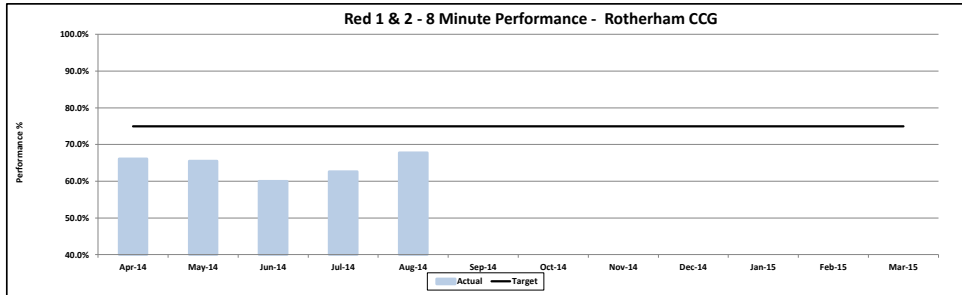


Harrogate & Rural CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual	74.7%	76.1%	73.6%	78.5%	76.0%								75.8%

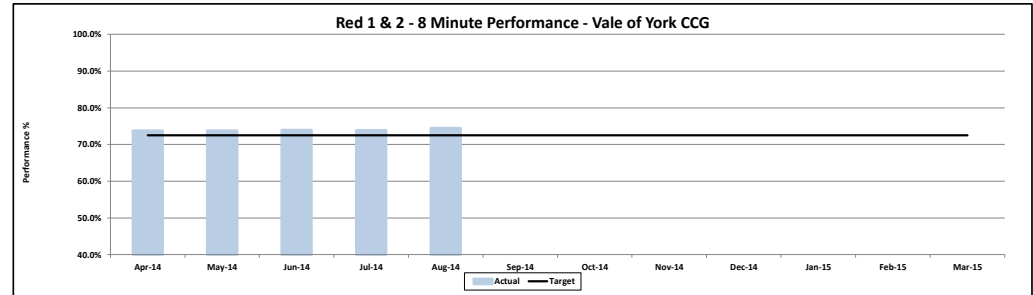
* Trajectory includes Cumbria CCG



Barnsley CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	74.0%	74.0%	74.0%	74.0%	74.0%	74.0%	74.0%	74.0%	74.0%	74.0%	74.0%	74.0%	74.0%
Actual	65.5%	67.7%	61.2%	59.7%	60.8%								63.0%



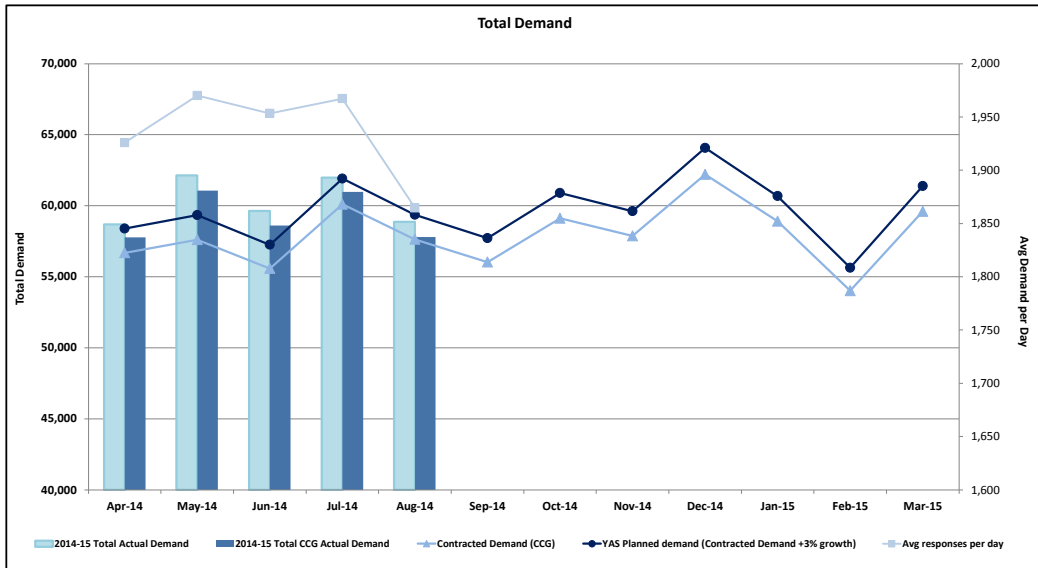
Rotherham CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual	66.1%	65.5%	60.0%	62.6%	67.8%								64.4%



Vale of York CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%
Actual	73.8%	73.8%	74.0%	73.9%	74.5%								74.0%

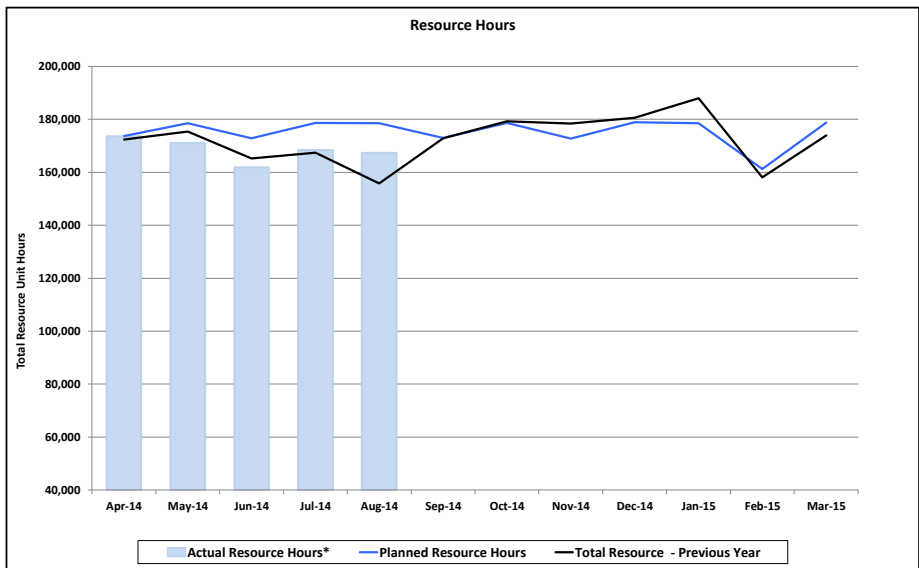
Total Demand

YTD RAG	GREEN
MTD RAG	GREEN



Resource Hours

YTD RAG	GREEN
MTD RAG	AMBER



	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD	Year end
2013-14 Total Actual Demand	57,697	58,749	56,616	61,386	58,511	56,876	60,026	58,760	63,072	59,853	54,804	60,316	292,959	706,666
2014-15 Total Actual Demand	58,695	62,128	59,626	61,987	58,869								301,305	
% Variance Current Year to Last Year	1.7%	5.8%	5.3%	1.0%	0.6%								2.8%	
Contracted Demand (CCG)	56,686	57,609	55,584	60,107	57,637	56,036	59,119	57,878	62,204	58,912	54,013	59,600	287,623	695,385
YAS Planned demand (Contracted Demand +3% growth)	58,387	59,337	57,252	61,910	59,366	57,717	60,893	59,614	64,070	60,679	55,633	61,388	296,252	716,247
2014-15 Total CCG Actual Demand	57,775	61,072	58,600	60,983	57,799								296,229	
Variance to Contracted Demand	1.9%	6.0%	5.4%	1.5%	0.3%								3.0%	
Variance to YAS Planned Demand	-1.0%	2.9%	2.4%	-1.5%	-2.6%								0.0%	
Avg responses per day	1,926	1,970	1,953	1,967	1,864									

	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD	
Planned Resource Hours	TOTAL	173,709	178,510	172,864	178,690	178,553	173,000	178,659	172,678	178,849	178,533	161,252	178,732	2,104,029
Actual Resource Hours*	DCA	99,706	102,595	97,070 *	100,740 *	101,582 *								842,106
	RRV	70,854	65,655	62,397	65,324	63,820								328,050
Avg Total Resource Hours per day	ALL	5,787	5,517	5,395	5,432	5,395								
Total Resource - Previous Year	TOTAL	172,362	175,407	165,255	167,459	155,817	172,854	179,240	178,421	180,534	188,022	158,079	173,986	2,067,435

* Actual Total Resource Hours include DCA, RRV and other types of vehicle hours (A&E support, Cycle responders etc.), which is why the Total is greater than DCA + RRV hours

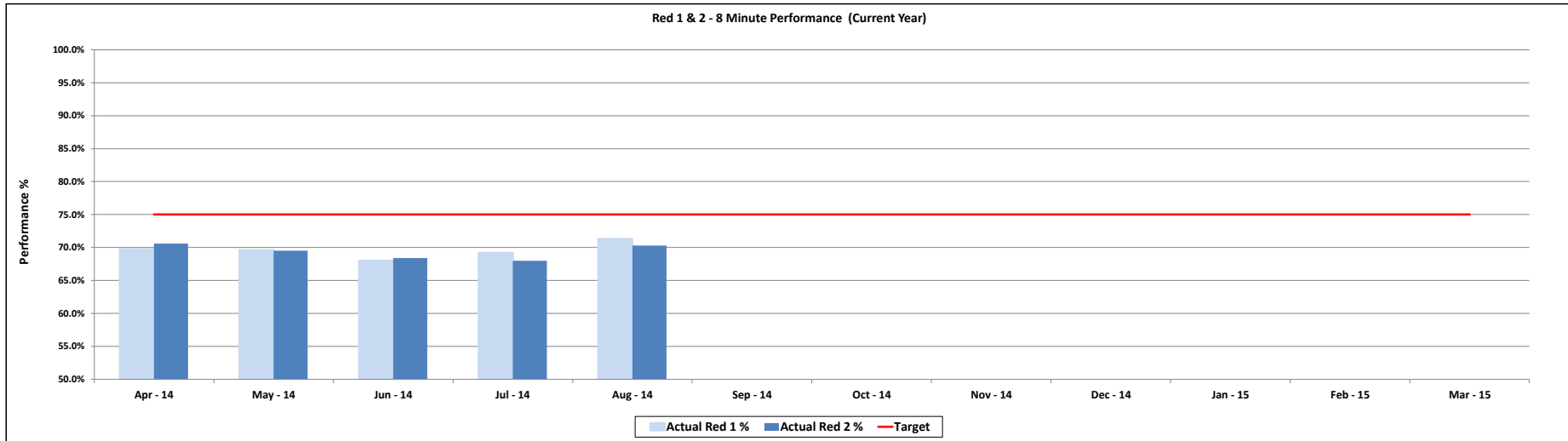
PLEASE NOTE: YAS Planned demand is based on Contracted Demand + 3% growth (a response is a distinct count of a resource arriving at scene, a resource is either a vehicle or a triaged call). Actual demand is a distinct count of a resource that has arrived scene, again this could be either a vehicle or a triaged call. Total Actual Demand includes ECP's and Out of Areas but excludes Embrace (this differs from page 5.5 which does not). Contracted demand excludes ECP, OOA and Embrace.

Category Red 1 - 8 Minute Performance HQU03_01

	YTD RAG	RED
↑	MTD RAG	RED

Category Red 2 - 8 Minute Performance HQU03_01

	YTD RAG	RED
↑	MTD RAG	RED



RED 1		EWI	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Target			75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual Red 1 %	Current Year		69.8%	69.6%	68.0%	69.2%	71.3%								69.6%
	Previous Year		75.3%	76.8%	75.6%	80.7%	83.1%	81.6%	79.3%	76.2%	72.7%	76.4%	73.3%	71.8%	77.4%
% Variance Current Year to Last Year			-5.5%	-7.2%	-7.6%	-11.5%	-11.8%								-7.8%
National Average															

RED 2		EWI	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Target			75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual Red 2 %	Current Year		70.6%	69.5%	68.4%	68.0%	70.3%								69.3%
	Previous Year		78.0%	78.7%	78.6%	75.0%	74.8%	74.4%	74.0%	74.0%	71.8%	76.1%	72.5%	73.7%	75.1%
% Variance Current Year to Last Year			-7.4%	-9.2%	-10.2%	-7.0%	-4.5%								-5.8%
National Average															

RED 1 by CBU		Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Calderdale, Kirklees & Wakefield	Current Year	72.4%	75.8%	73.5%	69.8%	76.5%								73.5%
	Previous Year	76.9%	81.1%	76.3%	84.9%	86.4%	84.9%	79.8%	82.7%	76.7%	82.6%	77.8%	76.4%	81.1%
	% Variance	-4.5%	-5.3%	-2.8%	-15.1%	-9.9%								
Airedale Bradford & Leeds	Current Year	67.2%	69.7%	66.4%	69.3%	72.1%								68.9%
	Previous Year	73.8%	76.4%	74.2%	79.5%	83.5%	79.6%	78.9%	74.4%	72.4%	75.0%	72.1%	73.6%	76.5%
	% Variance	-6.6%	-6.7%	-7.9%	-10.2%	-11.4%								
North Yorkshire	Current Year	75.5%	72.3%	68.1%	71.3%	70.2%								71.4%
	Previous Year	66.1%	74.3%	71.3%	77.6%	78.6%	82.1%	77.5%	71.9%	73.9%	74.3%	69.1%	72.7%	74.8%
	% Variance	9.4%	-2.0%	-3.2%	-6.3%	-8.4%								
The Humber	Current Year	72.2%	70.1%	72.4%	72.6%	73.6%								72.2%
	Previous Year	82.1%	79.0%	78.4%	85.2%	85.2%	85.0%	84.6%	74.6%	69.2%	74.2%	72.5%	66.9%	79.1%
	% Variance	-9.9%	-8.9%	-6.0%	-12.6%	-11.6%								
South Yorkshire	Current Year	66.8%	63.8%	64.4%	67.1%	66.8%								65.7%
	Previous Year	77.4%	75.5%	77.7%	78.8%	82.3%	79.6%	77.9%	76.1%	71.6%	75.3%	74.7%	68.8%	76.6%
	% Variance	-10.6%	-11.7%	-13.3%	-11.7%	-15.5%								

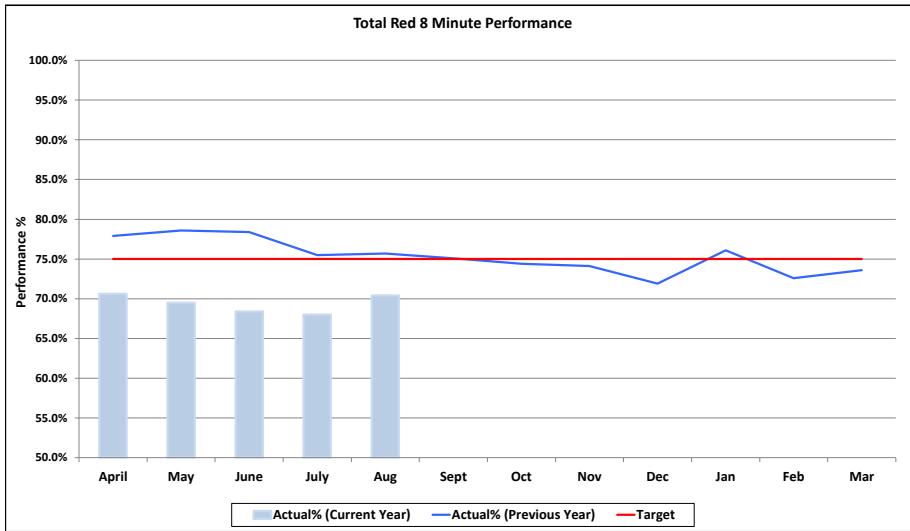
Please Note: National Average will always be 1 month in arrears

RED 2 by CBU		Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Calderdale, Kirklees & Wakefield	Current Year	73.6%	70.3%	69.3%	66.9%	68.3%								69.7%
	Previous Year	79.9%	81.2%	80.7%	76.3%	75.8%	76.5%	75.8%	76.2%	73.4%	78.9%	74.3%	76.9%	77.2%
	% Variance	-6.3%	-10.9%	-11.4%	-9.4%	-7.5%								
Airedale Bradford & Leeds	Current Year	68.1%	67.6%	65.8%	65.1%	68.6%								67.1%
	Previous Year	77.3%	78.6%	78.5%	75.2%	76.5%	74.9%	74.6%	73.8%	73.2%	75.9%	73.2%	74.5%	75.5%
	% Variance	-9.2%	-11.0%	-12.7%	-10.1%	-7.9%								
North Yorkshire	Current Year	73.6%	72.8%	74.8%	74.4%	73.0%								73.7%
	Previous Year	73.1%	76.2%	73.3%	72.1%	68.1%	71.3%	68.2%	71.8%	70.0%	72.4%	74.0%	73.2%	71.9%
	% Variance	0.5%	-3.4%	1.5%	2.3%	4.9%								
The Humber	Current Year	74.2%	72.7%	75.2%	74.9%	78.6%								75.0%
	Previous Year	82.9%	82.2%	81.3%	79.5%	77.5%	76.1%	77.4%	78.8%	71.4%	78.4%	76.3%	72.6%	77.7%
	% Variance	-8.7%	-9.5%	-6.1%	-4.6%	1.1%								
South Yorkshire	Current Year	68.6%	67.8%	64.2%	65.2%	68.5%								66.9%
	Previous Year	78.0%	77.2%	79.1%	73.9%	75.0%	73.8%	74.0%	72.1%	71.0%	75.9%	68.7%	71.7%	74.1%
	% Variance	-9.4%	-9.4%	-14.9%	-8.7%	-6.5%								

Please Note: National Average will always be 1 month in arrears

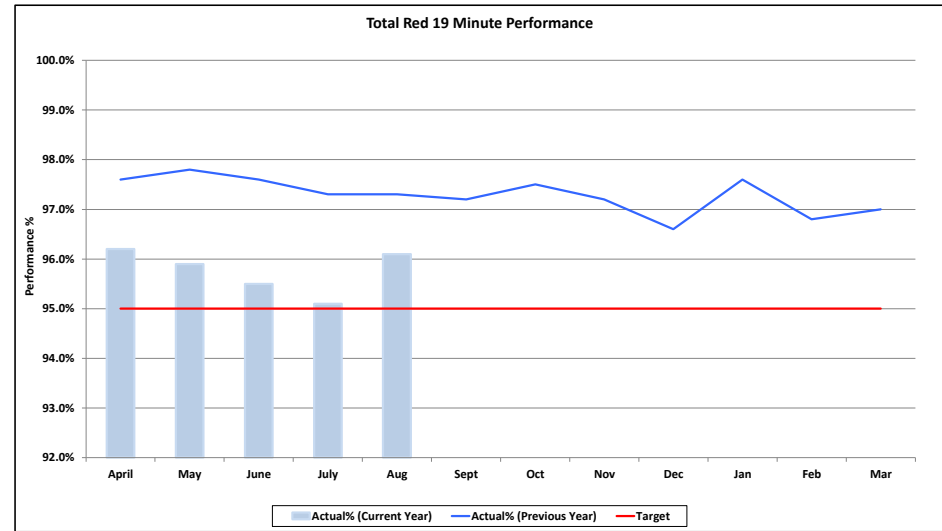
Category Red 1 & 2 8 Minute Performance HQU03_01

YTD RAG	RED
MTD RAG	RED



Category Red 1 & 2 19 Minute Performance HQU03_02

YTD RAG	GREEN
MTD RAG	GREEN



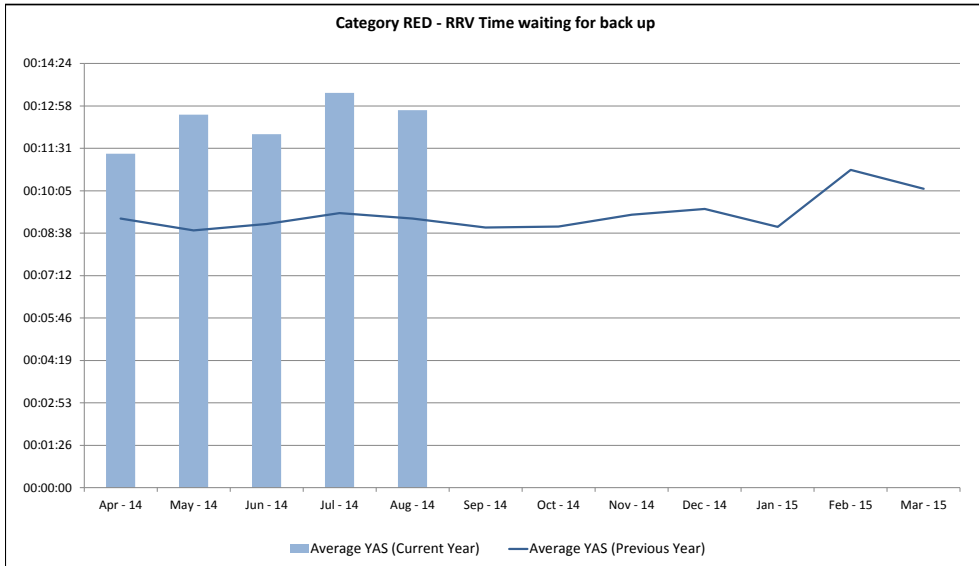
RED 8	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual% (Current Year)	70.6%	69.5%	68.4%	68.0%	70.4%								69.4%
Actual% (Previous Year)	77.9%	78.6%	78.4%	75.5%	75.7%	75.1%	74.4%	74.1%	71.9%	76.1%	72.6%	73.6%	75.3%
% Variance Current Year to Last Year	-7.3%	-9.1%	-10.0%	-7.5%	-5.3%								-5.9%

RED 19	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Target	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%
Actual% (Current Year)	96.2%	95.9%	95.5%	95.1%	96.1%								95.8%
Actual% (Previous Year)	97.6%	97.8%	97.6%	97.3%	97.3%	97.2%	97.5%	97.2%	96.6%	97.6%	96.8%	97.0%	97.3%
% Variance Current Year to Last Year	-1.4%	-1.9%	-2.1%	-2.2%	-1.2%								-1.5%
National Average													

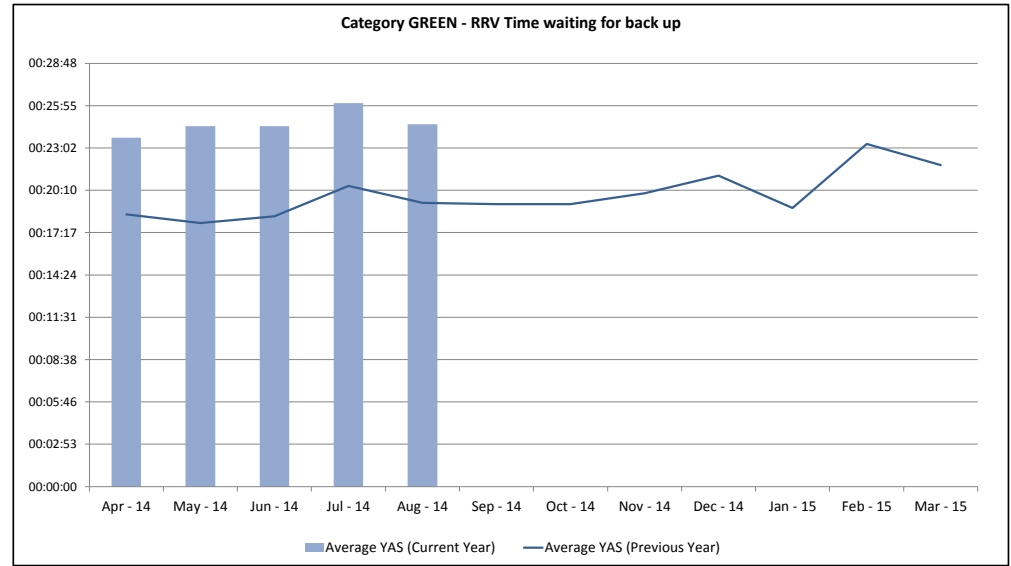
RED 8 by CBU	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Calderdale, Kirklees & Wakefield	Current Year	73.5%	70.7%	69.6%	67.1%	68.9%							70.0%
	Previous Year	79.8%	81.2%	80.5%	77.0%	77.0%	77.4%	76.2%	76.8%	73.6%	79.2%	74.5%	77.5%
	% Variance	-6.3%	-10.5%	-10.9%	-9.9%	-8.1%							
Airedale Bradford & Leeds	Current Year	68.1%	67.8%	65.8%	65.4%	68.8%							67.2%
	Previous Year	77.1%	78.5%	78.3%	75.5%	77.1%	75.3%	74.9%	73.8%	73.1%	75.9%	73.1%	75.6%
	% Variance	-9.0%	-10.7%	-12.5%	-10.1%	-8.3%							
North Yorkshire	Current Year	73.7%	72.8%	74.4%	74.2%	72.8%							73.6%
	Previous Year	72.6%	76.0%	73.2%	72.5%	69.2%	72.4%	68.9%	71.8%	70.3%	72.5%	73.7%	72.2%
	% Variance	1.1%	-3.2%	1.2%	1.7%	3.6%							1.4%
The Humber	Current Year	74.1%	72.5%	75.0%	74.7%	78.2%							74.9%
	Previous Year	82.8%	82.0%	81.1%	80.0%	78.4%	77.0%	78.1%	78.6%	71.2%	78.1%	76.1%	77.8%
	% Variance	-8.7%	-9.5%	-6.1%	-5.3%	-0.2%							-2.9%
South Yorkshire	Current Year	68.5%	67.5%	64.2%	65.3%	68.4%							66.8%
	Previous Year	78.0%	77.0%	79.1%	74.3%	75.7%	74.4%	74.3%	72.4%	71.0%	75.8%	69.0%	71.5%
	% Variance	-9.5%	-9.5%	-14.9%	-9.0%	-7.3%							-7.5%

RED 19 by CBU	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Calderdale, Kirklees & Wakefield	Current Year	97.3%	96.9%	96.5%	95.2%	96.6%							96.5%
	Previous Year	98.5%	98.5%	98.6%	97.9%	98.3%	98.3%	98.2%	97.9%	97.7%	98.5%	97.4%	98.2%
	% Variance	-1.2%	-1.6%	-2.1%	-2.7%	-1.7%							-1.7%
Airedale Bradford & Leeds	Current Year	96.2%	96.9%	95.9%	95.6%	96.7%							96.3%
	Previous Year	98.2%	98.5%	98.0%	98.4%	98.4%	98.0%	98.2%	98.1%	97.5%	98.5%	97.7%	98.1%
	% Variance	-2.0%	-1.6%	-2.1%	-2.8%	-1.7%							-1.8%
North Yorkshire	Current Year	94.1%	93.0%	93.6%	92.8%	93.1%							93.3%
	Previous Year	94.8%	95.0%	94.3%	93.2%	92.6%	93.9%	94.0%	93.9%	93.3%	94.6%	94.3%	93.9%
	% Variance	-0.7%	-2.0%	-0.7%	-0.4%	0.5%							-0.6%
The Humber	Current Year	95.0%	93.1%	94.5%	93.7%	95.6%							94.4%
	Previous Year	96.4%	96.7%	96.4%	95.9%	95.7%	95.2%	95.9%	96.1%	94.0%	96.4%	95.3%	95.7%
	% Variance	-1.4%	-3.6%	-1.9%	-2.2%	-0.1%							-1.3%
South Yorkshire	Current Year	97.1%	97.1%	96.2%	96.4%	97.3%							96.8%
	Previous Year	98.4%	98.6%	98.8%	98.3%	98.5%	98.5%	98.8%	98.0%	97.5%	98.2%	97.6%	98.3%
	% Variance	-1.3%	-1.5%	-2.6%	-1.9%	-1.2%							-1.5%

Category RED - RRV Time waiting for back up



Category GREEN - RRV Time waiting for back up



RED - YAS	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Average YAS (Current Year)	00:11:20	00:12:40	00:12:00	00:13:24	00:12:49							
95th Percentile YAS (Current Year)	00:34:00	00:39:14	00:50:51	00:40:24	00:39:00							
Average YAS (Previous Year)	00:09:08	00:08:44	00:08:57	00:09:19	00:09:08	00:08:50	00:08:52	00:09:16	00:09:28	00:08:51	00:10:47	00:10:09
95th Percentile YAS (Previous Year)	00:28:07	00:25:30	00:26:21	00:28:06	00:27:25	00:26:26	00:26:13	00:27:25	00:28:13	00:27:25	00:32:07	00:29:47

GREEN - YAS	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Average YAS (Current Year)	00:23:44	00:24:31	00:24:32	00:26:05	00:24:39							
95th Percentile YAS (Current Year)	01:02:41	01:04:23	01:04:59	01:08:01	01:05:22							
Average YAS (Previous Year)	00:18:31	00:17:56	00:18:24	00:20:28	00:19:18	00:19:13	00:19:13	00:19:57	00:21:09	00:18:57	00:23:19	00:21:52
95th Percentile YAS (Previous Year)	00:49:32	00:49:00	00:50:23	00:56:39	00:51:58	00:52:41	00:53:10	00:56:24	00:58:15	00:53:53	01:02:54	00:59:21

Average RED by CBU		Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Calderdale, Kirklees & Wakefield	Current Year	00:09:39	00:10:47	00:11:16	00:13:47	00:12:13							
	Previous Year	00:09:11	00:08:36	00:09:10	00:09:17	00:08:57	00:08:52	00:08:48	00:08:59	00:08:49	00:08:07	00:10:11	00:08:49
Leeds & Bradford	Current Year	00:11:47	00:11:48	00:12:05	00:13:52	00:13:17							
	Previous Year	00:09:33	00:09:10	00:09:39	00:08:55	00:08:45	00:08:53	00:08:41	00:09:19	00:09:15	00:09:10	00:10:13	00:10:13
North Yorkshire	Current Year	00:09:50	00:10:32	00:10:38	00:10:26	00:10:18							
	Previous Year	00:07:28	00:06:37	00:06:51	00:07:38	00:07:59	00:07:30	00:07:34	00:08:00	00:07:39	00:06:53	00:09:23	00:08:51
The Humber	Current Year	00:08:57	00:09:51	00:09:34	00:10:29	00:09:25							
	Previous Year	00:06:38	00:06:48	00:07:02	00:07:36	00:07:29	00:07:00	00:07:29	00:07:38	00:08:49	00:07:53	00:08:58	00:08:56
South Yorkshire	Current Year	00:13:40	00:17:41	00:17:01	00:15:27	00:15:31							
	Previous Year	00:10:09	00:09:46	00:09:25	00:11:04	00:10:54	00:10:04	00:10:08	00:10:39	00:11:21	00:10:09	00:13:35	00:12:14

Average GREEN by CBU		Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Calderdale, Kirklees & Wakefield	Current Year	00:21:34	00:23:12	00:22:29	00:27:39	00:25:10							
	Previous Year	00:19:22	00:18:31	00:18:38	00:20:39	00:19:58	00:18:28	00:18:15	00:19:21	00:18:54	00:16:34	00:21:29	00:19:33
Leeds & Bradford	Current Year	00:25:14	00:24:35	00:24:54	00:28:08	00:27:30							
	Previous Year	00:19:45	00:18:41	00:19:51	00:19:33	00:18:37	00:19:25	00:19:57	00:20:43	00:20:55	00:20:22	00:23:25	00:23:44
North Yorkshire	Current Year	00:17:32	00:19:24	00:18:24	00:18:29	00:17:40							
	Previous Year	00:12:38	00:11:51	00:12:21	00:15:27	00:15:25	00:14:02	00:15:38	00:14:25	00:15:49	00:13:12	00:18:07	00:15:43
The Humber	Current Year	00:19:28	00:19:13	00:19:29	00:20:14	00:17:25							
	Previous Year	00:13:18	00:11:57	00:15:26	00:15:58	00:15:34	00:15:57	00:16:37	00:17:37	00:22:47	00:17:04	00:23:03	00:20:35
South Yorkshire	Current Year	00:28:09	00:29:54	00:31:15	00:29:46	00:27:23							
	Previous Year	00:20:50	00:20:46	00:19:57	00:24:31	00:22:35	00:22:23	00:21:18	00:23:01	00:22:47	00:21:37	00:26:49	00:24:43

A&E Operational Delivery Model

Item	Apr-13	Apr-14	May-13	May-14	Jun-13	Jun-14	Jul-13	Jul-14	Aug-13	Aug-14	Sep-13	Sep-14	Oct-13	Oct-14	Nov-13	Nov-14	Dec-13	Dec-14	Jan-14	Jan-15	Feb-14	Feb-15	Mar-14	Mar-15	
Demand																									
CCG Contracted Demand (SLA Responses)	54,307	56,686	57,163	57,609	54,818	55,584	56,852	60,107	54,582	57,637	53,555	56,036	56,311	59,119	55,295	57,878	62,117	62,204	58,245	58,912	52,275	54,013	61,302	59,600	
YAS Planned Demand (SLA Previous YAS Total +3% Growth)	57,293	58,387	60,437	59,337	57,871	57,252	60,124	61,910	57,505	59,366	57,705	57,717	60,642	60,893	59,156	59,614	66,244	64,070	62,020	60,679	55,905	55,633	65,130	61,388	
CCG Demand (SLA Responses)	56,712	57,775	57,677	61,072	55,627	58,600	60,172	60,983	57,289	57,799	55,735		58,785		57,583		61,881		58,600		53,646		59,277		
YAS Actual Total Demand (SLA Responses)	57,697	58,695	58,749	62,128	56,616	59,626	61,386	61,987	58,511	58,869	56,876		60,026		58,760		63,072		59,853		54,804		60,316		
% Variance from CCG Demand to CCG Contracted <small>(See Finance Section 5.5)</small>	4.4%	1.9%	0.9%	6.0%	1.5%	5.4%	5.8%	1.5%	5.0%	0.3%	4.1%		4.4%		4.1%		-0.4%		0.6%		2.6%		-3.3%		
% Variance from YAS Actual to YAS Planned Demand	0.7%	0.5%	-2.8%	4.7%	-2.2%	4.1%	2.1%	0.1%	1.7%	-0.8%	-1.4%		-1.0%		-0.7%		-4.8%		-3.5%		-2.0%		-7.4%		
Contract Value over performance attributed to A&E	£416,363	£221,036	£90,667	£644,755	£142,591	£560,123	£593,186	£162,711	£466,597	£46,959	£378,892		£452,471		£411,405		£-39,982		£53,823		£276,570		£-345,846		
Job Cycle																									
Target Job Cycle (in seconds)(RED only)	00:58:50	01:01:09	00:59:11	01:00:05	00:59:08	01:00:21	01:00:15	00:59:57	00:59:52	00:01:22	01:01:00	01:00:38	01:00:53	01:00:26	01:00:40	01:01:29	01:03:41	01:02:12	01:02:19	01:01:05	01:02:39	01:02:55	01:02:49	01:02:23	
Actual Job Cycle (in seconds)(RED only)	01:01:09	01:02:58	01:00:05	01:03:39	01:00:21	01:04:14	00:59:57	01:04:58	00:01:22	01:05:43	01:00:38		01:00:26		01:01:29		01:02:12		01:01:05		01:02:55		01:02:23		
Performance																									
Actual Resource (Vehicle hours)	172,362	173,597	175,407	171,019	165,255	161,849	167,459	168,391	155,817	167,250	172,854		179,240		178,421		180,534		188,022		158,079		173,986		
Planned Staff (Establishment) FTE	2,106	2,164	2,106	2,164	2,106	2,164	2,106	2,164	2,106	2,164	2,106	2,164	2,106	2,164	2,107	2,164	2,107	2,164	2,107	2,164	2,107	2,164	2,107	2,164	
Actual Staff FTE	2,048	2,068	2,056	2,070	2,058	2,092	2,075	2,088	2,087	2,095	2,105		2,120		2,087		2,069		2,092		2,085		2,621		
Actual Overtime (Staff Hours)	24,674	23,438	29,150	26,240	29,147	26,528	23,055	26,984	21,497	31,152	25,375		26,069		22,860		21,996		24,022		20,453		26,466		
Front line staff overspend / (underspend) after overtrade has been applied	(£24,538)	(£88,975)	(£501,978)	(£72,893)	£853,508	(£536,007)	(£624,849)	£515,156	(£394,544)	£336,556	(£786,079)		£715,637		£515,311		£361,908		(£1,005,838)		£658,141		(£259,773)		
Planned Abstractions %	30.0%	31.0%	31.0%	31.0%	32.0%	31.0%	32.0%	31.0%	32.0%	31.0%	30.0%	31.0%	31.0%	31.0%	30.0%	31.0%	29.0%	31.0%	29.0%	31.0%	31.0%	31.0%	31.0%	31.0%	
Actual Abstractions %	28.5%	27.7%	29.2%	28.1%	29.2%	29.4%	30.6%	29.4%	33.7%	29.9%	31.5%		30.4%		28.5%		29.5%		27.1%		30.3%		27.9%		
UHU (Unit Hour Utilisation)	0.35	0.35	0.35	0.36	0.35	0.36	0.37	0.36	0.36	0.35	0.36		0.33		0.34		0.36		0.32		0.33		0.34		
*Planned Performance %	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	
Actual Performance %	77.9%	70.6%	78.6%	69.5%	78.4%	68.4%	75.5%	68.0%	75.7%	70.4%	75.1%		74.4%		74.1%		71.9%		76.1%		72.6%		73.6%		

Please Note: Planned demand and actual demand is based on the SLA and is reported at response level.

