



Monthly Yorkshire Ambulance Trust Board Integrated Performance Report

December 2014



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Section 1

Executive Summary



Overall Trust wide Top Exceptions

RAG	Section	No of months Exception	Exceptions for month	Comments	Who	When	Year end Risk Level
RED	2.2	9/9	RED 1 Performance	RED 1 performance was 63.35%. There was an increase in RED demand of 10.3% on December 2013. Actions being developed as part of the Operational Improvement Group focusing on Demand, Resources and Efficiency. Red demand remaining high. Abstractions remain high lowering base line operational hours. Large increase in the number of hours lost to Turnaround issues at many of the large acutes across the region.	Interim Executive Director of Operations	Ongoing	AMBER
RED	2.2	9/9	RED 2 Performance	RED 2 performance in December was 60.4% . There was an increase in RED demand of 10.3% on December 2013 Actions being developed as part of the Operational Improvement Group focusing on Demand, Resources and Efficiency. Red demand remaining high. Abstractions remain high lowering base line operational hours . Large increase in the number of hours lost to Turnaround issues at many of the large acutes across the region.	Interim Executive Director of Operations	Ongoing	AMBER
RED	2.5	9/9	Green 1 Performance	Green 1 Performance was 77.7%. Improvements will form part of work of the Operational Improvement Group. Abstractions remain high lowering base line operational hours . Large increase in the number of hours lost to Turnaround issues at many of the large acutes across the region.	Interim Executive Director of Operations	Ongoing	GREEN
RED	2.5	5/9	Green 2 Performance	Green 2 Performance was 70.56%. Improvements will form part of work of the Operational Improvement Group. Abstractions remain high lowering base line operational hours . Large increase in the number of hours lost to Turnaround issues at many of the large acutes across the region.	Interim Executive Director of Operations	Ongoing	GREEN
RED	CQ1	6/9	CQUIN delivery	Delivery of performance standards according to CQUIN 2 schedule is required for the Underperforming CCG CQUIN. All other CCGs to maintain a performance of 75%. All other CQUINs on track.	Interim Executive Director of Operations	Ongoing	AMBER
RED	2.16	9/9	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 and further discussions on resourcing of the clinical service are continuing through established contract processes.	AD NHS 111/Urgent Care	Ongoing	RED
RED	2.16	3/3	Total % of calls answered within 60 seconds (Target >= 95%)	Call volumes rose to 33% above the normal monthly rate in December, above the seasonal rise anticipated, creating significant pressures on response times. Additional staff to manage the demand were in the recruitment and training process and are now in post, with performance now stabilised at above 95%. During the periods of intense pressure additional clinical staff were rostered to support triage and management of patients and to maintain the delivery of a safe service.	AD NHS 111/Urgent Care	Jan-15	AMBER
RED	2.16	1/1	Total % of calls abandoned after 30 seconds (Target <=5%)	Call volumes rose to 33% above the normal monthly rate in December, above the seasonal rise anticipated, creating significant pressures on response times. Additional staff to manage the demand were in the recruitment and training process and are now in post, with the call abandonment rate now stabilised below 5%. During the periods of intense pressure additional clinical staff were rostered to support triage and management of patients and to maintain the delivery of a safe service.	AD NHS 111/Urgent Care	Jan-15	GREEN
RED	4.6	9/9	Sickness / Absence	December was another poor month in terms of absence due to sickness with absence rising from 6.74% in November to 7.21%. Highest levels of absence were in NHS 111 (10.55%), A&E EY (9.55%) Ancillary Division (8.25%) and PTS (7.37%) It appears that Ambulance Services nationally have seen an increase in sickness absence through December and this may be a reflection on the demand pressures that have been experienced by the services through the month. The Director of People & Engagement is to hold formal meetings with all Associate Directors who's directorates The Director of People & Engagement has written to all Directors following the last Quality Committee asking them to take action to ensure improved compliance through December. Whilst there has been a small improvement, (65.5% to 69.3%) a number of areas remain below target. The most significant areas of concern are:	All Directors & Managers	Ongoing	RED
RED	4.10	7/7	PDR's	Finance Division 32% Fleet 67% A&E NY 64% A&E SY 49% EOC 68% NHS 111 68% Directors are working with their Associate Directors to remedy this.	All Directors & Managers	Ongoing	AMBER
RED	2.11	9/9	EAST - KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 88.2% Target 89.26% position on November improved.	Locality Manager East Yorkshire	On-going	AMBER
RED	2.12	4/9	EAST - KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 57.4% Target 82.14% KPI 4 this measurement for East is complex in calculation due to historical practices of booking and needs to be re-defined.	Locality Manager East Yorkshire	On-going	RED
RED	2.10	9/9	NORTH - KPI 2 - Patients arriving on time for their appointment	Achieved 81.6% Target 82.00% position on November improved with an increase of 2.5%	Locality Manager North Yorkshire	On-going	AMBER
RED	2.12	9/9	NORTH - KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 95.3 Target 99.00% position on November improved with an increase of 0.6%	Locality Manager North Yorkshire	On-going	AMBER
RED	2.9	8/9	SOUTH - KPI 1 Patients Picked up within 120 minutes before Appointment	Achieved 93.1% Target 96.0% position on November improved with an increase of 0.1% and YTD 94.7%	Locality Manager South Yorkshire	On-going	AMBER
RED	2.10	9/9	SOUTH - KPI 2 - Patients arriving on time for their appointment	Achieved 81.6% Target 90.0% position on November improved with an increase of 0.4% and YTD 85.8%	Locality Manager South Yorkshire	On-going	RED
RED	2.11	9/9	SOUTH - KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 85.8% Target 95%, YTD 89.4%, higher acuity / complex patients in month	Locality Manager South Yorkshire	On-going	RED
RED	2.12	9/9	SOUTH - KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 90.5% Target 98.0%	Locality Manager South Yorkshire	On-going	RED
RED	2.12	3/7	SOUTH - KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 95.4% Target 96% YTD 96.5%	Locality Manager West Yorkshire	On-going	Green

Care Quality commission priorities		Safe	Effective	Caring	Well-led	Responsive									
Yorkshire Ambulance Service - Aims		Continuously improving patient care			Setting high standards of performance		Always learning			Spending public money wisely					
2014-15 BUSINESS PLAN OBJECTIVES		Lead Director	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Year End
Strategic Objectives			RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	Forecast
1. Improve clinical outcomes for key conditions															
1a	Improve survival to discharge for cardiac arrest	Julian Mark	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
1b	Reduce mortality from major trauma	Julian Mark	AMBER	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN				AMBER
1c	Training and supporting our staff	Dave Macklin/ Steve Page	AMBER	GREEN	GREEN	GREEN	GREEN	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	Dave Macklin	AMBER	AMBER	AMBER	RED	RED	RED	RED	RED	RED				AMBER
2b	Increase non-conveyance rates	Dave Macklin	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER				AMBER
2c	Building and maintaining successful partnerships including NHS 111	Alex Crickmar	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
2d	Develop care pathways for specialist groups	Julian Mark	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
2e	Develop urgent care transport and inter-facility transport solutions	Dave Macklin	AMBER	AMBER	AMBER	AMBER	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	GREEN	GREEN	GREEN				GREEN
2g	Continue the development and roll-out of ePRF and Paramedic Pathfinder	Alex Crickmar	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	AMBER				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	GREEN	GREEN	GREEN				GREEN
3b	Improve performance in Ambulance Clinical Quality Indicators (ACQIs)	Julian Mark/Dave Macklin	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
3c	Continued expansion of the Clinical Hub	Dave Macklin	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
3d	Deliver Red 1 and Red 2 targets on a consistent basis through implementation of new rotas	Dave Macklin	AMBER	AMBER	AMBER	RED	RED	RED	RED	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	GREEN	GREEN	GREEN				GREEN
4b	Develop services in partnership with others	Steve Page	GREEN	GREEN	GREEN	GREEN	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	Alex Crickmar	GREEN	GREEN	RED	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	GREEN			GREEN
5b	Implementation of Service Line Management	Alex Crickmar	AMBER	AMBER	AMBER	RED	AMBER	AMBER	AMBER	AMBER	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	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	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	GREEN	GREEN	GREEN				GREEN
7b	Finalisation of new HART facility	Alex Crickmar	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
7c	Introduction of YAS Forum	Alex Crickmar/ Anne Allen	GREEN	GREEN	GREEN	GREEN	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	Alex Crickmar	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
8b	Improve financial performance	Alex Crickmar	GREEN	GREEN	GREEN	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER				AMBER
8c	Monitor sustainability of service lines	Alex Crickmar	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER				AMBER
8d	Drive forward whole-system efficiencies	Alex Crickmar	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN

Early Warning Indicators	EWI	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	>=75%	-	<75%	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) *	Ranked within the top 4 nationally	Ranked between 5 and 7 nationally	Ranked 8 and above nationally	2.7	↑	↔	↑	↔	↔	↔	↔	↔	↔			
	Complaints (% Rate)	<0.125%	Between 0.125% & 0.174%	>0.175%	3.13	↓	↑	↑	↑	↔	↑	↑	↔	↑			
EOC	Time to answer 50% (YTD) *	Ranked within the top 4 nationally	Ranked between 5 and 7 nationally	Ranked 8 and above nationally	2.7	↔	↔	↔	↔	↔	↔	↔	↔	↔			
	Time to answer 95% (YTD) *	Ranked within the top 4 nationally	Ranked between 5 and 7 nationally	Ranked 8 and above nationally	2.7	↓	↔	↔	↑	↑	↔	↔	↔	↔			
	Abandoned calls (YTD) *	Ranked within the top 4 nationally	Ranked between 5 and 7 nationally	Ranked 8 and above nationally	2.7	↑	↓	↔	↔	↑	↔	↓	↔	↓			
	Recontact 24 hours telephone (YTD) *	Ranked within the top 4 nationally	Ranked between 5 and 7 nationally	Ranked 8 and above nationally	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>	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	2.11	↔	↓	↔	↔	↔	↔	↑	↓	↑			
	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	RED	RED	RED	RED				AMBER
GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	RED				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	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

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

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

Monitor Risk Ratings (Quarterly)

Finance			
Quarter 1	Quarter 2	Quarter 3	Quarter 4
<p>Highest Risk Lowest Risk</p>	<p>Highest Risk Lowest Risk</p>	<p>Highest Risk Lowest Risk</p>	<p>Highest Risk Lowest Risk</p>

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	9/9	RED 1 Performance	RED 1 performance was 63.35%. There was an increase in RED demand of 10.3% on December 2013. Actions being developed as part of the Operational Improvement Group focusing on Demand, Resources and Efficiency. Red demand remaining high. Abstractions remain high lowering base line operational hours. Large increase in the number of hours lost to Turnaround issues at many of the large acutes across the region.	Interim Executive Director of Operations	Ongoing	AMBER
RED	2.2	9/9	RED 2 Performance	RED 2 performance in December was 60.4 % . There was an increase in RED demand of 10.3% on December 2013 Actions being developed as part of the Operational Improvement Group focusing on Demand, Resources and Efficiency. Red demand remaining high. Abstractions remain high lowering base line operational hours . Large increase in the number of hours lost to Turnaround issues at many of the large acutes across the region.	Interim Executive Director of Operations	Ongoing	AMBER
RED	2.5	9/9	Green 1 Performance	Green 1 Performance was 77.7%. Improvements will form part of work of the Operational Improvement Group. Abstractions remain high lowering base line operational hours . Large increase in the number of hours lost to Turnaround issues at many of the large acutes across the region.	Interim Executive Director of Operations	Ongoing	GREEN
RED	2.5	5/9	Green 2 Performance	Green 2 Performance was 70.56%. Improvements will form part of work of the Operational Improvement Group. Abstractions remain high lowering base line operational hours . Large increase in the number of hours lost to Turnaround issues at many of the large acutes across the region.	Interim Executive Director of Operations	Ongoing	GREEN
RED	CQ1	6/9	CQUIN delivery	Delivery of performance standards according to CQUIN 2 schedule is required for the Underperforming CCG CQUIN. All other CCGs to maintain a performance of 75%. All other CQUINs on track.	Interim Executive Director of Operations	Ongoing	AMBER

Directors Comments on Actual Performance**A&E Performance**

There was an increase in RED demand of 10.3% on December 2013. Actions being developed as part of the Operational Improvement Group focusing on Demand, Resources and Efficiency. Red demand remaining high. Abstractions remain high lowering base line operational hours. Large increase in the number of hours lost to Turnaround issues at many of the large acutes across the region.

Business Continuity:

Provision of information for the Derbyshire Bid supporting PTS Service

CQC Evidence and Meetings

National BC Managers meeting at Ryton

Meeting and Planning for internal Auditors day on 6th January 2014 Procurement planning meeting for P3Q, supply chain and supply chain workshop planning.

BC Incidents - NHS 111 loss of Adastra of 27.12.2014, Loss of power (inc.phones) at Harrogate Ambulance Station 3.12.2015, Major Incident Standby 12.12.2014, Internal Major Incident due to service pressures on 27th, 28th December 2014.

Resilience/HART:

Plans and risk assessments being prepared for national day of Industrial Action on 29th January 2015.

EPRR Statement of Compliance and action plan presented to South Yorkshire and North Yorkshire and the Humber LHRPs (to West Yorkshire LHRP 9 January 15).

MIP revised and out to consultation internally and externally, closing date 12 January 2014.

New Hart Base at Manor Mill Lane officially opened on 18th December 2014.

Inaugural Gold Planning meeting for the Tour of Yorkshire cycle race planned for 1st,2nd,3rd May 2015.

Training:

Control Room Managers and Supervisors JESIP – 2

Operational JESIP – 2

Resilience Awareness for Urgent Support Staff – 1

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

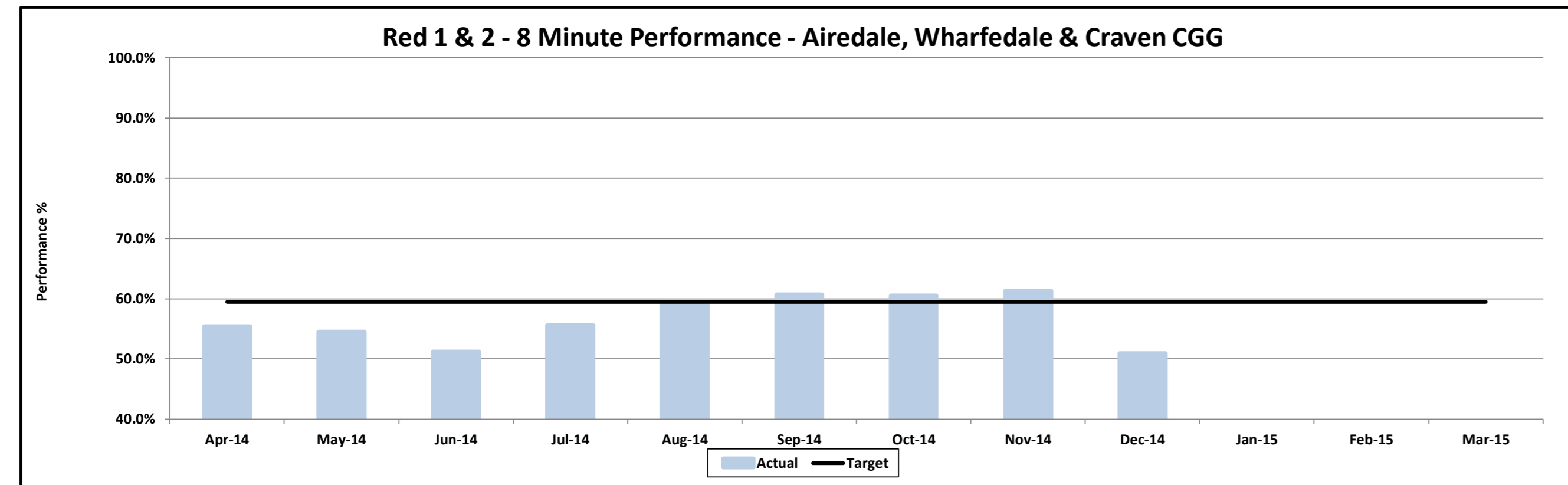
A & E CQUINS

	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) Care homes: Right Care, Right Place	10.00%	£395,164	GREEN	GREEN	GREEN	GREEN	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	GREEN	AMBER	GREEN				GREEN
1. (1.3) Right Care Right Place - South Yorkshire Re-contact Rates	10.00%	£395,164	GREEN	GREEN	GREEN	GREEN	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	AMBER	GREEN	GREEN	GREEN				GREEN
2. Underperforming CCG's - Red Performance	43.00%	£1,696,319	AMBER	AMBER	AMBER	RED	RED	RED	RED	RED	RED				AMBER
3. Improving Patient Safety & Reducing Harm	7.00%	£276,615	GREEN	GREEN	GREEN	GREEN	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	GREEN	GREEN	GREEN				GREEN
4. (4.2) Friends & Family Early Implementation	4.00%	£158,066	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
4. (4.3) Friends & Family Phased Expansion	3.00%	£118,549	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
TOTAL	100.00%	£3,948,754													