Comments

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A&E Operational Delivery Model

Item		Apr-13	Apr-14	May-13	May-14	Jun-13	Jun-14	Jul-13	Jul-14	Aug-13	Aug-14	Sep-13	Sep-14	Oct-13	Oct-14	Nov-13	Nov-14	Dec-13	Dec-14	Jan-14	Jan-15	Feb-14	Feb-15	Mar-14	Mar-15	
Resource	Clinical Hub/ NHSD Calls																									
	Total Planned number of calls (Clinical Hub)	2,965	1,369	2,965	1,820	2,965	1,846	2,965	1,851	2,965	1,818	2,965	1,884	2,965	1,901	2,965	1,823	2,965	1,941	2,965	1,880	2,965	1,904	2,965	1,974	
	Total Actual number of calls (Clinical Hub/NHSD)	2,376	1,794	2,410	2,173	2,194	2,013	2,503	1,812	2,164	1,564	1,952		1,898		1,922		2,183		1,761		1,735		1,952		
	Total Planned %	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%
	Total Actual %	5.4%	4.1%	5.4%	4.8%	5.0%	4.6%	5.2%	3.8%	4.7%	3.4%	4.4%	0.0%	4.0%	0.0%	4.1%	0.0%	4.4%	0.0%	3.7%	0.0%	4.0%	0.0%	4.1%	0.0%	
	Total Number of calls closed by Clinical Hub	904	1,794	962	2,173	1,505	2,013	1,680	1,812	1,416	1,564	1,274		1,223		1,212		1,423		1,452		1,735		1,952		
Total Number of calls closed by NHS Direct	1,472	0	1,448	0	689	0	823	0	748	0	678	0	675	0	710	0	760	0	309	0	0	0	0	0	0	

Please Note: NHSD calls are included in 2013-14 calculations only

Comments

Incident Green & Routine Demand and Performance by CCG and CBU (Responses)

August 2014	Category G1 Responses		Category G2 Responses		Category G3 Responses		Category G4 Responses	TRIAGE	Routine
	No. Of Responses	% in 20 Mins*	No. Of Responses	% in 30 Mins*	No. Of Responses	% in 30 Mins*	No. Of Responses	No. Of Responses	No. Of Responses
HAMBLETON,RICHMONDSHIRE & WHITBY CCG	121	69.4%	476	87.6%	25	88.0%	423	31	0
HARROGATE & RURAL CCG	81	79.0%	469	90.4%	31	90.3%	334	50	3
SCARBOROUGH & RYEDALE CCG	95	71.6%	464	88.1%	46	93.5%	338	34	3
VALE OF YORK CCG	228	75.0%	984	88.4%	88	88.6%	635	84	14
NORTH YORKSHIRE CBU	525	73.7%	2393	88.6%	190	90.0%	1730	199	20
ERY CCG	259	74.1%	973	89.4%	50	84.0%	731	74	0
HULL CCG	240	75.4%	1014	85.1%	86	89.5%	688	126	1
EAST YORKSHIRE CBU	499	74.7%	1987	87.2%	136	87.5%	1419	200	1
CALDERDALE CCG	137	65.7%	614	80.3%	39	76.9%	514	73	29
GREATER HUDDERSFIELD CCG	170	74.1%	714	76.1%	39	71.8%	454	96	29
NORTH KIRKLEES CCG	119	78.2%	537	79.7%	44	79.5%	406	64	31
WAKEFIELD CCG	269	77.0%	1161	83.7%	80	80.0%	911	144	82
CALD / KIRK & WAKEFIELD CBU	695	74.2%	3026	80.5%	202	77.7%	2285	377	171
AIREDALE, WHARFEDAILE & CRAVEN CCG	145	64.1%	498	79.5%	23	60.9%	336	38	11
BRADFORD CITY CCG	119	80.7%	389	77.1%	38	84.2%	137	89	0
BRADFORD DISTRICTS CCG	271	69.4%	1071	74.1%	62	74.2%	531	142	11
LEEDS NORTH CCG	166	74.7%	595	72.9%	45	77.8%	366	93	0
LEEDS SOUTH & EAST CCG	259	71.0%	979	76.3%	83	79.5%	674	135	6
LEEDS WEST CCG	223	70.0%	962	72.9%	45	68.9%	506	123	0
LEEDS, BRADFORD & AIREDALE CBU	1183	71.1%	4494	75.0%	296	75.7%	2550	620	28
BARNSELY CCG	215	70.7%	805	83.2%	47	72.3%	503	88	3
DONCASTER CCG	330	72.1%	1067	82.0%	84	81.0%	668	153	67
ROTHERHAM CCG	225	74.7%	844	80.7%	60	70.0%	471	95	2
SHEFFIELD CCG	416	68.5%	1796	79.5%	121	77.3%	1083	235	9
SOUTH YORKSHIRE CBU	1186	71.0%	4512	80.9%	312	76.2%	2725	571	81
ECP	31		167		7		398		
OOA/UNKNOWN	15	66.7%	73	90.4%	5	100.0%	27	49	8
YORKSHIRE AMBULANCE SERVICE	4134	72.4%	16652	81.2%	1148	80.1%	11134	2016	309

Year to Date	Category G1 Responses		Category G2 Responses		Category G3 Responses		Category G4 Responses	TRIAGE	Routine
	No. Of Responses	% in 20 Mins*	No. Of Responses	% in 30 Mins*	No. Of Responses	% in 30 Mins*	No. Of Responses	No. Of Responses	No. Of Responses
HAMBLETON,RICHMONDSHIRE & WHITBY CCG	478	73.8%	2344	88.1%	152	87.5%	1996	236	5
HARROGATE & RURAL CCG	441	77.6%	2288	89.4%	155	87.1%	1884	204	9
SCARBOROUGH & RYEDALE CCG	474	74.9%	2094	89.3%	202	89.6%	1703	180	11
VALE OF YORK CCG	1080	74.9%	4927	89.0%	353	85.8%	3194	558	73
NORTH YORKSHIRE CBU	2473	75.2%	11653	89.0%	862	87.2%	8777	1178	98
ERY CCG	1138	72.1%	4736	85.8%	263	81.7%	3629	457	5
HULL CCG	1208	75.7%	5125	83.7%	389	83.5%	3488	694	18
EAST YORKSHIRE CBU	2346	74.0%	9861	84.7%	652	82.8%	7117	1151	23
CALDERDALE CCG	807	69.5%	3294	77.3%	221	83.3%	2833	432	122
GREATER HUDDERSFIELD CCG	788	70.1%	3499	77.0%	210	72.9%	2423	560	150
NORTH KIRKLEES CCG	641	71.6%	2618	75.6%	144	71.5%	1933	419	140
WAKEFIELD CCG	1412	73.1%	5678	80.3%	362	77.1%	4586	893	407
CALD / KIRK & WAKEFIELD CBU	3648	71.4%	15089	78.1%	937	76.7%	11775	2304	819
AIREDALE, WHARFEDAILE & CRAVEN CCG	600	63.3%	2423	72.9%	103	74.8%	1782	252	45
BRADFORD CITY CCG	594	72.7%	1999	70.9%	174	74.7%	677	502	1
BRADFORD DISTRICTS CCG	1364	72.7%	5357	70.9%	271	74.7%	2527	888	57
LEEDS NORTH CCG	782	69.9%	3119	71.4%	169	75.7%	2032	535	5
LEEDS SOUTH & EAST CCG	1312	71.9%	5022	74.4%	382	79.3%	3500	1005	42
LEEDS WEST CCG	1174	69.2%	4939	71.5%	250	72.4%	2728	762	3
LEEDS, BRADFORD & AIREDALE CBU	5826	69.8%	22859	71.5%	1349	75.2%	13246	3944	153
BARNSELY CCG	1006	72.6%	4020	80.3%	217	73.3%	2606	491	20
DONCASTER CCG	1590	68.9%	5120	81.4%	451	82.0%	3424	758	349
ROTHERHAM CCG	1172	69.9%	4242	76.2%	270	70.4%	2327	658	11
SHEFFIELD CCG	2225	67.9%	9154	73.0%	613	74.9%	5615	1470	35
SOUTH YORKSHIRE CBU	5993	69.3%	22536	76.7%	1551	75.9%	13972	3377	415
ECPs	125		757		48		1961		
OOA/UNKNOWN	70	68.6%	298	85.6%	17	88.2%	104	163	43
YORKSHIRE AMBULANCE SERVICE	20481	71.1%	83053	78.2%	5416	78.6%	56952	12117	1551

*Targets are 80% for Green 1, 85% for Green 2 and 80% Green 3

Resilience

YTD RAG GREEN



MTD RAG GREEN

Strategic Aim - High Performing

KPI 4 Fulfilment of requirements as a Category 1 responder as detailed in the Civil Contingency Act (CCA) 2004

Description	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Year End Forecast 14/15	Q1 Forecast
Risk Assessments linked to Civil Contingency Act	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	GREEN
Emergency Plans	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	GREEN
Business Continuity Plans	AMBER	AMBER	AMBER	AMBER	GREEN								GREEN	GREEN
Information Provision	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	GREEN
Co-operation with other responders	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	GREEN
Training	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	GREEN

Directors Exceptions on AQI's

Page Ref No	No of Months Exception	Exception	Actions required to put back on track	Who	When
2.7	4/4	Cat Red 8 minute response - RED 1	Slight improvement in August to 71.33% (+2%). Actions being developed as part of the Operational Improvement Group focusing on Demand, Resources and Efficiency. Red demand remaining high.	Emergency Operation Centre Locality	On-going
2.7	4/4	Cat Red 8 minute response - RED 2	Slight improvement in August to 69.58% (+0.5%). Actions being developed as part of the Operational Improvement Group focusing on Demand, Resources and Efficiency. Red demand remaining high.	Emergency Operation Centre Locality	On-going
2.7	4/4	STEMI - 150	In April 2014 there were 8 breaches due to delays by YAS, accounting for 42.1% of the STEMI 150 breaches for PPCI that month. This is a significant increase in breaches compared with the previous three months (cf: 18.8% for March 2014). Improvement will be achieved through implementation of the Performance Recovery Plan.	Head of Clinical Effectiveness	On-going

Comments
<p>Top Third Time to Answer - 50% Cardiac - STD Utstein Recontact 24hrs Telephone Recontact 24hrs on Scene Cat Red 19 minute response Time to Treat - 95% Time to Treat - 99%</p> <p>Middle Third Frequent caller * Abandoned calls Stroke - Care Stroke - 60 STEMI - Care Non A&E Resolved by telephone ROSC Time to Treat - 50% ROSC - Utstein Cardiac - STD Time to Answer - 95% Time to Answer - 99% 95 Percentile Red 1 only Response Time</p> <p>Bottom Third Cat Red 8 minute response - RED 1 Cat Red 8 minute response - RED 2 STEMI - 150</p>

Ambulance Quality Indicators - National Figures - Year to Date

Ambulance Quality Indicator	Units	East Midlands	East of England	Isle of Wight	London	North East	North West	South Central	South East Coast	South Western	West Midlands	Yorkshire	RANK	YTD	
Time to Answer - 50%	EWI	mm:ss	0:02	0:01	0:01	0:00	0:01	0:01	0:03	0:03	0:02	0:01	0:01	2	July
Time to Answer - 95%	EWI	mm:ss	0:17	0:16	0:01	0:08	0:49	0:26	0:22	0:22	0:19	0:01	0:22	6	July
Time to Answer - 99%		mm:ss	0:58	1:13	0:08	0:51	1:37	1:09	1:21	1:00	0:55	0:38	1:11	7	July
Abandoned calls	EWI	%	1.28	0.89	1.14	0.33	3.52	4.65	1.07	0.55	0.85	0.55	0.87	5	July
Cat Red 8 minute response - RED 1		%	73.7	66.8	85.1	72.6	74.2	72.2	78.0	74.0	75.0	80.3	69.1	9	July
Cat Red 8 minute response - RED 2		%	74.3	60.6	75.3	66.0	75.0	73.1	74.0	74.0	75.5	76.0	69.1	8	July
95 Percentile Red 1 only Response Time		mm:ss	13:57	16:07	8:34	18:26	13:19	14:03	13:43	14:12	14:28	11:28	14:26	7	July
Cat Red 19 minute response		%	94.7	90.2	96.0	95.0	95.4	95.3	95.8	94.8	95.1	97.0	95.7	3	July
Time to Treat - 50%	EWI	mm:ss	8:07	7:29	6:07	6:49	6:12	6:15	5:58	5:59	5:43	5:55	6:22	7	July
Time to Treat - 95%		mm:ss	15:26	23:25	16:57	17:37	19:34	18:21	17:51	19:06	19:22	16:06	16:28	3	July
Time to Treat - 99%		mm:ss	23:24	37:57	22:24	30:13	31:21	32:57	29:05	29:03	32:00	25:01	25:33	3	July
STEMI - Care		%	81.5	89.1	90.0	74.4	95.1	90.0	67.3	83.2	89.0	74.5	81.1	7	April
Stroke - Care		%	98.9	97.7	100.0	95.4	99.6	99.3	98.4	94.7	97.3	95.4	97.3	6	April
Frequent caller *		%	0.15	0.17	1.26	1.88	0.70	0.71	1.02	0.00	0.00	0.00	2.62	5	July
Resolved by telephone		%	6.6	7.0	8.5	10.7	6.1	3.6	4.8	10.8	6.7	5.3	6.2	6	July
Non A&E		%	31.4	43.0	46.4	33.9	31.4	27.3	42.9	42.3	51.7	37.4	33.2	7	July
STEMI - 150		%	93.3	89.1	100.0	96.0	87.7	84.3	88.0	88.2	78.4	87.3	82.7	9	April
Stroke - 60		%	60.4	59.5	58.8	65.0	82.3	74.6	53.0	71.5	55.6	54.3	55.7	7	April
ROSC		%	16.5	20.9	0.0	33.3	29.0	24.5	42.8	28.9	18.6	28.5	21.0	7	April
ROSC - Utstein		%	28.1	45.5	50.0	61.9	64.3	48.8	57.5	59.3	33.3	37.5	45.8	6	April
Cardiac - STD		%	7.3	5.5	0.0	-	3.6	8.2	15.1	9.8	7.4	9.7	6.2	7	April
Cardiac - STD Utstein		%	17.2	18.2	0.0	-	25.0	34.6	27.0	30.4	22.9	31.3	29.2	4	April
Recontact 24hrs Telephone	EWI	%	7.6	10.1	5.0	2.3	13.2	11.1	11.9	11.3	13.7	11.4	3.9	2	July
Recontact 24hrs on Scene	EWI	%	7.0	5.2	3.4	6.9	4.8	5.8	4.6	4.5	5.7	4.7	3.8	1	July

*Only 6 Trusts manage Frequent Callers

Please note: The rankings exclude Isle of Wight



Section 2b

PTS Performance



Directors Exceptions on PTS

RAG	Page Ref No	No of months Exception	Consortia	Exception	Actions required to put back on track	Who	When	Year end Risk Level
RED	2.9	1/4	East	Patients Picked up within 120 minutes before Appointment - South Consortia	Achieved 93.5%. Target 93.85%, First month slightly off track. YTD holds at 94.6%. LM to monitor and report exceptions daily with plan to improve.	Locality Manager East Yorkshire	On-going	GREEN
RED	2.9	4/5	South	Patients Picked up within 120 minutes before Appointment - South Consortia	Achieved 95.2% . Target 96.0%, YTD holds at 95.4%. LM to monitor and report exceptions daily with plan to improve.	Locality Manager South Yorkshire	On-going	GREEN
RED	2.10	5/5	South	KPI 2 - Patients arriving on time for their appointment	Achieved 87.6% Target 90.0%, YTD at 87.8%, LM to monitor and action plan to improve YTD.	Locality Manager South Yorkshire	On-going	GREEN
RED	2.10	5/5	North	KPI 2 - Patients arriving on time for their appointment	Achieved 77.4% . Target 82.00% . YTD at 79.2%. LM to monitor and action plan improved YTD.	Locality Manager North Yorkshire	On-going	GREEN
RED	2.11	4/5	East	KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 85.6% . Target 87.6% YTD 89.26%, 2.0% off YTD , action plan to correct ,	Locality Manager East Yorkshire	On-going	AMBER
RED	2.11	5/5	South	KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 88.4% Target 95.0% , YTD 91.4% , significant fall this Q2 based on previous Q1, Action to improve	Locality Manager South Yorkshire	On-going	AMBER
RED	2.11	5/5	North	KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 86.8%. Target 90.0% , YTD 88.8% - 0.2% off trajectory, action to correct LM.	Locality Manager North Yorkshire	On-going	GREEN
RED	2.12	5/5	South	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 90.5 Target 98.0%. YTD 92.8%. Focus on data quality and exceptions by LM and south team.	Locality Manager South Yorkshire	On-going	AMBER
RED	2.12	5/5	North	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Data Quality issues (unmeasured) are affecting this KPI, action to correct October 2014	Locality Manager North Yorkshire	On-going	GREEN

Directors Comments on Actual Performance

KPI 1 - Performance against this indicator has been positive with all areas achieving or marginal. South Yorkshire has shown some slippage against the trajectory and reflects South Yorkshire's higher than average threshold for KPI compliance. Further rota changes are being planned in South Yorkshire to further align capacity and demand and formal consultation on these has already commenced with implementation Nov 2014

KPI 2 - Both North and South Yorkshire struggle against this performance standard. North Yorkshire is reflective of the geography and rurality, whilst in South, although Rotherham and Doncaster achieve their KPI's, Barnsley and Sheffield underperform (-4%) . This is partially due to the high volume of patients (especially the inclusion of all bariatric patients as part of the standard contract) and lack of dedicated discharge facilities (Barnsley). Mitigating actions include more timely resource sharing across South Yorkshire, performance focus by the Locality Manager and improved data capture to ensure an accurate picture of performance is being reported. Alternative resourcing models including dedicated resources to support bariatric patients are also being investigated with Commissioners.

KPI 3 – Although met for West (92.8%) Target 91%, performance against KPI 3 is showing as non-compliant for all other areas. Performance against this standard has improved from 2013 and this continues to be an area of focus for management.

KPI 4 Same Day /Short notice KPIs are variable depending on area, where dedicated resources are contracted performance has improved , however for areas that contract within the core PTS block this KPI4 may also compromise KPI 3 , discussion with commissioners around dedicated service models are ongoing. Hull & East Yorkshire financial delivery targets are being tightly monitored to ensure year PTS financial end position is held.

Additional recruitment and training (above 2014 plan) has been scheduled throughout September – October – November 2014 to fill B2-B3 vacancies in West & East Yorkshire. Further additional training is currently being scoped for anticipated leavers from PTS to A&E as they recruit to ECA/ Urgent staff.

CONTRACTUAL COMPLIANCE 2014 - 15 - Definitions: Contractual Indicators presented are those to which non compliance would result in the issuing of a formal contractual performance notice

PTS CQUINS

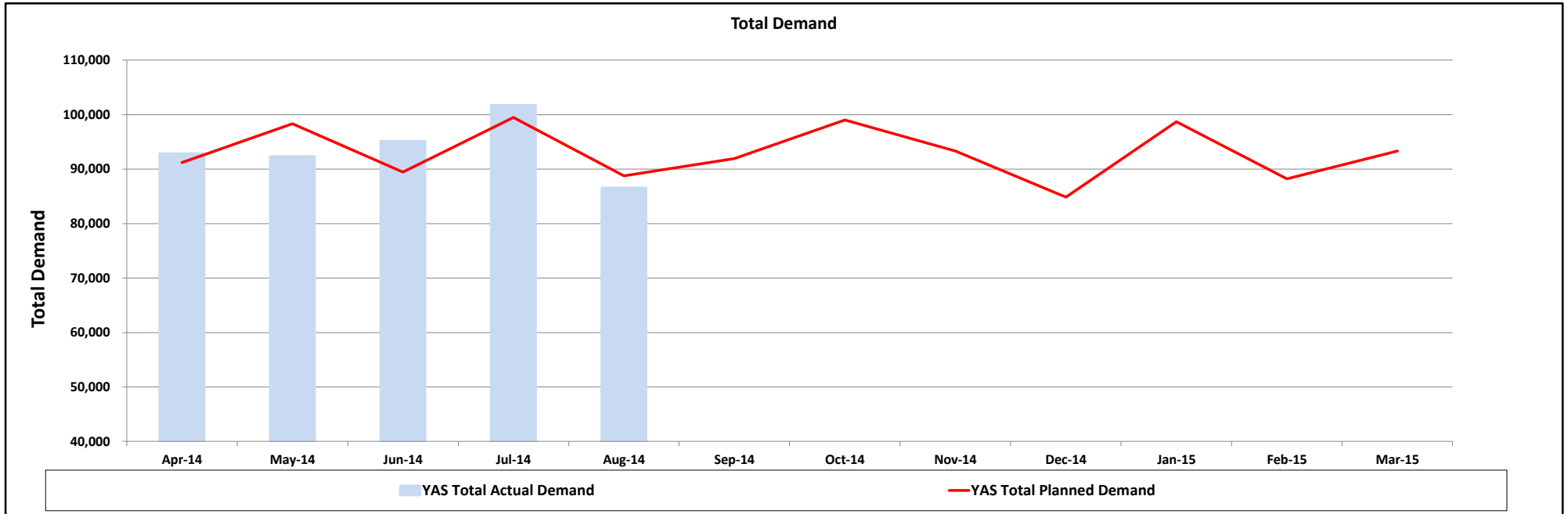
		Goal weighting (% of CQUIN scheme available)	Expected Financial Value of Goal	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Year End	
1. Friends and Family - Implementation of Staff FFT	North Consortia	20.00%	£27,284	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	
	South Consortia		£27,284	GREEN	GREEN	GREEN	GREEN	GREEN									GREEN
	East Consortia		£17,061	GREEN	GREEN	GREEN	GREEN	GREEN									GREEN
	West Consortia		£61,993	GREEN	GREEN	GREEN	GREEN	GREEN									GREEN
2. Improving the experience of Patients with complex needs	North Consortia	40.00%	£41,029	GREEN	GREEN	GREEN	AMBER	GREEN								GREEN	
	South Consortia		£54,568	GREEN	GREEN	GREEN	AMBER	GREEN								GREEN	
	East Consortia		£34,121	GREEN	GREEN	GREEN	AMBER	GREEN								GREEN	
	West Consortia		£122,186	GREEN	GREEN	GREEN	AMBER	GREEN								GREEN	
3. Patient Experience - Investigate and quantify the potential improvements related to patients experience in relation to transport to outpatients clinics	North Consortia	40.00%	£41,029	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	
	South Consortia		£54,568	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	
	East Consortia		£34,121	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	
	West Consortia		£122,186	GREEN	GREEN	GREEN	GREEN	GREEN								GREEN	
TOTAL		100.00%	£637,430														

GREEN	Fully Completed / Appropriate actions taken
AMBER	Delivery at risk
RED	Milestone not achieved

Comments	
All CQUIN activity planned for the period has been completed. Work is ongoing in relation to the next stage activities in the plan and real time studies of patient journeys are being undertaken. All indicators for Q2 are on track	

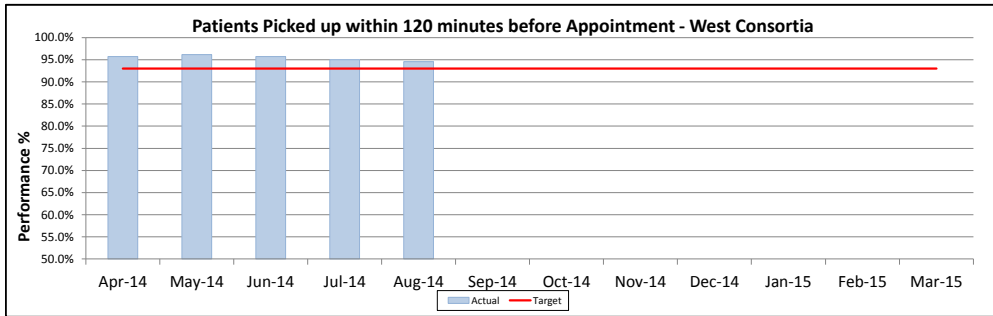
PTS Demand

↔	YTD RAG	GREEN
	MTD RAG	GREEN

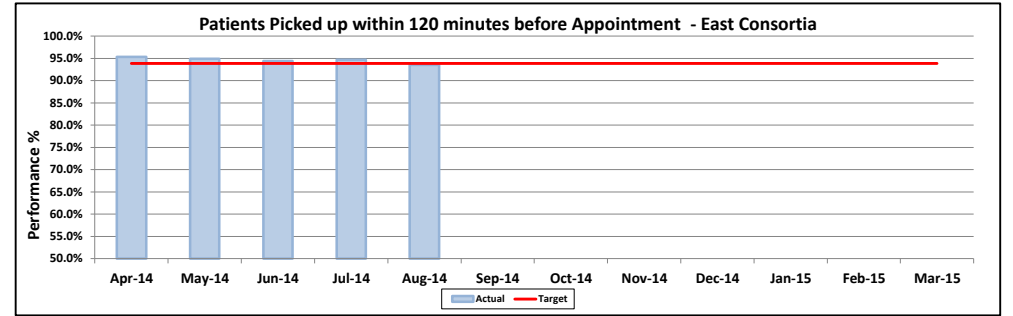


PTS Demand by Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
West Consortia Planned Demand	45,344	51,587	45,016	50,466	45,469	46,375	50,265	47,301	43,657	50,924	45,529	48,214	570,147
West Consortia Actual Demand	48,069	48,150	49,702	52,711	44,734								243,366
East Consortia Planned Demand	9,276	9,372	8,715	9,645	8,559	9,224	9,748	9,201	8,504	9,562	8,542	9,088	109,436
East Consortia Actual Demand	9,223	9,253	9,153	9,575	8,566								45,770
South Consortia Planned Demand	25,060	25,397	24,132	26,762	23,149	24,661	26,559	24,925	21,859	25,643	23,089	24,398	295,634
South Consortia Actual Demand	24,071	23,829	24,629	26,826	22,735								122,090
North Consortia Planned Demand	11,510	11,985	11,575	12,626	11,568	11,697	12,468	11,900	10,846	12,563	11,054	11,598	141,390
North Consortia Actual Demand	11,432	11,094	11,610	12,563	10,481								57,180
YAS Total Planned Demand	91,190	98,341	89,438	99,499	88,745	91,957	99,040	93,327	84,866	98,692	88,214	93,298	467,213
YAS Total Actual Demand	92,795	92,326	95,094	101,675	86,516								468,406
% Variance Planned V Actual	1.8%	-6.1%	6.3%	2.2%	-2.5%								0.3%

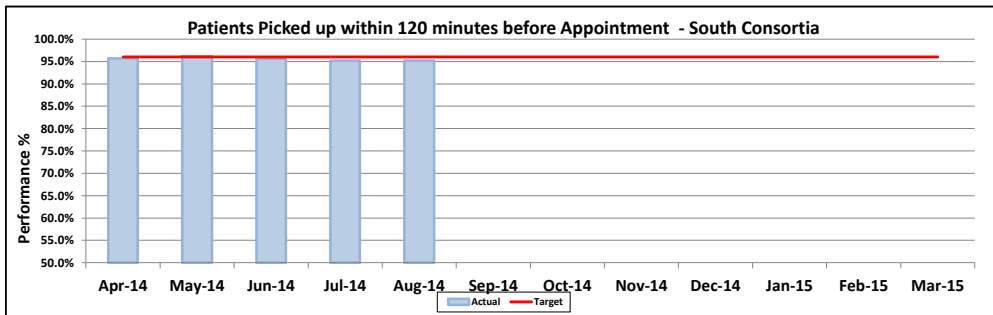
Arrival - KPI 1



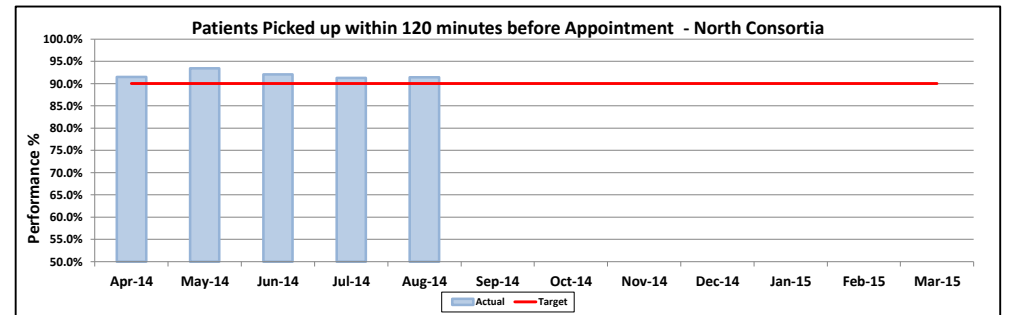
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%
Actual	95.7%	96.1%	95.7%	95.0%	94.6%							



East Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	93.85%	93.85%	93.85%	93.85%	93.85%	93.85%	93.85%	93.85%	93.85%	93.85%	93.85%	93.85%
Actual	95.4%	94.9%	94.4%	94.7%	93.5%							

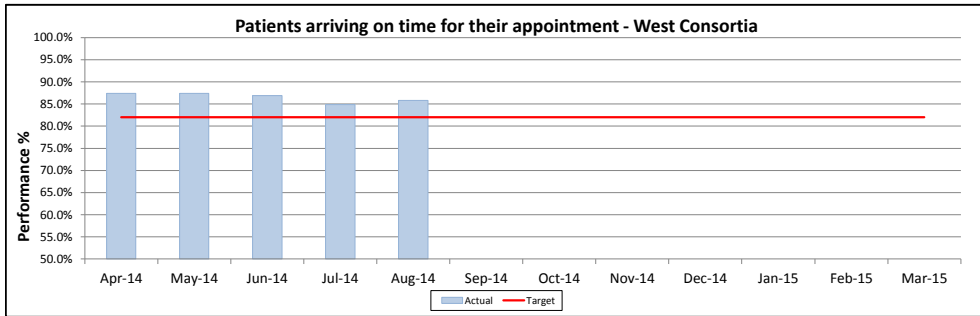


South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%
Actual	95.7%	96.2%	95.7%	95.2%	95.2%							

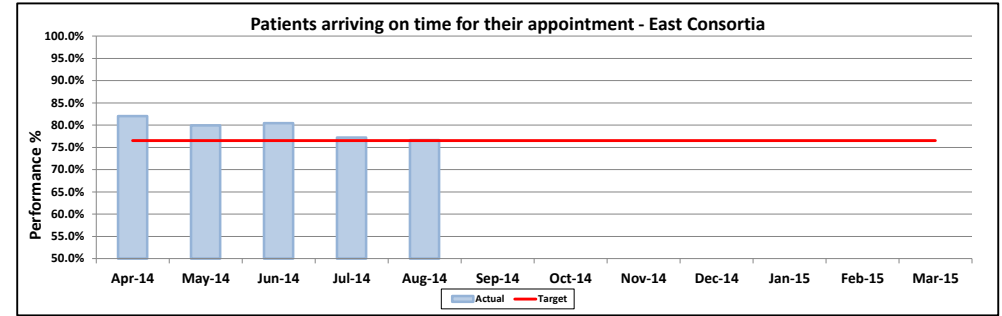


North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Actual	91.5%	93.4%	92.1%	91.3%	91.4%							

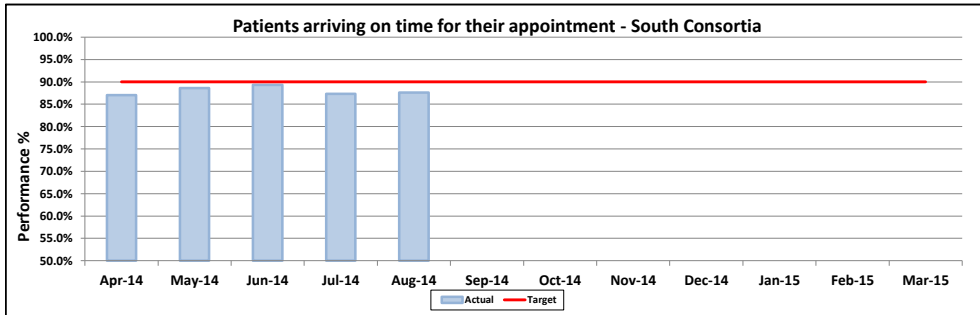
Arrival - KPI 2 EWI



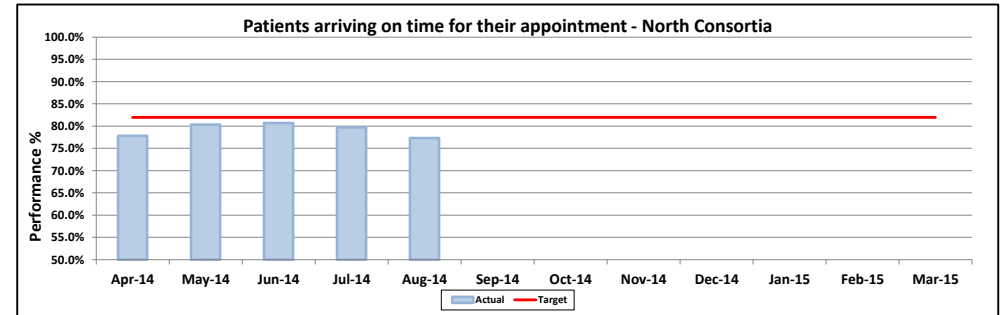
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%
Actual	87.4%	87.4%	86.9%	84.9%	85.8%							



East Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	76.53%	76.53%	76.53%	76.53%	76.53%	76.53%	76.53%	76.53%	76.53%	76.53%	76.53%	76.53%
Actual	82.0%	79.9%	80.4%	77.2%	76.7%							



South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Actual	87.0%	88.6%	89.3%	87.3%	87.6%							

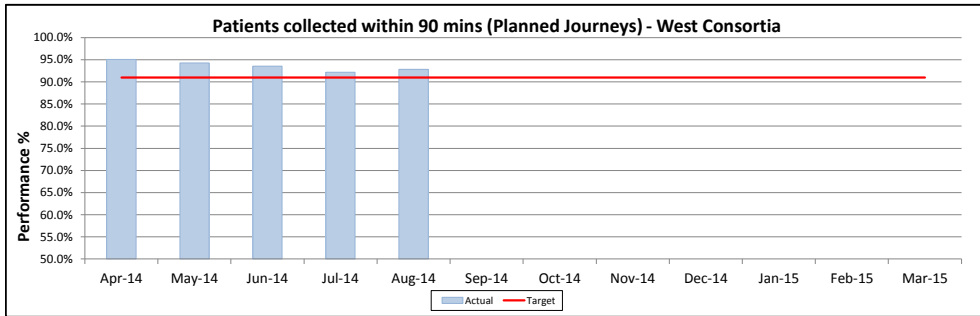


North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%
Actual	77.9%	80.3%	80.7%	79.7%	77.4%							

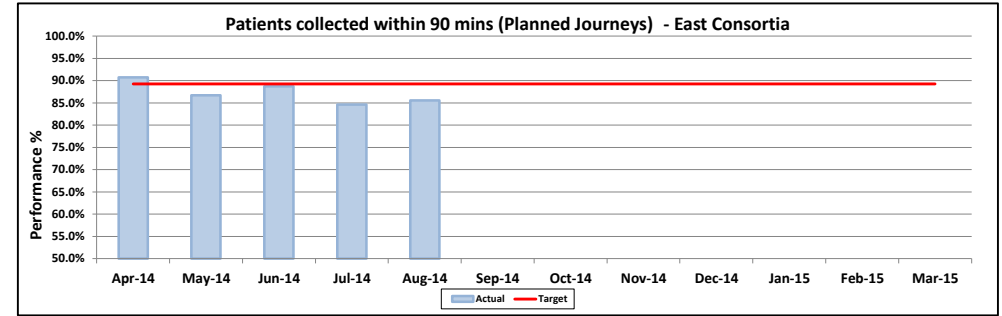
EWI Early Warning Indicator

Departure - KPI 3

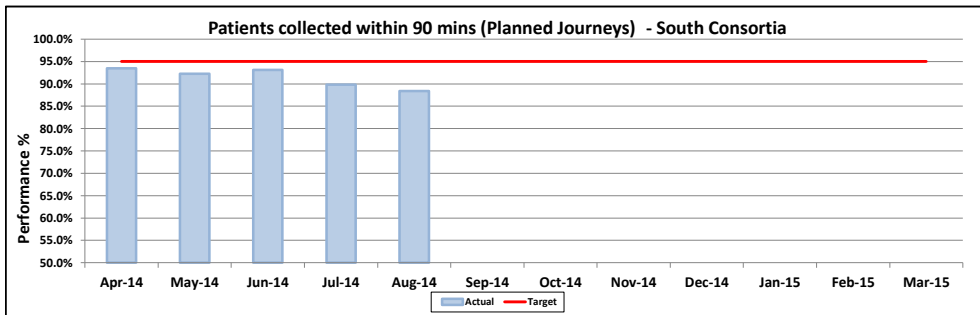
EWI



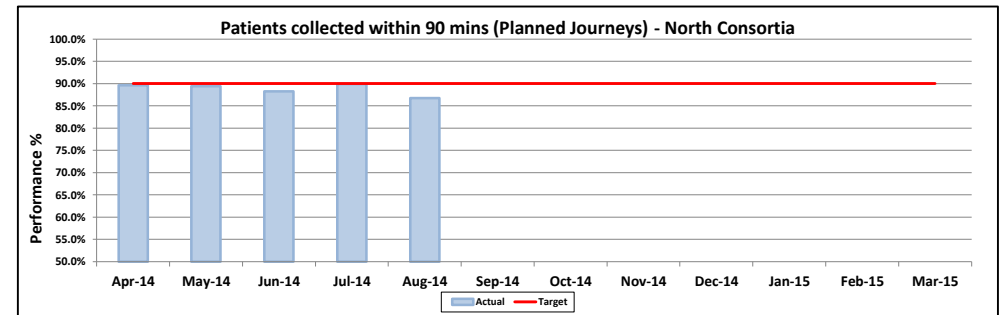
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%
Actual	95.0%	94.3%	93.5%	92.1%	92.8%							



East Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	89.26%	89.26%	89.26%	89.26%	89.26%	89.26%	89.26%	89.26%	89.26%	89.26%	89.26%	89.26%
Actual	90.7%	86.7%	88.7%	84.6%	85.6%							



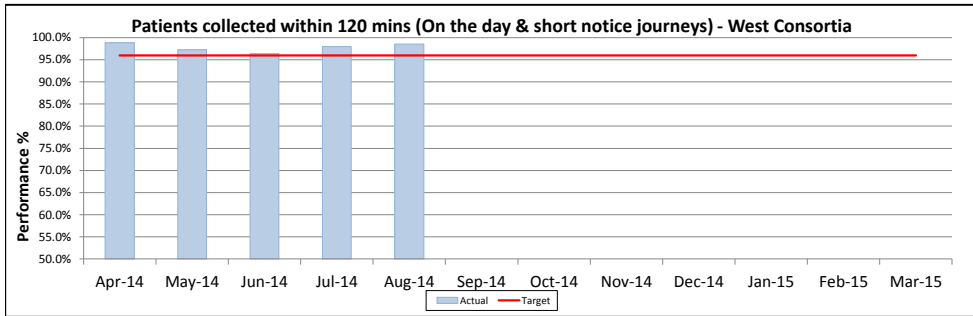
South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%
Actual	93.5%	92.2%	93.2%	89.8%	88.4%							



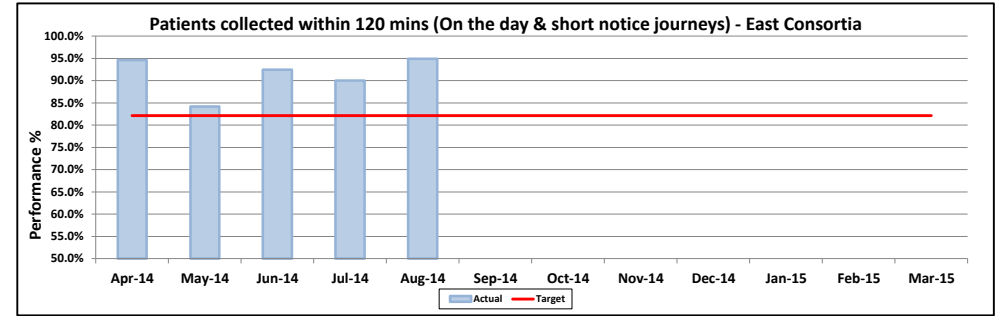
North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Actual	89.7%	89.4%	88.3%	89.9%	86.8%							

EWI Early Warning Indicator

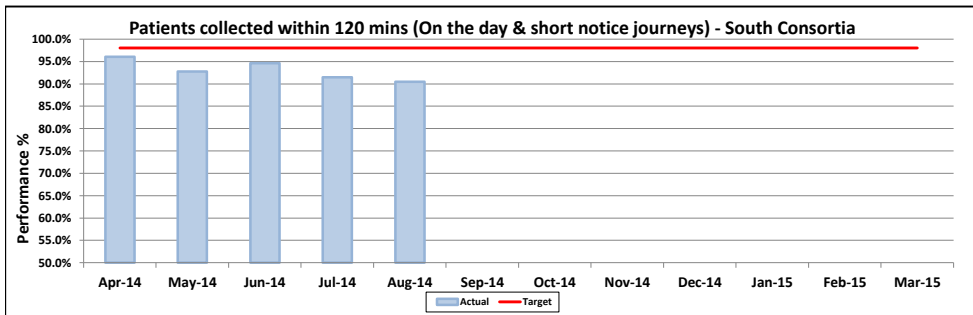
Departure - KPI 4



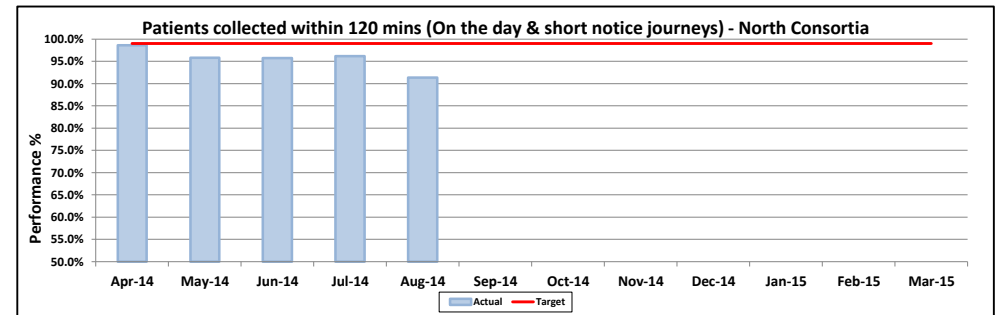
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%
Actual	98.8%	97.2%	96.4%	98.0%	98.6%							



East Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	82.14%	82.14%	82.14%	82.14%	82.14%	82.14%	82.14%	82.14%	82.14%	82.14%	82.14%	82.14%
Actual	84.6%	84.2%	92.5%	90.0%	94.9%							



South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%
Actual	96.1%	92.8%	94.7%	91.5%	90.5%							



North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
Actual	98.7%	95.9%	95.7%	96.2%	91.3%							

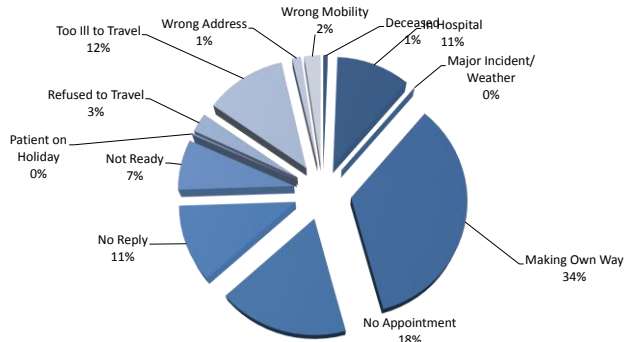
West Renal KPIs

West Consortia - RENAL		TARGET	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
KPI 1 - Inward arrivals	0-30 mins early	95%	74.3%	75.2%	74.1%	73.9%	76.3%							
	0-60 mins early	100%	91.6%	89.9%	89.9%	90.9%	90.8%							
	up to 30 mins late	0%	0.6%	0.9%	1.0%	1.1%	0.9%							
KPI 2 - Outward collections	Within 45 mins of ready time	90%	92.9%	91.6%	90.1%	90.9%	91.5%							
	Within 60 mins of ready time	100%	97.9%	97.7%	96.9%	97.0%	97.6%							
KPI 3 - Journey Time	10 miles and >45 mins	90%	96.9%	97.2%	96.7%	97.0%	97.2%							

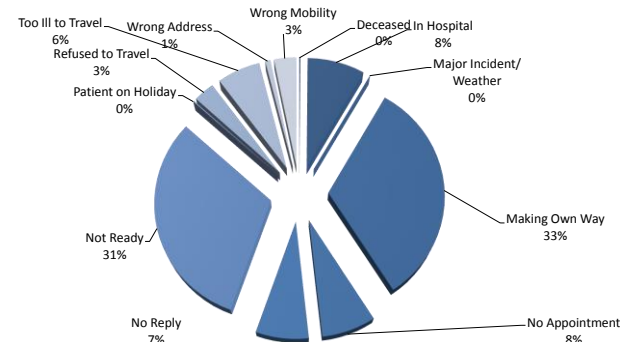
PTS Abortive journeys

Abortive journeys are those where YAS is informed with less than 2 hours' notice that the journey is not required

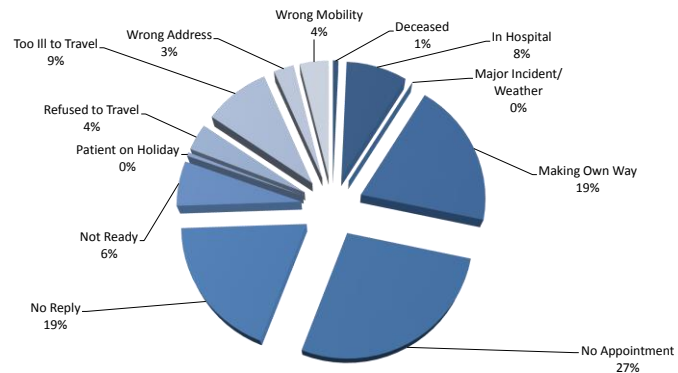
North Consortium													
Abort Reason	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Total
Deceased	5	2	3	5	3								18
In Hospital	73	67	82	82	50								354
Major Incident/Weather	0	0	0	0	0								0
Making Own Way	147	140	167	184	162								800
No Appointment	89	65	93	117	83								447
No Reply	56	50	73	56	52								287
Not Ready	53	48	45	59	34								239
Patient on Holiday	0	0	0	0	1								1
Refused to Travel	23	25	26	36	13								123
Too Ill to Travel	63	65	59	68	55								310
Wrong Address	4	7	9	4	6								30
Wrong Mobility	11	15	10	15	11								62
Overall Totals	524	484	567	626	470								2671



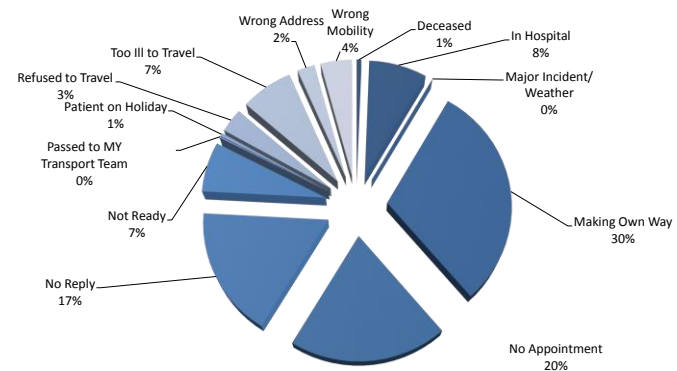
East Consortium													
Abort Reason	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Total
Deceased	2	4	2	2	1								11
In Hospital	61	58	49	46	54								268
Major Incident/Weather	0	1	0	0	0								1
Making Own Way	127	176	183	183	214								883
No Appointment	57	54	74	62	48								295
No Reply	48	61	44	42	47								242
Not Ready	169	163	169	189	205								895
Patient on Holiday	0	1	0	1	1								3
Refused to Travel	11	27	22	14	20								94
Too Ill to Travel	44	45	45	47	41								222
Wrong Address	6	5	6	13	5								35
Wrong Mobility	21	16	17	15	21								90
Overall Totals	546	611	611	614	657								3039



South Consortium													
Abort Reason	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Total
Deceased	12	9	8	16	9								54
In Hospital	110	121	102	124	102								559
Major Incident/Weather	0	1	0	0	0								1
Making Own Way	247	225	217	283	243								1215
No Appointment	334	313	372	416	343								1778
No Reply	284	293	297	325	233								1432
Not Ready	86	81	66	92	75								400
Patient on Holiday	2	4	7	8	6								27
Refused to Travel	53	39	55	66	45								258
Too Ill to Travel	129	134	142	118	111								634
Wrong Address	33	27	38	46	34								178
Wrong Mobility	73	72	83	84	48								360
Overall Totals	1363	1319	1387	1578	1249								6896

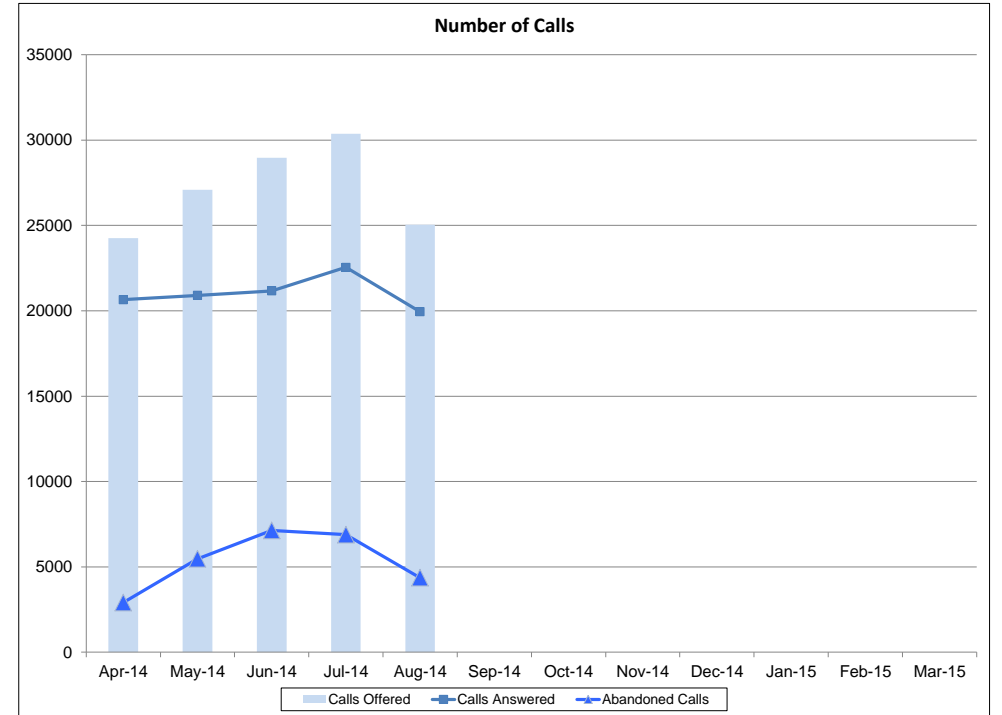
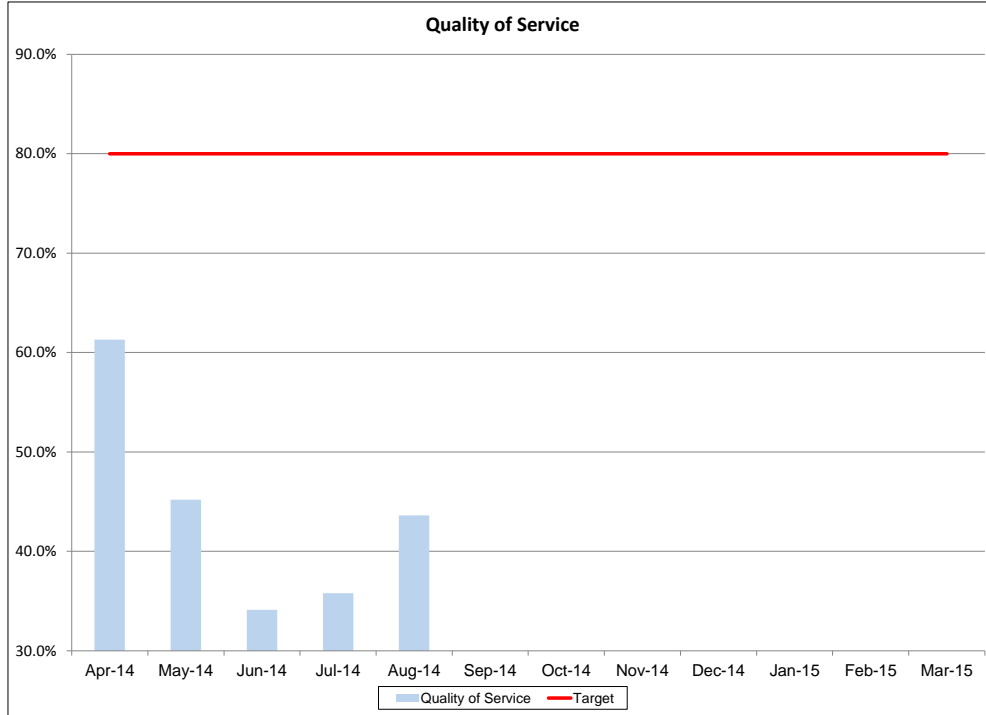


West Consortium													
Abort Reason	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Total
Deceased	29	33	41	26	20								149
In Hospital	303	293	311	351	250								1508
Major Incident/Weather	0	0	1	0	0								1
Making Own Way	740	772	926	1042	972								4452
No Appointment	679	710	701	766	640								3496
No Reply	592	637	593	681	551								3054
Not Ready	237	266	213	279	215								1210
Passed to MY Transport Team	8	9	8	6	6								37
Patient on Holiday	4	11	6	4	13								27
Refused to Travel	110	109	132	150	104								385
Too Ill to Travel	262	279	260	295	226								1322
Wrong Address	78	79	83	105	76								421
Wrong Mobility	148	145	152	150	135								730
Overall Totals	3190	3343	3427	3855	3208								17023



PTS Call Answering - 80% of Calls to be answered within 30 seconds

↔	YTD RAG	RED
	MTD RAG	RED



Week Commencing	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Calls Offered	24264	27097	28970	30379	25053							
Calls Answered	20652	20907	21168	22543	19946							
Average Answer Delay	00:01:00	00:01:55	00:02:33	00:02:27	00:01:47							
Max Answer Delay	00:58:24	00:58:55	00:59:56	00:59:05	00:54:36							
Abandoned Calls	2908	5471	7132	6882	4362							
Quality of Service	61.3%	45.2%	34.1%	35.8%	43.6%							



Section 2c

NHS 111



Directors Exceptions

RAG	Page Ref No	No of months Exception	Exception	Actions required to put back on track	Who	When	Year end Risk Level
RED	2.16	5/5	Warm Transfer & Call Back Targets	Continued implementation of NHS 111 service optimisation plan. Safe patient care delivered with prioritised Clinical Adviser follow up. Discussion has been held with commissioners to agree relevant KPIs and improvement targets for the current year.	AD NHS 111/Urgent Care	Ongoing	RED

NHS 111

Measure	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Comments
Contracted Call volumes * (flat 1/12th of the annual volumes)	107,670	107,670	107,670	107,670	107,670								
Total number of Calls Offered	116,583	122,083	109,737	110,065	110,896								
Total number of Calls answered	114,451	119,321	107,833	107,738	109,515								
Variation to Contract Flat Rate	6.3%	10.8%	0.2%	0.1%	1.7%								
Variation to Contract Flat Rate (Quarter)		5.8%			0.9%								
Total number of Calls answered within 60 seconds	108,872	112,218	104,093	101,572	106,271								
Total % of calls answered within 60 seconds (Target >= 95%)	95.1%	94.0%	96.5%	94.3%	97.0%								
Total number of abandoned calls after 30 seconds	1,203	1,528	871	1,413	700								
Total % of calls abandoned after 30 seconds (Target <=5%)	1.0%	1.3%	0.8%	1.3%	0.6%								
Total number of calls triaged	97,629	101,065	91,068	90,805	92,446								
Total number of calls completed in 1 contact	98,272	101,041	91,309	90,573	95,006								
Total number of calls transferred to a clinical advisor (DX Calls)	21,634	20,771	19,757	20,594	20,380								
Total % of calls which were transferred to a clinical advisor (DX Calls)	18.9%	17.4%	18.3%	19.1%	18.6%								
Total number of calls which were warm transferred to a clinical advisor	7,895	5,104	5,257	5,218	7,727								
Total % of Warm transfers (Target 95%)	36.5%	24.6%	26.6%	25.3%	37.9%								
Total % of Call Backs (Target 95%) in 10 Mins (KPI)	37.1%	31.8%	32.6%	29.3%	31.4%								
Total % of Call Backs (Target 95%) in 120 Mins (Internal)	94.1%	93.7%	94.1%	91.6%	93.0%								
Total % of Call Backs (Target 65%) in 10 Mins and Warm Transferred	60.0%	48.6%	50.5%	47.3%	57.4%								
Longest wait for a call back by a clinical advisor	05:26:34	06:44:28	05:41:22	06:13:21	13:26:53								
Average call back time by a clinical advisor	00:39:09	00:42:02	00:40:58	00:46:04	00:41:18								
Total number of calls directed to 999 - RED	4,181	4,468	4,003	3,924	3,912								
Total number of calls directed to 999 - GREEN	5,350	5,481	5,055	5,270	5,051								
Total number of calls directed to 999	9,531	9,949	9,058	9,194	8,963								
Total number of calls recommended to attend an A&E	6,538	6,665	6,556	6,990	6,531								
Total number of calls directed to see GP	39,627	40,708	35,491	34,554	35,561								
Total number of calls directed to speak to GP	10,176	10,034	8,627	7,863	8,773								
Total number of calls directed to 999 - RED (%)	3.7%	3.7%	3.7%	3.6%	3.6%								
Total number of calls directed to 999 - GREEN (%)	4.7%	4.6%	4.7%	4.9%	4.6%								
Total number of calls directed to 999 (%)	8.3%	8.3%	8.4%	8.5%	8.2%								
Total number of calls recommended to attend an A&E (%)	5.7%	5.6%	6.1%	6.5%	6.0%								
Total number of calls directed to see GP (%)	34.6%	34.1%	32.9%	32.1%	32.5%								
Total number of calls directed to speak to GP (%)	8.9%	8.4%	8.0%	7.3%	8.0%								



Section 2d

Support Services Performance



ICT Summary

	YTD RAG	AMBER
↔	MTD RAG	AMBER

NB - the information on this summary dashboard is made up of the more detailed information contained in the ICT Departmental Performance Dashboard.