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

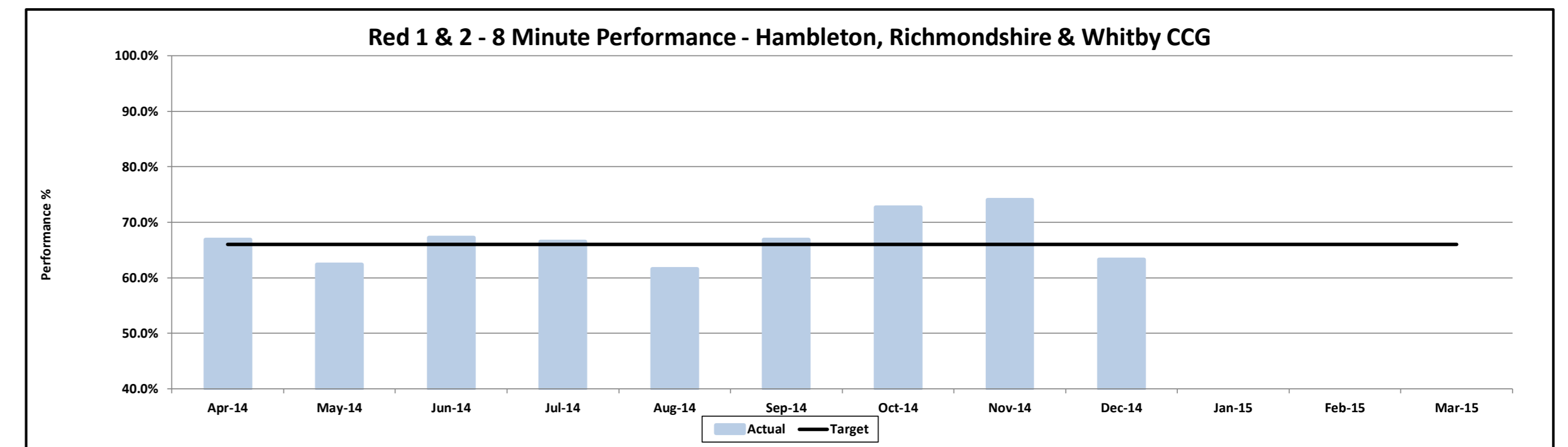
Comments

CQUIN 2 - Red Performance by CCG

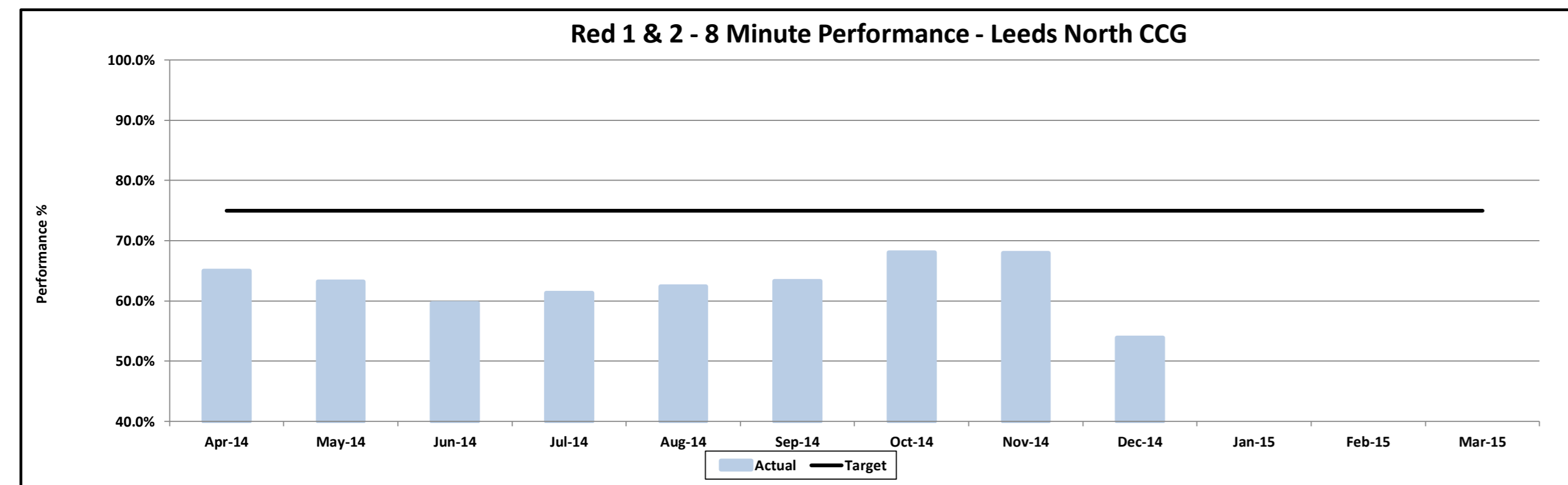


Airedale, Wharfedale & Craven CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%
Actual	55.4%	54.5%	51.2%	55.6%	59.5%	60.7%	60.5%	61.3%	50.9%				56.4%

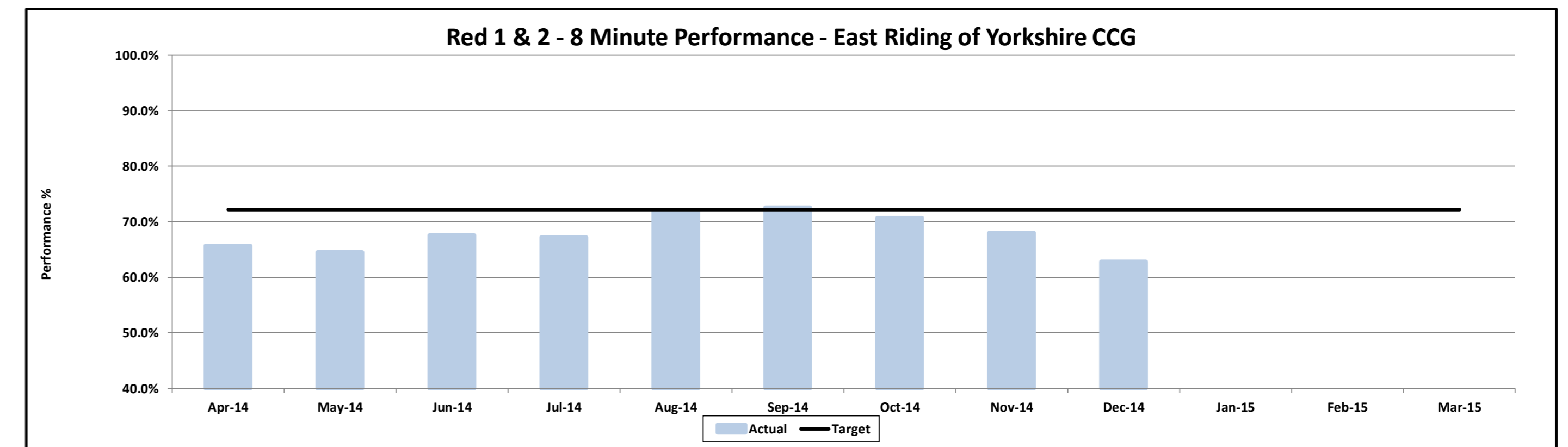
* Trajectory includes Cumbria CCG



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%	66.9%	72.7%	74.0%	63.3%				66.7%

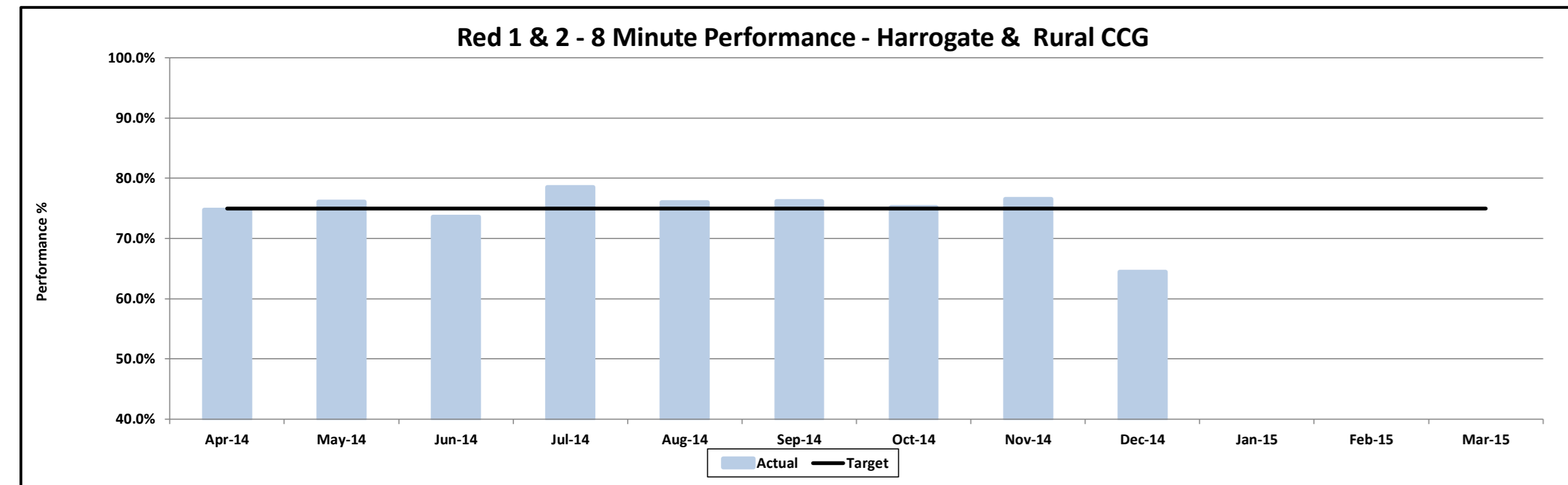


Leeds North CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual	65.0%	63.2%	59.6%	61.3%	62.4%	63.3%	68.0%	67.9%	53.9%				62.5%



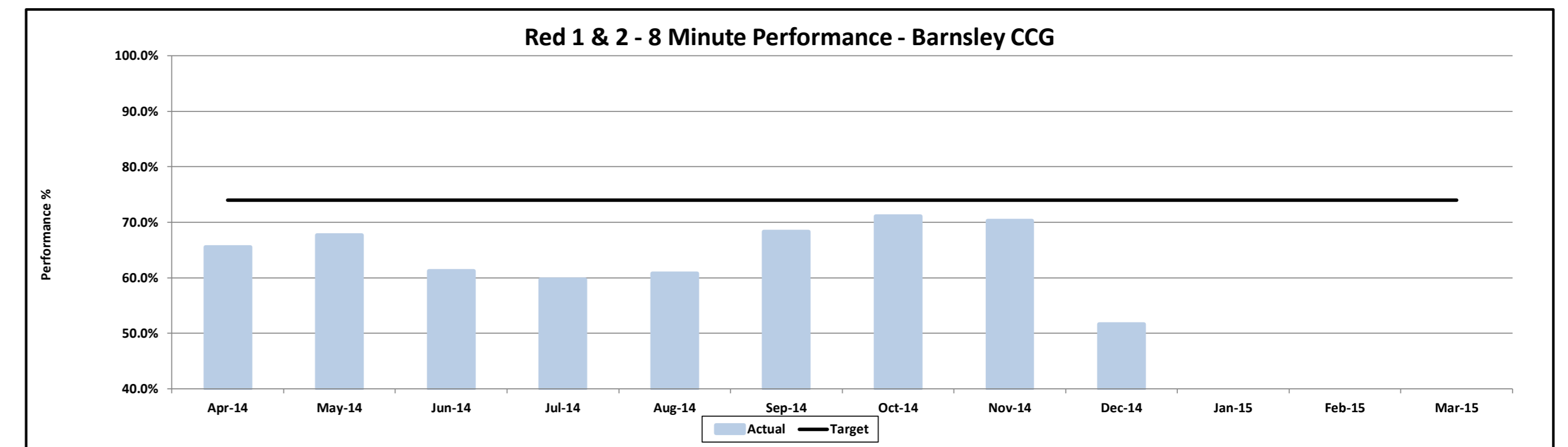
East Riding of Yorkshire CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%
Actual	65.7%	64.5%	67.6%	67.2%	71.9%	72.6%	70.7%	68.0%	62.8%				67.8%

CQUIN 2 - Red Performance by CCG

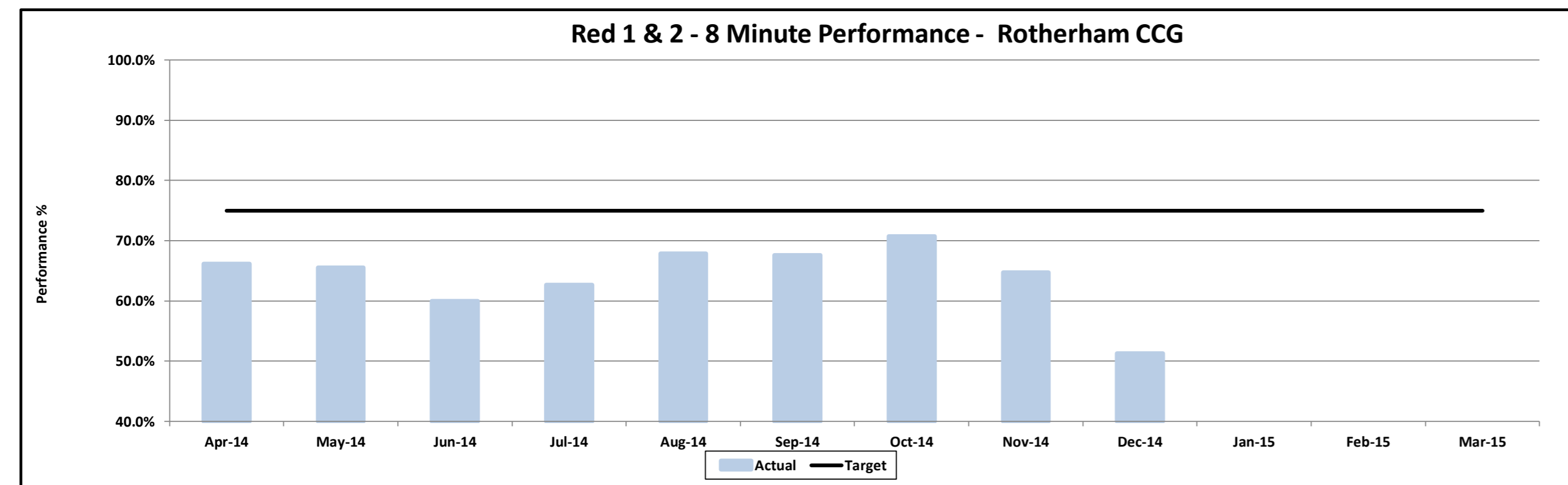


Harrogate & Rural CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual	74.7%	76.1%	73.6%	78.5%	76.0%	76.2%	75.2%	76.5%	64.4%				74.5%

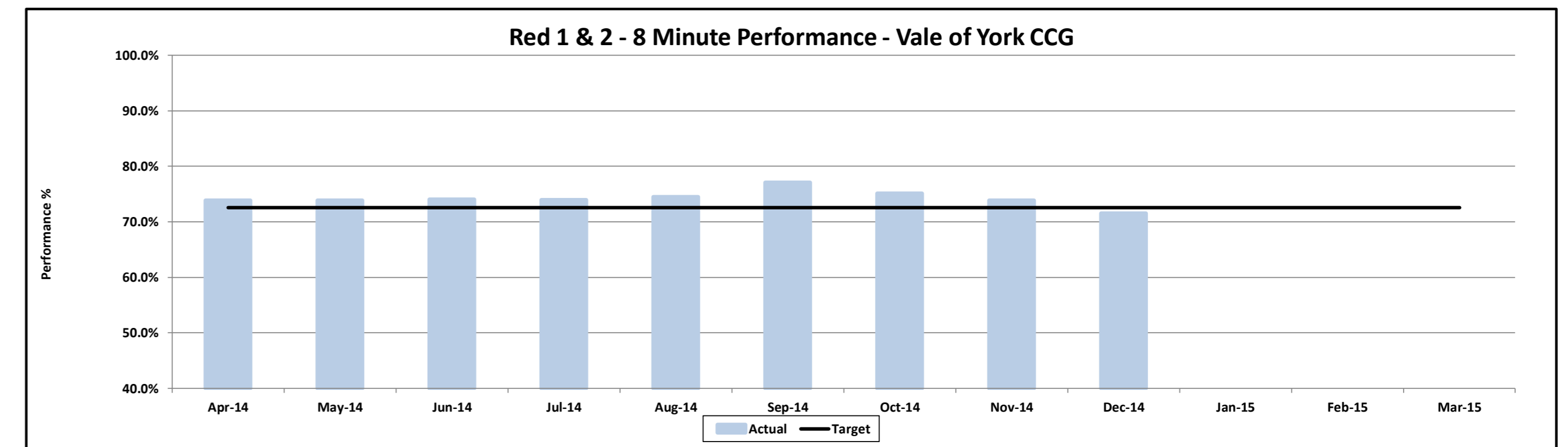
* Trajectory includes Cumbria CCG



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%	68.3%	71.1%	70.3%	51.6%				63.7%