Key Areas	Performance / Activity	Criteria	Target	Green	Amber	Red	Apr RAG	May RAG	Jun RAG	Jul RAG	Aug RAG	Sep RAG	Oct RAG	Nov RAG	Dec RAG	Jan RAG	Feb RAG	Mar RAG	Year End Forecast 14/15	
Our Service	SLA	% of Items resolved within SLA	>=90%	>=90%	< 90% >=85%	<85%	80.5%	88.0%	78.0%	83.0%	78.0%	Results impacted by annual leave and the reduced departmental establishment, both of which have contingency plans in place to recover the position during the 3rd quarter.						84.3%		
		Incidents (Logged)					766	962	1252	1457	1781								1,728	
		Service Requests (Logged)					1612	1697	1394	1689	863									3,309
		Total Activity (Logged)					2378	2469	2646	2646	2644									5,037
	Customer Feedback	% of either Very Good or Good	>=90%	>=90%	<90% >=85%	<85%	94.5%	96.1%	90.0%	0.0%	0.0%	Insufficient data collected in Aug due to survey changeover. Data will be available in Sept						94.7%		
		Number of Surveys Returned					310	164	19	0	0									474
		Positive Score					293	156	15	0	0									449
		Negative Score					17	8	4	0	0									25
	Customer Contact	Average Speed to Answer	<=10(s)	<=10(s)	>10(s) <=15(s)	>15(s)	6	4	6	6	5									5

2014 - 2015 Active and Pipeline Projects

Task ID	Projects	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Nov	Dec	Jan	Feb	Mar
P14	Roll-out of ECS	0%	0%	0%	0%	30%												
P11	Clinical Hub – Trauma Module.	50%	55%	55%	55%	60%												
P29	Estates Reconfigurations – HART				0%	20%												
P15	Estates Reconfigurations – Hub & Spoke	20%	20%	20%	20%	20%												
P24	Data Warehouse - Management Information	0%	10%	10%	10%	20%												
P30	Rolling out of Mobile Phones			5%	5%	5%												
P4	ICT Asset Management	35%	65%	75%	75%	75%												
P13	Upgrade South Remote sites links	5%	15%	18%	40%	40%												
P27	Implement ITIL																	
P7	New YAS Intranet																	
P33	Deliver 111/999 any to any	30%	60%	60%	70%	70%												
P1	Airwave to callFlex DR site				0%	20%												
P19	Telematics	90%	90%	90%	90%	100%												
P20	Migration to Thin Client Terminals on Remote Sites	0%	10%	10%	10%	20%												
P17	Wireless Network	0%	0%	0%	10%	10%												
P16	YAS TV																	
P	Electronic Document Management system	0%	5%	5%	40%	40%												
P21	Clinical Web Site (PathFinder)	0%	15%	15%	30%	30%												
P25	PRF outsource scanning																	
P21	New Maps for CAD																	
P18	New Maps for PTS																	
P22	VDO Replacement	5%	7%	7%	22%	25%												
P23	New Maps for Terrafix		0%	0%	70%	100%												
P26	Resweb		0%	0%	20%	95%												
P22	Board Pad		0%	0%	10%	20%												
P23	EOC Wall Board System		10%	10%	10%	10%												
P25	ACCS		0%	0%	100%													
P26	Blaydon Walk-in Centre Adastra Deployment			5%	15%	30%												
P28	New Build Reception SH2				0%	30%												
P34	ISO-22301- Standard - Business Continuity				0%	15%												
P31	GRS to MIS Interface																	
P32	OHIO to MIS Interface				0%	15%												
P35	PTS Call Flex Moves (PTS Transformation)	90%	90%	90%	90%	90%												
P6	ICT and HR Service Desk - Assure					20%												
P36	PTS PDA Replacement (PTS Transformation)					120%												

Estates and Procurement

↔	YTD RAG	GREEN
	MTD RAG	GREEN

E2.1 Estates		RAG Status	Empty	Underused		Fully used	Overcrowded	Notes
E2.1	Space Utilisation	GREEN	0%	2%		86%	12%	
		RAG Status	As New	Acceptable	Acceptable but will req Upgrade within 10 yrs	Upgrade Req'd	Unacceptable	
E2.1	Physical Condition (External)	GREEN	7%	21%	53%	19%	0%	
	Physical Condition (Office)	GREEN	9%	22%	62%	7%	0%	
	Physical Condition (Garage)	GREEN	3%	23%	74%	0%	0%	
E2.1	Fire, Health & Safety Compliance	GREEN	21%	49%		30%	0%	The Fire, Health and Safety six facet figures have been reviewed and updated following work completed during the last financial year.
E2.1	Energy Performance	GREEN	17%	65%		13%	5%	The 5% is based on Bentley, Bramley, Malton and Menston which all require replacement heating systems due to their age and inefficiency. These will be replaced in line with the Estates Capital program. The condition classification D was given by E.C. Harris on the 6 Facet Survey.
E2.1	Functional Suitability	GREEN	7%	75%		17%	0%	
E2.1	Quality	GREEN	9%	79%		12%	0%	
		RAG Status						
E2.1	Capital Project Delivery	GREEN						2014 Capital program is progressing. The works to replace the roof at Middlewood station is now complete as is the tarmac repair to Castleford. An additional capital bid had been submitted for various electrical resilience works at Springhill and York Fairfields. Phase 1 (UPS battery replacement in Springhill 2) has been completed and Phase 2 (Generator control panels) is to start on Monday 8th September.
E2.1	Station Egress Status	GREEN						
E2.1	Supported Standby Points	GREEN						

RAG Status history	Apr RAG	May RAG	Jun RAG	Jul RAG	Aug RAG	Sep RAG	Oct RAG	Nov RAG	Dec RAG	Jan RAG	Feb RAG	Mar RAG
	GREEN	GREEN	AMBER	GREEN	GREEN							

Fleet

YTD RAG	GREEN
MTD RAG	GREEN

E1 Carbon Management		RAG Status	Baseline 2009	Jun-14	Forecast	Quarter 1 Actual	Notes
E1.1	Carbon Emissions (Fuel)	AMBER	11516 Tonnes CO2	5175 Tonnes CO2			Aim to reduce carbon emissions by 10% by 2015 from the 2009 figures. YAS has been awarded a £166k grant to install solar panels on 175 vehicles, and will be establishing a contractor and installation plan. The introduction of the panels is expected to reduce carbon dioxide emissions by 720kg per vehicle per year, and nitrogen oxide emissions by 17kg.
E1.2	Carbon Emissions (Estates)	GREEN	5,707 Tonnes CO2	5560 Tonnes (2013/2014)			Aim to reduce carbon emissions by 10% by 2015 from the 2009 figures. Emissions for 2010/2011: 5104 t, 2011/2012: 5058 t, 2012/2013: 5742 t, 2013/2014: 5560 t. Information can only be supplied on a quarterly basis due to bills being sent in and processed from all the stations (May 2014 figures are representative of the figures obtained during 2013/2014). Carbon emissions are dependant on degree days (ie heating/energy requirements due to time of year) and can be weather dependant (ie winter vs summer)

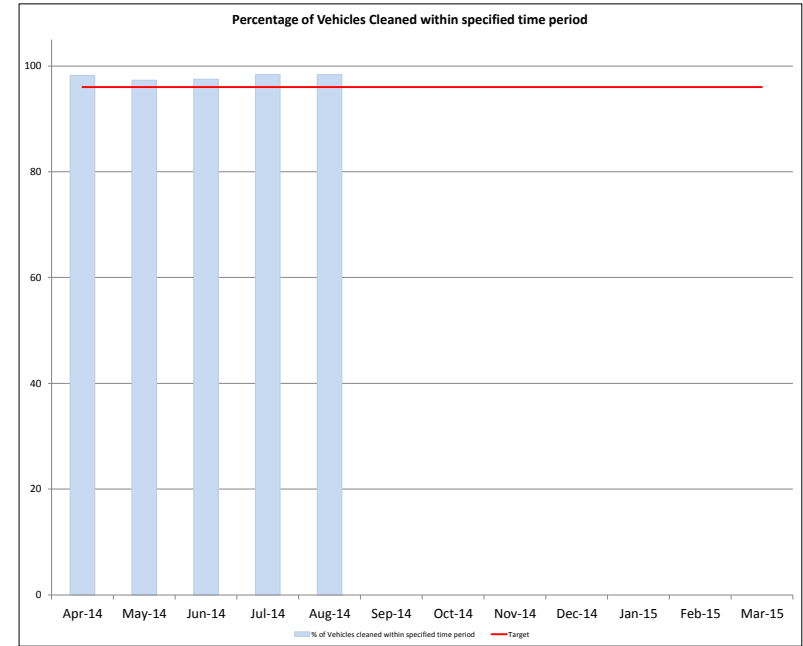
E3 Fleet		RAG Status	Plan YTD	Actual YTD	Var YTD	Plan Mth	Actual Mth	Var Mth	Notes
Vehicle Availability % Plan vs. Actual *									
E3.1	A&E	GREEN	92%	93%	1%	92%	92%	0%	
E3.1	PTS	GREEN	94%	95%	1%	94%	94%	0%	

Vehicle Age		RAG Status	Plan YTD	Number Over Age	Var YTD	Notes
E3.1	A&E - RRV	GREEN	4	0		
E3.1	A&E - DMA	AMBER	5	22		43 DMA Vehicles currently in build from 2013/14 procurement. These vehicles are being delivered and put into service. Delays caused by problems with the tail lift mean that 32 Delivered, 22 are on the road and 10 further being commissioned.
E3.1	A&E - Other	AMBER	7	9		9 ECP cars - Replacements ordered and delivery expected December 14/January 15
E3.1	PTS	RED	7	125		There are 124, 6 year old vehicles currently leased by the Trust that are on contracts that expire during 2014/15. It is proposed that these vehicles could be purchased and then retained on fleet for a further 3 years releasing revenue budget to lease further new vehicles suitably specified by PTS. There are a 125 vehicles in excess of 9 years old on the PTS fleet and the aim is to remove all of these vehicles by means of leasing 100 replacement vehicles and a vehicle reduction provided by improved reliability, by the end of 2014/15 FY.
E3.1	Other	GREEN	7	6		

Vehicle Replacement Plan		RAG Status	Plan Annual	Forecast Annual	Notes
E3.1	A&E - RRV	GREEN	40	40	
E3.1	A&E - DMA	GREEN	43	43	
E3.1	A&E - Other	GREEN	20	20	
E3.1	PTS	GREEN	31	31	
E3.1	Other	GREEN	14	14	

E3.2 Compliance / Safety		RAG Status	Number	% Total	Notes
E3.2	Safety Checks Outside "Window" at end of period	GREEN	22	3.98%	
E3.2	Vehicle Services Outside "Window" at end of period	GREEN	9	2.42%	
E3.1	Vehicle Cleans Outside "Window" at end of period	GREEN	46	1.30%	
E3.4	Defibrillator servicing Outside "Window" at end of period	GREEN	0	0.00%	
E3.5	Suction Unit servicing Outside "Window" at end of period	GREEN	23	3.85%	
E3.6	Parapac servicing Outside "Window" at end of period	GREEN	4	1.35%	
E3.7	Microvent servicing Outside "Window" at end of period	RED	69	17.04%	It has been proposed and agreed by the medical directorate and ratified at the Vehicle and Equipment Committee, that the Microvent is surplus where a vehicle has a Parapac ventilator. All microvents will be removed from RRV's and a program has been started to remove Microvents from DMA's which have a Parapac fitted.

RAG Status history	Apr RAG	May RAG	Jun RAG	Jul RAG	Aug RAG	Sep RAG	Oct RAG	Nov RAG	Dec RAG	Jan RAG	Feb RAG	Mar RAG
	AMBER	GREEN	AMBER	GREEN	GREEN							



Vehicle Cleaning	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
% of Vehicles cleaned within specified time period	98.2	97.3	97.5	98.4	98.35							

Vehicles repaired by Vehicle Body Care

Number of Vehicles Repaired 2013-2014	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Actual 2013 / 2014	16	19	26	29	23	18	26	25	26	18	23	23	272
Target	20	20	20	20	20	20	20	30	30	30	30	30	290
Actual Vehicle Repairs	25	21	22	15	19								102
Variance	-5	-1	-2	5	1	20	20	30	30	30	30	30	



Section 3

Quality Analysis



Directors Exceptions

RAG	Page Ref No	No of months Exception	Exception	Actions required to put back on track	Who	When	Year end Risk Level
AMBER	3.4	two	'Data for April and May has been refreshed to include all incidents as well as issues/concern and near misses reported by staff. Incident reporting has overall increased since June which reflects current issues within the A&E operational service, but is also a positive indicator of staff engagement with the reporting process.	Actions in the A&E performance improvement plan will address the potential underlying cause and reported incidents and near misses are monitored closely, with Executive oversight.	Executive Director of Standards and Compliance	Oct-14	GREEN
AMBER	3.17	one	The Friends and Family question s	Actions in the A&E performance improvement plan will address the potential underlying cause.	Executive Director of Operations	Oct-14	GREEN

Comments on Quality**New Incidents Reported**

Data for April and May has been refreshed to include all incidents as well as issues/concern and near misses reported by staff. Incident reporting has overall increased since June which reflects current issues within the A&E operational service, but is also a positive indicator of staff engagement with the reporting process. The rate of actual harm to patients associated with reported incidents remains very low.

Patient Related Incidents

Patient related incidents have increased in June, July & August however a number of these are reported issues/concerns and near misses. July & August has seen an increase primarily in response time related incidents. A process is in place within EOC to monitor the delayed responses & their potential impact on patients.

Staff Related Incidents

There was a rise in staff related incidents in June, including 'Staff Welfare' issues with staff reporting missed or late meal breaks. There has been improvements in July & August with this figure decreasing in A&E Operations. There was an increase in PTS staff related incidents in July and these are mainly moving and handling or violence and aggression related incidents. However, this figure has reduced in August.

Never Events

No never events have been identified during this period.

Serious Incidents

The number of SIs occurring in August has reduced to 4. The August figure includes 2 SIs which occurred in July but which were reported retrospectively.

RIDDOR

The RIDDOR reportable incidents remain consistent in category. Over recent months there has been a reduction in the amount of injuries sustained relating to the use of the emergency response bag. This was following procurement of a new, improved bag. Incidents relating to the use of the carry chair continue to be a persistent issue and training is still ongoing across the Trust aligned to roll out of the new carry chair, to reduce the number of injuries being sustained by staff.

Medication related incidents

There were 18 Controlled Drug incidents in August of which 12 were breakages mostly due to vials shattering. This has been attributed to the manufacturer using thinner glass which was reported to the MHRA; this has now been rectified. In addition, there was one instance of key loss and one temporary loss of a Controlled Drugs register.

Five medicine-related clinical errors were reported in August. All have been investigated and no patient harm was caused. Individual clinicians have been instructed to write articles related to their incidents which will be published in Clinical Update.

Complaints and concerns

The numbers of complaints and concerns received this year to date are 115% greater than the same period last year, whilst 23% more have been received for A&E Operations over the same period. The numbers peaked in June this year but still remain high during July and August. Numbers of complaints about PTS services remain consistent, whilst NHS 111 complaints and concerns are 54% than this period last year.

Patient experience

The Friends and Family question score has fallen in July for all A&E CBU's. There is considerable variation in monthly scores but it is likely that the July figures are influenced by the impact of operational performance issues on patient experience during May when the survey was issued.

IPC Audit

Issues arising from the lower percentage results for hand hygiene and vehicle audits are as follows:

Upholstery damage to some PTS vehicles.
Some staff not carrying personal alcohol gel

Clinical Audit Programme

Currently, PRF validation is running approximately 5 wks. in arrears OT to recover position agreed. BT power failure resulted in the loss of the internet and phone connection on the Rotherham site for 4hrs a separate issue disrupted overtime working at a weekend. Two manager staff vacancies, one at Rotherham and one at York. Sickness at York during August were also high but improving with one LTS returned to work. National CPIs and ACQIs are up to date and have been submitted on time. The National Figures which we queried last month (difference in some percentages between the individual cycle 12 report for febrile convulsions and hypoglycaemia and the combined national cycle 12 report) were resolved and have been corrected in the charts. The YAS hypoglycaemia figure had been copied across wrongly on the national report we received and the difference in the figures on the febrile convulsion was due to one Trust submitting revised data after the individual report was published, resulting in a change of national average results on the combined Cycle 12 report.

Safeguarding

Adult referrals from December 2013 include Community Care Assessment (CCA) referrals

CCA referrals are requests for an assessment of a patient's care / support needs

However, following a change in reporting, the adult figures for June & July do not include the CCA referrals. These figures will be included in September

KPI	Description	Measure	Apr RAG	May RAG	Jun RAG	Jul RAG	Aug RAG	Sep RAG	Oct RAG	Nov RAG	Dec RAG	Jan RAG	Feb RAG	Mar RAG	Year End 14/15 Forecast	Q1 Forecast 2014/15
3	Safety	<ul style="list-style-type: none"> Infection, Prevention and Control Patients Incidents Medication Incidents Staff Incidents RIDDOR Serious Incidents 	GREEN	GREEN	AMBER	AMBER	AMBER									GREEN
1.2	Clinical Effectiveness	<ul style="list-style-type: none"> Clinical Performance Indicators (National) Clinical Audit Programme 	AMBER	AMBER	AMBER	GREEN	GREEN									GREEN
1.2	Patient Involvement and Experience	<ul style="list-style-type: none"> Concerns, Complaints and Compliments Patient Experience Local Involvement Networks/Overview & Scrutiny Committees 	GREEN	GREEN	GREEN	GREEN	GREEN									GREEN
3	CQC and Other Registration / Legislation Standards	<ul style="list-style-type: none"> Registration Regulations & Outcomes NHS Litigation Authority 	AMBER	AMBER	AMBER	AMBER	AMBER									AMBER

Description	Apr RAG	May RAG	June RAG	July RAG	Aug RAG	Sept RAG	Oct RAG	Nov RAG	Dec RAG	Jan RAG	Feb RAG	Mar RAG	Year End 13/14 Forecast
Governance Risk Rating	GREEN	GREEN	GREEN/AMBER	GREEN/AMBER	GREEN/AMBER								

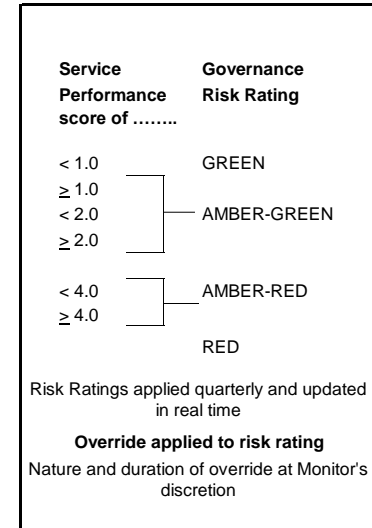
Deriving the governance risk rating

Monitoring

Service performance score

Governance Risk Rating

1 Performance against national measures	<ul style="list-style-type: none"> National Indicators set out Applicable to all foundation trusts commissioned to provide services Declared risk of, or actual, failure to meet any indicator = +0.5-1.0 Three successive quarters' failure of a 1.0-weighted measure, red rating and potential escalation for significant breach
2. Third Parties	<p>Care quality Commission *1 following non-compliance with essential standards</p> <ul style="list-style-type: none"> Major impacts on patients = +2.0 Enforcement action = +4.0 <p>NHS Litigation Authority *2 -Failure to maintain, or certify a minimum published CNST level of 1.0 or have in place appropriate alternative arrangements: +2.0</p>
3. Mandatory Services	-Declared risk of, or actual, failure to deliver mandatory services: +4.0
4. Other board statement failures	-If not covered above, failure to either (i) provide or (ii) subsequently comply with annual or quarterly board statements
5. Other factors	<ul style="list-style-type: none"> Failure to comply with material obligations in areas not directly monitored by Monitor Includes exception or third party records Represents a material risk to compliance



*1 Consideration for escalation can occur as soon as the full year breach is recorded.

*2 As the indicator must be met in each month during the quarter, trusts are required to report, by exception, any month in which they have breached the RTT measure. Where trusts consequently report failures in the first or second months of a quarter and have failed the measure in each of the previous two quarters, Monitor may consider whether to escalate the trust in advance of the end of the third quarter. This also applies where a trust fails the relevant measure in each year spanning any three quarters from 2011/12 into 2012/13

Service Transformation Programme 2014-2016

Service Transformation Programme															
Reference	Project	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Comments	
		Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
Hub and Spoke - Deputy Chief Executive, Executive Director of Finance and Performance														Strategic Outline Case will now be presented to Board in December - modelling ongoing	
HS1	Programme Team and Governance	ED Ops													Project team established
HS2	Strategic Outline Business Case	ED Finance													SOC tender to be launched 04-09-14 for contract start 29 September.
HS3	Full business Case	ED Finance													Awaiting approval of SOC
HS4	Communications	ED Ops													Communications tender to be launched 01-09-14 for contract start mid-October
HS5	ORH Modelling	ED Ops													Revised ORH report expected late September.
HS6	Financial Modelling	ED Finance													Initial financial modelling based on ORH 2013 report to be completed in September and updated when revised ORH information available.
HS7	Hub and Spoke Specification	ED Finance													Draft Hub and Spoke building specification document reviewed by Project Team
HS8	Make Ready	ED Ops													Efforts focussed on the requirements for the SOC.
HS9	Fleet and Ancillary	ED Finance													Work currently 50% completed. Interviews for interim Fleet manager being held
HS10	ICT	ED Ops													Draft ICT specification and costs completed 29.8.14.
HS11	EOC Deployment Models	ED Ops													Full engagement from EOC. Representation at all levels within the Project Board and Project Team.
HS12	Operational Support Functions	ED Ops													Operational support functions established
HS13	Estates	ED Finance													Leasehold/freehold options to be developed as required by the SOC.
HS14	Benefits and Realisation	ED Ops													Benefits have been assessed. To be reviewed against investment objectives as required for the SOC.
OD and Leadership - Executive Director of People and Engagement															
ODL1	Management & Leadership	ED PR & E													Process for protected abstractions and notification of PDRs agreed and new paperwork and training pack under development.
ODL2	Service Line Development	ED PR & E													Presentation detailing current position, update against plan and revised timescales developed to go to F&I committee in September.
ODL3	Developing Clinical Leadership	EMD													Updates as per below
ODL3a	Support Development of Independent Clinical Practice	EMD													The clinical career framework and clinical supervision model are produced and has been consulted on during August. The final documents will be submitted for approval in September.
ODL3b	Development of Clinical Career Framework for Frontline Clinicians	EMD													The draft scopes of practice for the Specialist and Advanced Paramedic roles have been consulted on during August.
ODL3c	Support Development and Implementation of evidence based best practice by frontline clinicians	EMD													Actions resulting from the forums are being undertaken by operational staff and outputs from the forums will be presented at Clinical Governance Group meetings.
ODL 3d	Support the Development of Clinical Appraisal and Professional Portfolio Development	EMD													The clinical appraisal and portfolio development work will link with the organisation-wide OEE programme of developing the PDR process
ODL4	Staff Engagement and Communications	ED PR & E													Employee Engagement Manager appointed. Paper on Employee Values and Communications including recommendations for improved employee engagement developed
Urgent Care - Executive Director of Standards and Compliance															
UC1	Paramedic Pathfinder/ePRF	ED S&C													All actions on track, action plan developed to resolve connectivity issues.
UC2	NHS 111+/Care Coordination	ED S&C													Funding approved for continuation of pilot until March 2015
UC3	Technology Enabled Services	ED S&C													Updates as per below:
UC3a	Telehealth	ED S&C													Telecare procurement process investigated and strategy paper progressed through Project Gateway process
UC3b	Telecare	ED S&C													Actions on track
UC4	Community ECPs and Advanced Paramedics	ED S&C													UCP Proposals supported by a number of CCGs via SRGs - recruitment underway. Plans developed for ongoing ECP/UCP development
UC5	Urgent Care Transport	ED S&C													Work us now beginning to mobilise crews for interim urgent tier
UC6	Managed Services Portfolio	ED S&C													The Frequent Caller Team Leader will now be converted to a substantive position following a successful bid for SRG funding

RAG key	
	Project actions and benefits delivery on track
	Project actions and benefits delivery slippage - mitigations in place
	Project actions and benefits delivery slippage - further action required
	Project complete and benefits realised

IPC Audit - Percentage compliant

	YTD RAG	GREEN
↔	MTD RAG	GREEN

Area	Audit	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Calderdale, Kirklees, Wakefield	Hand Hygiene	97%	96%	99%	95%	100%							
	Premise	99%	96%	96%	99%	99%							
	Vehicle	97%	98%	99%	99%	99%							
North Yorkshire and York	Hand Hygiene	97%	97%	99%	97%	98%							
	Premise	100%	97%	97%	100%	99%							
	Vehicle	96%	94%	96%	94%	96%							
Humber	Hand Hygiene	98%	99%	100%	99%	100%							
	Premise	99%	97%	100%	98%	97%							
	Vehicle	98%	98%	100%	99%	98%							
Airedale, Bradford, Leeds	Hand Hygiene	98%	99%	95%	96%	93%							
	Premise	94%	98%	98%	100%	98%							
	Vehicle	99%	98%	96%	95%	94%							
South Yorkshire and Bassetlaw	Hand Hygiene	99%	99%	100%	98%	99%							
	Premise	96%	96%	94%	96%	96%							
	Vehicle	99%	97%	99%	99%	98%							
YAA	Hand Hygiene	100%	100%	100%	100%	100%							
	Premise	100%	100%	100%	100%	100%							
	Vehicle	100%	100%	100%	100%	100%							
Resilience and Special Operations	Hand Hygiene	99%	99%	99%	100%	100%							
	Premise	90%	90%	95%	100%	95%							
	Vehicle	100%	100%	100%	100%	100%							
Private & Events	Hand Hygiene	100%	100%	100%	100%	100%							
	Vehicle	100%	100%	100%	100%	100%							
PTS Leeds	Hand Hygiene	100%	100%	100%	100%	100%							
	Vehicle	98%	96%	100%	100%	94%							
PTS Mid Yorkshire	Hand Hygiene	99%	100%	100%	99%	99%							
	Vehicle	95%	93%	96%	94%	97%							
PTS Bradford / Airedale	Hand Hygiene	100%	99%	99%	100%	99%							
	Vehicle	99%	99%	100%	99%	99%							
PTS Calderdale / Huddersfield	Hand Hygiene	99%	100%	99%	100%	100%							
	Vehicle	98%	100%	100%	99%	100%							
PTS North Yorkshire	Hand Hygiene	100%	99%	98%	99%	98%							
	Vehicle	98%	98%	100%	98%	97%							
PTS Hull & East	Hand Hygiene	100%	98%	100%	99%	98%							
	Vehicle	92%	93%	96%	95%	95%							
PTS Sheffield / Barnsley	Hand Hygiene	99%	100%	99%	100%	99%							
	Vehicle	100%	100%	98%	99%	97%							
PTS Rotherham / Doncaster	Hand Hygiene	100%	100%	100%	100%	100%							
	Vehicle	99%	100%	100%	100%	100%							
Overall Compliance (Current Year)	Hand Hygiene	99%	99%	99%	99%	99%							
	Premise	97%	96%	97%	99%	98%							
	Vehicle	98%	98%	99%	98%	98%							
Overall Compliance (Previous Year)	Hand Hygiene	99%	100%	98%	99%	98%							
	Premise	97%	96%	98%	98%	99%							
	Vehicle	96%	98%	98%	92%	92%							

Key for IPC Audit: Pre April 2012

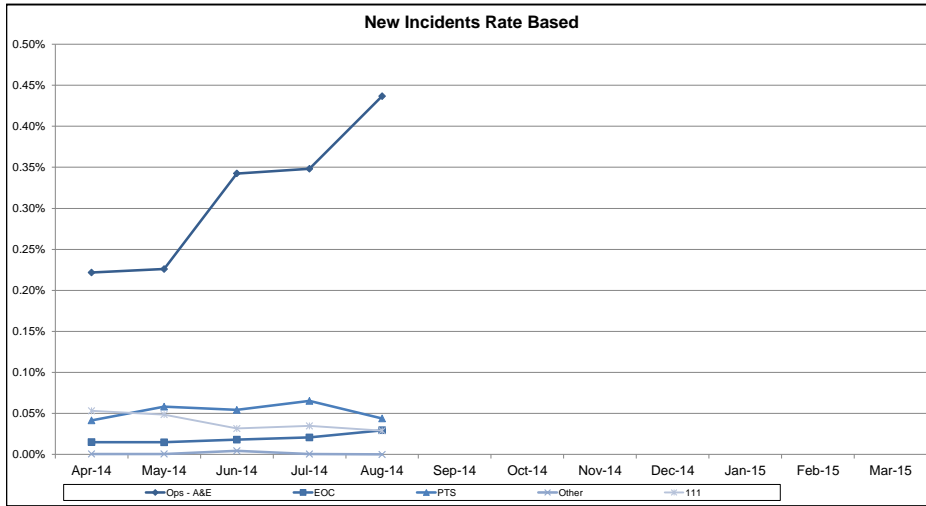
I/Data	Insufficient Data - Minimum Audit requirements not met
	No Audits Completed or minimum audit requirements met with compliance <75%
	Minimum audit requirements met with compliance 75% to 89%
	Minimum audit requirements met with compliance >89%

Key for IPC Audit: April 2012 onwards

I/Data	Insufficient Data - Minimum Audit requirements not met
	No Audits Completed or minimum audit requirements met with compliance
	Minimum audit requirements met with compliance 80% to 94%
	Minimum audit requirements met with compliance >94%

New Incidents Reported

EWI

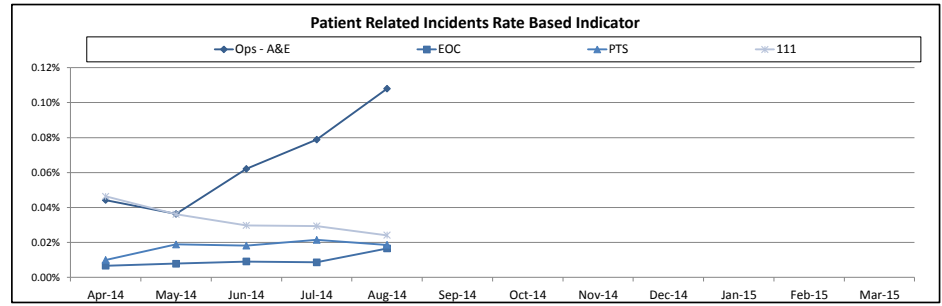


New Incidents Reported	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Ops - A&E	336 (0.22%)	349 (0.23%)	530 (0.34%)	570 (0.35%)	635 (0.44%)							
EOC	23 (0.02%)	23 (0.01%)	28 (0.02%)	34 (0.02%)	43 (0.03%)							
PTS	63 (0.04%)	90 (0.06%)	84 (0.05%)	107 (0.07%)	64 (0.04%)							
111	62 (0.05%)	58 (0.05%)	49 (0.03%)	57 (0.03%)	42 (0.03%)							
Finance	1 (0%)	1 (0%)	7 (0%)	1 (0%)	0 (0%)							
Medical - Operations	4 (0%)	4 (0%)	9 (0.01%)	2 (0%)	6 (0%)							
Quality & Patient Experience	2 (0%)	1 (0%)	4 (0%)	0 (0%)	1 (0%)							
Resilience & Specialist Services	8 (0.01%)	5 (0%)	5 (0%)	11 (0.01%)	6 (0%)							
Support Services	1 (0%)	0 (0%)	2 (0%)	5 (0%)	4 (0%)							
Foundation Trust	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)							
Human Resources	0 (0%)	1 (0%)	0 (0%)	1 (0%)	1 (0%)							
Organisational Effectiveness and Education	2 (0%)	1 (0%)	1 (0%)	3 (0%)	1 (0%)							
Risk & Safety	2 (0%)	0 (0%)	0 (0%)	1 (0%)	0 (0%)							
ICT	1 (0%)	0 (0%)	0 (0%)	1 (0%)	1 (0%)							
Business Intelligence	0 (0%)	0 (0%)	0 (0%)	1 (0%)	1 (0%)							
Fleet	5 (0%)	3 (0%)	0 (0%)	5 (0%)	1 (0%)							
Legal	0 (0%)	0 (0%)	0 (0%)	1 (0%)	0 (0%)							
Transformation	1 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)							
Procurement	1 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)							
TOTALS	512	537	723	801	807							
TOTALS (Prev Year)	395	491	468	518	484	434	497	456	482	465	444	445

New Incidents Reported Percentage is the number of new reported incidents divided by the total demand for A&E and PTS per month. 111 is the number of new reported incidents divided by the total number of 111 calls received

Patient Related Incidents Rate Based Indicator

EWI



	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Ops - A&E	67 (0.04%)	56 (0.04%)	96 (0.06%)	129 (0.08%)	157 (0.11%)							
EOC	10 (0.01%)	12 (0.01%)	14 (0.01%)	14 (0.01%)	24 (0.02%)							
PTS	15 (0.01%)	29 (0.02%)	28 (0.02%)	35 (0.02%)	27 (0.02%)							
111	53 (0.05%)	43 (0.04%)	46 (0.03%)	48 (0.03%)	35 (0.02%)							
Medical Operations	1 (0%)	2 (0%)	4 (0%)	0 (0%)	3 (0%)							
OTHER	4 (0%)	3 (0%)	1 (0%)	4 (0%)	6 (0%)							
TOTALS (Current Year)	150	145	189	230	252							
TOTALS (Previous Year)	105	90	72	82	91	60	91	100	72	101	73	69

Patient Related Incidents Percentage is the number of patient related incidents divided by the total demand for A&E and PTS per month. 111 is the number of new reported incidents divided by the total number of 111 calls received

Medication Related Incidents

OBJ REF 3

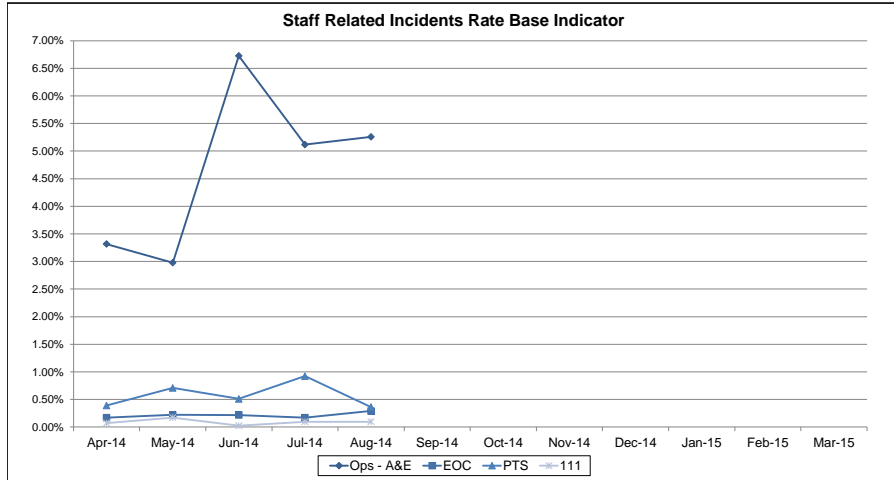
Number of Medication Incidents	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Current Year	39	40	48	75	59							
Previous Year	23	26	30	34	29	23	30	27	50	29	30	37

Morphine Related Incidents

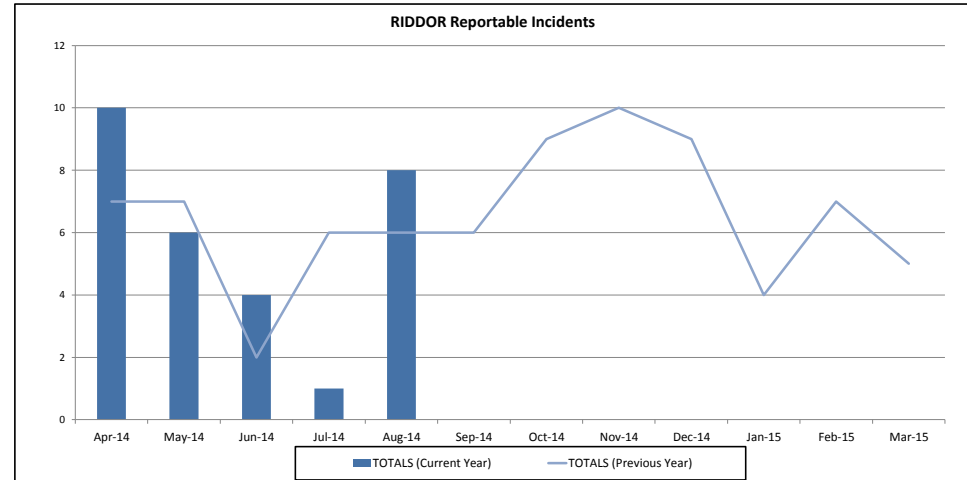
OBJ REF 3

Number of Morphine Incidents	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Breakage	9	15	18	13	12							
Administrative errors	6	3	3	4	4							
Loss	2	1	1	3	2							
Clinical	0	0	3	0	0							
Other	2	1	0	15	0							
TOTAL (Current Year)	19	20	25	35	18							
TOTAL (Previous Year)	14	18	7	16	10	10	12	11	23	11	19	14

Staff Related Incidents



Riddor Incidents



Staff Related Incidents	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Ops - A&E	136 (3.32%)	122 (2.98%)	277 (6.73%)	211 (5.12%)	217 (5.26%)							
EOC	7 (0.17%)	9 (0.22%)	9 (0.22%)	7 (0.17%)	12 (0.29%)							
PTS	16 (0.39%)	29 (0.71%)	21 (0.51%)	38 (0.92%)	15 (0.36%)							
111	3 (0.07%)	7 (0.17%)	1 (0.02%)	4 (0.1%)	4 (0.1%)							
Finance	0 (0%)	1 (0.02%)	1 (0.02%)	0 (0%)	0 (0%)							
Medical - Operations	3 (0.07%)	1 (0.02%)	2 (0.05%)	1 (0.02%)	3 (0.07%)							
Quality & Patient Experience	0 (0%)	0 (0%)	2 (0.05%)	0 (0%)	0 (0%)							
Resilience & Specialist Services	4 (0.1%)	2 (0.05%)	1 (0.02%)	1 (0.02%)	3 (0.07%)							
Support Services	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	1 (0.02%)							
Foundation Trust	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)							
Human Resources	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)							
Organisational Effectiveness and Education	1 (0.02%)	1 (0.02%)	1 (0.02%)	3 (0.07%)	1 (0.02%)							
Risk & Safety	0 (0.02%)	0 (0%)	0 (0%)	1 (0.02%)	0 (0%)							
ICT	0 (0%)	0 (0%)	0 (0.02%)	1 (0.02%)	0 (0%)							
Procurement	1 (0.02%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)							
FLEET	2 (0.05%)	1 (0.02%)	0 (0%)	1 (0.02%)	0 (0%)							
TOTALS (Current Year)	174	174	316	269	257							
TOTALS (Previous Year)	108	106	101	101	129							

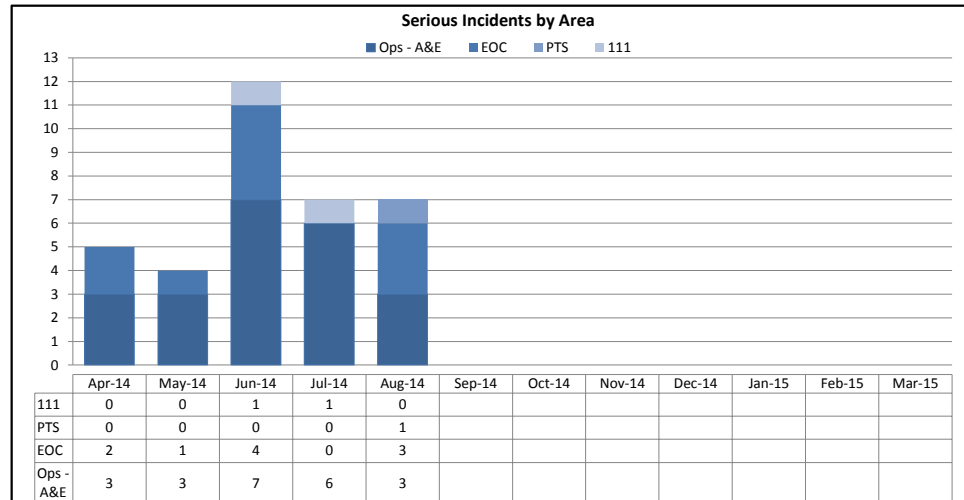
Staff Related Incidents Percentage is the number of staff related incidents divided by the total WTE per month

RIDDOR reportable	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
North Yorkshire CBU	0	1	1	0	2							
East Riding of Yorkshire CBU	1	0	1	1	2							
Leeds & Wakefield CBU	1	1	1	0	1							
Bradford, Calderdale and Kirklees CBU	6	2	0	0	0							
South Yorkshire CBU	1	1	1	0	1							
Operations PTS	1	0	0	0	2							
Other Directorates	0	1	0	0	0							
TOTALS (Current Year)	10	6	4	1	8							
TOTALS (Previous Year)	7	7	2	6	6	6	9	10	9	4	7	5

Incident Type	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Contact with moving machinery or materials	0	0	0	0	0							
Hit by a moving, flying or falling object	0	1	0	0	0							
Hit by a moving vehicle	0	0	0	0	0							
Hit by something fixed or stationary	0	0	0	0	0							
Injured while handling, lifting or carrying	7	2	2	1	4							
Slip, trip or fall on the same level	2	1	2	0	3							
Fall from a height	0	1	0	0	0							
Trapped by something collapsing	0	0	0	0	0							
Drowned or asphyxiated	0	0	0	0	0							
Exposed to or in contact with a harmful substance	0	0	0	0	0							
Exposed to fire	0	0	0	0	0							
Exposed to an explosion	0	0	0	0	0							
Contact with electricity or an electrical discharge	0	0	0	0	0							
Injured by an animal	0	0	0	0	0							
Physically assaulted by a person	0	0	0	0	0							
Another kind of accident	1	1	0	0	1							
Total	10	6	4	1	8							

SUI Incidents by Area

EWI



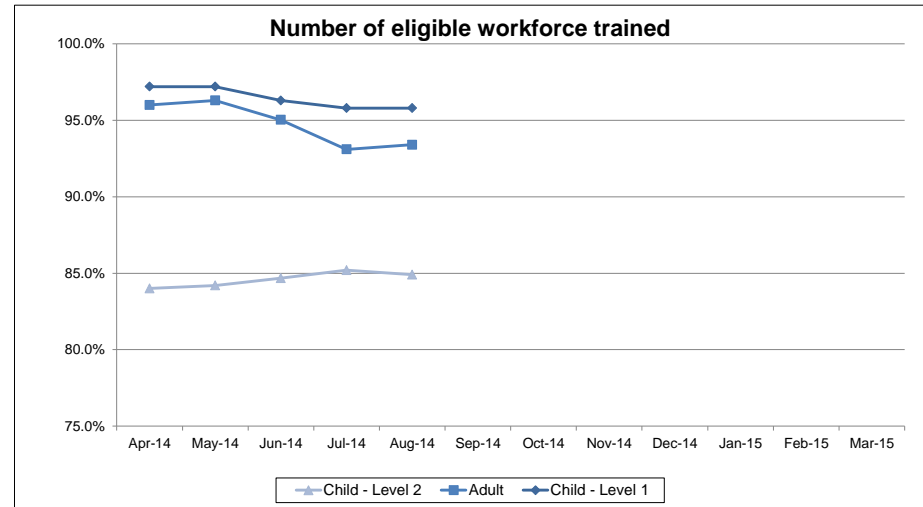
SUI Incidents	EWI	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
TOTAL (Current Year)		5	4	12	8	8							
TOTAL (Previous Year)		3	1	2	4	2	0	2	3	4	5	6	5

Incident Type	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Delayed dispatch/response	3	3	9	5	6							
Road Traffic Collision	0	1	0	0	0							
Clinical care	1	0	1	1	0							
Inadequate clinical assessment	1	0	2	1	0							
Violence & aggression	0	0	0	0	0							
Data protection breach	0	0	0	1	1							
Adverse media attention	0	0	0	0	0							
Medication related	0	0	0	0	0							
Patient Fall	0	0	0	0	1							
Maternity issue	0	0	0	0	0							
Other	0	0	0	0	0							
Total	5	4	12	8	8							

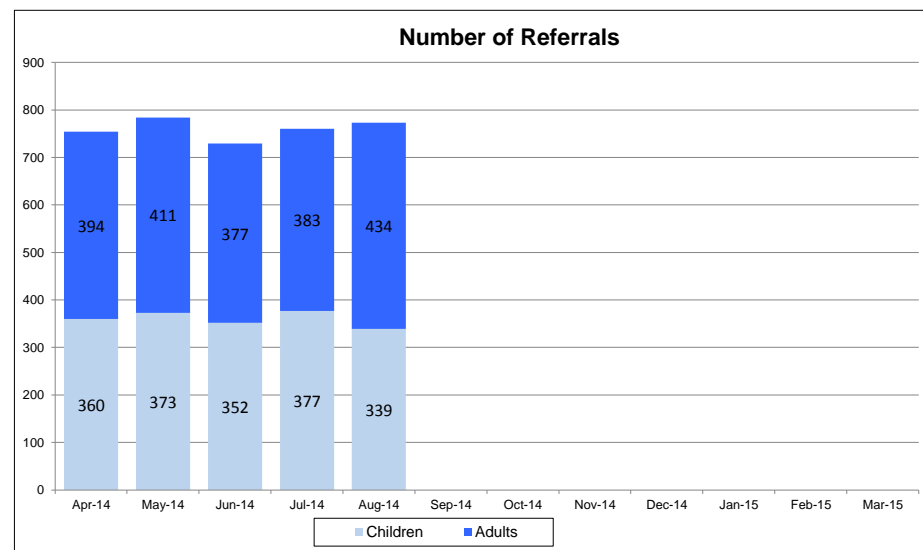
Training Position

YTD RAG GREEN

MTD RAG GREEN



Number of Child and Adult Referrals



Clinical Audit Programme

National Audit Programme

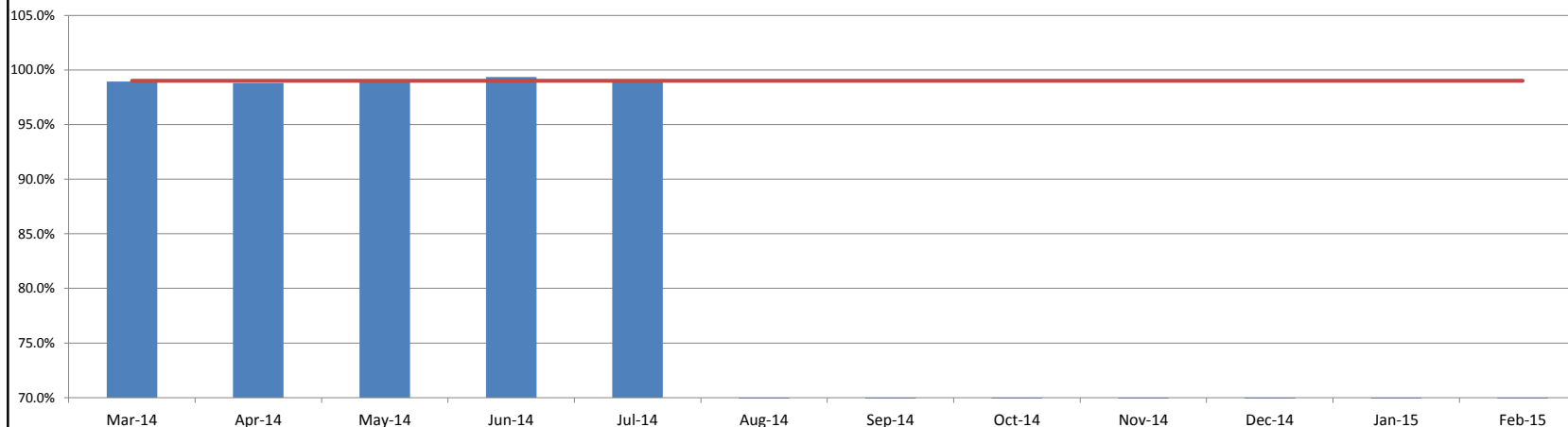
National Ambulance CPis:	National clinical ACOIs	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Febrile convulsions	Cardiac arrest outcomes	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG
Below the knee #	Stroke	GREEN	GREEN	GREEN	GREEN	GREEN							
Hypoglycaemia	STeMI												
Asthma	MINAP												

Internal Clinical Audit Plan

Monthly Local CPis	Other See Audit Plan	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Cardiac Arrest outcomes		RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG
National Requirements		AMBER	AMBER	AMBER	AMBER	GREEN							

Patient Report Form Audit

Percentage of Records Fully Completed for all Key Data fields for Retrieval



Percentage of Records Fully Completed For All Key Data Fields Used For Retrieval	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
Total Forms Scanned	61,873	61,280	63,395	40701	50,534							
Total of forms with key data incomplete	658	738	602	262	547							
% of Completed Forms	98.9%	98.8%	99.1%	99.4%	98.9%							

*This measure will always be 1 month in arrears

*New criteria from March 2012 - A PRF must include an incident number together with the pin number of at least one attending clinician otherwise it will be captured in the missing report and counted in the 'Total of forms with key data incomplete'

Concerns, Complaints, Comments and Compliments - A&E & EOC

Complaints, Concerns and Comments		EWI	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
EOC Attitude	Communications Skills		0	2	1	1	3								7
	Telephone Manner		0	2	1	5	0								8
EOC Call Handling	Red AMPDS		0	0	0	0	3								3
	Green AMPDS		0	1	1	0	1								3
	Green Clinical Hub		1	1	2	4	5								13
	Green 111 triage		0	0	0	0	0								0
	HCP Request		3	1	4	2	5								15
	Red		2	5	5	5	7								24
EOC Delayed Response	Green 1, 2, 3, 4		24	24	31	23	13								115
	IHT		0	7	5	3	7								22
	Admission		6	4	8	6	6								30
	Take Home		1	1	0	3	1								6
	Other		7	0	3	0	0								10
	EOC TOTAL		44	48	61	52	51								256
Demand Activity (Based on Number of Calls)			67571	71947	69623	73605	67861								350607
% Rate			0.07%	0.07%	0.09%	0.07%	0.08%								0.07%
A&E Attitude	Lack of Care		4	6	2	1	6								19
	Communication Skills		8	8	16	9	4								45
A&E Clinical	Assessment		1	6	7	5	6								25
	Clinical Handover		1	0	0	0	1								2
	Treatment		9	3	3	4	4								23
	Moving & Handling		1	0	3	1	1								6
	Pathways		9	6	8	4	2								29
A&E Operations	Operational Procedures		14	11	13	8	10								56
	Vehicles & Stretchers		0	1	2	1	1								5
	Driving		9	7	8	6	4								34
	Other		0	1	0	2	0								3
	A&E TOTAL		56	49	62	41	39								247
Demand Activity (Based on Number of Responses)			58695	62128	59626	61987	58869								301305
% Rate			0.10%	0.08%	0.10%	0.07%	0.07%								0.08%

Grade Profile		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	
Complaints, Concerns & Comments (including Service to Service)	Red	North	0	0	0	1	0							1	
		South	0	2	0	0	0								2
		Hull & East	0	0	1	0	0								1
		ABL	0	0	0	0	0								0
		CKW	0	0	0	0	0								0
		EOC	0	0	1	0	2								3
	Total	0	2	2	1	2								7	
	Amber	North	3	0	1	0	1								5
		South	4	0	3	0	2								9
		Hull & East	2	1	2	1	0								6
		ABL	0	1	2	0	0								3
		CKW	2	0	0	2	0								4
		EOC	1	3	5	4	4								17
	Total	12	5	13	7	7								44	
	Yellow	North	4	6	9	7	4								30
		South	4	4	7	4	4								23
		Hull & East	5	2	1	6	2								16
		ABL	7	3	7	7	9								33
		CKW	8	8	8	4	5								33
		EOC	27	21	36	24	25								133
Total	55	44	68	52	49								268		
Green	North	5	4	4	0	4								17	
	South	3	6	6	2	2								19	
	Hull & East	2	4	1	1	2								10	
	ABL	0	4	4	2	3								13	
	CKW	7	4	6	4	1								22	
	EOC	16	23	19	24	20								102	
Total	33	45	40	33	32								183		

Compliments		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
A&E/EOC TOTAL		64	50	64	33	54								265

Concerns, Complaints, Comments and Compliments - PTS

Complaints, Concerns and Comments		EWI	Codes	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
PTS Communications	Attitude		C	2	0	3	0	1								6
	Administration Error		A	4	4	5	2	2								17
	Call Handling		J	1	0	1	2	1								5
PTS Operations	Attitude		B	6	3	8	6	8								31
	Driving		I	5	2	2	3	1								13
	Vehicle Condition/Comfort		E	1	0	0	0	0								1
	Non-Attendance/Late to Collect Patient from Home		F H U	4	6	11	15	8								44
	Patient Early/Late for Appointment		T S	5	4	5	3	2								19
	Non-Attendance/Late to Collect Patient from Clinic/Hospital		D G V	11	7	21	8	15								62
	Patient Injury		M N	0	1	2	3	2								8
	Patient Care		O	9	1	4	4	3								21
Vehicle Unsuitable		W	5	3	3	3	4								18	
Time on Vehicle		P	1	2	2	0	0								5	
PTS Other				1	1	0	1	0								3
SUB TOTAL 4Cs				55	34	67	50	47								253
PTS Service-to-Service				35	16	48	20	41								160
TOTAL				90	50	115	70	88								413
Demand Activity				92795	92326	95094	101675	86516								468406
% Rate				0.10%	0.05%	0.12%	0.07%	0.10%								0.1%

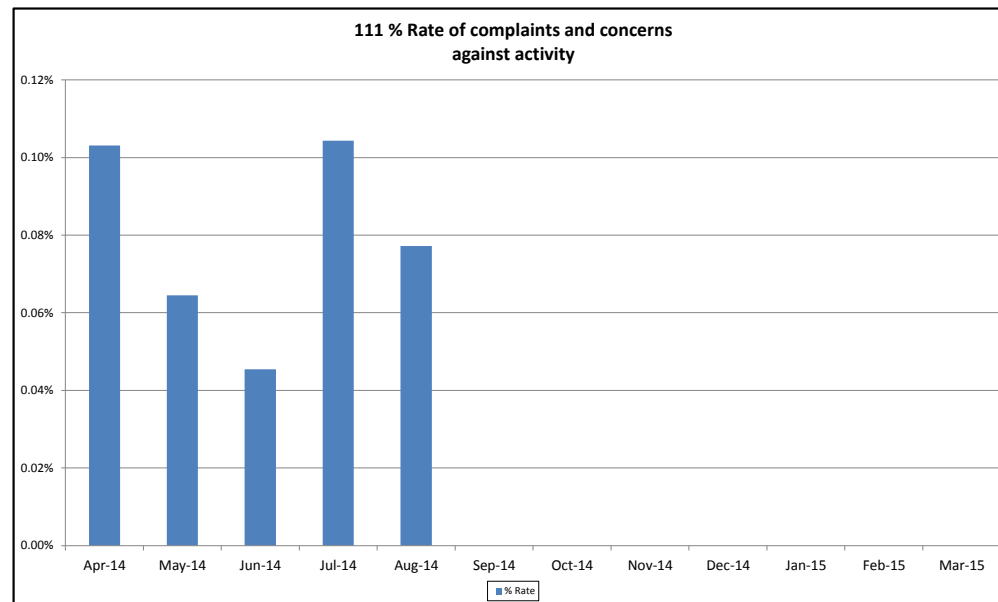
Grade Profile			Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
Complaints, Concerns & Comments (Not Service to Service)	Red	North	0	0	0	0	0								0
		South	0	0	0	0	0								0
		East	0	0	0	0	0								0
		West	0	0	0	0	0								0
		Total	0	0	0	0	0								
	Amber	North	1	0	0	0	0								1
		South	1	0	0	0	0								1
		East	0	0	0	2	0								2
		West	0	2	1	1	2								6
		Total	2	2	1	3	2								
	Yellow	North	0	1	1	0	0								2
		South	2	1	3	2	2								10
		East	2	0	2	5	7								16
		West	8	6	11	11	6								42
		Total	12	8	17	18	15								
	Green	North	9	3	6	1	6								25
		South	3	4	7	6	4								24
		East	10	8	13	10	10								51
		West	20	9	23	12	10								74
		Total	42	24	49	29	30								

Compliments			Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
PTS TOTAL			7	1	5	0	5								18

Concerns, Complaints, Comments and Compliments - 111 & LCD

Complaints & Concerns													
111	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Attitude / Conduct	0	1	3	5	2								11
Clinical	8	5	7	7	8								35
Operations	8	6	2	1	5								22
Sub Total	16	12	12	13	15								68
HCP Complaints & Concerns	102	65	37	93	67								364
GRAND TOTAL	118	77	49	106	82								432
Call Activity	114,451	119,321	107,833	101,572	106,271								549,448
% RATE	0.10%	0.06%	0.05%	0.10%	0.08%								0.08%

Complaints & Concerns													
Local Care Direct	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Attitude / Conduct	1	0	3	0	0								4
Clinical	6	5	5	11	8								35
Operations	2	7	5	2	6								22
Sub Total	9	12	13	13	14								61
HCP Complaints & Concerns	1	4	5	2	3								15
GRAND TOTAL	10	16	18	15	17								76
Call Activity	24337	25058	21072	19548	21328								111343
% RATE	0.04%	0.06%	0.09%	0.08%	0.08%								0.07%



Compliments													
	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
111	10	12	12	7									41
LCD	1	1	0	0									2

Concerns, Complaints, Comments - Response Times

A&E by CBU		Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	YTD
North	Within 1 Working Day	4	1	0	0	0								5
	2 - 24 Working Days	3	1	2	6	2								14
	>25 Working Days	17	10	9	8	4								48
South	Within 1 Working Day	1	1	0	3	0								5
	2 - 24 Working Days	6	2	2	7	3								20
	>25 Working Days	22	8	9	6	5								50
Hull & East	Within 1 Working Day	0	0	1	0	0								1
	2 - 24 Working Days	3	2	2	4	1								12
	>25 Working Days	10	7	4	1	7								29
ABL	Within 1 Working Day	0	0	0	2	0								2
	2 - 24 Working Days	9	2	4	2	2								19
	>25 Working Days	11	6	4	9	7								37
CKW	Within 1 Working Day	5	1	0	1	0								7
	2 - 24 Working Days	10	6	9	6	2								33
	>25 Working Days	19	9	3	7	8								46
EOC	Within 1 Working Day	6	4	3	2	0								15
	2 - 24 Working Days	3	6	3	6	11								29
	>25 Working Days	35	34	42	53	41								205

PTS by Consortia		Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	YTD
North	Within 1 Working Day	0	1	0	0	1								2
	2 - 24 Working Days	1	6	1	4	0								12
	>25 Working Days	4	3	3	3	0								13
South	Within 1 Working Day	7	0	0	0	1								8
	2 - 24 Working Days	3	4	3	5	2								17
	>25 Working Days	8	1	3	5	5								22
East	Within 1 Working Day	1	0	0	1	0								2
	2 - 24 Working Days	3	5	3	8	13								32
	>25 Working Days	3	7	4	6	4								24
West	Within 1 Working Day	3	2	0	2	0								7
	2 - 24 Working Days	18	16	7	10	14								65
	>25 Working Days	29	10	10	23	10								82

Please Note: This data is 1 month in arrears

Reopened Complaints & Concerns													
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
A&E	0	3	3	2	1								9
EOC	1	2	0	2	1								6
PTS	0	3	1	1	2								7
111	0	3	1	1	0								5

Ombudsman Referrals - A&E													
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
Referral notified	1	1	0	0	0								2
Referral accepted	0	0	0	1	0								1
Referral rejected	0	0	0	0	0								0
Case upheld	0	0	0	0	0								0
Case not upheld	0	0	0	0	0								0
Outstanding	0	0	0	3	0								3

Ombudsman Referrals - EOC													
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
Referral notified	0	0	0	0	0								0
Referral accepted	0	0	0	0	0								0
Referral rejected	0	0	0	0	0								0
Case upheld	0	0	0	0	0								0
Case not upheld	0	0	0	0	0								0
Outstanding	0	0	0	0	0								0

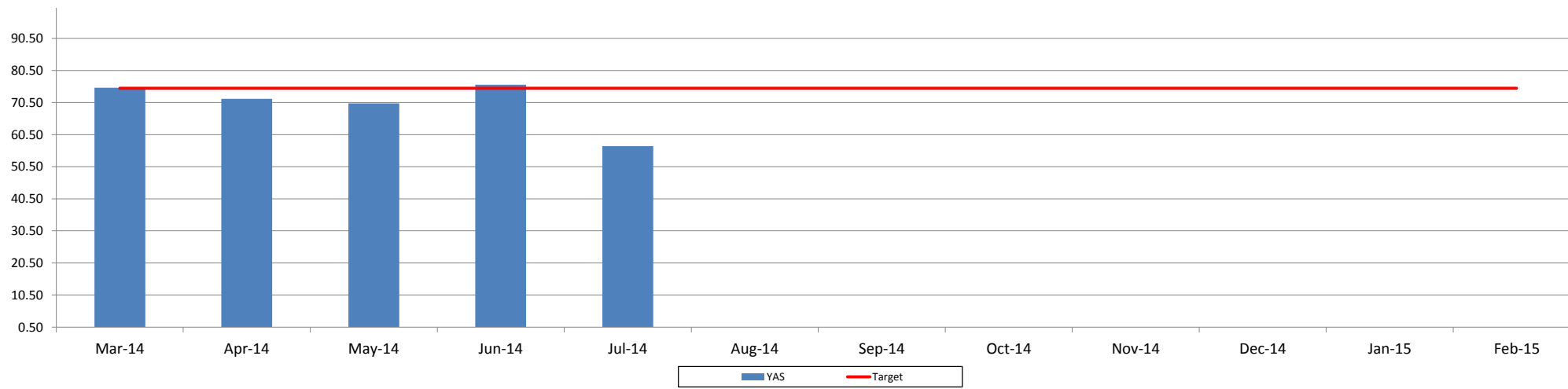
Ombudsman Referrals - PTS													
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
Referral notified	0	0	0	0	0								0
Referral accepted	0	0	0	0	0								0
Referral rejected	0	0	0	0	0								0
Case upheld	0	0	0	0	0								0
Case not upheld	0	0	0	0	0								0
Outstanding	0	0	0	0	0								0

Ombudsman Referrals - 111													
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
Referral notified	0	1	0	0	0								1
Referral accepted	0	0	0	0	0								0
Referral rejected	0	0	0	0	0								0
Case upheld	0	0	0	0	0								0
Case not upheld	0	0	0	0	0								0
Outstanding	0	0	0	0	0								0

A&E Patient Experience Survey

	YTD RAG	AMBER
↓	MTD RAG	AMBER

How likely are you to recommend the Yorkshire Ambulance Service to friends and family if they needed similar care or Treatment? (Number of Detractors - Number of Promoters = Net Promoter Score)



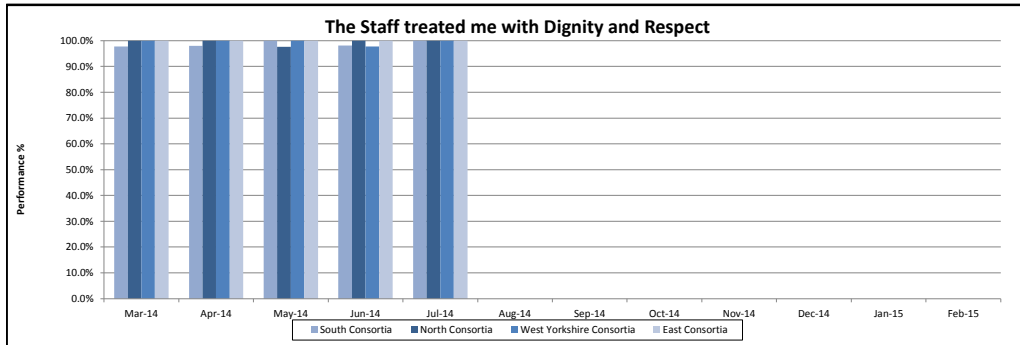
Overall Service	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
North Yorkshire CBU	72.70	61.30	83.33	83.33	68.75							
East Yorkshire CBU	89.50	78.60	60.00	86.67	68.75							
Calderdale, Kirklees & Wakefield CBU	82.10	82.10	84.62	80.00	77.27							
Leeds, Bradford & Airedale CBU	70.00	67.60	35.71	84.62	62.50							
South Yorkshire CBU	65.40	83.30	69.70	72.22	52.00							
Unknown Area	82.10	41.20	70.97	71.43	36.11							
YAS	75.10	71.70	70.29	76.03	56.91							
YAS variance to previous Month	5.60	-3.40	-1.44	5.74	-19.12							

Please note: This will be 1 month in arrears

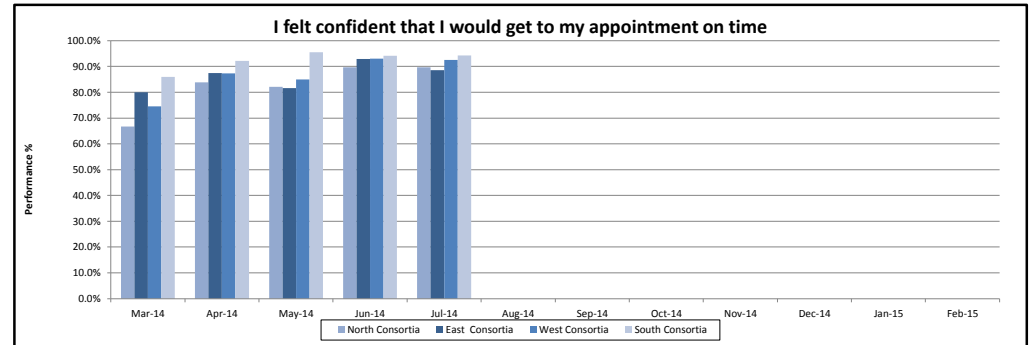
In November 2012 the rating scale used for this question was changed from 1 to 10 to a descriptive scale (extremely likely, likely, neither likely nor unlikely, unlikely, not at all, don't know)

PTS Patient Experience Survey

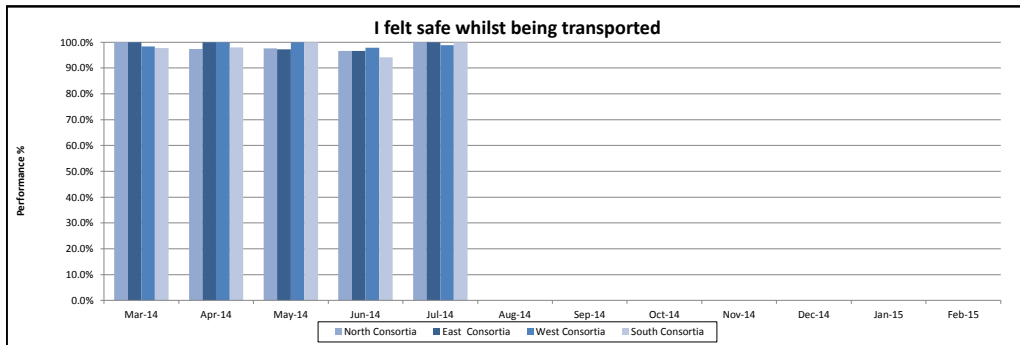
	YTD RAG	N/A
←	MTD RAG	N/A



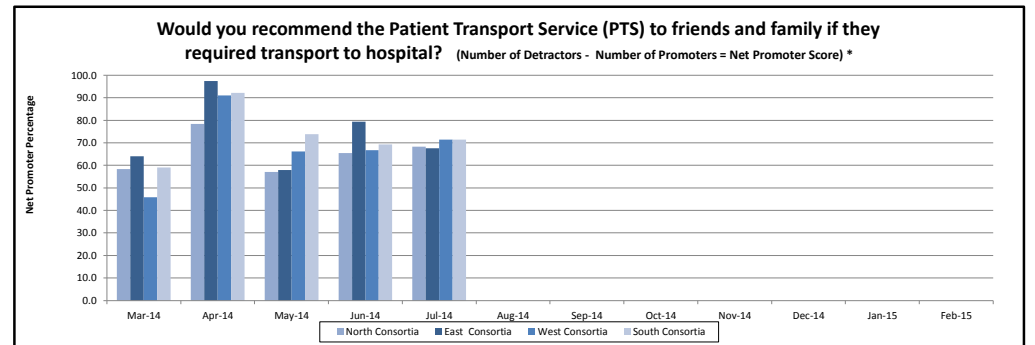
	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
North Consortia	100.0%	100.0%	97.6%	100.0%	100.0%							
East Consortia	100.0%	100.0%	100.0%	100.0%	100.0%							
West Yorkshire Consortia	100.0%	100.0%	100.0%	97.7%	100.0%							
South Consortia	97.7%	98.0%	100.0%	98.1%	100.0%							



	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
North Consortia	66.7%	83.8%	82.1%	89.7%	89.7%							
East Consortia	80.0%	87.5%	81.6%	92.9%	88.6%							
West Consortia	74.6%	87.3%	85.0%	93.0%	92.5%							
South Consortia	86.0%	92.2%	95.5%	94.2%	94.3%							



	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
North Consortia	100.0%	97.3%	97.6%	96.6%	100.0%							
East Consortia	100.0%	100.0%	97.2%	96.6%	100.0%							
West Consortia	98.3%	100.0%	100.0%	97.8%	98.8%							
South Consortia	97.7%	98.0%	100.0%	94.1%	100.0%							



* Promoters response 'Extremely Likely' & Detractors responses 'Neither Likely nor Unlikely', 'Unlikely', 'Extremely Unlikely' or 'Don't know'

	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
North Consortia	58.3	78.4	57.1	65.5	68.3							
East Consortia	64.0	97.5	57.9	79.3	67.6							
West Consortia	45.8	91.1	66.1	66.7	71.4							
South Consortia	59.1	92.2	73.9	69.2	71.4							

Please note: This will be 1 month in arrears and from June 2013 an updated survey was introduced.