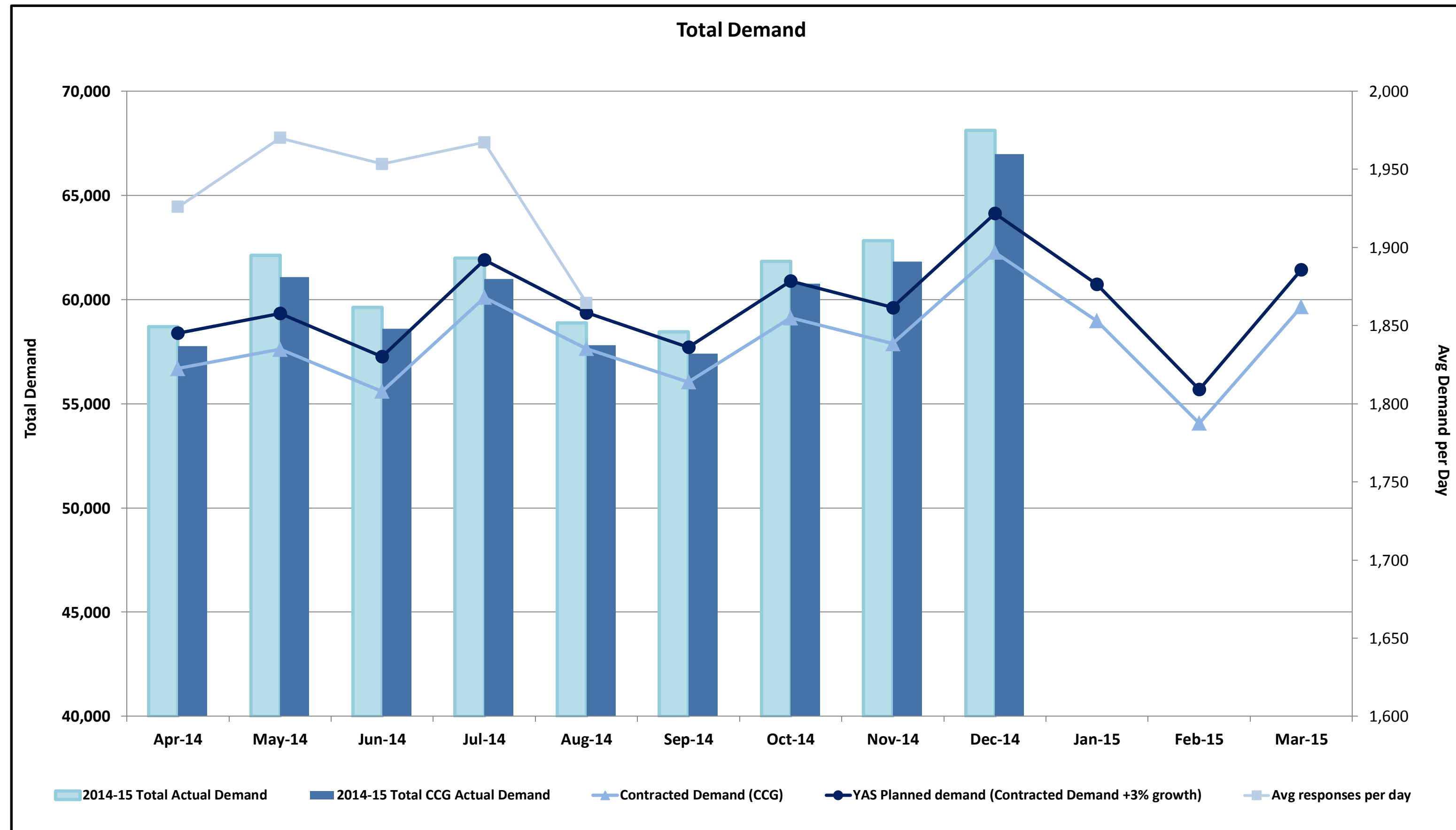
Rotherham CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual	66.1%	65.5%	60.0%	62.6%	67.8%	67.6%	70.7%	64.7%	51.3%				63.6%



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%	77.1%	75.1%	73.8%	71.5%				74.1%

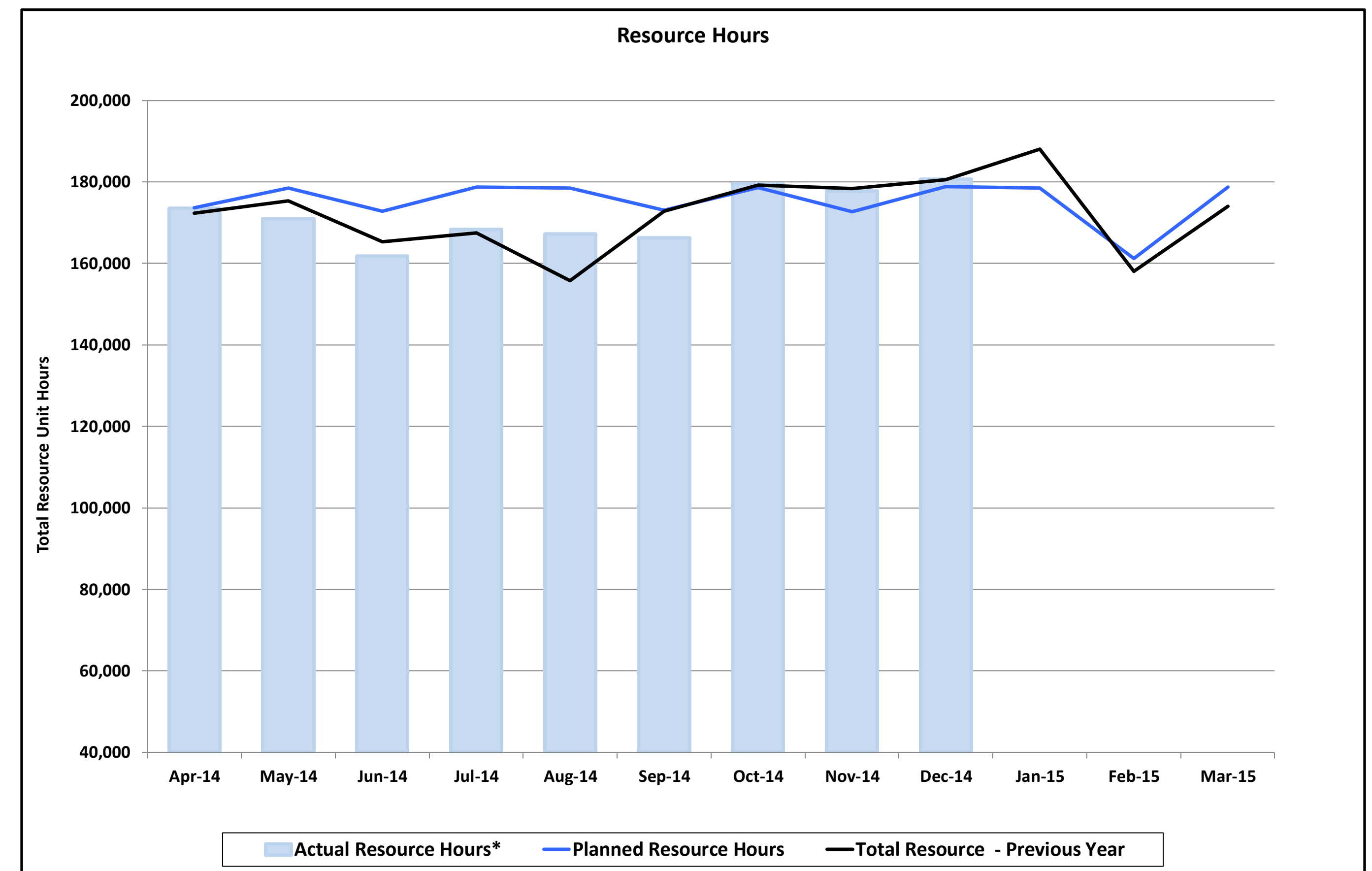
Total Demand

YTD RAG	GREEN
MTD RAG	AMBER



Resource Hours

YTD RAG	GREEN
MTD RAG	GREEN



	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	531,693	706,666
2014-15 Total Actual Demand	58,695	62,128	59,626	61,987	58,869	58,443	61,827	62,830	68,124				552,529	
% Variance Current Year to Last Year	1.7%	5.8%	5.3%	1.0%	0.6%	2.8%	3.0%	6.9%	8.0%				3.9%	
Contracted Demand (CCG)	56,686	57,609	55,584	60,107	57,637	56,036	59,119	57,878	62,255	58,963	54,063	59,638	522,911	695,575
YAS Planned demand (Contracted Demand +3% growth)	58,387	59,337	57,252	61,910	59,366	57,717	60,893	59,614	64,123	60,732	55,685	61,427	538,598	716,442
2014-15 Total CCG Actual Demand	57,775	61,072	58,600	60,983	57,799	57,406	60,761	61,816	66,972				543,184	
Variance to Contracted Demand	1.9%	6.0%	5.4%	1.5%	0.3%	2.4%	2.8%	6.8%	7.6%				3.9%	
Variance to YAS Planned Demand	-1.0%	2.9%	2.4%	-1.5%	-2.6%	-0.5%	-0.2%	3.7%	4.4%				0.9%	
Avg responses per day	1,926	1,970	1,953	1,967	1,864	1,914	1,960	2,061	2,160					

		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*	TOTAL	173,597	171,019	161,849	168,391	167,250	166,330	179,568	177,737	180,706				1,546,446
	DCA	99,706	102,595	97,070 *	100,740 *	101,582 *	69,342 *	76,258 *	106,230 *	105,064 *				858,586
	RRV	70,854	65,655	62,397	65,324	63,820	50,785	53,615	67,833	70,974				571,257
Avg Total Resource Hours per day	ALL	5,787	5,517	5,395	5,432	5,395	5,544	5,793	5,925	5,829				
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

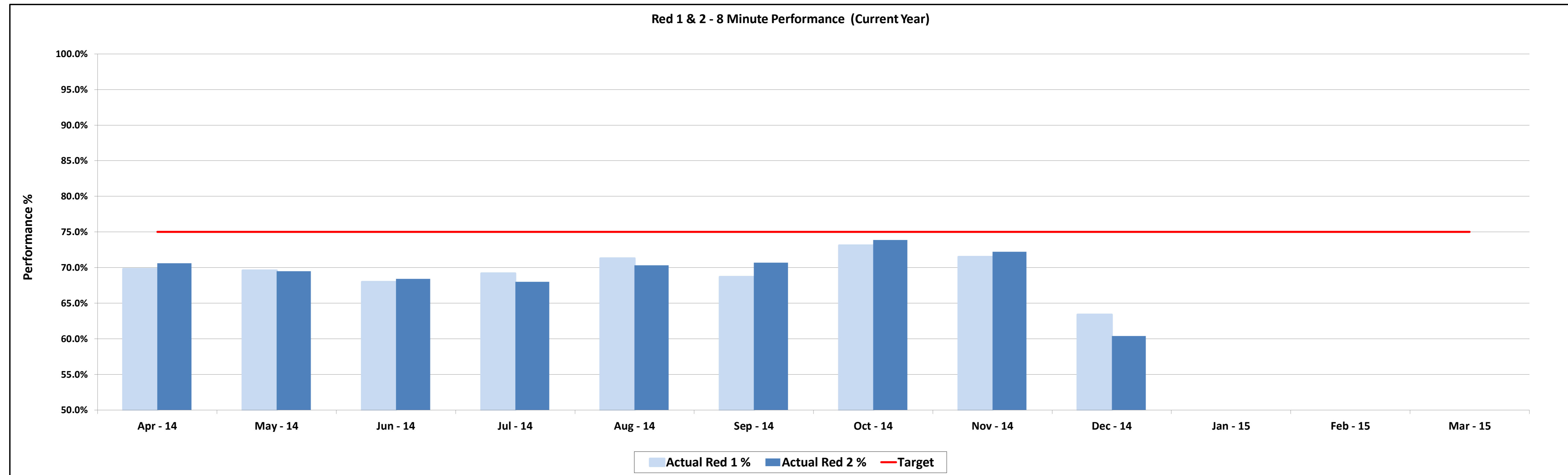
PLEASE NOTE: YAS Planned demand is based on Contracted Demand + 3% growth (a response is a distinct count of a resource arriving at scene, a resource is either a vehicle or a triaged call). Actual demand is a distinct count of a resource that has arrived scene, again this could be either a vehicle or 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 EW1		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%	68.7%	73.1%	71.5%	63.4%				69.3%
	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%	-12.9%	-6.2%	-4.7%	-9.3%				-8.1%
National Average														

RED 2 EW1		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%	70.7%	73.9%	72.2%	60.4%				69.2%
	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%	-3.7%	-0.1%	-1.8%	-11.4%				-5.9%
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%	69.3%	70.9%	77.1%	66.4%				72.2%
	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%	-15.6%	-8.9%	-5.6%	-10.3%				-8.9%
Airedale Bradford & Leeds	Current Year	67.2%	69.7%	66.4%	69.3%	72.1%	66.7%	70.0%	69.4%	61.8%				68.0%
	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%	-12.9%	-8.9%	-5.0%	-10.6%				-8.5%
North Yorkshire	Current Year	75.5%	72.3%	68.1%	71.3%	70.2%	74.7%	75.9%	71.4%	68.3%				71.9%
	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%	-7.4%	-1.6%	-0.5%	-5.6%				-2.9%
The Humber	Current Year	72.2%	70.1%	72.4%	72.6%	73.6%	66.1%	71.6%	73.6%	63.1%				70.6%
	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%	-18.9%	-13.0%	-1.0%	-6.1%				-8.5%
South Yorkshire	Current Year	66.8%	63.8%	64.4%	67.1%	66.8%	69.3%	77.2%	69.2%	61.1%				67.2%
	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%	-10.3%	-0.8%	-6.9%	-10.5%				-9.4%

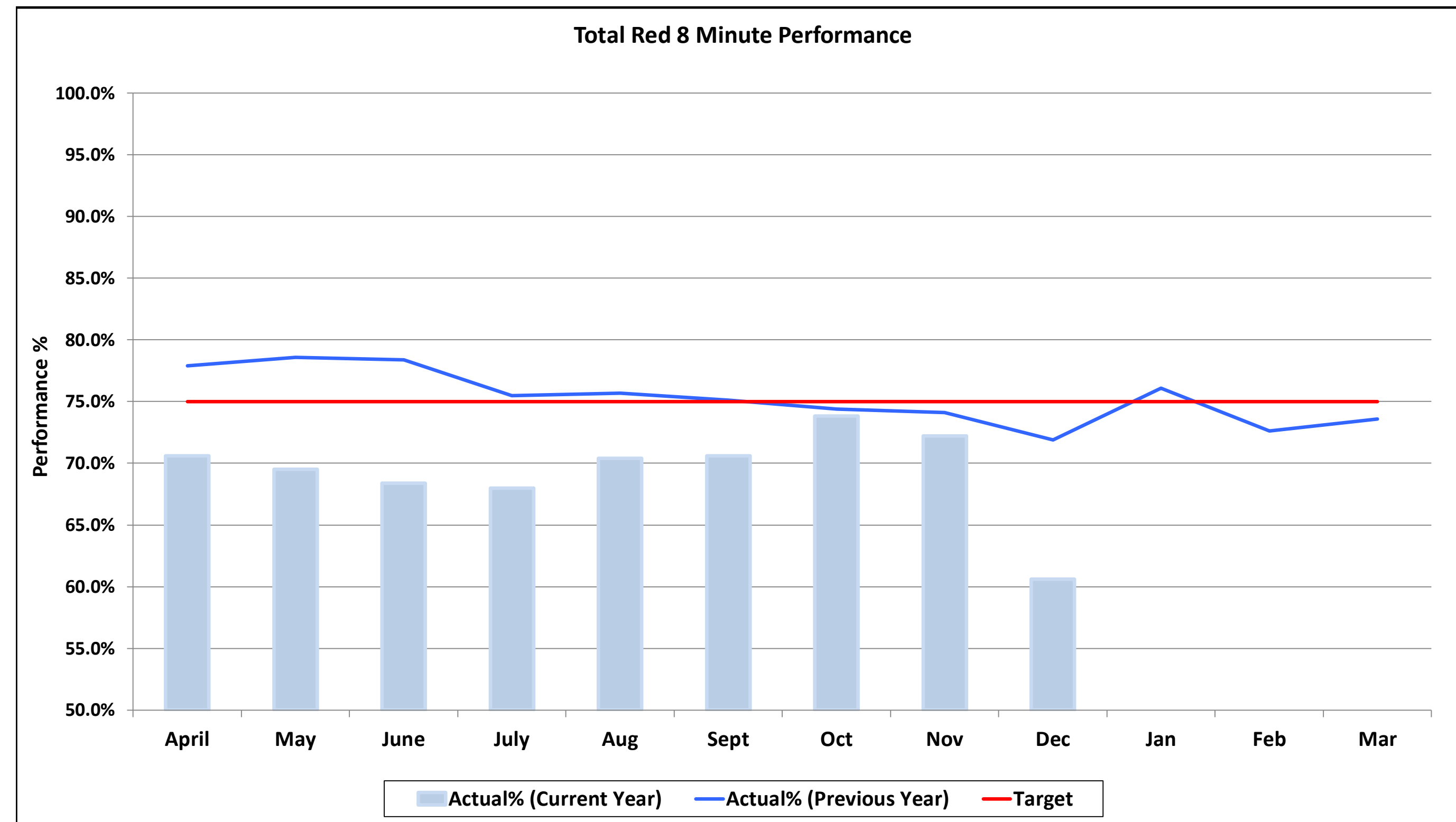
Please Note: National Average will always be 1 month in arrears

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%	69.0%	72.5%	74.2%	58.3%				69.0%
	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%	-7.5%	-3.3%	-2.0%	-15.1%				-8.2%
Airedale Bradford & Leeds	Current Year	68.1%	67.6%	65.8%	65.1%	68.6%	68.5%	72.9%	70.6%	59.0%				67.2%
	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%	-6.4%	-1.7%	-3.2%	-14.2%				-8.3%
North Yorkshire	Current Year	73.6%	72.8%	74.8%	74.4%	73.0%	75.8%	75.7%	75.4%	70.2%				73.9%
	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%	4.5%	7.5%	3.6%	0.2%				2.0%
The Humber	Current Year	74.2%	72.7%	75.2%	74.9%	78.6%	78.7%	76.7%	73.0%	68.1%				74.5%
	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%	2.6%	-0.7%	-5.8%	-3.3%				-3.2%
South Yorkshire	Current Year	68.6%	67.8%	64.2%	65.2%	68.5%	68.4%	73.2%	70.8%	55.7%				66.7%
	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%	-5.4%	-0.8%	-1.3%	-15.3%				-7.4%