Registration Regulations & Outcomes

NHS Litigation Authority

	YTD RAG	GREEN
↔	MTD RAG	GREEN

Comments	
A new Intelligence model which has been completed for acute Trusts by the CQC is currently under development for the ambulance service. Compliance against the new model will be reported once this is in place. The Associate Directors for Quality and Nursing and Risk and Safety have been appointed as Specialist Advisors to the CQC. This will provide an opportunity for shared learning and early feedback on the new inspection regime.	
Developments since last report	
Notifications to CQC	None

Quality Governance Rating			
	Criteria	Overall rating	
		Jul-12	Feb-13
Strategy	Does Quality drive the Trusts strategy	0.5	0.5
	Is the Board aware of potential risks to quality?	0.5	0.5
Capabilities & Culture	Does the Board have the necessary leadership, skills and knowledge to ensure the delivery of the quality agenda?	0.5	0.5
	Does the Board promote a quality focused culture throughout the Trust?	0.5	0.0
Processes & structures	Are there clear roles and responsibilities in relationship to quality governance?	0.5	0.5
	Are there clear well defined, well understood processes for escalating and resolving issues and managing quality?	0.5	0.5
	Does the Board actively engage patients, staff, and other key stakeholders on quality?	0.0	0.0
Processes & structures (measurement)	Is appropriate quality information being analysed and challenged?	0.0	0.0
	Is the Board assured of the robustness of the quality information?	0.5	0.5
	Is quality information used effectively?	0.0	0.0
Final overall score		3.5	3.0

A final external review of the Board Quality Governance memorandum and Quality Governance arrangements has been completed by Deloitte and reported a compliant position with a score of 3.0. A further review by Internal Audit has been carried out and the findings is currently being reviewed and will be reported in the next update.

Information Governance

Freedom of Information (FOI) Requests	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Number of cases due for response this month	25	28	30	29	23							
Number of cases due this month and responded to in time	22	21	25	28	21							
Number of cases due this month and responded to out of time	2	7	5	1	2							
Number of out of time (prior to this month) cases responded to this month	3	1	0	0	0							
Number of out of time cases still open	1	0	0	0	0							
Number of internal reviews open	4	9	6	2	1							
Number of internal reviews closed this month	0	2	7	3	1							
Information Commissioner Referrals	0	0	0	1	2							

Data Protection Act (DPA) Requests	Workload		Compliance	
	Cases Awaiting	Year to Date	Compliance with 21 day DoH guidance (%)	Compliance with 40 day DPA legislative requirement (%)
Subject Access Requests				
Solicitor Requests	29	290	88%	97%
Police requests	114	616		
Witness Statements / Police Interviews	27	168		
	This Month	Year to Date		
Coroner Requests	21	162		

Description	Apr RAG	May RAG	Jun RAG	Jul RAG	Aug RAG	Sep RAG	Oct RAG	Nov RAG	Dec RAG	Jan RAG	Feb RAG	Mar RAG
Information Governance Toolkit	81%	81%	81%	81%	81%							

Comments

Legal Services

Workload continues to remain high within the legal services team KPIs are being maintained due to short term resource support.

Freedom of Information (FOI) Requests



Section 4

Workforce



Directors Exceptions

RAG	Page Ref No	No of months Exception	Exception	Actions required to put back on track	Who	When	Year end Risk Level
RED	4.60	5/5	Sickness / Absence	<p>Those areas with the highest sickness levels have been identified as follows:</p> <p>NHS 111 Ancillary Division A&E ABL A&E East Yorks & Hull EOC A&E South Yorkshire Clinical Directorate</p> <p>The Associate Director responsible for each area has been tasked with producing a further action plan and developing an improvement trajectory. An update will be provided at the meeting.</p>	All Directors & Managers	Oct-14	RED

Comments on Workforce

The IPR identifies a number of key workforce performance issues for Board consideration:

Those areas with the highest sickness levels have been identified as follows:

NHS 111
Ancillary Division
A&E ABL
A&E East Yorks & Hull
EOC
A&E South Yorkshire
Clinical Directorate

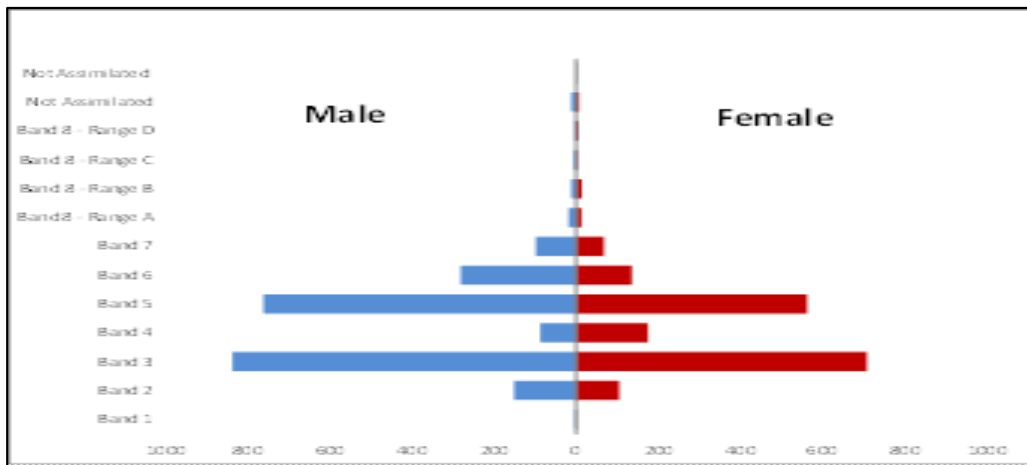
The Associate Director responsible for each area has been tasked with producing a further action plan and developing an improvement trajectory. An update will be provided at the meeting.

Performance Development Reviews (PDRs)

Slight improvement compared to last month, but still below 75% target. AD's whose teams currently remain <75% asked to provide an improvement trajectory

August 2014 - YORKSHIRE AMBULANCE SERVICE SCORECARD - DATA UP TO 31 August 2014									
Indicator	Current Data - Aug-14		Previous Data - Jul-14		Target	Performance vs target	Trend	Yearly Comparison	
	Measure	Period	Measure	Period				Measure	Period
Total FTE in Post	4126.78	Aug-14	4123	Jul-14	4306		↗	4048	Aug-13
Equality & Diversity	5.13% fte	Aug-14	5.14% fte	Jul-14	14.20%		↘	5.12% fte	Aug -13
	5.26% hcount		5.29% hcount					5.00% hcount	
Sickness Absence		Aug-14	6.54%	Jul-14	5.00%		↗	5.70%	Aug -13
		Sep 13 Aug 14	6.17%	Aug 13 Jul 14				↗	6.17%
Turnover	9.78% fte	Aug-14	9.63% fte	Jul-14	7.76% Amb Trust Aver		↗	9.78% fte	Aug -13
	10.90% hcount		10.82% hcount					10.90% hcount	
Stability	90.92% fte	Aug-14	90.98% fte	Jul-14	92.22 Amb Trust Aver		↘	90.94% fte	Aug -13
	93.12% hcount		92.48% Hcount					93.12% hcount	
Current PDRs	72.54%	Aug-14	70.96%	Jul-14	75%		↗	64.97%	Aug -13
Stat & Mand Workbook	93.97% (combined)	Aug-14	93.49% (Combined)	Jul-14	85%		↗	88.63%	Aug -13
	83.81%	Aug-14	81.24%	Jul-14					
Overtime	£975,973.96	Aug-14	£824,746.44	Jul-14			↗	£728,964	Aug -13
	£9,889,718.84	Sep 13 Aug 14	£9,642,708.92	Aug 13 Jul 14				n/a	Sep 12 Aug 13

Staff in Post by Pay Band

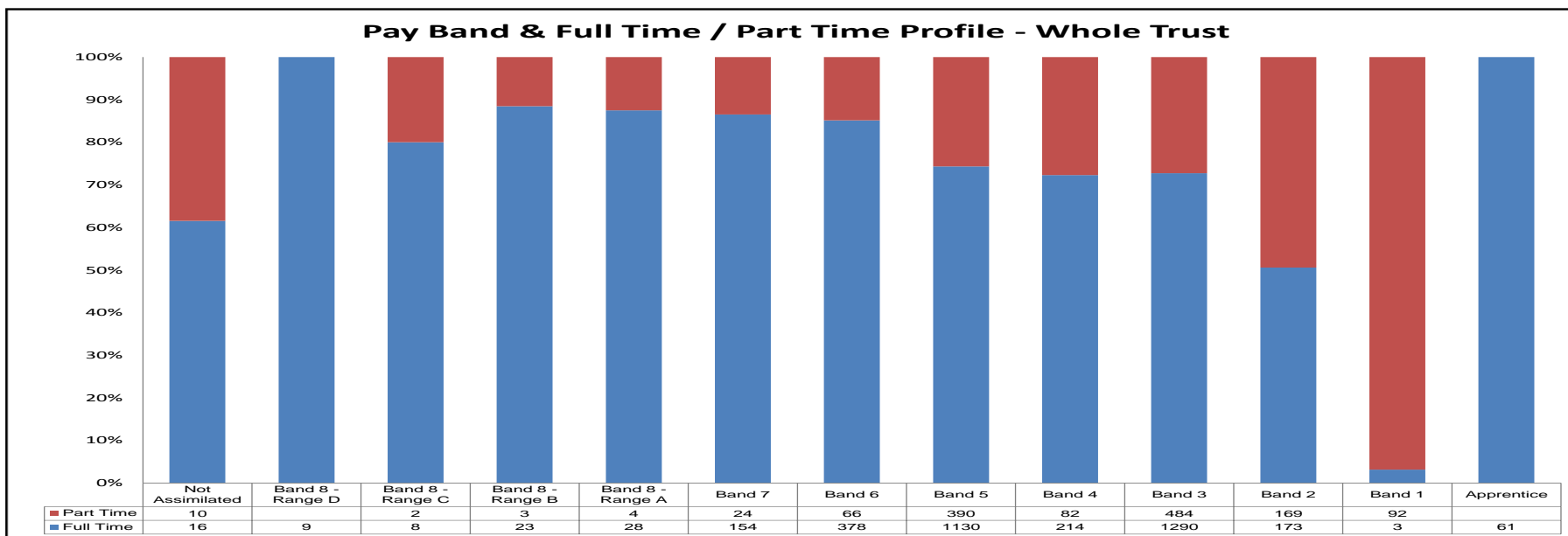


The graph opposite and the table and graph below shows all staff on 31 June 2014.

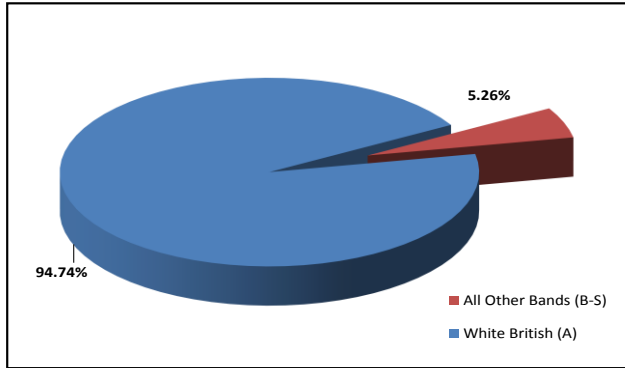
AFC Pay Band	HC	F.T.E	HC%	FTE%
Apprentice	61	61.00	1.27%	1.48%
Band 1	95	3.00	1.97%	0.07%
Band 2	342	255.58	7.11%	6.19%
Band 3	1774	1544.52	36.86%	37.43%
Band 4	296	261.77	6.15%	6.34%
Band 5	1520	1324.18	31.58%	32.09%
Band 6	444	416.63	9.23%	10.10%
Band 7	178	165.98	3.70%	4.02%
Band 8 - Range A	32	31.12	0.66%	0.75%
Band 8 - Range B	26	25.00	0.54%	0.61%
Band 8 - Range C	10	9.20	0.21%	0.22%
Band 8 - Range D	9	9.00	0.19%	0.22%
Not Assimilated	26	19.79	0.54%	0.48%
Grand Total	4813	4126.77	100%	100%

Payband by FT/PT

Those identified as not assimilated are our doctors, exec directors, non execs and we still employ 2 individuals who have not accepted AFC terms and conditions.



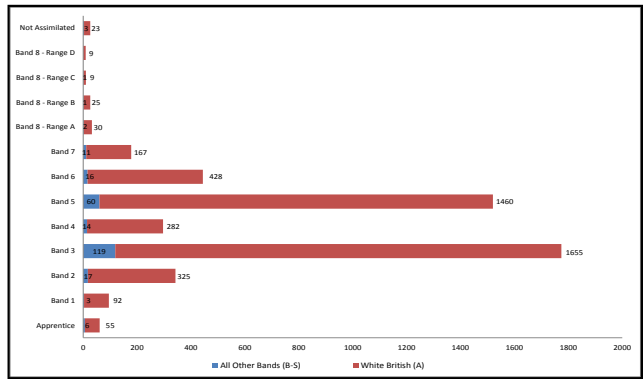
Ethnicity Profile



This pie chart shows the ethnicity build of the workforce split as White British (band A) and All Other bands (B-Z)

Ethnic Origin	HC	FTE	HC%	FTE%
A White - British	4558	3913.56	94.70%	94.83%
B White - Irish	17	15.95	0.35%	0.39%
C White - Any other White Background	37	33.14	0.77%	0.80%
CK White Italian	1	1.00	0.02%	0.02%
CP White Polish	3	3.00	0.06%	0.07%
CX White Mixed	4	4.00	0.08%	0.10%
CY White Other European	1	1.00	0.02%	0.02%
D Mixed - White & Black Caribbean	11	10.30	0.23%	0.25%
E Mixed - White & Black African	1	1.00	0.02%	0.02%
F Mixed - White & Asian	4	0.96	0.08%	0.02%
G Mixed - Any other mixed background	7	4.98	0.15%	0.12%
H Asian or Asian British - Indian	25	21.92	0.52%	0.53%
J Asian or Asian British - Pakistani	86	69.22	1.79%	1.68%
K Asian or Asian British Bangladeshi	4	2.40	0.08%	0.06%
L Asian or Asian British	3	2.00	0.06%	0.05%
LH Asian British	4	2.80	0.08%	0.07%
M Black or Black British - Caribbean	11	9.43	0.23%	0.23%
N Black or Black British - African	8	6.96	0.17%	0.17%
P Black or Black British	4	2.93	0.08%	0.07%
R Chinese	5	3.60	0.10%	0.09%
S Any Other Ethnic Group	17	15.22	0.35%	0.37%
Z Not Stated	2	1.40	0.04%	0.03%
Grand Total	4813	4126.77	100%	100%

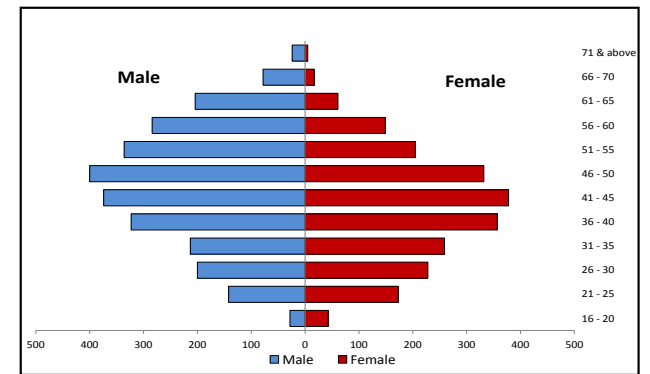
Ethnicity Profile by Pay Band



This graph and table show the Headcount Ethnicity Profile by categories and by Pay band for all staff

AFC Pay Band	White British (A)	All Other Bands (B-S)	Grand Total	% of Ethnic in AFC Band
Apprentice	6	55	61	9.84%
Band 1	3	92	95	3.16%
Band 2	17	325	342	4.97%
Band 3	119	1655	1774	6.71%
Band 4	14	282	296	4.73%
Band 5	60	1460	1520	3.95%
Band 6	16	428	444	3.60%
Band 7	11	167	178	6.18%
Band 8 - Range A	2	30	32	6.25%
Band 8 - Range B	1	25	26	3.85%
Band 8 - Range C	1	9	10	10.00%
Band 8 - Range D	0	9	9	0.00%
Not Assimilated	3	23	26	11.54%
Grand Total	253	4560	4813	5.29%

Age & Gender Profile

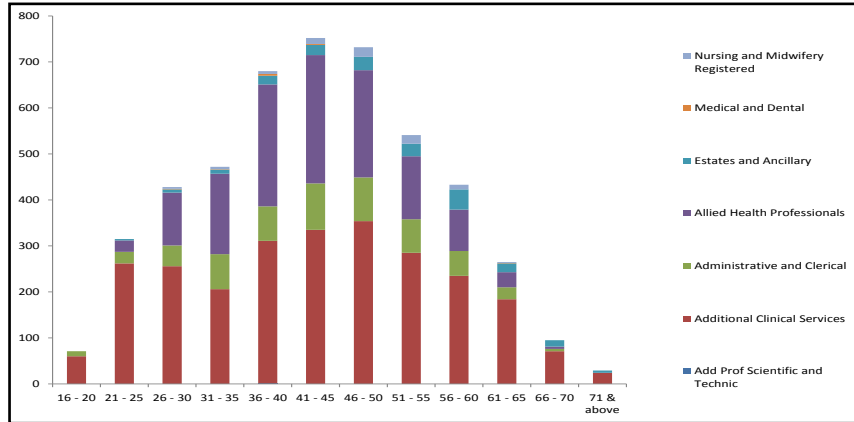


The chart above and table below show the age and gender breakdown throughout the Trust

Age Group	HC	FTE	HC %	FTE %
16 - 20	71	58.54	1.48%	1.42%
21 - 25	315	271.7	6.54%	6.58%
26 - 30	428	383.53	8.89%	9.29%
31 - 35	472	418.62	9.81%	10.14%
36 - 60	680	600.25	14.13%	14.55%
41 - 45	752	667.13	15.62%	16.17%
46 - 50	732	666.98	15.21%	16.16%
51 - 55	541	493.06	11.24%	11.95%
56 - 60	433	364.19	9.00%	8.83%
61 - 65	265	165.28	5.51%	4.01%
66 - 70	95	33.73	1.97%	0.82%
71 & above	29	3.77	0.60%	0.09%
Not Assimilated	0	0	0.00%	0.00%
Grand Total	4813	4126.78	100%	100%

Age & Gender Profile

Age Profile by Staff Group



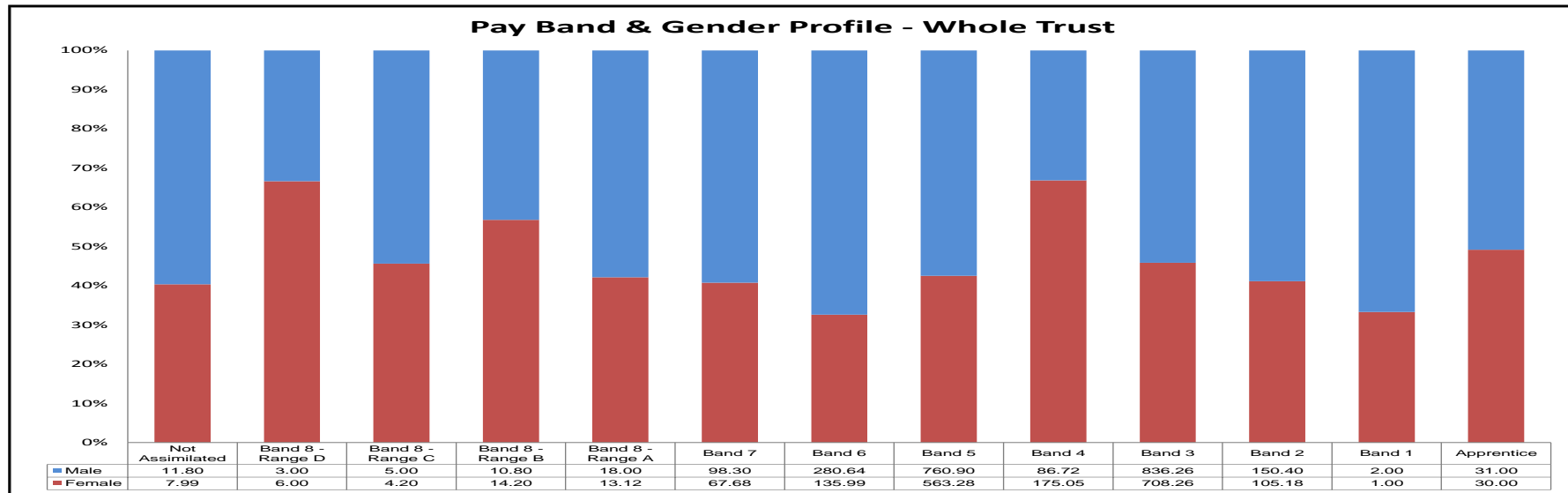
The graph opposite shows the staff group breakdown within a 5 year age bracket using FTE. This data is tabulated below in 20 year banding per staff group.

Paramedic qualified staff are represented below within the staff group Allied Health Professionals, ECAs and Technicians are shown under the staff group Additional Clinical Services.

Staff Group	16-24	25-44	45-64	65+	Grand total - FTE
Add Prof Scientific and Technic		0.60			0.60
Additional Clinical Services	240.06	931.18	938.62	35.11	2144.97
Administrative and Clerical	28.50	257.37	252.81	4.05	542.73
Allied Health Professionals	15.00	712.68	487.17	3.03	1217.88
Estates and Ancillary	1.40	45.48	103.24	11.44	161.56
Medical and Dental		3.40		0.8	4.20
Nursing and Midwifery Registered		18.10	35.73	1	54.83
Grand Total	284.96	1968.81	1817.57	55.43	4126.77

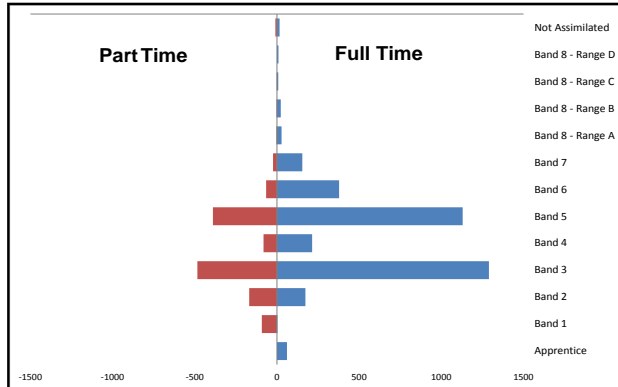
Gender 100% Profile by Pay Band

The chart below shows the proportional breakdown by Gender and Pay Band



Age & Gender Profile

Part time/Full time by Pay Band



The table below shows the actual Gender breakdown by Full time and Part time profiles

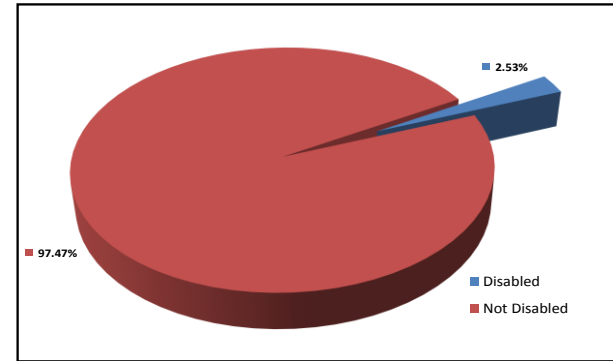
Gender	Employee Category	HC	FTE	FTE %
Female		2207.00	1831.96	100%
	Full time	1353.00	1353.00	73.86%
	Part Time	854.00	478.96	26.14%
Male		2606.00	2294.82	100.00%
	Full Time	2134.00	2134.00	92.99%
	Part time	472.00	160.82	7.01%

AFC Pay Band	Female	Male	Grand Total
Apprentice	30	31	61
Band 1	11	84	95
Band 2	155	187	342
Band 3	855	919	1774
Band 4	201	95	296
Band 5	675	845	1520
Band 6	155	289	444
Band 7	75	103	178
Band 8 - Range A	14	18	32
Band 8 - Range B	15	11	26
Band 8 - Range C	5	5	10
Band 8 - Range D	6	3	9
Not Assimilated	10	16	26
Grand Total	2207	2606	4813

The tables below show the headcount by Gender by Pay Band and by Employee Category and Pay Band

AFC Pay Band	Full Time	Part Time	Grand Total
Apprentice	61	0	61
Band 1	3	92	95
Band 2	173	169	342
Band 3	1290	484	1774
Band 4	214	82	296
Band 5	1130	390	1520
Band 6	378	66	444
Band 7	154	24	178
Band 8 - Range A	28	4	32
Band 8 - Range B	23	3	26
Band 8 - Range C	8	2	10
Band 8 - Range D	9	0	9
Not Assimilated	16	10	26
Grand Total	3487	1326	4813

Disability Profile



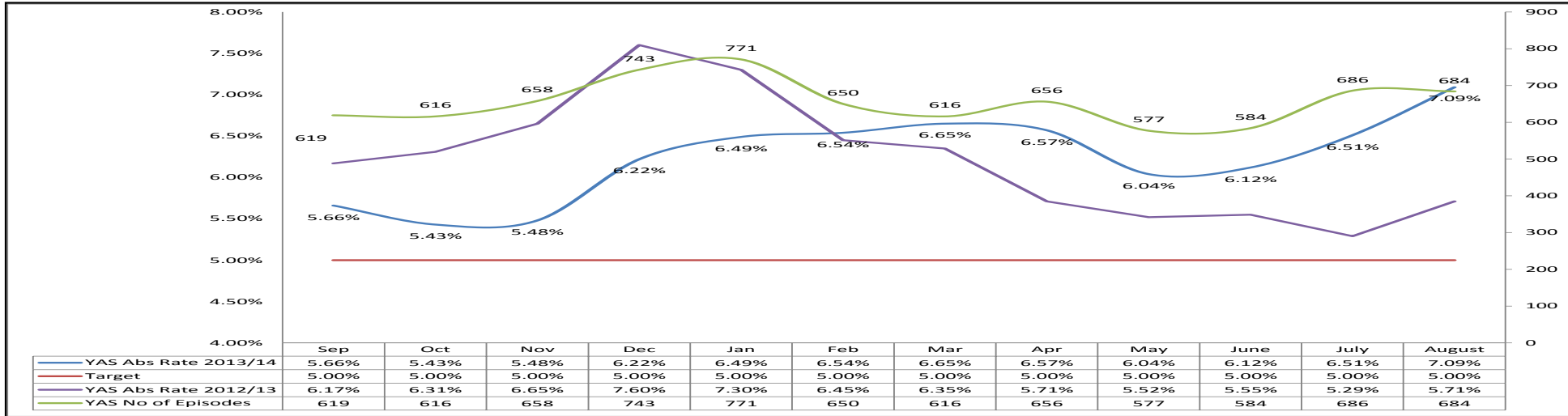
The pie chart above shows the disability profile by headcount of all staff, while the table below shows disability profile by headcount and FTE.

Disability	Head Count	FTE	Headcount %	FTE %
Disabled	122	112.31	2.53%	2.72%
Not Disabled	4691	4014.47	97.47%	97.28%
Grand Total	4813	4126.78	100%	100%

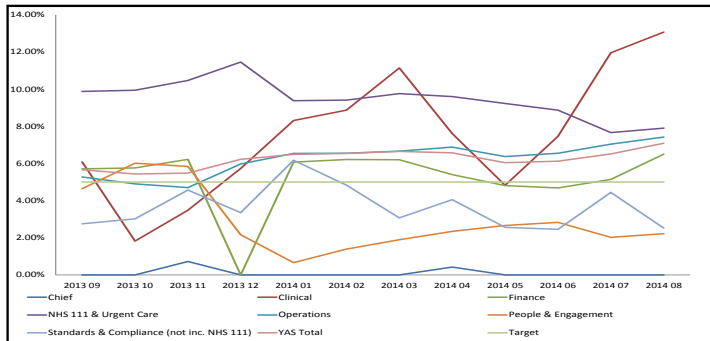
Sickness Absence

EWI

Sickness Absence Rates – 12 month trend analysis



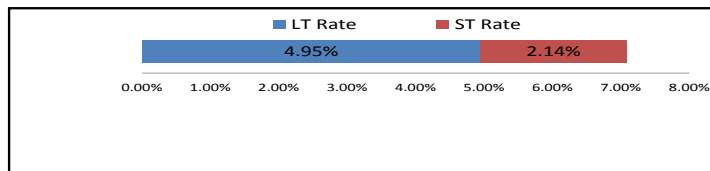
Sickness Absence Rates – Directorate 12 month trend



The line graph opposite shows the last 12 months absence for each Directorate within YAS using the data below;

Directorate	Chief	Clinical	Finance	NHS 111	Operations	People	Stan	Total	Target
2013 09	0.00%	5.96%	5.71%	10.73%	5.27%	4.64%	0.00%	5.66%	5.00%
2013 10	0.00%	1.78%	5.85%	11.21%	4.93%	6.01%	0.37%	5.48%	5.00%
2013 11	0.72%	3.41%	6.42%	10.61%	4.75%	5.84%	2.10%	5.58%	5.00%
2013 12	0.00%	5.63%	6.34%	11.61%	6.02%	2.16%	3.73%	6.37%	5.00%
2014 01	0.00%	8.21%	6.19%	9.41%	6.58%	1.36%	6.17%	6.57%	5.00%
2014 02	0.00%	8.87%	6.38%	8.44%	6.48%	1.52%	5.83%	6.48%	5.00%
2014 03	0.00%	12.96%	6.65%	9.66%	6.79%	1.56%	3.14%	6.84%	5.00%
2014 04	0.42%	7.76%	5.84%	9.39%	6.94%	2.37%	2.52%	6.69%	5.00%
2014 05	0.00%	5.74%	5.29%	9.26%	6.43%	2.69%	2.36%	6.20%	5.00%
2014 06	0.00%	7.07%	5.10%	8.56%	6.51%	2.95%	7.78%	6.18%	5.00%
2014 07	0.00%	12.19%	5.38%	7.62%	7.00%	2.07%	4.75%	6.54%	5.00%
2014 08	0.00%	13.07%	6.50%	7.90%	7.40%	2.22%	2.50%	7.09%	5.00%

LT / ST Sickness Absence Trust Total



The graph opposite shows August 2014 Long Term & Short Term sickness absence rate for the whole Trust.