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

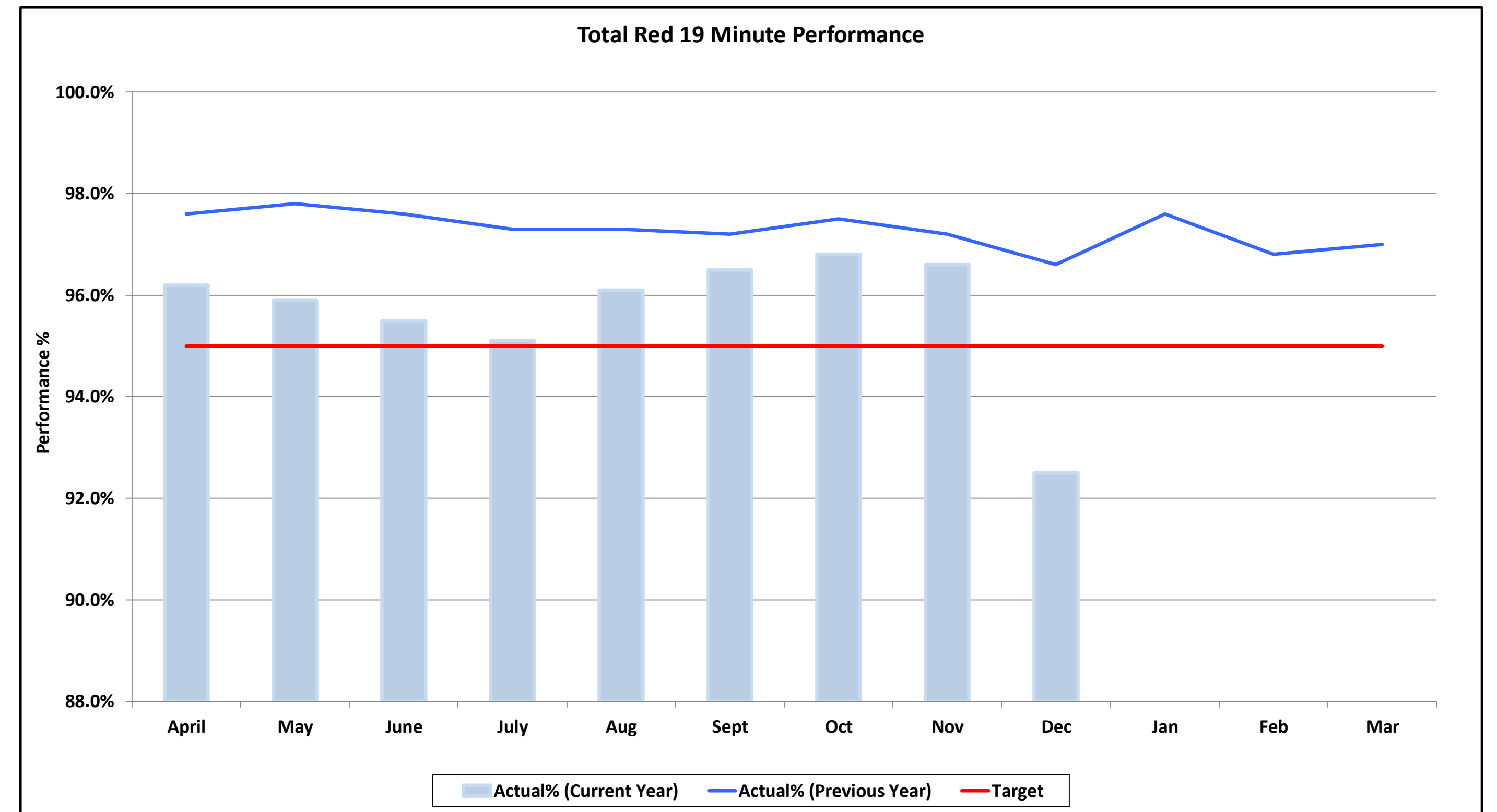
Category Red 1 & 2 8 Minute Performance HQU03_01

YTD RAG	RED
MTD RAG	RED



Category Red 1 & 2 19 Minute Performance HQU03_02

YTD RAG	GREEN
MTD RAG	AMBER



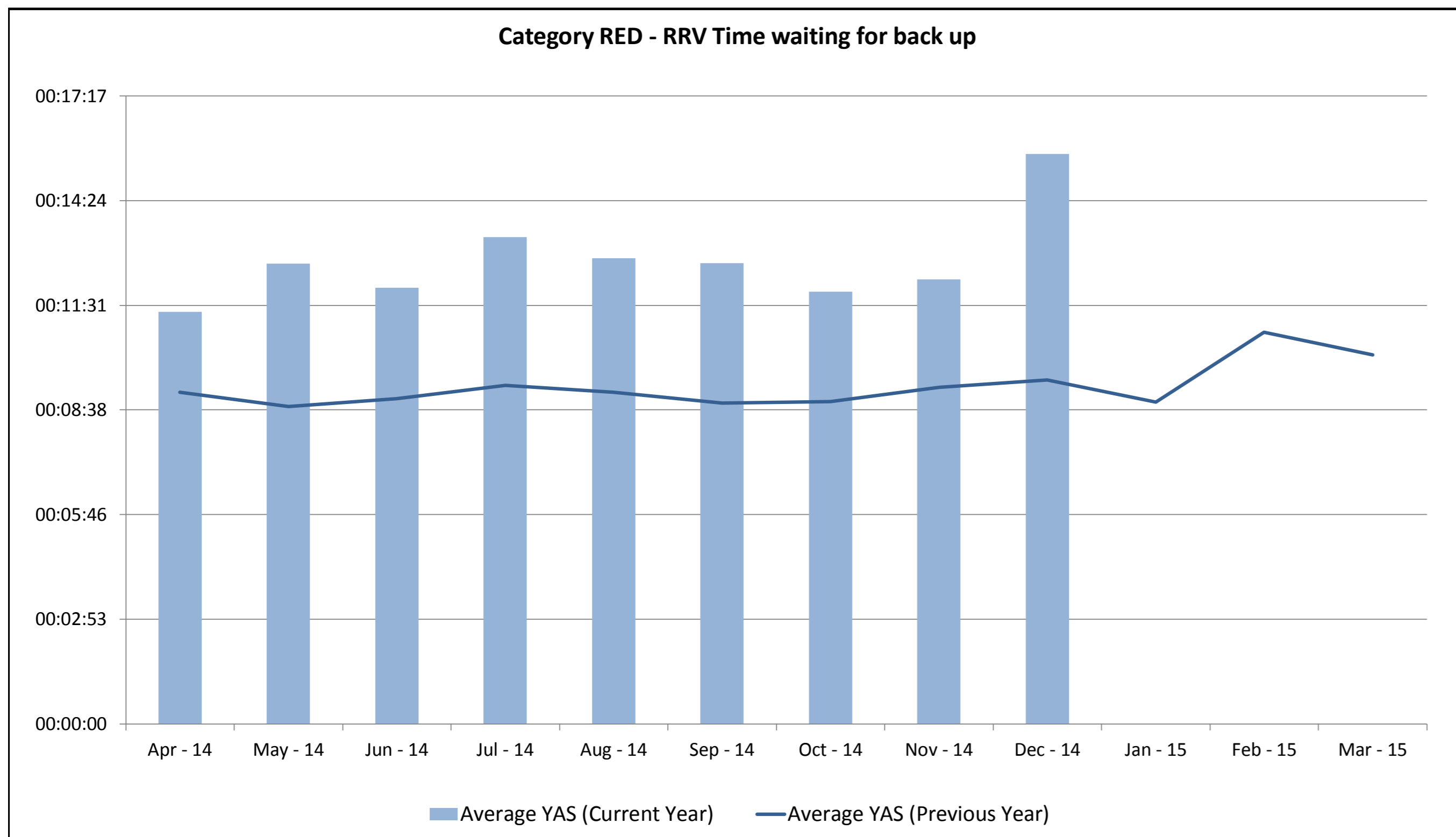
RED 8	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual% (Current Year)	70.6%	69.5%	68.4%	68.0%	70.4%	70.6%	73.8%	72.2%	60.6%				69.2%
Actual% (Previous Year)	77.9%	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%	-4.5%	-0.6%	-1.9%	-11.3%				-6.1%

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%	96.5%	96.8%	96.6%	92.5%				95.6%
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%	-0.7%	-0.7%	-0.6%	-4.1%				-1.7%
National Average													

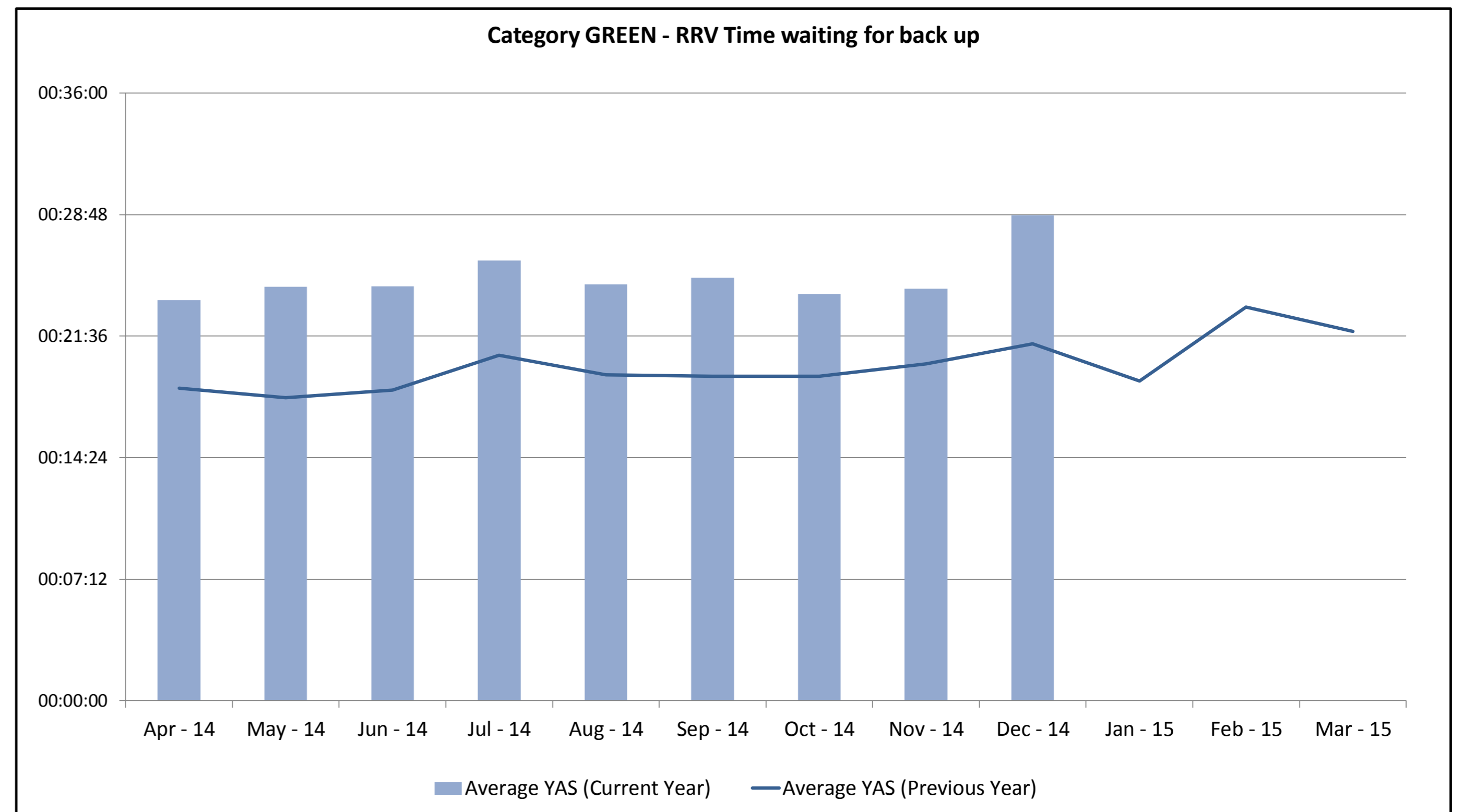
RED 8 by CBU	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Calderdale, Kirklees & Wakefield	Current Year	73.5%	70.7%	69.6%	67.1%	68.9%	69.0%	72.4%	74.4%	58.9%			69.2%
	Previous Year	79.8%	81.2%	80.5%	77.0%	77.0%	77.4%	76.2%	76.8%	73.6%	79.2%	74.5%	77.5%
	% Variance	-6.3%	-10.5%	-10.9%	-9.9%	-8.1%	-8.4%	-3.8%	-2.4%	-14.7%			-8.3%
Airedale Bradford & Leeds	Current Year	68.1%	67.8%	65.8%	65.4%	68.8%	68.4%	72.8%	70.5%	59.2%			67.3%
	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%	-6.9%	-2.2%	-3.3%	-13.9%			-8.3%
North Yorkshire	Current Year	73.7%	72.8%	74.4%	74.2%	72.8%	75.7%	75.7%	75.1%	70.0%			73.8%
	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%	3.3%	6.8%	3.3%	-0.3%			1.6%
The Humber	Current Year	74.1%	72.5%	75.0%	74.7%	78.2%	77.9%	76.4%	73.0%	67.8%			74.2%
	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%	0.9%	-1.7%	-5.6%	-3.4%			-3.6%
South Yorkshire	Current Year	68.5%	67.5%	64.2%	65.3%	68.4%	68.4%	73.5%	70.7%	56.1%			66.7%
	Previous Year	78.0%	77.0%	79.1%	74.3%	75.7%	74.4%	74.3%	72.4%	71.0%	75.8%	69.0%	74.3%
	% Variance	-9.5%	-9.5%	-14.9%	-9.0%	-7.3%	-6.0%	-0.8%	-1.7%	-14.9%			-7.6%

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%	97.1%	97.2%	97.6%	92.8%			96.3%
	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%	-1.2%	-1.0%	-0.3%	-4.9%			-1.9%
Airedale Bradford & Leeds	Current Year	96.2%	96.9%	95.9%	95.6%	96.7%	97.0%	97.8%	97.6%	93.6%			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%	-1.0%	-0.4%	-0.5%	-3.9%			-1.8%
North Yorkshire	Current Year	94.1%	93.0%	93.6%	92.8%	93.1%	93.8%	93.6%	93.3%	91.3%			93.1%
	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%	-0.1%	-0.4%	-0.6%	-2.0%			-0.8%
The Humber	Current Year	95.0%	93.1%	94.5%	93.7%	95.6%	95.5%	94.9%	94.5%	90.8%			94.1%
	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%	0.3%	-1.0%	-1.6%	-3.2%			-1.6%
South Yorkshire	Current Year	97.1%	97.1%	96.2%	96.4%	97.3%	97.4%	98.2%	97.6%	92.5%			96.5%
	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%	-1.1%	-0.6%	-0.4%	-5.0%			-1.8%

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	00:12:41	00:11:54	00:12:14	00:15:41			
95th Percentile YAS (Current Year)	00:34:00	00:39:14	00:50:51	00:40:24	00:39:00	00:39:07	00:35:40	00:35:45	00:46:51			
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	00:25:03	00:24:06	00:24:25	00:28:46			
95th Percentile YAS (Current Year)	01:02:41	01:04:23	01:04:59	01:08:01	01:05:22	01:06:59	01:05:03	01:04:45	01:15:02			
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	00:12:59	00:12:00	00:12:14	00:16:14		
	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
Leeds & Bradford	Current Year	00:11:47	00:11:48	00:12:05	00:13:52	00:13:17	00:13:18	00:12:44	00:12:42	00:16:38		
	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
North Yorkshire	Current Year	00:09:50	00:10:32	00:10:38	00:10:26	00:10:18	00:09:18	00:09:42	00:10:17	00:11:37		
	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
The Humber	Current Year	00:08:57	00:09:51	00:09:34	00:10:29	00:09:25	00:09:48	00:10:01	00:10:56	00:12:36		
	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
South Yorkshire	Current Year	00:13:40	00:17:41	00:17:01	00:15:27	00:15:31	00:14:26	00:12:29	00:13:08	00:17:27		
	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

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	00:25:56	00:24:23	00:23:46	00:29:09		
	Previous Year	00:19:22	00:18:31	00:18:38	00:20:39	00:19:59	00:18:28	00:18:15	00:25:45	00:18:54	00:16:34	00:21:29
Leeds & Bradford	Current Year	00:25:14	00:24:35	00:24:54	00:28:08	00:27:30	00:28:14	00:25:45	00:25:06	00:29:33		
	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
North Yorkshire	Current Year	00:17:32	00:19:24	00:18:24	00:18:29	00:17:40	00:18:06	00:19:58	00:18:41	00:20:44		
	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
The Humber	Current Year	00:19:28	00:19:13	00:19:29	00:20:14	00:17:25	00:19:40	00:22:19	00:24:26	00:29:25		
	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
South Yorkshire	Current Year	00:28:09	00:29:54	00:31:15	00:29:46	00:27:23	00:26:42	00:24:40	00:26:38	00:31:42		
	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

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	62,255	58,245	58,963	52,275	54,063	61,302	59,638
	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	64,123	62,020	60,732	55,905	55,685	65,130	61,427
	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	57,406	58,785	60,761	57,583	61,816	61,881	66,972	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	58,443	60,026	61,827	58,760	62,830	63,072	68,124	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%	2.4%	4.4%	2.8%	4.1%	6.8%	-0.4%	7.6%	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%	1.3%	-1.0%	1.5%	-0.7%	5.4%	-4.8%	6.2%	-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	£234,934	£452,471	£292,414	£411,405	£680,992	£39,982	£799,659	£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	01:05:02	01:00:26	01:04:42	01:01:29	01:05:59	01:02:12	01:12:20	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	166,330	179,240	179,568	178,421	177,737	180,534	180,706	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	2,112	2,120	2,118	2,087	2,130	2,069	2,119	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	31,007	26,069	37,673	22,860	40,832	21,996	29,983	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)	£267,225	£715,637	£31,335	£515,311	£472,713	£361,908	(£363,294)	(£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%	29.7%	30.4%	27.9%	28.5%	25.3%	29.5%	25.4%	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	0.34	0.33	0.32	0.34	0.32	0.36	0.38	0.32		0.33		0.34	
Performance	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%	70.6%	74.4%	73.8%	74.1%	72.2%	71.9%	60.6%	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

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	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	1,416	1,898	2,422	1,922	3,478	2,183	5,267	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%	5.2%	5.2%	4.4%	4.7%	4.0%	4.4%	3.7%	4.0%	6.2%	4.1%	9.6%	4.4%	13.7%	3.7%		4.0%		4.1%		
	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	1,416	1,223	2,422	1,212	3,478	1,423	5,267	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)

December 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	114	86.8%	485	83.9%	13	84.6%	320	78	0
HARROGATE & RURAL CCG	130	83.8%	461	81.3%	21	90.5%	370	107	0
SCARBOROUGH & RYEDALE CCG	91	92.3%	404	87.4%	24	87.5%	321	92	3
VALE OF YORK CCG	296	83.4%	1093	85.5%	53	86.8%	617	202	6
NORTH YORKSHIRE CBU	631	85.4%	2443	84.7%	111	87.4%	1628	479	9
ERY CCG	296	79.1%	950	75.4%	40	87.5%	714	203	4
HULL CCG	321	77.9%	953	70.1%	74	77.0%	576	432	8
EAST YORKSHIRE CBU	617	78.4%	1903	72.7%	114	80.7%	1290	635	12
CALDERDALE CCG	224	76.3%	718	69.4%	34	88.2%	447	205	15
GREATER HUDDERSFIELD CCG	243	77.8%	790	69.9%	21	61.9%	437	184	26
NORTH KIRKLEES CCG	190	79.5%	564	66.7%	22	86.4%	401	203	30
WAKEFIELD CCG	334	82.0%	1138	73.7%	50	80.0%	931	301	81
CALD / KIRK & WAKEFIELD CBU	991	79.2%	3210	70.6%	127	80.3%	2216	893	152
AIREDALE, WHARFEDAILE & CRAVEN CCG	156	77.6%	480	71.5%	17	88.2%	320	112	19
BRADFORD CITY CCG	107	62.6%	360	65.3%	17	47.1%	107	161	1
BRADFORD DISTRICTS CCG	350	74.9%	1071	61.7%	36	69.4%	474	423	13
LEEDS NORTH CCG	217	77.4%	603	67.3%	26	69.2%	371	209	3
LEEDS SOUTH & EAST CCG	296	81.8%	1036	68.8%	46	71.7%	671	361	7
LEEDS WEST CCG	282	78.0%	963	64.2%	37	56.8%	458	341	3
LEEDS, BRADFORD & AIREDALE CBU	1408	76.7%	4513	65.9%	179	67.0%	2401	1607	46
BARNESLEY CCG	254	71.3%	830	66.9%	21	42.9%	461	234	5
DONCASTER CCG	360	80.0%	994	74.8%	51	84.3%	579	351	87
ROTHERHAM CCG	329	73.6%	900	64.2%	34	79.4%	452	288	3
SHEFFIELD CCG	619	73.1%	1846	63.4%	93	67.3%	1090	698	9
SOUTH YORKSHIRE CBU	1562	74.4%	4570	66.6%	199	71.1%	2582	1571	104
ECP	27		149		5		362		
OOA/UNKNOWN	28	67.9%	79	82.3%	10	80.0%	34	82	12
YORKSHIRE AMBULANCE SERVICE	5264	77.7%	16867	70.6%	745	75.7%	10513	5267	335

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	903	75.9%	4173	87.6%	232	89.2%	3417	427	10
HARROGATE & RURAL CCG	817	80.9%	4092	88.8%	256	89.5%	3432	459	10
SCARBOROUGH & RYEDALE CCG	832	77.9%	3643	89.5%	341	88.3%	2993	401	15
VALE OF YORK CCG	2023	78.5%	9125	88.8%	626	87.4%	5981	1193	124
NORTH YORKSHIRE CBU	4575	78.3%	21033	88.7%	1455	88.2%	15823	2480	159
ERY CCG	2200	74.9%	8381	84.0%	478	81.6%	6518	1026	15
HULL CCG	2234	77.1%	9033	81.2%	716	82.8%	6165	1741	40
EAST YORKSHIRE CBU	4434	76.0%	17414	82.5%	1194	82.3%	12683	2767	55
CALDERDALE CCG	1527	73.5%	5994	77.6%	360	85.3%	4861	953	183
GREATER HUDDERSFIELD CCG	1577	73.9%	6390	77.3%	339	73.5%	4361	1237	247
NORTH KIRKLEES CCG	1294	75.7%	4786	76.4%	254	78.7%	3567	970	268
WAKEFIELD CCG	2605	77.6%	10172	81.0%	623	79.3%	8330	1704	731
CALD / KIRK & WAKEFIELD CBU	7003	75.5%	27342	78.6%	1576	79.3%	21119	4864	1429
AIREDALE, WHARFEDAILE & CRAVEN CCG	1112	68.7%	4224	74.8%	175	74.3%	3105	545	101
BRADFORD CITY CCG	1038	73.5%	3547	72.2%	296	74.0%	1162	988	2
BRADFORD DISTRICTS CCG	2615	73.5%	9542	72.2%	437	74.0%	4630	1923	95
LEEDS NORTH CCG	1460	73.2%	5515	72.7%	279	78.9%	3621	1074	10
LEEDS SOUTH & EAST CCG	2363	75.8%	9180	76.1%	627	81.0%	6364	2027	68
LEEDS WEST CCG	2193	73.6%	9065	72.3%	428	72.4%	4860	1731	9
LEEDS, BRADFORD & AIREDALE CBU	10781	73.3%	41073	72.9%	2242	76.1%	23742	8288	285
BARNESLEY CCG	1882	74.8%	7264	80.3%	382	75.4%	4636	1072	40
DONCASTER CCG	2858	74.4%	9074	82.1%	717	83.4%	6083	1692	651
ROTHERHAM CCG	2220	73.2%	7865	76.1%	467	74.3%	4235	1452	22
SHEFFIELD CCG	4232	72.2%	16390	74.8%	1102	76.4%	10251	3162	70
SOUTH YORKSHIRE CBU	11192	73.4%	40593	77.6%	2668	77.7%	25205	7378	783
ECPs	233		1375		78		3485		
OOA/UNKNOWN	160	72.5%	619	86.8%	37	86.5%	230	366	76
YORKSHIRE AMBULANCE SERVICE	38378	74.6%	149449	78.7%	9250	79.9%	102287	26143	2787

*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	GREEN	GREEN				GREEN	GREEN
Emergency Plans	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN	GREEN
Business Continuity Plans	AMBER	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN	GREEN
Information Provision	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN	GREEN
Co-operation with other responders	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN	GREEN
Training	GREEN	GREEN	GREEN	GREEN	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	1/8	Time to Answer - 99%	On going recruitment programme to keep call taking staff at establishment. Managing abstractions though weekly resource meetings. Workforce modelling carried out as currently seen a 9% increase in 999 calls YTD. New rotas to be in place April 15.	Locality Director EOC	Ongoing
2.7	2/5	STROKE - 60	Stroke 60 remains a challenge to deliver nationally. The Stroke 60 ACQI has been raised at a national level and the national lead for stroke care has presented to NASMeD.	Head of Clinical Effectiveness	Ongoing
2.7	2/5	ROSC	The Trust's resuscitation strategy concentrates on improving survival to discharge from out of hospital cardiac arrest rather than the measure of Return Of Spontaneous Circulation (ROSC) at hospital which is not an effective patient-centric measure of good practice. This is demonstrated by the Trust's survival to discharge rate for the Utstein Comparator group of 39.8% YTD which remains the highest in England for the fourth consecutive month.	Head of Clinical Effectiveness	On-going
2.7	5/5	STEMI - 150	YAS achieved 87.2% in August for STEMI 150 with no exceptions due to YAS operational delays.	Head of Clinical Effectiveness	On-going

Comments		
<p>Top Third</p> <p>Time to Answer - 50% Cat Red 19 minute response Time to Treat - 95% Time to Treat - 99% STEMI - Care Cardiac - STD Cardiac - STD Utstein Recontact 24hrs Telephone Recontact 24hrs on Scene</p>	<p>Middle Third</p> <p>Time to Answer - 95% Abandoned calls 95 Percentile Red 1 only Response Time Time to Treat - 50% Stroke - Care Frequent caller * Resolved by telephone Non A&E ROSC - Utstein</p>	<p>Bottom Third</p> <p>Cat Red 8 minute response - RED 1 Cat Red 8 minute response - RED 2 STEMI - 150 ROSC Time to Answer - 99% Stroke - 60</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	November
Time to Answer - 95% EWI	mm:ss	0:15	0:15	0:01	0:11	0:52	0:24	0:34	0:26	0:18	0:05	0:22	6	November
Time to Answer - 99%	mm:ss	0:53	1:06	0:09	0:56	1:42	1:07	1:40	1:07	0:56	0:45	1:11	8	November
Abandoned calls EWI	%	0.43	0.92	1.19	0.37	3.47	4.09	2.36	0.84	0.80	0.73	0.94	7	November
Cat Red 8 minute response - RED 1	%	73.1	69.3	81.2	68.7	71.3	71.5	75.9	75.5	75.3	79.4	70.2	8	November
Cat Red 8 minute response - RED 2	%	73.2	61.7	75.4	61.5	74.3	72.6	74.5	74.5	75.0	75.1	70.5	8	November
95 Percentile Red 1 only Response Time	mm:ss	14:13	15:38	9:06	19:08	13:33	14:13	14:00	14:03	14:31	11:33	14:06	6	November
Cat Red 19 minute response	%	94.3	90.6	96.4	93.1	94.9	94.8	95.6	95.3	94.8	97.0	96.1	2	November
Time to Treat - 50% EWI	mm:ss	8:37	7:22	5:58	7:17	6:14	6:22	6:00	5:57	5:46	6:00	6:09	5	November
Time to Treat - 95%	mm:ss	16:40	23:04	16:49	19:40	20:17	19:11	18:02	18:56	19:32	16:12	15:55	1	November
Time to Treat - 99%	mm:ss	25:36	36:22	21:22	34:49	33:05	35:05	30:02	28:33	32:07	24:50	24:25	1	November
STEMI - Care	%	80.1	82.2	85.0	73.4	92.8	87.9	69.9	77.7	88.9	71.0	83.2	4	August
Stroke - Care	%	98.6	97.4	96.4	96.7	98.8	99.2	99.1	94.0	97.6	93.6	97.8	5	August
Frequent caller *	%	0.19	0.19	1.17	1.72	1.05	0.83	1.92	0.00	0.00	0.00	2.42	7	November
Resolved by telephone	%	7.2	6.8	8.6	12.5	6.3	3.4	5.4	10.7	6.9	5.3	6.5	6	November
Non A&E	%	31.4	42.5	47.0	34.3	31.3	27.3	42.2	42.9	52.0	37.6	33.0	7	November
STEMI - 150	%	90.6	93.5	63.6	93.7	87.2	84.0	90.3	91.2	80.5	89.7	86.2	8	August
Stroke - 60	%	60.9	56.4	52.7	62.3	73.8	72.8	56.5	69.6	58.9	49.3	57.4	8	August
ROSC	%	18.3	20.8	23.5	33.6	29.0	28.0	40.1	30.2	24.4	27.5	21.5	8	August
ROSC - Utstein	%	31.0	45.1	50.0	60.4	59.2	43.1	50.8	60.6	43.2	46.2	46.6	5	August
Cardiac - STD	%	5.7	6.4	7.8	6.6	3.6	7.2	17.1	9.1	9.8	9.0	10.0	2	August
Cardiac - STD Utstein	%	12.6	16.5	33.3	20.9	19.6	20.6	27.9	27.9	26.7	28.6	39.8	1	August
Recontact 24hrs Telephone EWI	%	7.3	10.4	4.9	1.5	13.7	11.2	11.6	10.4	13.6	11.4	6.2	2	November
Recontact 24hrs on Scene EWI	%	4.2	5.4	3.8	7.3	5.3	5.9	4.9	4.4	5.8	5.2	3.7	1	November

*Only 7 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	2.11	9/9	East	KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 88.2% Target 89.26% position on November improved.	Locality Manager East Yorkshire	On-going	Amber
RED	2.12	4/9	East	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 57.4% Target 82.14% KPI 4 this measurement for East is complex in calculation due to historical practices of booking and needs to be re-defined.	Locality Manager East Yorkshire	On-going	Red
RED	2.10	9/9	North	KPI 2 - Patients arriving on time for their appointment	Achieved 81.6% Target 82.00% position on November improved with an increase of 2.5%	Locality Manager North Yorkshire	On-going	Amber
RED	2.12	9/9	North	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 95.3 Target 99.00% position on November improved with an increase of 0.6%	Locality Manager North Yorkshire	On-going	Amber
RED	2.9	8/9	South	KPI 1 Patients Picked up within 120 minutes before Appointment	Achieved 93.1% Target 96.0% position on November improved with an increase of 0.1% and YTD 94.7%	Locality Manager South Yorkshire	On-going	Amber
RED	2.10	9/9	South	KPI 2 - Patients arriving on time for their appointment	Achieved 81.6% Target 90.0% position on November improved with an increase of 0.4% and YTD 85.8%	Locality Manager South Yorkshire	On-going	Red
RED	2.11	9/9	South	KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 85.8% Target 95%, YTD 89.4%, higher acuity / complex patients in month	Locality Manager South Yorkshire	On-going	Red
RED	2.12	9/9	South	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 90.5% Target 98.0%	Locality Manager South Yorkshire	On-going	Red
RED	2.12	3/7	West	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 95.4% Target 96% YTD 96.5%	Locality Manager West Yorkshire	On-going	Green

Directors Comments on Actual Performance

December

West Yorkshire

All four KPI's remain positive exceeding YTD target. The sustained increase in the number of patient's booked double crew / stretcher continues to stretch our resources which increase costs and challenges available finances. Changing scheduling patterns to cope with the increase in higher mobility's and a noticed impact on patients travelling further for specialist treatment has also increased journey cost. West Yorkshire introduced new rota patterns mid- November which has seen marginal improvements in performance, however staff reluctance to work additional overtime due to I/A has impacted on our delivery in terms of more reliance on sub-contract spend.

South Yorkshire

KPI 1 –Picked up within 120 mins before appointment

Performance against this indicator has been positive with all SY CCG areas South Yorkshire has shown some deterioration against other KPIs and the downward trend reflects South Yorkshire's higher than average threshold for KPI compliance. KPI - 2, 3 & 4 is minus 4- 5% average off track YTD. Discussions with South Yorkshire CCGs regarding more complex mobility patients and higher volumes of Stretcher & T2 continue to be a challenge set against financial constraints.

North Yorkshire

KPI 1-2 3 remain positive YTD with the exception of KPI 4 where we strive to improve on correct data capture. The sustained increase in the number of patient's booked double crew / Stretcher is negatively affecting performance. Scheduling patterns to cope with the increase in higher mobility's along with a noticed impact on patients travelling further for specialist treatment has increased journey cost.

East Yorkshire

KPI 1&2 remain very positive with KPI 3 off track at 3% YTD. The sustained increase in the number of patient's booked double crew / Stretcher is negatively affecting performance. Scheduling patterns to cope with the increase in higher mobility's along with a noticed impact on patients travelling further for specialist treatment has increased journey cost.

Recruitment and training for both Band 2 and Band 3 vacancies continues as PTS staff move to vacancies within the YAS A&E tier. Current vacancy levels across all Operational PTS is currently circa 5% which is a positive improvement (12%- Aug 2014)

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

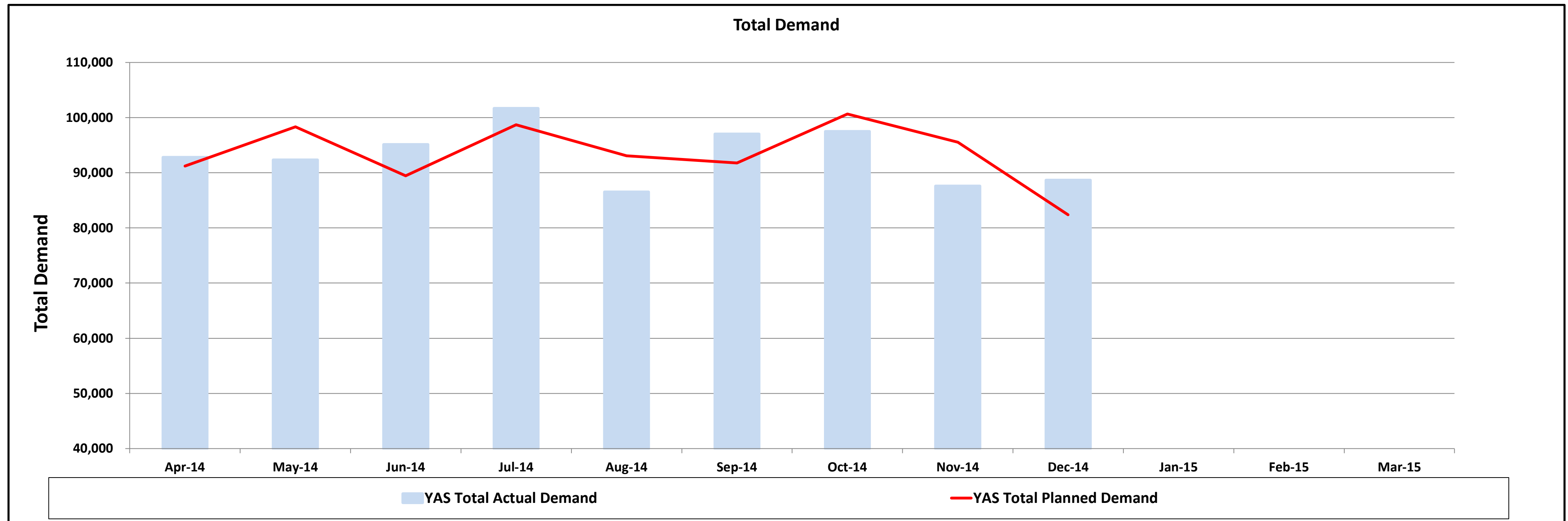
		Goal weighting (% of CQUIN scheme available)	Expected Financial Value of Goal	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Year End	
1. Friends and Family - Implementation of Staff FFT	North Consortia	20.00%	£27,284	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN	
	South Consortia		£27,284	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
	East Consortia		£17,061	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN
	West Consortia		£61,993	GREEN	GREEN	GREEN	GREEN	GREEN	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	AMBER	GREEN	GREEN	GREEN				GREEN	
	South Consortia		£54,568	GREEN	GREEN	GREEN	AMBER	GREEN	AMBER	GREEN	GREEN	GREEN				GREEN	
	East Consortia		£34,121	GREEN	GREEN	GREEN	AMBER	GREEN	AMBER	GREEN	GREEN	GREEN				GREEN	
	West Consortia		£122,186	GREEN	GREEN	GREEN	AMBER	GREEN	AMBER	GREEN	GREEN	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	GREEN	GREEN	GREEN				GREEN	
	South Consortia		£54,568	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN	
	East Consortia		£34,121	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN				GREEN	
	West Consortia		£122,186	GREEN	GREEN	GREEN	GREEN	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
<p>On-going work to negotiate and conclude the 15/16 CQUIN schemes has resulted in a provisional agreement of two region wide CQUIN schemes next year. January should be the conclusion of this work.</p> <p>The Q3 report from 14/15 CQUINS are currently in draft format and are expected to be submitted on-time as per the schedule.</p>