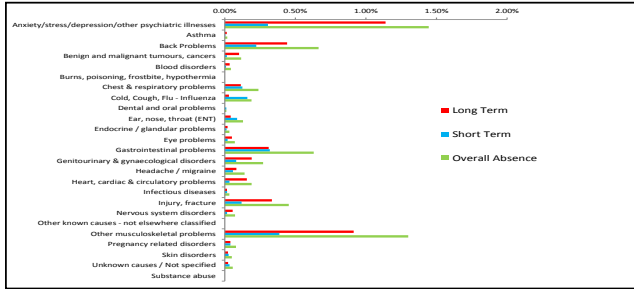
The trust sickness rate for August is 7.09% which consists of 4.95% long term (28 days or more) and 2.14% short term.

Sickness Absence EWI

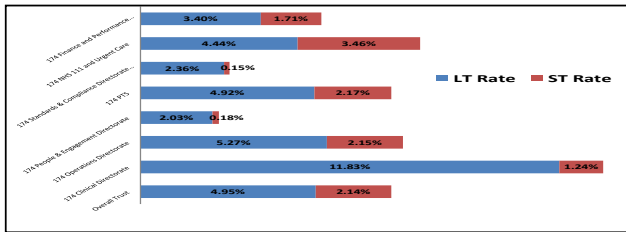
2014 07	Absence (FTE)	Available (FTE)	% Absence rate (FTE)	Calendar Days Absent	No of Episodes
174 Chief Executive Directorate	0	460.8	0.00%	0	0
174 Clinical Directorate	126.45	967.15	13.70%	131	5
174 Finance and Performance Directorate	2020.2	31071.23	6.50%	2320	138
174 Operations Directorate	6136.2	82725.8	7.42%	6441	423
174 People & Engagement Directorate	57.64	2600.78	2.22%	69	5
174 Standards & Compliance Directorate	33	1311.4	2.52%	33	3
174 NHS111 and Urgent Care	677.6	8575.87	7.90%	987	110
174 Yorkshire Ambulance Service Trust	9051.09	127713.03	7.09%	9981	684

Last 12 Mth Cumulative Rates of Absence as a % of Available Hours by Reason

The graph below shows the split of Long and Short Term sickness absence rates for all Directorates for August 2014 by absence reason.

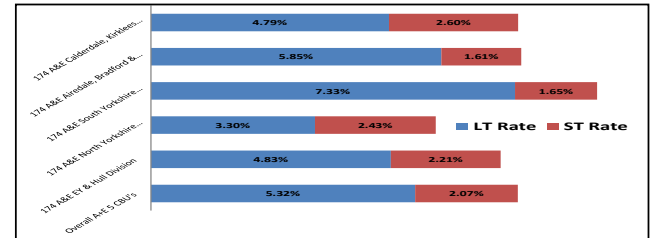


LT/ST Sickness Absence Analysis by Directorate



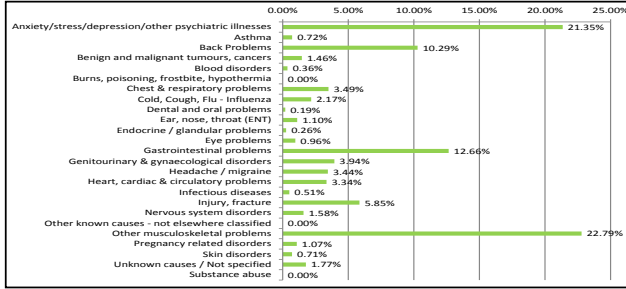
The graph above shows the sickness absence breakdown for each directorate within YAS for both Long Term and Short Term. As you will see above the Standards & Compliance directorate is now excluding NHS 111 which is now represented as its own area. This is the same for Finance and Performance as the chart above separates PTS.

LT/ST Sickness Absence Analysis by Operations CBU

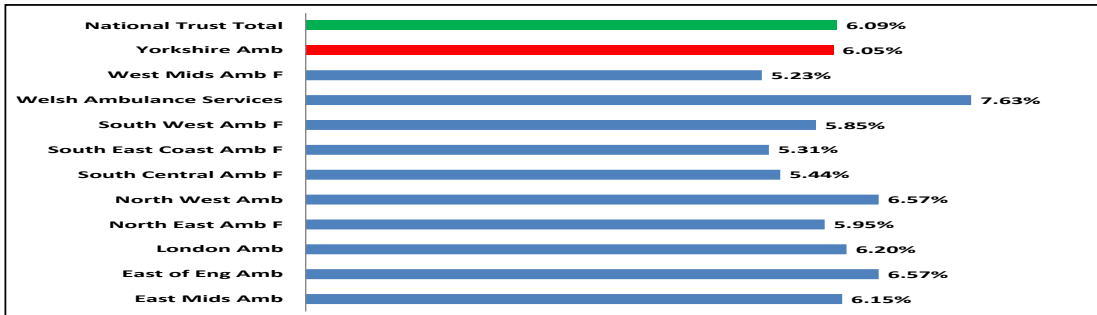


The graph below shows our LT/ST Sickness Absence Analysis for our 5 A+E CBU areas

The table below shows the absence reason as a percentage of 100 for August 2014. We can see that the bulk of absence is in the areas of Stress, Musculo skeletal, Back and Gastro.



Benchmarking Information - March 2014



In order to measure Yorkshire Ambulance Service against the other UK Ambulance Services, we are using IView which is the national benchmarking tool developed by the Health and Social Care Information Centre.

The National Ambulance Service average for the month of May 2014 is 6.09% and the chart opposite shows all UK Ambulance Services and there combined LT and ST Sickness Absence for this period.

The Sickness Absence for the Yorkshire Ambulance Service for May 2014 within I View is reported as 6.05%.

Occupational Health - Key Performance Indicators (KPI)

Please note the information for this section is for July 2014 as the release of OH information is one month behind the rest of the report.

The table below indicates our KPI Report for the last 6 months along with our current information for July 2014.

This indicates where we currently sit for June 2014 for the following; Employment Health Screenings (100%), Management Referral Appointment Lead time (83%) and Report Return Lead Time (87%).

Month	Employment Health Screens				Management Referrals Appointment Lead Time				Report Return Lead Time		
	No Of Screens	<5 days	>5 days	% < 5 Days	No of Referrals	Appointments < 5 days	Appointments , 5 days	% Appointments < 5 Days	Reports to Client < 1 day	Reports to Client > 1 day	% Reports to Client < 1 day
February	76	76	0	100%	103	93	10	90%	96	7	93%
March	112	112	0	100%	115	107	8	93%	113	2	98%
April	110	110	0	100%	105	97	8	93%	95	10	90%
May	157	157	0	100%	94	87	7	93%	70	24	74%
June	1	1	0	100%	0	119	24	83%	124	19	87%
July	119	119	0%	100%	145	129	16	89%	145	0	100%

Occupational Health - DNA and Cancelled OH Service Appts

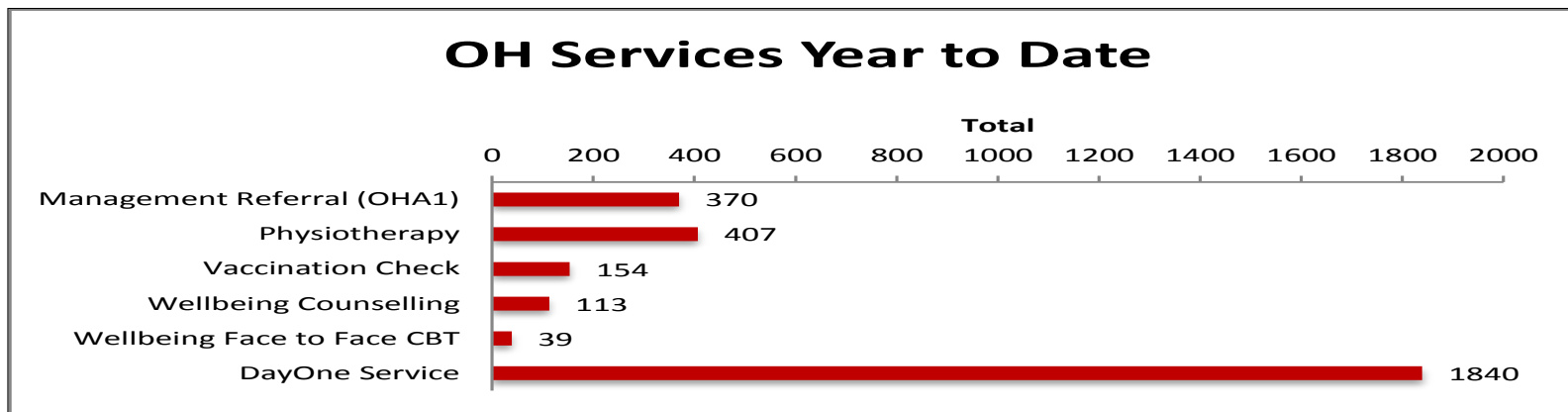
	Cancelled With Charge	Did Not Attend (DNA)	Grand Total
No Of Staff	11	36	47

The table opposite indicates the volume of staff that has either 'Cancelled' or 'Did Not Attend' their OH Appointment date in July 2014.

The table below indicates the core OH services used by YAS staff members for the month of July 2014. As you can see below we had 1360 staff members who used the day one service within July 2014.

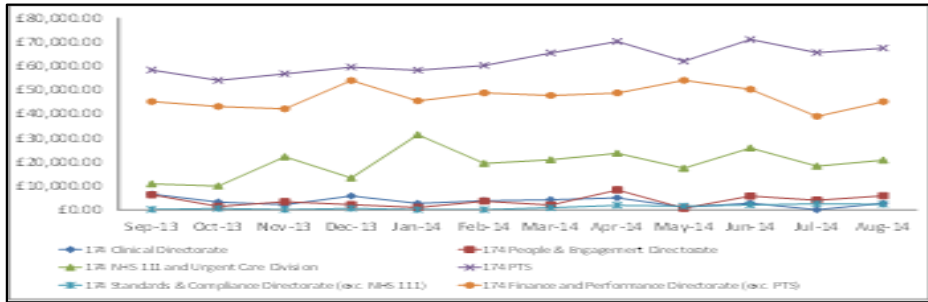
Occupational Health - Core Service Usage

The table below indicates the core OH services used by YAS staff members for the month of July 2014. As you can see below we had 1360 staff members who used the day one service within July 2014.



Overtime, Vacancies & Turnover

Gross Overtime Costs by Directorate (exc Operations)



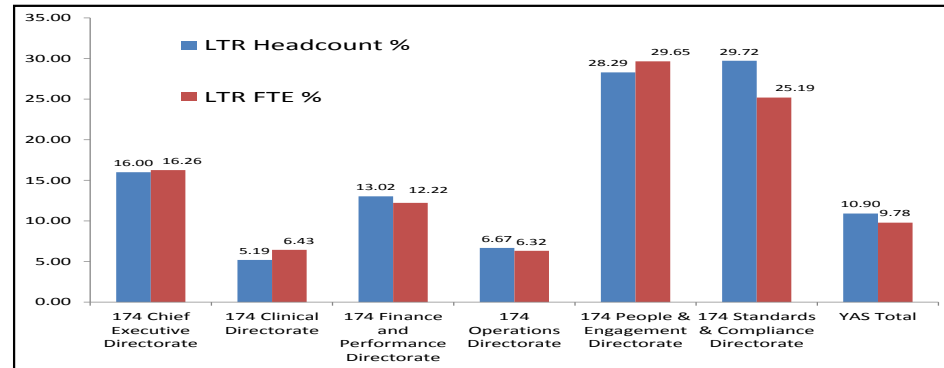
This chart opposite above the YAS gross overtime costs across a 12 month period from Sep 13 – Aug14 for all directorate excluding Operations.

The table below indicates the budgeted establishment and actual staff in post for the end of Aug 2014. The worked column indicates staff hours actually worked vs the budget.

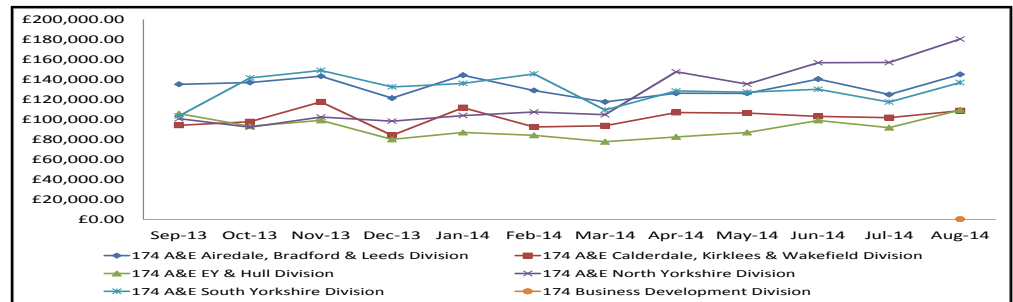
As you may see below there is a current discrepancy with the directorate figures for Budget vs Worked which is currently being investigated by Finance and MI.

Directorate	Budget WTE	Staff in Post WTE	Staff in Post Headcount	Worked WTE	Worked Hours
Chief Executive	15.80	13.80	14.00	9.87	1,757.64
Clinical	31.99	31.00	39.00	32.46	5,056.63
Finance & Performance	1,130.97	1,006.01	1,277.00	1,101.54	171,650.47
Operations	2,790.13	2,668.45	2,958.00	2,888.10	462,629.31
Standards and Compliance	361.65	322.15	443.00	348.34	53,349.82
Workforce & Strategy	96.59	85.37	105.00	92.53	14,641.57
Total	4,427.13	4,126.78	4,836.00	4,472.84	709,085.43

Turnover by Directorate



Gross Overtime Costs Operations



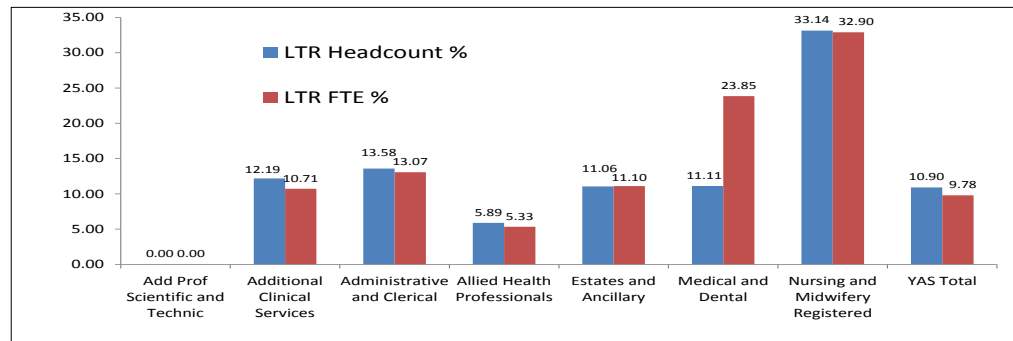
The table below shows the gross cost for overtime from ESR for the month of August 2014 across all directorates.

The chart above shows the YAS gross overtime costs across a 12 month period from Sep 13 – Aug14 for all the major operations divisions.

Directorate	Aug
174 Clinical Directorate	£2,713.60
174 Operations Directorate	£831,866.72
174 People & Engagement Directorate	£5,873.63
174 Standards & Compliance (Not inc. NHS 111)	£20,691.83
NHS 111 and Urgent Care	£67,421.95
PTS	£2,308.08
174 Finance and Performance (Not inc. PTS)	£45,098.15
Grand Total	£975,973.96

Turnover by Staff Group

This charts opposite and below shows the turnover rate for the period Sep13 to Aug14 by both Directorate and Staff Group.



Paramedics and ECPs sit within our Allied Health Professionals. ECAs and Technicians are shown under the staff group Additional Clinical Services

Learning and Development

EWI

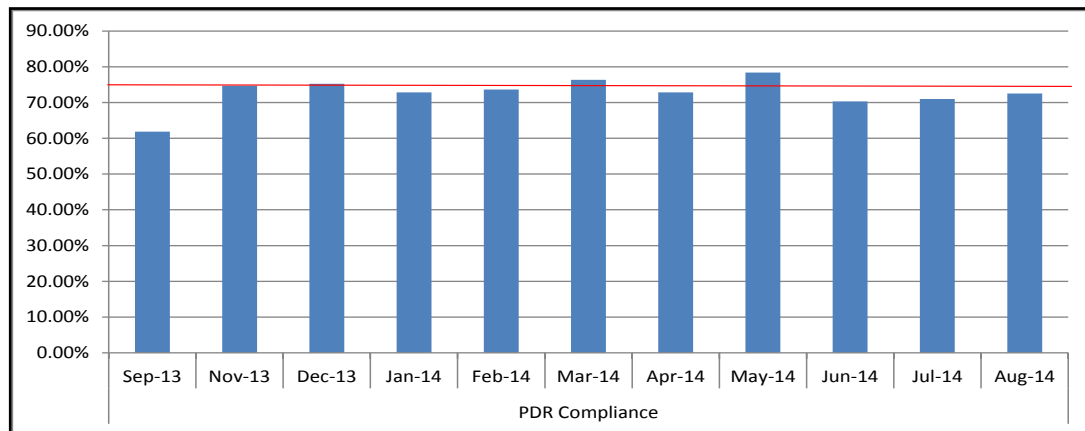
Statutory & Mandatory Training Workbook Combined

The red line across the chart illustrates the trust Stat & Mand Training Workbook compliance target which is currently set at 90%.



PDR Compliance from August 2013 to July 2014

The red line across the chart illustrates the Trust PDR target of which is currently 75%.



Staff Appraisals

Directorates	Compliant	Overdue	No PDR Recorded
174 Chiref Executive Directorate	100.00%	0.00%	0.00%
174 Clinical Directorate	93.10%	6.90%	0.00%
174 Finance and Performance Directorate	75.34%	17.31%	7.35%
174 Operations Directorate	70.72%	25.89%	3.40%
174 People & Engagement Directorate	85.19%	9.88%	4.94%
174 Standards & Compliance Directorate	72.58%	8.06%	19.35%
Grand Total	72.54%	21.63%	5.83%

This month 2985 assignments of the possible 4115 (72.54 %) have an in- date PDR recorded in ESR for the current appraisal period.

The table opposite show the PDR compliance per directorate and the following staff have been removed: long term sick, maternity, external secondment, inactive assignment, honorary contracts and all new starters who commenced employment between 1 June 2014 and 31 August 2014.



Section 5

Finance



EBITDA	Reference
<ul style="list-style-type: none"> The Trust's Earnings before Interest Tax Depreciation and Amortisation (EBITDA), for the year to date, is £5.742m (5.9%). 	5.4
<ul style="list-style-type: none"> This is slightly below the YTD plan of £5.985m (6.2%). 	5.4
SURPLUS	
<p>The Trust has reported a surplus as at the end of August 2014 of £1.258m against a planned surplus of £1.176m. This is prior to the application of penalties of associated with A & E under performance against Red 1 and 2 targets. Penalties to date total £1.619m and if applied would amend the position to a deficit of £0.361m, an adverse variance against plan of £1.537m.</p>	5.4
<p>The forecast surplus for the year is £2.504m against a plan of £2.913m, the shortfall being largely as a result of overspends in PTS, through reliance on private providers and the cost of implementing the A & E Performance Improvement Plan. Red 1 and 2 penalties for the year total £3.887m and, if applied to the forecast surplus of £2.504m, would amend the forecast position to a deficit of £1.383m.</p>	5.4
CASH	
<ul style="list-style-type: none"> The Trust had cash and cash equivalents of £17.377m at 31st August 2014 against a plan of £16.841m. 	5.8 / 5.11
NHS TDA ACCOUNTABILY FRAMEWORK	
<ul style="list-style-type: none"> The Trust had cash and cash equivalents of £17.377m at 31st August 2014 against a plan of £16.841m. 	5.2
MONITOR ACCOUNTABILY FRAMEWORK	
<ul style="list-style-type: none"> Overall the Trust has achieved a Amber rating (no change from previous month). 	5.2
MONITOR CONTINUITY OF SERVICE	
<ul style="list-style-type: none"> Overall the Trust has achieved a rating of 4. 	5.2
CIP DELIVERY	
<ul style="list-style-type: none"> The Trust has a savings target of £10.351m for 2014/15 and identified schemes totalling £10.351m. 	5.7
<ul style="list-style-type: none"> 90% delivery of the CIP target was achieved in Month 5 against the original plan. This creates a negative variance against plan of (£410k). Reserve schemes have achieved £737k of the savings made year to date. Forecast CIP delivery is £9.757m which is 94% of plan. 	

	Actual vs Plan
EBITDA	⊗ ⊗
Surplus	★ ★
Cash	★ ★
Monitor rating	★
CIP delivery	⊗ ⊗

Key:-

★ ★ ★	> 5% favourable variance
★ ★	Up to 5% favourable variance
★	On target Up to 5% adverse variance
⊗ ⊗	> 5% adverse variance

The Trust Development Authority (TDA) has introduced an Accountability Framework on which it measures Trust performance. Under this regime the Trust has achieved an overall Amber rating as a result of the projected under achievement of surplus and current and forecast under achievement of CIPs.

Monitor has implemented a 'Continuity of Service' rating designed to identify the level of risk to the on-going availability of key NHS services. Under this regime the Trust has achieved a rating of 4 which is the maximum i.e. the lowest level of risk.

Key Performance Metrics Accountability Framework	Current Month Year to Date Metrics			
	Plan £000s	Actual / Forecast £000s	Variance £000s	RAG Rating
NHS Financial Performance				
1a) Forecast Outturn, Compared to Plan	2,913	2,504	(409)	AMBER
1b) Year to Date, Actual compared to Plan	1,176	1,258	81	GREEN
Financial Efficiency				
2a) Actual Efficiency for Year to Date compared to Plan	4,201	3,791	(410)	AMBER
2b) Forecast Outturn Efficiency compared to Plan	10,351	9,757	(594)	AMBER
Underlying Revenue Position				
3) Forecast Outturn Underlying Revenue Position compared to Plan	2,913	2,504	(409)	AMBER
Cash and Capital				
4) Forecast Year End Charge to Capital Resource Limit	12,547	12,547	0	GREEN
5) Temporary PDC for Liquidity Purposes (cumulative sum)		0		
Trust Overall RAG Rating				AMBER

Financial Criteria	Metric	Year to July 14	Rating	Weight	Weighted score	Actual statistic	Comments	Calculation
Continuity of Service	Liquidity Ratio (days)	Actual year to date	4	50%	2	22.0	Achieving a rating of 4	Cash for liquidity purposes divided by Operating expenses
	Capital Servicing capacity (times)	Actual year to date	4	50%	2	4.82	Achieving a rating of 4	Revenue available for debt service divided by capital service costs
	Continuity of Service				4			

EXECUTIVE SUMMARY**Month 5 - YTD**

- Overall at the end of Month 5 we are reporting a surplus of £1.258m against a planned surplus of £1.176m.
- We are presenting a YTD EBITDA of £5.742m (5.9%) which is behind the YTD plan of £5.985m (6.2%).
- The year to date position also includes penalties related to non-performance against CQUINs targets of £0.313m (5 of the 8 identified under-performing CCGs failing to achieve target) and £0.207m (all other CCGs not achieving the 75% target)
- This position is, however, prior to the application of the penalties associated with A&E under-performance against Red 1 and 2 targets. Penalties to date total £1.619m, and if applied would amend the position to a deficit of £0.361m, an adverse variance against plan of £1.537m.
- This position includes adverse performance within PTS of £1.363m YTD, mainly driven by slippage in CIP achievement and dependancies on third party support, offset by benefits in 111 where demand is higher than expected (£195K), Private & Events Tour De France income (£203K), Capital Charges underspends due to delays in bringing assets into use (£370K) and lower contingent Reserves usage.

Month 5 - Full Year Forecast

- The Trust is currently forecasting the achievement of a £2.5m surplus by year end against the plan of £2.9m. The forecast position of £2.5m reflects an anticipated overspend of £2.2m in PTS and a net overspend £0.751m within A & E due to the costs of £3.8m associated with the A&E Performance Improvement Plan (PIP). The current forecast also includes assumptions that A&E overtrade on contractual activity will average a level of 3% for the financial year.
- As with the YTD position, the full year forecast does not include application of the penalties associated with A&E under-performance against Red 1 and 2 targets. The full year impact amounts to £3.887m and would adjust the full year position to a deficit of £1.383m.
- Specific actions to ensure the £2.5m is achieved include:
 - A&E: the development and implementation of Performance Improvement Plan (PIP) to address the poor performance to date and aim to deliver Red 1 and 2 targets by the end of the year, thus avoiding penalties.
 - PTS: operational rota redesign is being implemented and working practices are being challenged in order to drive efficiency and identify savings, particularly reducing expenditure on private provider usage, to ensure costs are kept to a minimum for the remainder of the financial year. July saw a positive impact on the financial position for a number of PTS regions, with efforts now being concentrated on a other areas in an attempt to address financial performance.

Yorkshire Ambulance Service - Director's Commentary	August 2014
<p>A&E - YTD £0.2m adverse and Full Year Forecast £0.8m adverse</p> <p>Income :</p> <ul style="list-style-type: none"> A&E activity is 3% cumulatively above contract for year to date with a value of £1,636k. The forecast assumes a 3% overtrade for the year. The A&E contract includes penalties of 2% of the base contract value if Red 1, Red 2 or Green performance targets are not met. The maximum penalty is capped at 2.5%. At month 5 neither Red 1 or Red 2 targets have been achieved overall, therefore the full penalty value is £1,619k. Although this is a significant risk it is not included in the current year to date position. <p>Pay :</p> <ul style="list-style-type: none"> The main element of the variance of £1.478k is the impact of the PIP overtime in August was £100k less than planned. Vacancies in A&E Ops (c.60 WTE) continue to contribute to the underspend year to date <p>Non-Pay :</p> <ul style="list-style-type: none"> Increased costs are the result of YTD subsistence payments been significantly higher than plan. The forecast was for £120k per month but the actual run rate is £188k, leading to a £476k cost increase for the remainder of FY15. To offset this Nick Holmes finishing in December generates a £76k saving. 	
<p>PTS - YTD £1.3m adverse and Full Year Forecast £2.2m adverse</p> <p>Income :</p> <ul style="list-style-type: none"> PTS YTD income is under-achieved by £24k at Month 5 due to the following: £82k credit notes raised to PTS South CCGs in respect of 2013/14 Q4 under activity and under achievement of CQUINs/QIF and ECR income is £41k below budget. There is additional income of £112k for the Calderdale & Huddersfield extension to the unscheduled care discharge service. Mid Yorks is under achieving its income budget by £14k due to the change in the discharge service. In full year terms we are expecting to maintain the CCG block income, and the current benefit we are forecasting is the continuation of the Calderdale and Huddersfield unscheduled care extension YTD. <p>Pay :</p> <ul style="list-style-type: none"> Pay expenditure YTD is under by £117k due to PTS carrying 64 vacancies relating to rota reviews, which have recently been implemented or are due to be in November . In full year forecast terms we are expecting to be underspent by £446k due to an anticipated 5% vacancy level throughout the second half of the year offset by overtime support. <p>Non-Pay :</p> <ul style="list-style-type: none"> Non-Pay YTD is overspent by £1.5m with the forecast for the year showing an expected overspend of £2.8m. Driving this position is the dependency on taxis and private providers due to delays in recruitment of around £600k, along with the slippage in CIP delivery partially due to unidentified schemes (600k still not yet identified schemes), and VCS scheme slippage, which is planned to catch up in later months. In order to achieve an improved forecast position we are targeting the removal of specific discharge service private providers, and driving better resource utilisation, as well as tasking areas such as Hull & East and Mid Yorks to reduce their taxi spend. 	
<p>111/Urgent Care - YTD £0.1m favourable and Full Year Forecast £0.3m favourable</p> <p>Income :</p> <ul style="list-style-type: none"> 111/Urgent Care income is over achieving by £270k, which is mainly driven by £174k additional income relating to increased call volumes in Q1, and £34k secondment income; offset by a £58k under achievement of KPI income at month 5. There is also an additional £125k of income year to date relating to the 111 York SPA Pilot. <p>Pay :</p> <ul style="list-style-type: none"> Due to the higher call demand 111 pay expenditure year to date is over spent against budget by £135k. In full year terms we are expecting this higher demand trend to continue and therefore, Pay is likely to be over spent against budget but this will be offset by an increase in income. <p>Non-Pay :</p> <ul style="list-style-type: none"> In line with expectations YTD, however, anticipating a full year benefit of £205k, driven by expected under-achievement of LCD KPI payments. EOC - YTD £0.1m favourable and Full Year Forecast £0.1m favourable <p>Pay :</p> <ul style="list-style-type: none"> Pay : YTD £103k underspent, which is mainly driven by the delayed recruitment to the new EOC structure, offset by overtime relating to the A&E PIP. <p>Finance Directorate - YTD in line and Full Year Forecast £0.1m adverse</p>	
<p>111/Urgent Care - YTD £0.1m favourable and Full Year Forecast £0.3m favourable</p> <p>Income :</p> <ul style="list-style-type: none"> 111/Urgent Care income is over achieving by £270k, which is mainly driven by £174k additional income relating to increased call volumes in Q1, and £34k secondment income; offset by a £58k under achievement of KPI income at month 5. There is also an additional £125k of income year to date relating to the 111 York SPA Pilot. <p>Pay :</p> <ul style="list-style-type: none"> Due to the higher call demand 111 pay expenditure year to date is over spent against budget by £135k. In full year terms we are expecting this higher demand trend to continue and therefore, Pay is likely to be over spent against budget but this will be offset by an increase in income. Non-Pay : In line with expectations YTD, however, anticipating a full year benefit of £205k, driven by expected under-achievement of LCD KPI payments. <p>EOC - YTD £0.1m favourable and Full Year Forecast £0.1m favourable</p> <p>Pay : YTD £103k underspent, which is mainly driven by the delayed recruitment to the new EOC structure, offset by overtime relating to the A&E PIP.</p>	
<p>Finance Directorate - YTD in line and Full Year Forecast £0.1m adverse</p> <ul style="list-style-type: none"> Fleet: YTD £304k behind budget, Full Year £586k forecast behind budget <p>In terms of income, Fleet are expecting to achieve plan. Pay is expected to be underspent by year end due to carrying vacancies within the Cleaning team, however current vacancies in the Fleet Department are expected to be recruited to within the next couple of months. Non-Pay is forecast to overspend by £806k by year end which is driven by overspends in vehicle maintenance, of £2.1m offset by anticipated savings in fuel of £1m due to lower volumes of usage and lease cost savings of £0.4m.</p> <p>Capital Charges: YTD £456 better than budget, Full Year £859k forecast better than budget</p> <ul style="list-style-type: none"> The Capital Charges underspend is due to a £370k YTD lower depreciation charge driven by delays in capital purchases within projects across Fleet, IM&T and Medical Services. We are forecasting that capital purchases slippage amount to an underspend of £680k on depreciation, and £145k underspend on dividends paid for the year. 	
<p>Other movements:</p> <p>IM&T : We have forecasted a £100k rebate from Vodafone relating to the new mobile contract savings.</p> <p>Standards & Compliance: A number of legal support invoices have been received relating to the Hillsborough Inquest this month amounting to £176k, we have forecasted all spend to be covered by funding or reserves.</p> <p>Finance - Claims and Other Payments: Upon a review of actual claims/losses levels we have forecasted a full year spend of £798k an increase of £278k on last month's forecast position.</p>	

Yorkshire Ambulance Service - Statement of Comprehensive Income

August 2014

	Current Month			Year to Date			Full Year		
	Plan £000	Actual £000	Variance £000	Plan £000	Actual £000	Variance £000	Plan £000	Forecast £000	Variance £000
Accident & Emergency	13,558	13,365	192	69,994	69,845	150	167,091	168,418	-1,328
Patient Transport Service	2,231	2,262	-31	11,155	11,132	24	26,801	26,967	-166
111 / Urgent Care	2,411	2,568	-157	12,055	12,326	-271	28,932	29,444	-512
Other Income	774	705	69	3,877	4,103	-226	9,250	9,627	-377
Operating Income	18,974	18,900	73	97,081	97,404	-323	232,074	234,457	-2,383
Pay Expenditure & reserves	-13,067	-12,096	-971	-67,115	-65,637	-1,478	-158,901	-158,580	-320
Non-Pay expenditure & reserves	-4,669	-5,598	929	-23,981	-26,025	2,044	-57,963	-61,934	3,971
Operating Expenditure	-17,736	-17,693	-42	-91,096	-91,661	566	-216,864	-220,514	3,651
EBITDA	1,238	1,207	31	5,985	5,742	243	15,211	13,943	1,268
EBITDA %	6.5%	6.4%		6.2%	5.9%		6.6%	5.9%	
Depreciation	-793	-685	-108	-3,877	-3,507	-370	-9,918	-9,239	-679
Interest payable & finance costs	0	-147	147	0	-147	147	-280	-280	0
Interest receivable	3	5	-2	13	20	-7	32	32	0
Profit on fixed asset disposal	0	26	-26	0	34	-34	138	172	-34
Dividends, interest and other	-189	-177	-12	-945	-885	-60	-2,269	-2,124	-145
Retained Surplus	258	228	30	1,176	1,258	-81	2,913	2,504	409
I&E Surplus %	1.4%	1.2%		1.2%	1.3%		1.3%	1.1%	