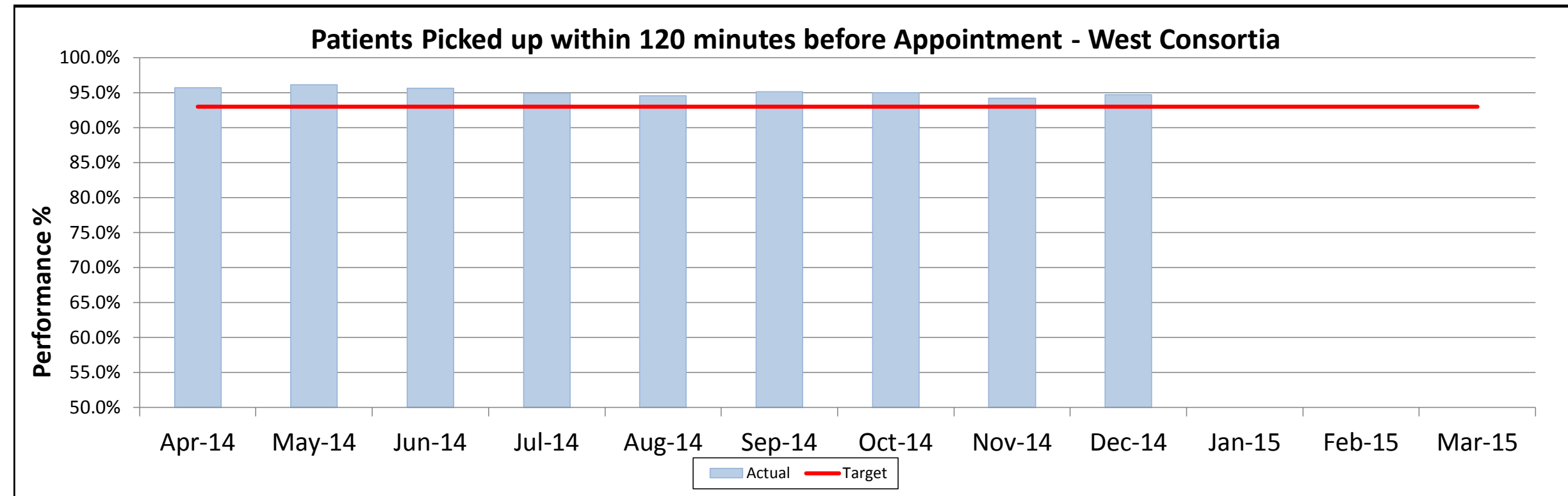
PTS Demand

	YTD RAG	GREEN
↔	MTD RAG	GREEN

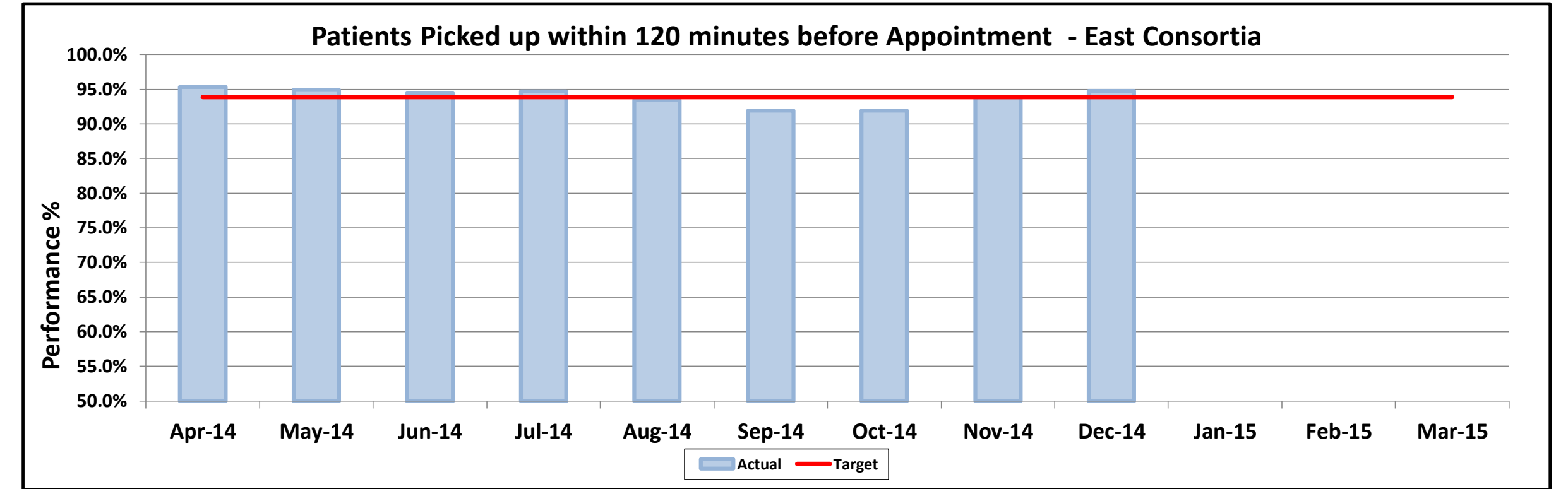


PTS Demand by Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
West Consortia Planned Demand	45,344	51,587	45,016	49,662	49,790	46,201	51,860	49,486	41,189				430,135
West Consortia Actual Demand	48,069	48,150	49,702	52,711	44,734	49,637	51,298	46,176	47,278				437,755
East Consortia Planned Demand	9,276	9,372	8,715	9,645	8,559	9,224	9,748	9,201	8,504				82,244
East Consortia Actual Demand	9,223	9,253	9,153	9,575	8,566	9,146	9,295	8,530	8,421				81,162
South Consortia Planned Demand	25,060	25,397	24,132	26,762	23,149	24,661	26,559	24,925	21,859				222,504
South Consortia Actual Demand	24,071	23,829	24,629	26,826	22,733	26,285	25,280	22,631	22,134				218,418
North Consortia Planned Demand	11,510	11,985	11,575	12,626	11,568	11,697	12,468	11,900	10,846				106,175
North Consortia Actual Demand	11,432	11,094	11,610	12,563	10,481	11,943	11,598	10,254	10,809				101,784
YAS Total Planned Demand	91,190	98,341	89,438	98,695	93,066	91,783	100,635	95,512	82,398				841,058
YAS Total Actual Demand	92,795	92,326	95,094	101,675	86,514	97,011	97,471	87,591	88,642				839,119
% Variance Planned V Actual	1.8%	-6.1%	6.3%	3.0%	-7.0%	5.7%	-3.1%	-8.3%	7.6%				-0.2%

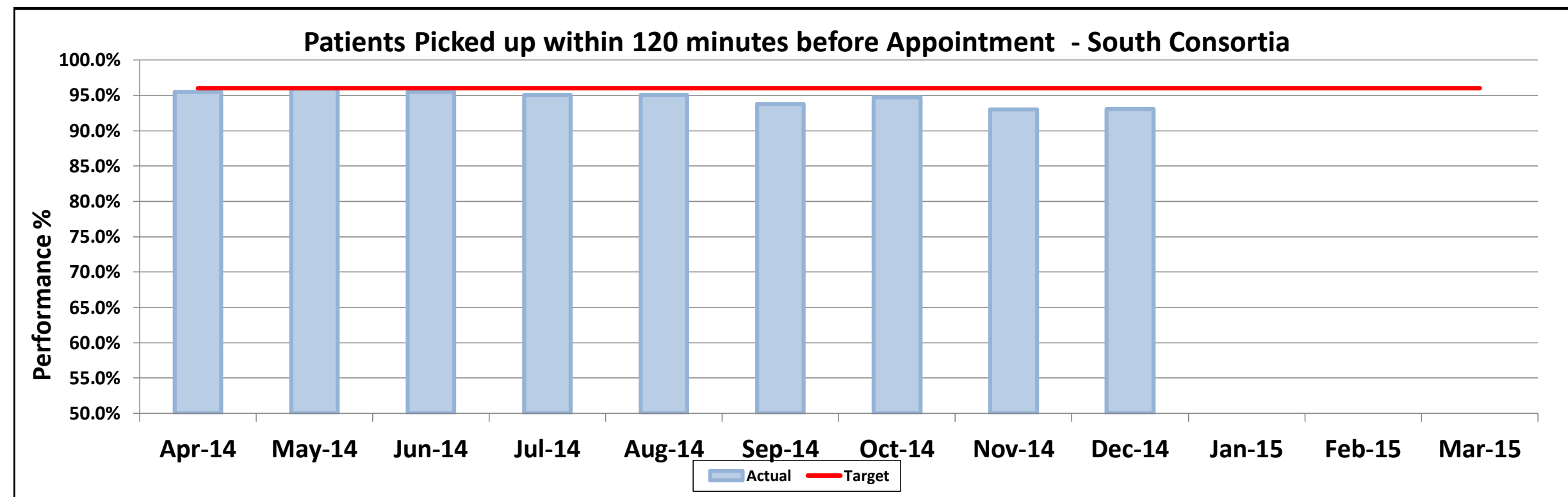
Arrival - KPI 1



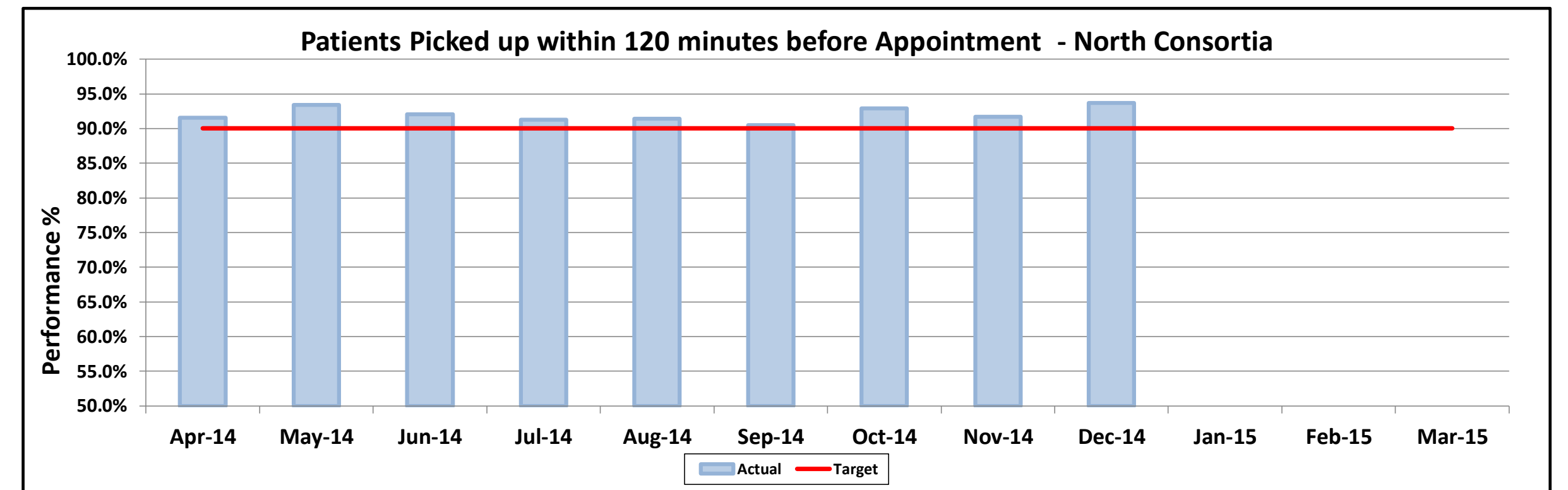
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%
Actual	95.7%	96.1%	95.7%	95.0%	94.6%	95.1%	95.0%	94.2%	94.7%			



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%	92.0%	92.0%	93.8%	94.8%			



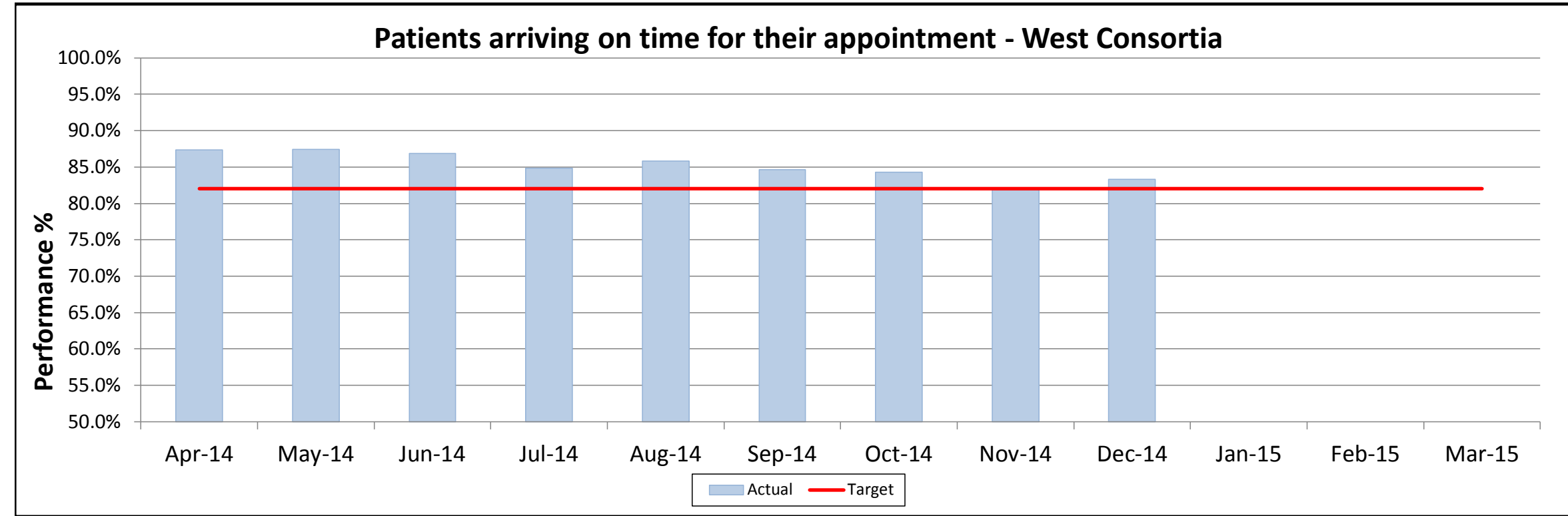
South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%
Actual	95.5%	96.0%	95.5%	95.1%	95.1%	93.8%	94.7%	93.0%	93.1%			



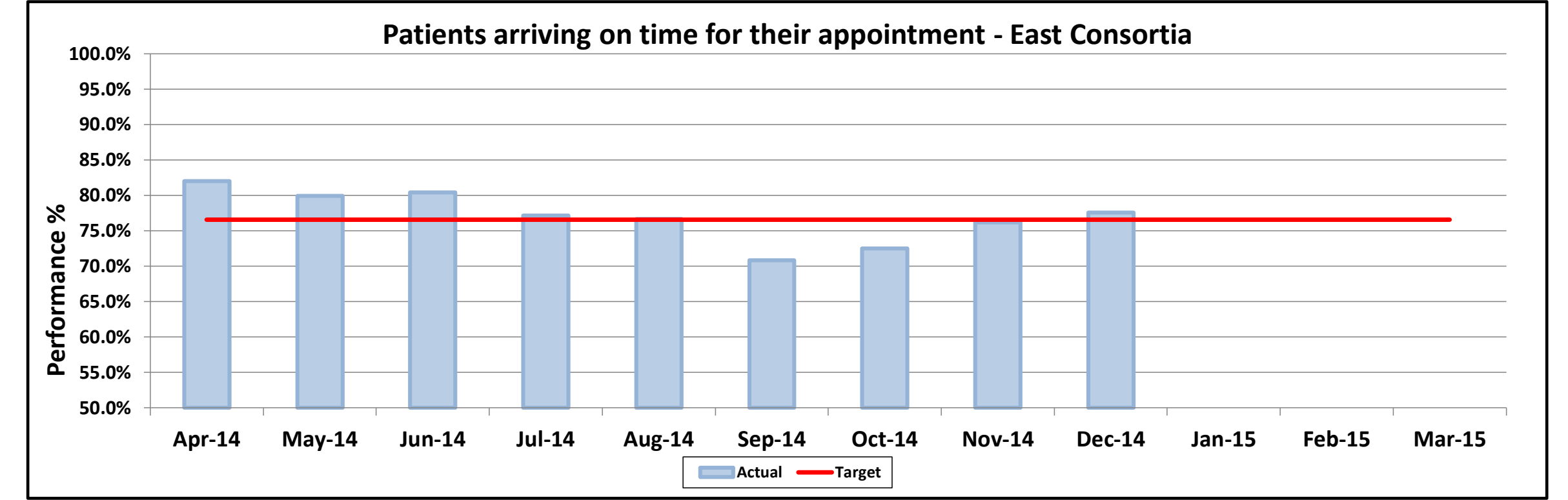
North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Actual	91.5%	93.4%	92.1%	91.3%	91.4%	90.5%	92.9%	91.7%	93.7%			

Arrival - KPI 2

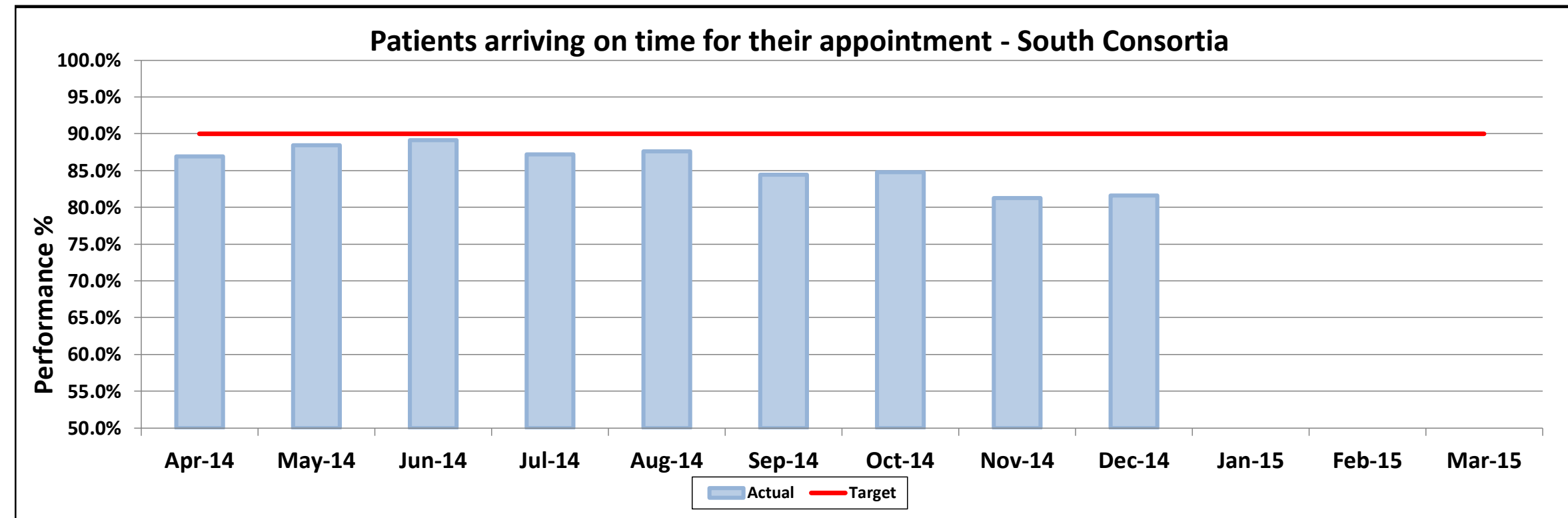
EWI



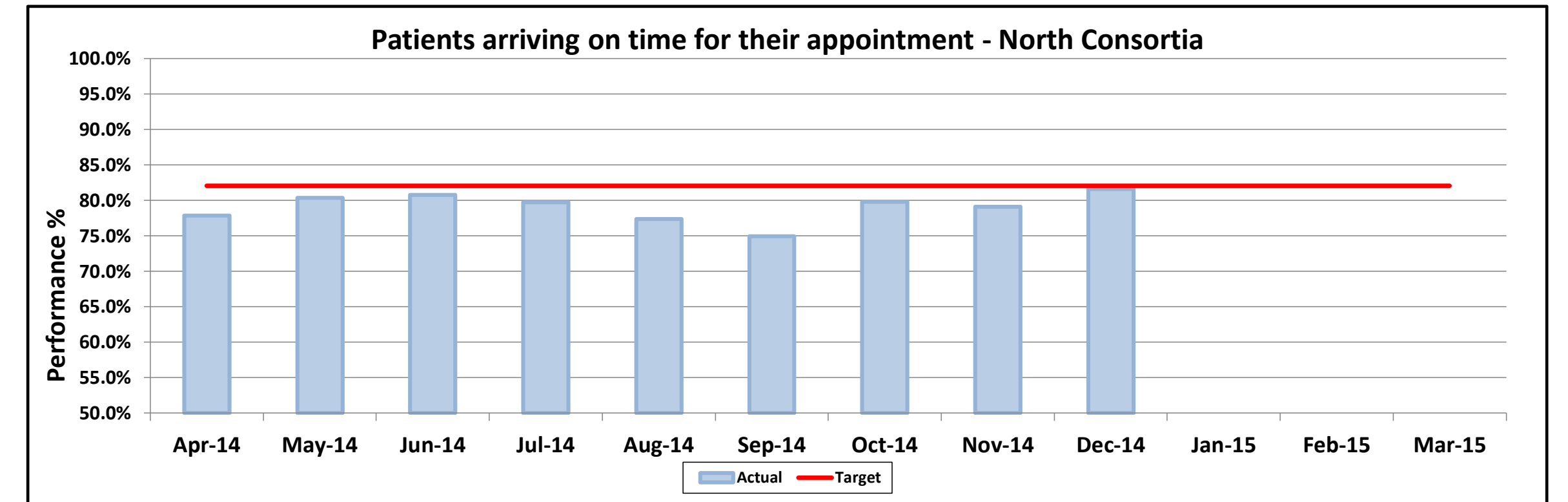
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%
Actual	87.4%	87.4%	86.9%	84.9%	85.8%	84.7%	84.3%	81.9%	83.3%			



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%	70.8%	72.5%	76.2%	77.6%			



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	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	86.9%	88.4%	89.1%	87.2%	87.6%	84.4%	84.8%	81.2%	81.6%			

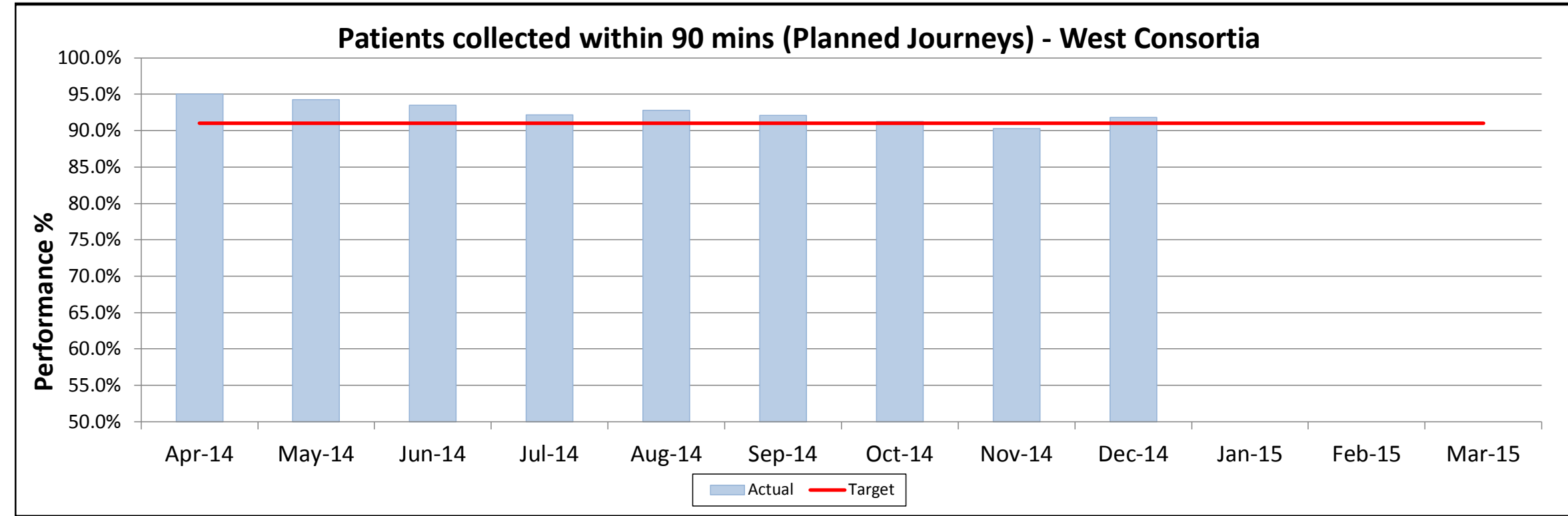


North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%
Actual	77.9%	80.3%	80.7%	79.7%	77.4%	74.9%	79.8%	79.1%	81.6%			

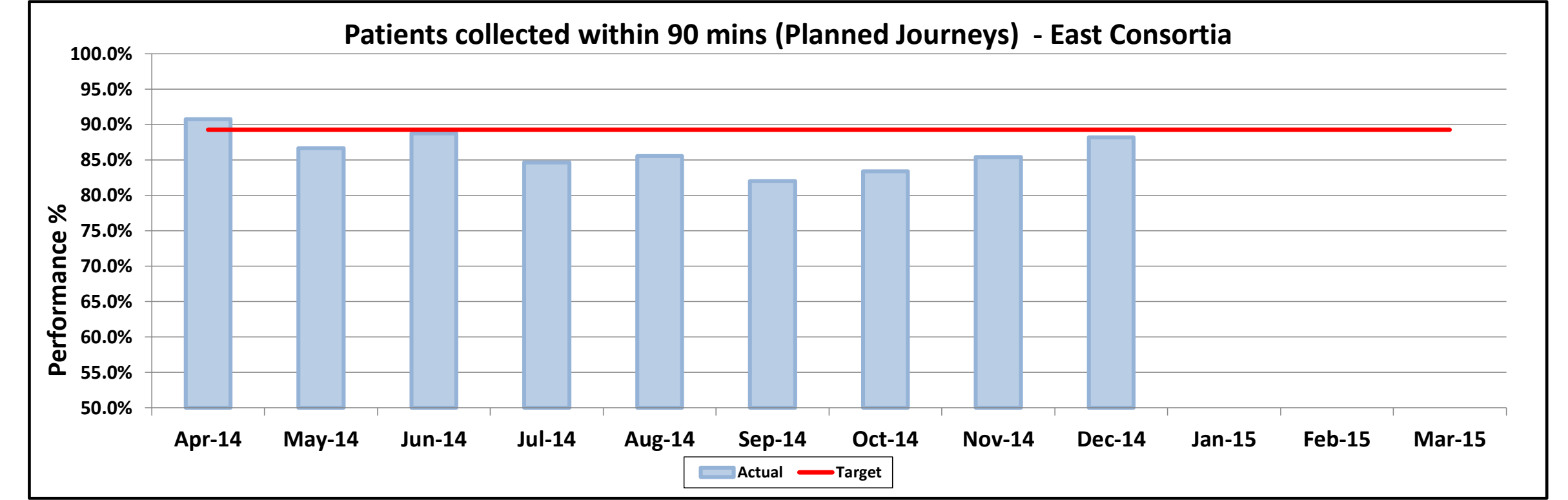
EWI Early Warning Indicator

Departure - KPI 3

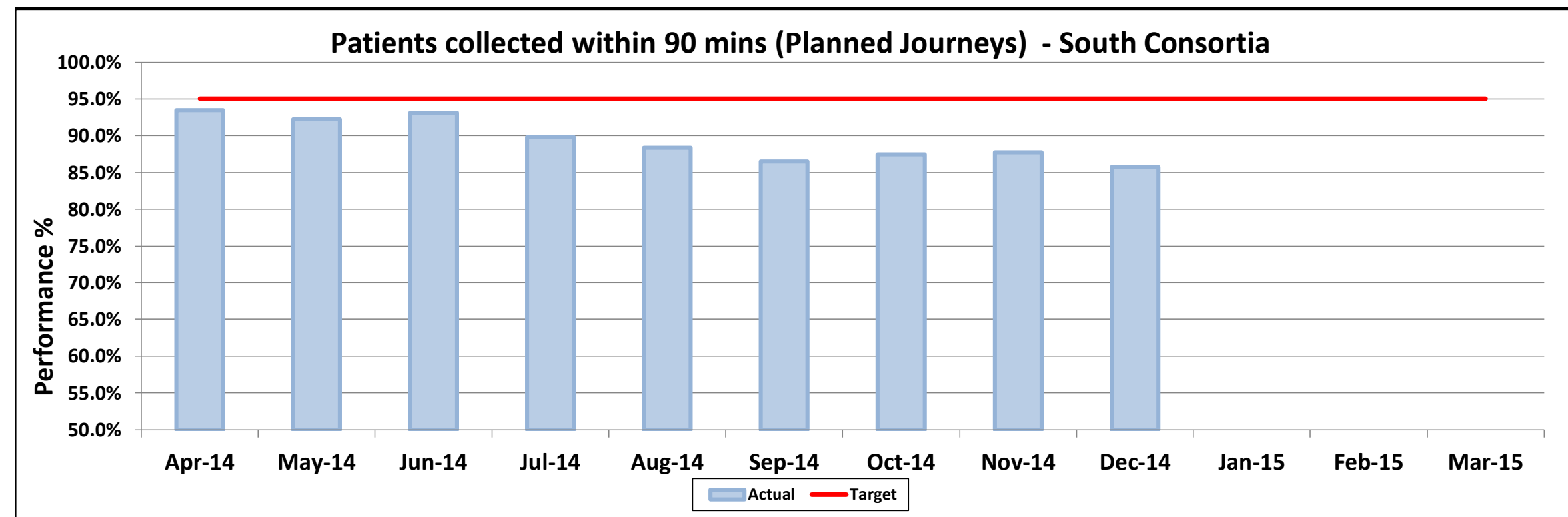
EWI



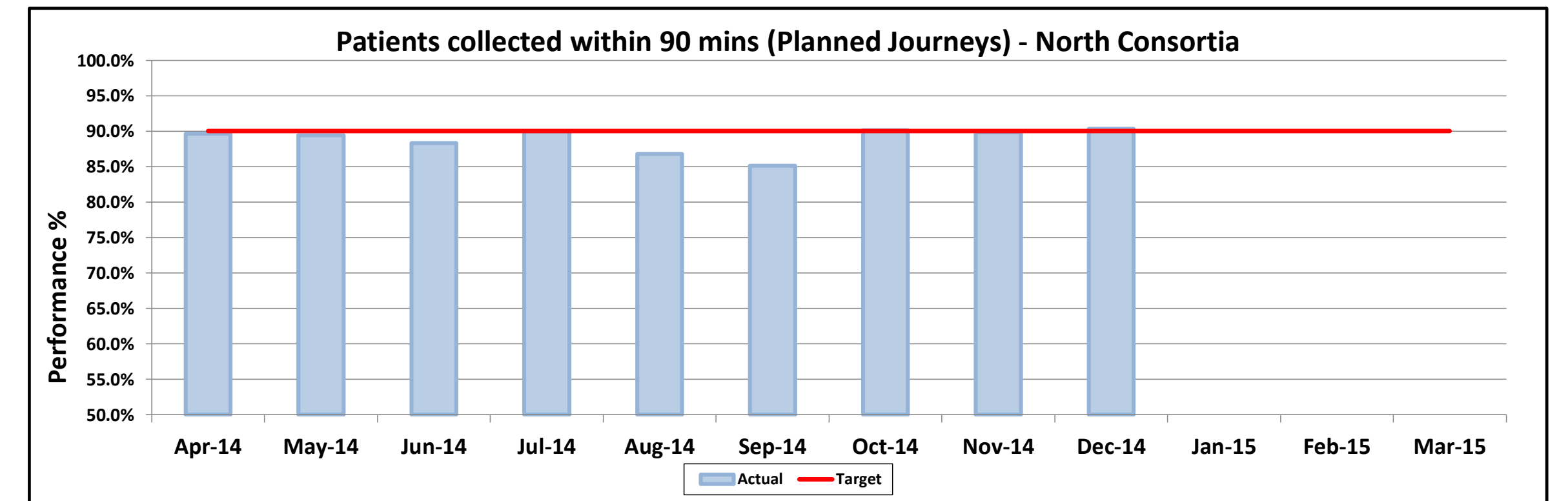
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%
Actual	95.0%	94.3%	93.5%	92.1%	92.8%	92.1%	91.3%	90.3%	91.8%			



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%	82.0%	83.4%	85.4%	88.2%			



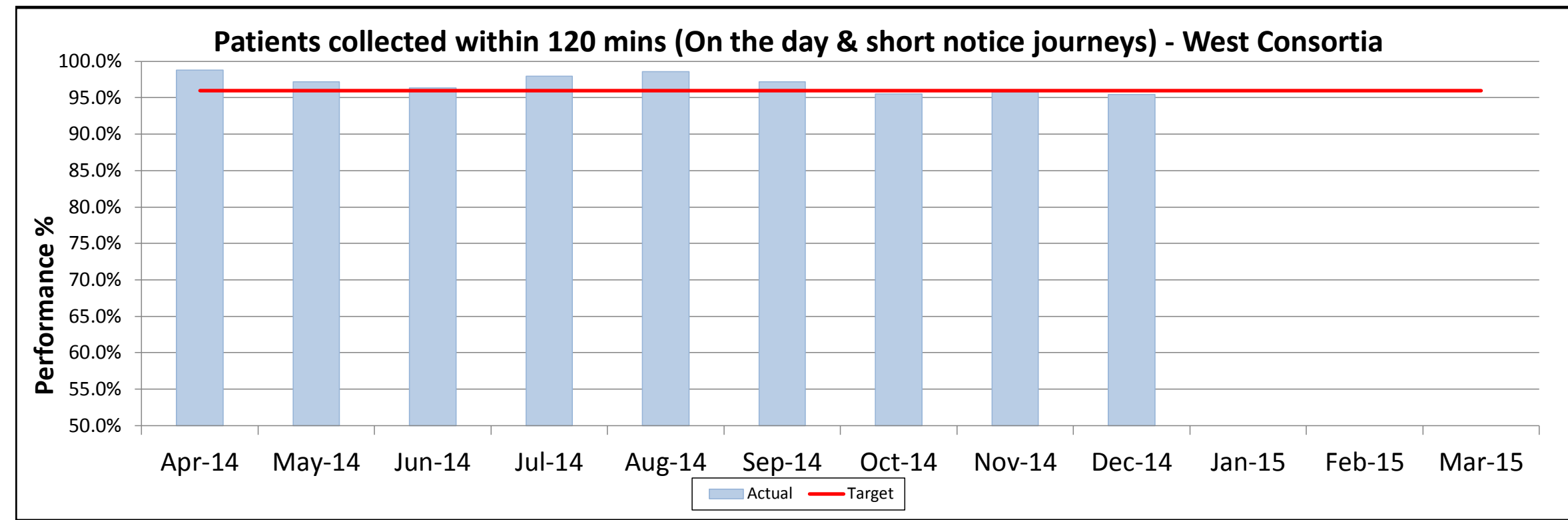
South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%
Actual	93.5%	92.2%	93.1%	89.8%	88.4%	86.5%	87.5%	87.7%	85.8%			