2014/2015 Contracting Reporting (A&E - KA34 Definition vehicle arrive at scene)

A&E CONTRACT - Responses	Quarter 1					July 2014					August					YTD				
Clinical Commissioning Groups (CCGs)	Contract	Actual	Over/ (Under) Trade	% Over/ (Under) Trade	Overtrade £ 000	Contract	Actual	Over/ (Under) Trade	% Over/ (Under) Trade	Overtrade £ 000	Contract	Actual	Over/ (Under) Trade	% Over/ (Under) Trade	Overtrade £ 000	Contract	Actual	Over/ (Under) Trade	% Over/ (Under) Trade	Overtrade £ 000
NHS Airedale, Wharfedale and Craven CCG	4,803	5,150	347	7.2%	63,408	1,692	1,755	63	3.7%	11,512	1,602	1,695	93	5.8%	16,994	8,097	8,600	503	6.2%	91,915
NHS Barnsley CCG	8,315	8,446	131	1.6%	19,424	2,948	2,904	-44	-1.5%	-6,524	2,715	2,814	99	3.6%	14,679	13,978	14,164	186	1.3%	27,579
NHS Bradford City CCG	4,243	4,311	68	1.6%	9,715	1,466	1,534	68	4.6%	9,715	1,421	1,384	-37	-2.6%	-5,286	7,130	7,229	99	1.4%	14,144
NHS Bradford Districts CCG	11,145	11,439	294	2.6%	52,199	3,689	3,789	100	2.7%	17,755	3,683	3,673	-10	-0.3%	-1,775	18,517	18,901	384	2.1%	68,178
NHS Calderdale CCG	7,606	7,541	-65	-0.9%	-11,601	2,623	2,527	-96	-3.7%	-17,134	2,415	2,276	-139	-5.8%	-24,808	12,644	12,344	-300	-2.4%	-53,543
NHS Doncaster CCG	11,273	11,634	361	3.2%	48,735	3,887	3,949	62	1.6%	8,370	3,854	3,951	97	2.5%	13,095	19,014	19,534	520	2.7%	70,200
NHS East Riding of Yorkshire CCG	9,909	10,316	407	4.1%	77,355	3,529	3,548	19	0.5%	3,611	3,488	3,543	55	1.6%	10,453	16,926	17,407	481	2.8%	91,419
NHS Greater Huddersfield CCG	7,795	7,566	-229	-2.9%	-42,375	2,715	2,593	-122	-4.5%	-22,576	2,461	2,495	34	1.4%	6,292	12,971	12,654	-317	-2.4%	-58,659
NHS Hambleton, Richmondshire and Whitby CCG	4,062	4,911	849	20.9%	187,799	1,522	1,711	189	12.4%	41,807	1,565	1,707	142	9.1%	31,410	7,149	8,329	1,180	16.5%	261,016
NHS Harrogate and Rural District CCG	4,066	4,775	709	17.4%	160,669	1,549	1,684	135	8.7%	30,593	1,557	1,530	-27	-1.7%	-6,119	7,172	7,989	817	11.4%	185,143
NHS Hull CCG	11,257	11,353	96	0.9%	14,709	3,893	3,991	98	2.5%	15,015	3,848	3,617	-231	-6.0%	-35,392	18,998	18,961	-37	-0.2%	-5,669
NHS Leeds North CCG	6,250	6,621	371	5.9%	63,969	2,184	2,253	69	3.2%	11,897	2,127	2,103	-24	-1.1%	-4,138	10,561	10,977	416	3.9%	71,728
NHS Leeds South and East CCG	11,168	11,763	595	5.3%	108,371	3,989	3,966	-23	-0.6%	-4,189	3,725	3,733	8	0.2%	1,457	18,882	19,462	580	3.1%	105,639
NHS Leeds West CCG	10,355	10,140	-215	-2.1%	-32,137	3,572	3,343	-229	-6.4%	-34,229	3,324	3,125	-199	-6.0%	-29,745	17,251	16,608	-643	-3.7%	-96,111
NHS North Kirklees CCG	5,794	5,833	39	0.7%	7,360	2,041	1,992	-49	-2.4%	-9,247	1,921	1,915	-6	-0.3%	-1,132	9,756	9,740	-16	-0.2%	-3,020
NHS Rotherham CCG	8,806	8,906	100	1.1%	13,551	3,156	3,175	19	0.6%	2,575	2,979	2,905	-74	-2.5%	-10,028	14,941	14,986	45	0.3%	6,098
NHS Scarborough and Ryedale CCG	4,039	4,557	518	12.8%	102,084	1,587	1,613	26	1.6%	5,124	1,478	1,604	126	8.5%	24,831	7,104	7,774	670	9.4%	132,039
NHS Sheffield CCG	17,436	18,801	1,365	7.8%	205,518	6,144	6,542	398	6.5%	59,924	5,855	5,971	116	2.0%	17,465	29,435	31,314	1,879	6.4%	282,907
NHS Vale of York CCG	9,357	10,686	1,329	14.2%	279,019	3,589	3,640	51	1.4%	10,707	3,413	3,515	102	3.0%	21,415	16,359	17,841	1,482	9.1%	311,141
NHS Wakefield CCG	12,200	12,698	498	4.1%	98,142	4,332	4,474	142	3.3%	27,984	4,206	4,243	37	0.9%	7,292	20,738	21,415	677	3.3%	133,418
SUB TOTAL (CONTRACTED)	169,879	177,447	7,568				60,107			162,690	57,637	57,799			46,960			8,606		1,635,562
ECP	0	2,450					763					820				0	4,033	4,033		
NHS Cumbria CCG	134	181					241									134	422	288		
OOA/UNKNOWN	0	552										250				0	802	802		
GRAND TOTAL*	169,879	177,447	7,568	4.5%	1,426	60,107	60,983	876	1.7%	162,691	57,637	58,869	162	0.3%	46,959	287,623	296,229	8,606	2.99%	1,635,564

Yorkshire Ambulance Service - Income and Expenditure Forecast

August 2014

Budget Name	Budget manpower current month WTE	Actual manpower current month WTE	Current month over/ (under) WTE	Budget current month £	Actual current month £	Variance month Over/ (under) spend £	Budget YTD £	Actual Income / Expenditure YTD £	Variance YTD Over/ (under) spend £	Annual Budget £	Forecast Year-end Income / Expenditure £
Income				18,973,529	18,900,200	73,329	97,080,946	97,404,214	-323,268	232,074,134	234,457,101
Pay											
A&E Operations	-2,272.77	-2,370.56	97.79	-7,635,749	-7,802,849	167,100	-38,419,407	-37,909,861	-509,546	-92,835,084	-92,650,495
PTS Operations	-772.01	-765.29	-6.72	-1,424,300	-1,406,669	-17,631	-7,121,500	-7,004,260	-117,240	-17,091,632	-16,645,506
Resilience	-128.77	-127.72	-1.05	-418,880	-445,727	26,847	-2,158,416	-2,087,836	-70,580	-5,183,166	-4,909,015
EOC	-388.59	-389.82	1.23	-1,109,730	-1,167,103	57,373	-5,548,650	-5,445,277	-103,373	-13,316,761	-13,267,723
Finance	-69.65	-61.90	-7.75	-218,209	-188,575	-29,634	-1,097,025	-993,646	-103,379	-2,624,515	-2,449,436
Estates	-42.87	-47.49	4.62	-98,888	-104,103	5,215	-494,440	-520,362	25,922	-1,186,661	-1,260,694
Fleet	-186.93	-170.32	-16.61	-417,229	-394,917	-22,312	-2,112,930	-1,983,666	-129,264	-5,033,531	-4,813,135
IM&T	-39.98	-38.55	-1.43	-125,260	-121,400	-3,860	-626,300	-613,107	-13,193	-1,503,133	-1,493,658
Procurement	-18.53	-16.99	-1.54	-39,681	-40,701	1,020	-198,405	-196,107	-2,298	-476,175	-491,539
Standards & Compliance	-43.55	-45.78	2.23	-148,321	-165,320	16,999	-752,476	-797,444	44,968	-1,790,732	-1,899,955
111	-318.10	-306.49	-11.61	-878,763	-878,419	-344	-4,285,751	-4,421,269	135,518	-10,164,061	-10,619,983
People & Engagement	-96.59	-92.53	-4.06	-298,009	-298,095	86	-1,498,103	-1,447,805	-50,298	-3,584,183	-3,543,923
Clinical Directorate	-31.99	-32.46	0.47	-128,166	-124,851	-3,315	-637,372	-634,993	-2,379	-1,532,818	-1,514,962
Chief Executive	-16.80	-10.87	-5.93	-93,401	-90,364	-3,037	-465,458	-460,062	-5,396	-1,119,281	-1,055,752
Reserves	0.00	0.00	0.00	-32,034	1,133,367	-1,165,401	-1,698,711	-1,120,928	-577,783	-1,458,771	-1,964,421
Total Pay	-4,427.13	-4,476.77	49.64	-13,066,620	-12,095,726	-970,894	-67,114,944	-65,636,623	-1,478,321	-158,900,504	-158,580,197
Non Pay											
A&E Operations				-135,184	-365,010	229,826	-659,824	-1,231,133	571,309	-1,602,436	-3,874,811
PTS Operations				26,648	-274,104	300,752	114,020	-1,342,188	1,456,208	592,142	-2,211,206
Resilience				-260,355	-265,715	5,360	-565,838	-711,977	146,139	-1,100,488	-1,336,783
EOC				-15,971	-20,130	4,159	-79,855	-55,790	-24,065	-191,642	-137,708
Finance				-1,168,623	-949,392	-219,231	-5,342,625	-5,143,447	-199,178	-13,367,125	-13,025,812
Estates				-408,766	-396,575	-12,191	-2,043,824	-2,035,873	-7,951	-4,905,223	-4,862,426
Fleet				-1,611,644	-1,727,281	115,637	-7,946,179	-8,354,383	408,204	-19,178,578	-19,984,979
IM&T				-343,325	-388,472	45,147	-1,716,625	-1,841,147	124,522	-4,119,895	-4,274,422
Procurement				-271,626	-275,356	3,730	-1,274,986	-1,248,183	-26,803	-3,021,422	-3,015,425
Standards & Compliance				-117,969	-225,969	108,000	-550,057	-723,157	173,100	-1,288,587	-1,557,657
111				-1,409,712	-1,528,337	118,625	-7,048,560	-7,043,186	-5,374	-16,916,537	-16,711,491
People & Engagement				-136,638	-150,897	14,259	-683,190	-698,748	15,558	-1,639,620	-1,638,028
Clinical Directorate				-4,728	-1,101	-3,627	-23,640	-3,768	-19,872	-56,740	-36,636
Chief Executive				-24,192	-13,705	-10,487	-120,956	-79,421	-41,535	-290,310	-262,853
Reserves				233,345	5,999	227,346	-847,533	2,343	-849,876	-3,173,968	-442,803
Total Non Pay				-5,648,740	-6,576,046	927,306	-28,789,672	-30,510,059	1,720,387	-70,260,429	-73,373,041
Total Expenditure	-4,427.13	-4,476.77	49.64	-18,715,360	-18,671,772	-43,588	-95,904,616	-96,146,682	242,066	-229,160,933	-231,953,237
Surplus/(Deficit)				258,169	228,428	29,741	1,176,330	1,257,532	-81,202	2,913,201	2,503,864

NB total non-pay includes depreciation, dividends and impairments

CIP DELIVERY

• 90% delivery of the CIP target was achieved in Month 5 against the original plan. This creates a negative variance against plan of (£410k). Reserve schemes have achieved £737k of the savings made year to date.

• In A&E there is a £196k favourable variance on the A&E skill mix CIP, including gains from the overtrade of 3.0% year to date and around 68.6 paramedic vacancies. The CIP to remove missed meal break payments and AVPs has slipped against plan which has created an adverse variance of (£101k). Other A&E CIPs which are under achieving against plan include value for money and clinical hub schemes (£647k). A&E have identified additional savings to mitigate against risk of non-delivery, including reduced private provider expenditure, which has achieved savings of £563k to date.

• The underperformance against plan in PTS is mainly explained by an unidentified CIP of £610k for the year and by the underperforming voluntary car scheme CIP. The CIPs concerned with reducing subcontractor spend, winning new contracts and reducing overtime spend have also slipped against the plan by (£48k). These movements have been marginally offset by the £13k over performance of the CIP to reduce subcontractor spend in the South region.

• Achievement against plan is monitored by the CIP Management Group which is chaired by the Chief Executive.

CIP Tracker 2014/15

	TDA Plan	YTD Plan	YTD Actual	YTD Variance	Forecast Outturn
	£000	£000	£000	£000	£000
Planned savings	£000	£000	£000	£000	£000
Accident & Emergency	5,612	2,400.00	1,848	(551)	5,547
Patient Transport Service	2,279	759.00	405	(354)	1,485
Special Operations	309	123.00	49	(73)	129
Finance	89	33.00	33	0	89
Standards & Compliance	173	72.00	37	(35)	134
Trust wide	1,890	815.00	681	(133)	1,351
Sub Total	10,351	4,201	3,054	(1,147)	8,735
Reserve Schemes	£000	£000	£000	£000	£000
111 additional CIP	0	0.00	163	163	414
Reduce spend on Private Providers	0	0.00	563	563	563
Other	0	0.00	11	11	45
Sub total	0	0.00	737	737	1,022
Total	10,351	4,201	3,791	-410	9,757

Summary of Top 5 Schemes 2014 / 15

CIP Scheme	Lead	2014/15	14/15 YTD Plan	14/15 YTD Actual	Variance
		£000	£000	£000	£000
A&E Skill mix	I Brandwood	3,292	1,465	1,661	196
Increase use of clinical hub (triage)	I Brandwood	1,257	491	-	-491
Voluntary Car Scheme	J Halliwell	874	349	199	-149
Remove missed meal break payments and AVP	I Brandwood	689	287	187	-101
PTS Pay	J Halliwell	610	170	-	-170
Total		6,721	2,762	2,047	-715

Yorkshire Ambulance Service - Statement of Financial Position
August 2014
SUMMARY

- Land, Buildings, Equipment and Intangibles is £651k underspent compared to the plan due to delays in the supply of the remaining 13/14 A&E replacement vehicles. This is partially offset by reduced depreciation charges again caused by slippage on the programme.
- Stock, Trade & Other Receivables is higher than plan as a result of the higher than anticipated levels of NHS debtors £1m (as explained on page 5.9) and accrued income which includes A&E overtrade of £1.7m; reversal of A&E performance penalties £1m; 111/LCD additional trading income £0.7m and 13/14 over payment of PDC dividend £0.2m (which will be refunded in September).
- Cash is higher than anticipated primarily as a result of slippage on the capital programme.
- Creditors are higher than anticipated as a result of capital creditors brought forward from 13/14 (£0.6m); re-provision of 13/14 resource for training, ECS, and TDF in current year (£0.9m); and provisions in respect of A&E performance penalty for July, non achievement of 111 KPI and costs of the A&E recovery plan.

CAPITAL SUMMARY

- The purchase of land for the additional HART Car Park was finalised and payment made in August 2014.
- The Electronic Patient Reporting Form (EPRF) project has commenced, with expenditure on equipment due to be incurred from October onwards.
- The Programme figures for Estates, IT, Fleet, Plant & Machinery and Medical Equipment have been taken from the individual strategies agreed by the Board. The slippage of £101k is due to a delayed finalisation of scheme specifics. The Estates schemes and Medical Equipment are underway and ahead of the original plan.
- The national framework for the supply of vehicles concluded in July, therefore the Trust business case for the supply of 14/15 A&E vehicles is scheduled to go to Finance and Investment Committee in September. The supply of the remaining 13/14 vehicles has been delayed resulting in slippage of £600k however delivery started, as expected, in July with completion expected in September.
- The Hub & Spoke project is due to commence this financial year, subject to Board approval. The Strategic Outline Business Case is currently being developed.

Statement of Financial Position

	Plan at 31/08/2014 £000	Actual at 31/08/2014 £000	Variance £000
Land, Buildings and equipment	78,261	77,974	-287
Trade and other receivables (>1 yr)	879	756	-123
Non-Current assets	79,140	78,730	-410
Stocks, Trade and other receivables (<1 yr)	10,104	14,933	4,829
Cash and cash equivalents	16,841	17,377	536
Current assets	26,945	32,310	5,365
Creditors (< 1yr)	-11,587	-16,775	-5,188
Provisions & Deferred Income(<1 yr)	-2,454	-2,490	-36
Current Liabilities	-14,041	-19,265	-5,224
Provisions (>1 yr)	-9,002	-8,605	397
Borrowings	-5,837	-5,837	0
Non-Current Liabilities	-14,839	-14,442	397
Net Assets	77,205	77,333	128
Public Dividend Capital	78,594	78,594	0
Revaluation Reserve	5,238	5,176	-62
Donation Reserve	0	0	0
Income & Expenditure Reserve	-6,627	-6,437	190
Total Taxpayer's Equity	77,205	77,333	128

Capital Programme

	Baseline Programme £000	Revised 14/15 Programme £000	Year to Date Plan £000	Spend to 31/08/2014 £000	Committed at 31/08/2014 £000	(Under)/ Over plan 31/08/2014 £000	Forecast Outturn 14/15 £000
Major Schemes							
HART	100	100		72	3	75	100
ECS	2,200	2,190		2	679	681	2,190
Hub & spoke	2,400	2,274		107	3	110	2,274
Minor Schemes							
Estates	735	741	179	154	220	195	741
IM&T	1,600	1,624	620	45	159	-416	1,624
Vehicles A&E	4,658	4,765	600	608	49	57	4,765
Vehicles PTS	1,290	1,290		0	0	0	1,290
Vehicles HART	167	167		0	0	0	167
Medical equipment	1,134	1,134	240	0	360	120	1,134
Total planned expenditure	14,284	14,284	1,639	988	1,473	822	14,284
NBV of Disposals	1,737	1,737	0	55	0		1,737
CRL (Including External Funds)	12,547	12,547	1,639	933			12,547
Total planned resources	14,284	14,284					14,284
Rating						⊗ ⊗	

Yorkshire Ambulance Service - Debtors and Payments

August 2014

DEBT SUMMARY

Total Non-NHS Debt has decreased due to payment of a Tour de France invoice (£191k on P&E). A cheque in settlement of the £108k fleet factors stock invoice was received on the 9th September. NHS Debt has increased by £1m due to a number of contractual invoices not settled in accordance with terms however £862k of this was received at the beginning of September with a further £155k scheduled for payment on the 12th. NHS Debt over 90 days has increased as a result of some Local Care Direct and 111 invoices for April and May being unpaid. On investigation it was found the invoices had not reached the Trusts. Copies have been provided and payment agreed before the end of September. Work is ongoing to clear as many NHS debtor items as possible ahead of the month 6 Agreement of Balances exercise.

£000	May-14	Jun-14	Jul-14	Aug-14
Non NHS debt	467	511	733	421
Of which >90 days overdue	147	147	259	267
NHS debt	4,663	353	1,840	2,856
Of which >90 days overdue	55	919	1,059	1,367
Total debt	5,130	864	2,573	3,277
Of which >90 days overdue	202	1,066	1,318	1,634
Provision to cover this debt	202	1,066	1,318	1,634

PAYMENTS

The Trust has paid 2,059 invoices in August 2014 of which 1,958 were paid within 30 days of receipt giving a Better Payment Practice Code (BPPC) position of 95.09% for the month and 95.36% year to date. In value terms, the Trust has achieved 96.16% year to date. This is in line with the Trust's target to pay 95% of invoices within 30 days.

	Aug-14		Year to Date	
	Number	£000	Number	£000
Non NHS payables				
Total non NHS invoices paid in period	2,024	5,986	11,045	27,863
Total non NHS invoices paid within target	1,925	5,741	10,535	26,748
	95.11%	95.91%	95.38%	96.00%
NHS Payables				
Total NHS invoices paid in period	35	427	258	1,825
Total NHS invoices paid within target	33	426	243	1,800
	94.29%	99.77%	94.19%	98.63%
Total Payables				
Total invoices paid in period	2,059	6,413	11,303	29,688
Total invoices paid within target	1,958	6,167	10,778	28,548
	95.09%	96.16%	95.36%	96.16%

QUALITY, INFORMATION REPORTING, AND CQUIN

A&E CQUIN 2 which includes two parts. Part 1 - relating to the 8 underperforming CCGs Red performance. The year to date position is that 5 of the 8 CCGs are not meeting their individual Red performance targets and therefore funding attached to these CCGs is at risk. However, The CQUIN states that if performance targets are not met but demand increase is greater than 3% there will be a review. Part 2 - relating to the remaining CCGs to achieve 75% Red performance targets is also unachieved at month 5.

RISK SUMMARY

Description	Total Value of Risk	In Financial Position YTD	In Financial Position Forecast	Mitigation
In the Financial Position	£000	£000	£000	
CIP non-delivery by 10%	1,035	410	594	CIP underachievement at Month 5 with the use of reserve schemes, 90% achievement against plan.
A&E contractual penalties - RED 1	1,943	0	0	Red 1 and Red 2 targets were not achieved for period to August. A penalty of 2% per target per month is applicable if cumulative performance for the year is not achieved, however this is capped at a maximum of 2.5% across all targets. Year to date the total penalty charge is £1,619k and the forecast full year penalty is £3.9m. These have not been included in the YTD position or the current forecast. However the impact of these penalties is included in the commentary of sections 5.1. and 5.3 of this report.
A&E contractual penalties - RED 2	1,943	0	0	
111 income risk (based 50% of call volume)	140	47	140	KPI non delivery has been assumed in the current financial position.
Non delivery of CQUINS - A&E	1,696	519	1,246	A&E CQUIN goal part 1 - year to date, 5 out of 8 identified under-performing CCGs not achieving and part 2 100% not achieved. The forecast financial position assumes that 5 CCGs will not achieve part 1 and 100% will not achieve part 2, based on the current A&E Performance Improvement Plan.
25% Non delivery of CQUINS - PTS	158	0	0	As the CQUINS are investigatory in nature YAS anticipate to achieve all of the goals set at this point.
Introduction of Payment by Results	1,658	0	0	No risk identified at this stage from discussions with the Commissioners.
Unsocial Hours Payments - NHS 111	268	0	0	This reflects the unsocial hours risk for NHS 111 to reflect the expected cost should Ambulance Trusts decide to move to schedule 2 of Agenda for Change. This is still subject to national negotiation.
PTS Overspend	2,191	1,363	2,191	This reflects the current YTD and expected full year position of PTS, which is mainly impacted by dependency on private providers and therefore under achievement on CIP schemes.
A&E Overspend	751	208	751	Current view of the impact on A&E outturn due to the costs of the Performance Improvement Plan.
GRAND TOTAL	11,783	2,547	4,922	

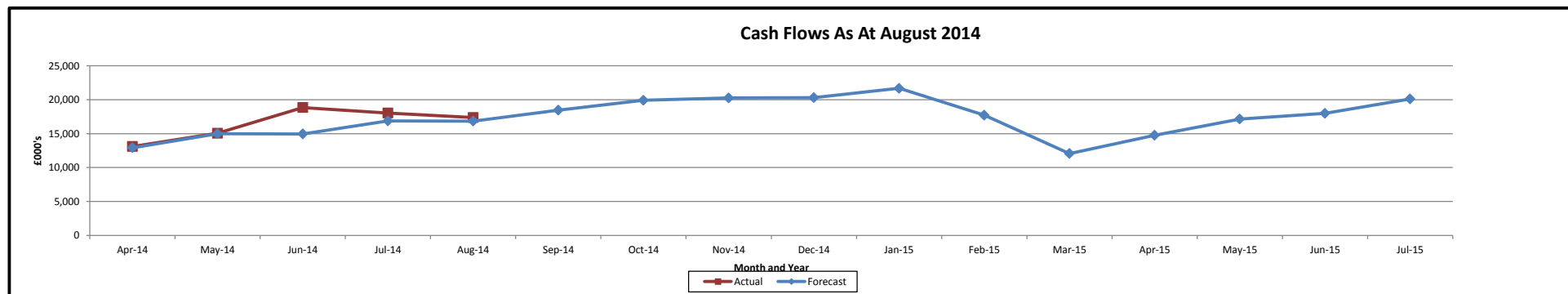
Yorkshire Ambulance Service - Cash Flow

August 2014

Analysis Of Actual/Plan Cash Flows

Cash Name (£000's)	Actual	Actual	Actual	Actual	Actual	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	
	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15
Actual/Forecast Opening Cash Balance	10,142	13,112	15,058	18,839	18,030	16,841	18,445	19,905	20,262	20,309	21,667	17,710	12,075	14,765	17,142	17,979	20,112
Cash Inflows																	
Income from Activities	17,719	19,466	22,354	17,964	18,467	18,931	19,561	18,880	19,521	20,158	19,134	17,043	19,887	19,759	19,258	19,549	18,564
Interest Receivable	3	3	5	4	4	2	3	3	2	3	3	2	2	2	3	3	3
Capital Receipts	12	12	20	0	26	0	0	0	0	711	1,062	101	0	0	0	0	0
Loans	0	0	0	0	0	2,200	0	0	0	0	0	0	0	0	0	0	0
PDC Capital *	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Cash Inflows	17,734	19,481	22,379	17,968	18,497	21,133	19,564	18,883	19,523	20,872	20,199	17,146	19,889	19,761	19,261	19,552	18,567
Cash Outflows																	
Pay	9,730	12,679	12,873	12,728	12,847	12,905	12,880	12,856	12,855	12,858	12,842	12,869	12,639	12,735	12,676	12,720	12,639
Non-pay	4,832	4,659	5,216	5,585	5,133	5,206	4,489	5,345	5,949	5,664	4,902	6,043	3,134	4,649	5,748	4,699	5,412
Interest Payable	0	0	0	0	0	57	0	0	0	0	0	78	0	0	0	0	0
PDC Dividends	0	0	0	0	0	1,134	0	0	0	0	0	1,135	0	0	0	0	0
Capital Expenditure	202	197	509	464	1,170	60	735	325	672	992	6,412	2,269	1,426	0	0	0	0
Loans	0	0	0	0	0	167	0	0	0	0	0	387	0	0	0	0	0
PDC Capital *	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Cash Outflows	14,764	17,535	18,598	18,777	19,150	19,529	18,104	18,526	19,476	19,514	24,156	22,781	17,199	17,384	18,424	17,419	18,051
Net Cash Inflow/(Outflow)	2,970	1,946	3,781	-809	-653	1,604	1,460	357	47	1,358	-3,957	-5,635	2,690	2,377	837	2,133	516
Actual Closing Cash Balance	13,112	15,058	18,839	18,030	17,377												
Forecast Closing Cash Balance (per TDL Plan)	12,922	14,990	14,962	16,881	16,841	18,445	19,905	20,262	20,309	21,667	17,710	12,075	14,765	17,142	17,979	20,112	20,628

The cash position essentially reflects year to date slippage on the capital programme and residual 13/14 capital accruals which were expected to have reached payment stage by this point in the year (see page 5.8).



Hospital	Qtr1				Jul-14				Aug-14				YTD			
	Post Handover Greater than 30 Less Than 60 Minutes Breaches	Post Handover Greater than 60 Minutes Breaches	Total Breaches	Total Arrivals At Destination	Post Handover Greater than 30 Less Than 60 Minutes Breaches	Post Handover Greater than 60 Minutes Breaches	Total Breaches	Total handover	Post Handover Greater than 30 Less Than 60 Minutes Breaches	Post Handover Greater than 60 Minutes Breaches	Total Breaches	Total handover	Post Handover Greater than 30 Less Than 60 Minutes Breaches	Post Handover Greater than 60 Minutes Breaches	Total Breaches	Total Arrivals At Destination
AIREDALE GENERAL HOSPITAL	21	3	24	3516	8	1	9	1159	11	1	12	1177	40	5	45	5852
	£420	£300	£720		£160	£100	£260		£220	£100	£320		£800	£500	£1,300	
BARNESLEY DISTRICT GENERAL	18	3	21	5510	7	1	8	1808	10	3	13	1792	35	7	42	9110
	£360	£300	£660		£140	£100	£240		£200	£300	£500		£700	£700	£1,400	
BRADFORD ROYAL INFIRMARY	60	14	74	9897	22	1	23	3240	14	4	18	3105	96	19	115	16242
	£1,200	£1,400	£2,600		£440	£100	£540		£280	£400	£680		£1,920	£1,900	£3,820	
CALDERDALE ROYAL HOSPITAL	26	3	29	4662	11	2	13	1534	7	1	8	1440	44	6	50	7636
	£520	£300	£820		£220	£200	£420		£140	£100	£240		£880	£600	£1,480	
HUDDERSFIELD ROYAL INFIRMARY	34	3	37	4602	5	3	8	1523	13	3	16	1552	52	9	61	7677
	£680	£300	£980		£100	£300	£400		£260	£300	£560		£1,040	£900	£1,940	
HULL ROYAL INFIRMARY	247	4	251	10918	85	3	88	3707	60	5	65	3510	392	12	404	18135
	£4,940	£400	£5,340		£1,700	£300	£2,000		£1,200	£500	£1,700		£7,840	£1,200	£9,040	
DEWSBURY DISTRICT HOSPITAL	15	5	20	3623	8	0	8	1219	3	2	5	1213	26	7	33	6055
	£300	£500	£800		£160	£0	£160		£60	£200	£260		£520	£700	£1,220	
PINDERFIELDS GENERAL HOSPITAL	41	10	51	8378	17	1	18	2814	18	0	18	2670	76	11	87	13862
	£820	£1,000	£1,820		£340	£100	£440		£360	£0	£360		£1,520	£1,100	£2,620	
PONTEFRACT GENERAL INFIRMARY	1	0	1	314	0	0	0	96	1	0	1	111	2	0	2	521
	£20	£0	£20		£0	£0	£0		£20	£0	£20		£40	£0	£40	
DONCASTER ROYAL INFIRMARY	43	7	50	7449	10	3	13	2491	9	3	12	2447	62	13	75	12387
	£860	£700	£1,560		£200	£300	£500		£180	£300	£480		£1,240	£1,300	£2,540	
FRIARAGE HOSPITAL	18	2	20	1562	9	1	10	579	6	0	6	541	33	3	36	2682
	£360	£200	£560		£180	£100	£280		£120	£0	£120		£660	£300	£960	
HARROGATE DISTRICT HOSPITAL	21	1	22	3009	12	2	14	1046	6	2	8	971	39	5	44	5026
	£420	£100	£520		£240	£200	£440		£120	£200	£320		£780	£500	£1,280	
LEEDS GENERAL INFIRMARY	68	12	80	6998	23	1	24	2281	27	2	29	2225	118	15	133	11504
	£1,360	£1,200	£2,560		£460	£100	£560		£540	£200	£740		£2,360	£1,500	£3,860	
ST JAMES UNIVERSITY HOSPITAL	81	8	89	9787	15	0	15	3132	17	0	17	3045	93	8	101	15964
	£1,220	£800	£2,020		£300	£0	£300		£340	£0	£340		£1,860	£800	£2,660	
NORTHERN GENERAL HOSPITAL	47	15	62	10085	31	2	33	3417	18	2	20	3359	96	19	115	16861
	£940	£1,500	£2,440		£620	£200	£820		£360	£200	£560		£1,920	£1,900	£3,820	
ROTHERHAM DISTRICT GENERAL HOSPITAL	19	5	24	5308	9	3	12	1844	11	1	12	1831	39	9	48	8983
	£380	£500	£880		£180	£300	£480		£220	£100	£320		£780	£900	£1,680	
SCARBOROUGH DISTRICT GENERAL HOSPITAL	58	3	61	4788	27	2	29	1691	25	1	26	1719	110	6	116	8198
	£1,160	£300	£1,460		£540	£200	£740		£500	£100	£600		£2,200	£600	£2,800	
YORK DISTRICT HOSPITAL	111	6	117	6093	35	3	38	2080	36	1	37	2143	182	10	192	10316
	£2,220	£600	£2,820		£700	£300	£1,000		£720	£100	£820		£3,640	£1,000	£4,640	
SHEFFIELD CHILDRENS HOSPITAL	2	1	3	1003	7	0	7	323	0	0	0	260	9	1	10	1586
	£40	£100	£140		£140	£0	£140		£0	£0	£0		£180	£100	£280	
Grand Total Handover				107502				35984				35111				178597
Grand Total Breaches	911	105	1016		341	29	370		292	31	323		1544	165	1709	
Grand Total Cost	£18,220	£10,500	£28,720		£6,820	£2,900	£9,720		£5,840	£3,100	£8,940		£30,880	£16,500	£47,380	

Number of Post Handover is the Total Arrivals with a Handover Time

Number of Post Handover Breaches is 'Post Handover (Handover to Clear) Greater than 30 Less Than 60 Minutes' + 'Post Handover (Handover to Clear) Greater than 60 Minutes'