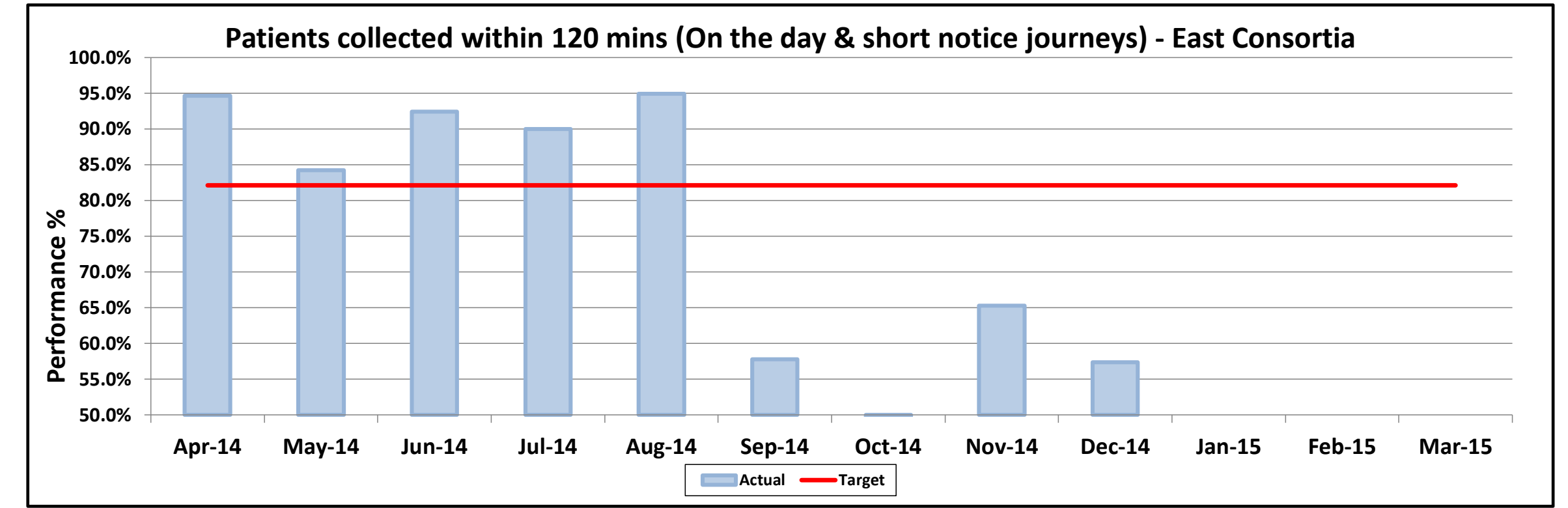
North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Actual	89.7%	89.4%	88.3%	89.9%	86.8%	85.1%	90.1%	89.8%	90.4%			

EWI Early Warning Indicator

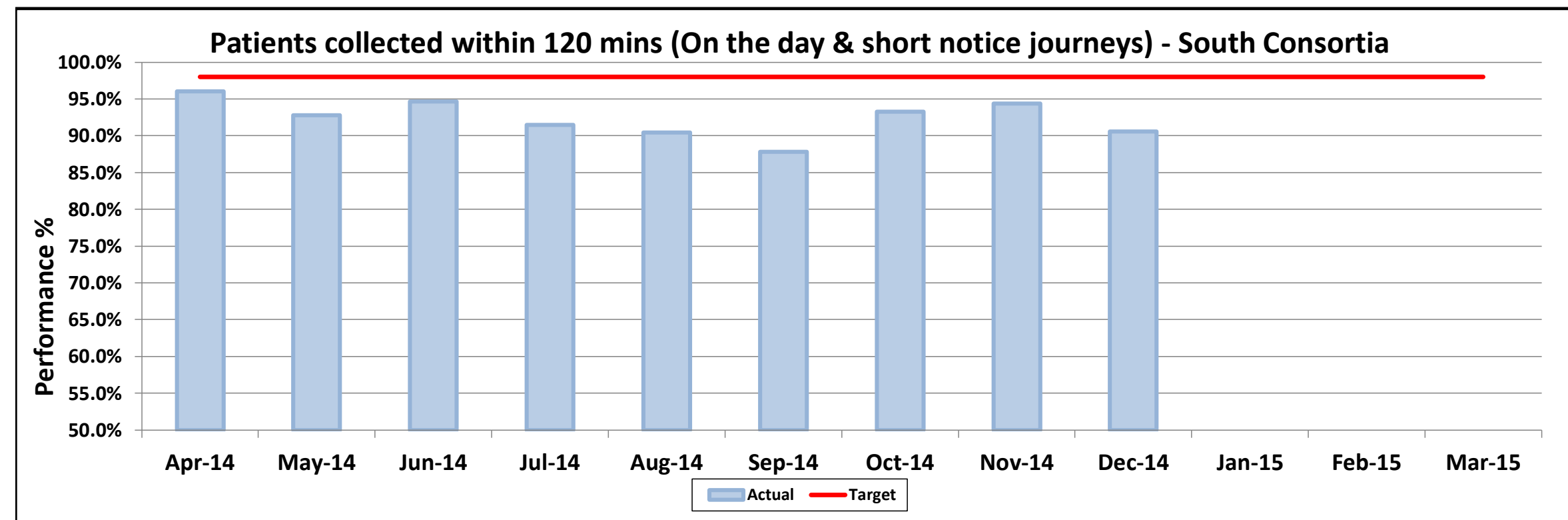
Departure - KPI 4



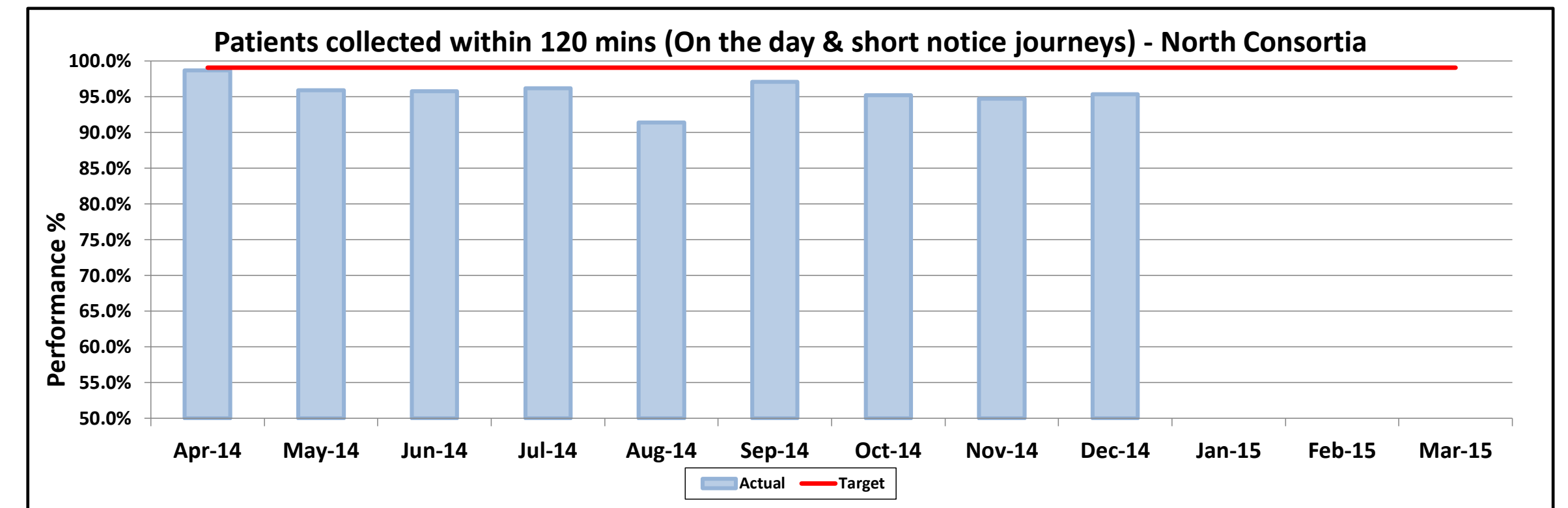
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%
Actual	98.8%	97.2%	96.4%	98.0%	98.6%	97.2%	95.5%	95.8%	95.4%			



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	94.6%	84.2%	92.5%	90.0%	94.9%	57.8%	48.2%	65.3%	57.4%			



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%	87.8%	93.3%	94.4%	90.5%			



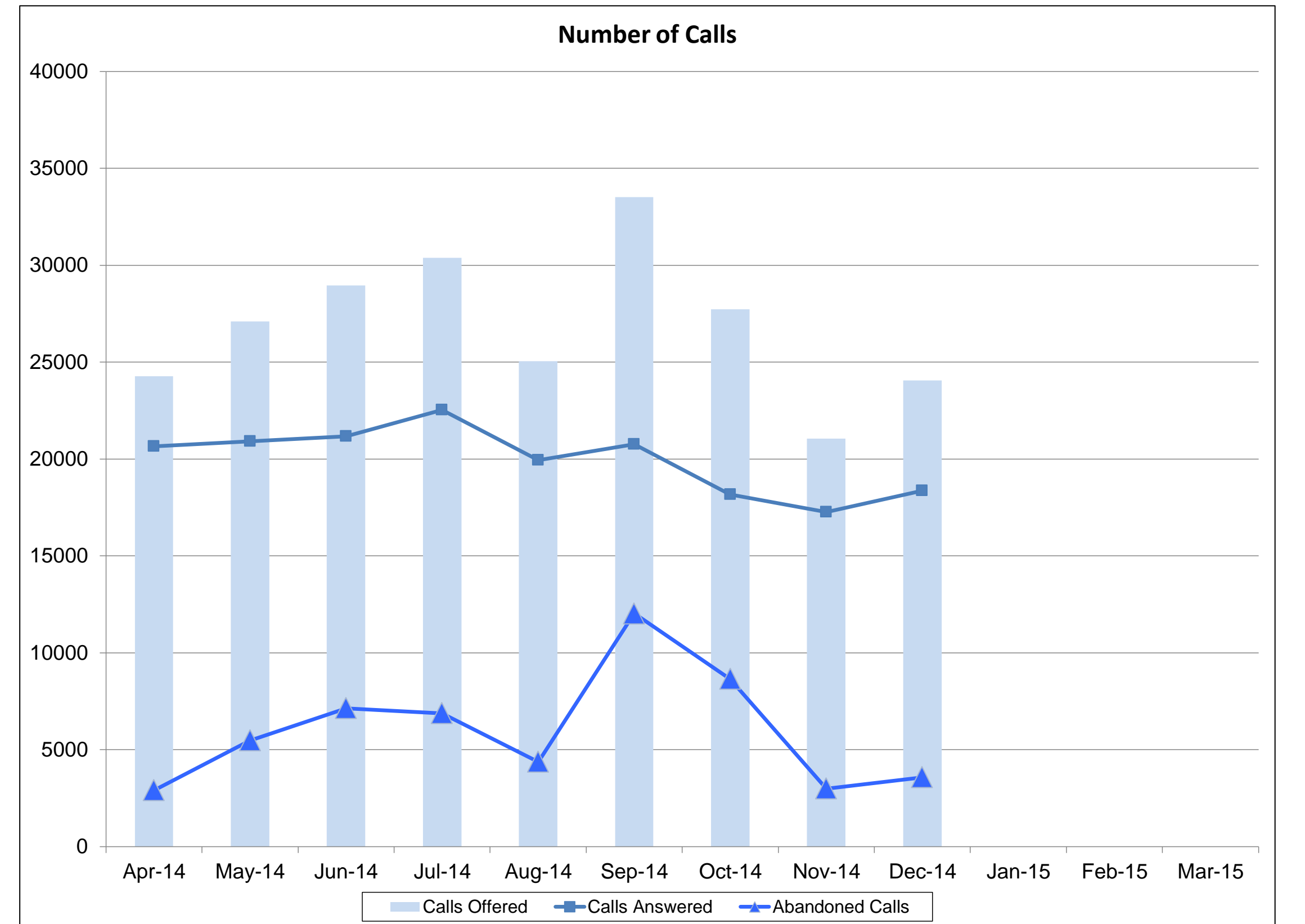
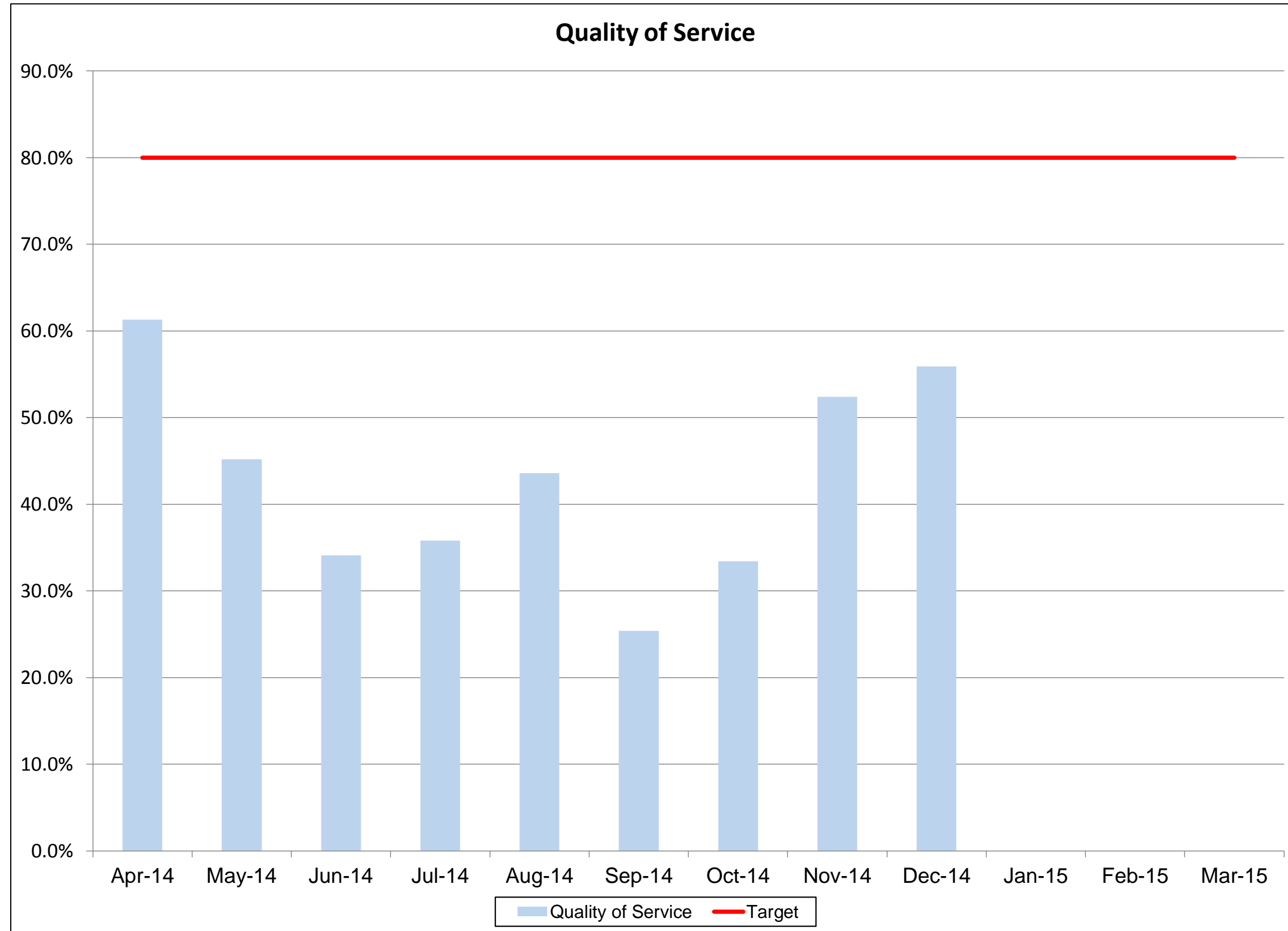
North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
Actual	98.7%	95.9%	95.7%	96.2%	91.3%	97.1%	95.2%	94.7%	95.3%			

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%	73.9%	74.4%	69.6%	68.7%			
	0-60 mins early	100%	91.6%	89.9%	89.9%	90.9%	90.8%	89.7%	88.8%	84.5%	83.4%			
	up to 30 mins late	0%	0.6%	0.9%	1.0%	1.1%	0.9%	0.8%	1.3%	2.6%	3.2%			
KPI 2 - Outward collections	Within 45 mins of ready time	90%	92.9%	91.6%	90.1%	90.9%	91.5%	91.7%	90.0%	85.8%	83.5%			
	Within 60 mins of ready time	100%	97.9%	97.7%	96.9%	97.0%	97.6%	97.8%	96.7%	94.7%	92.8%			
KPI 3 - Journey Time	10 miles and >45 mins	90%	96.9%	97.2%	96.7%	97.0%	97.2%	97.7%	97.2%	96.3%	96.1%			

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

↔	YTD RAG	RED
	MTD RAG	RED

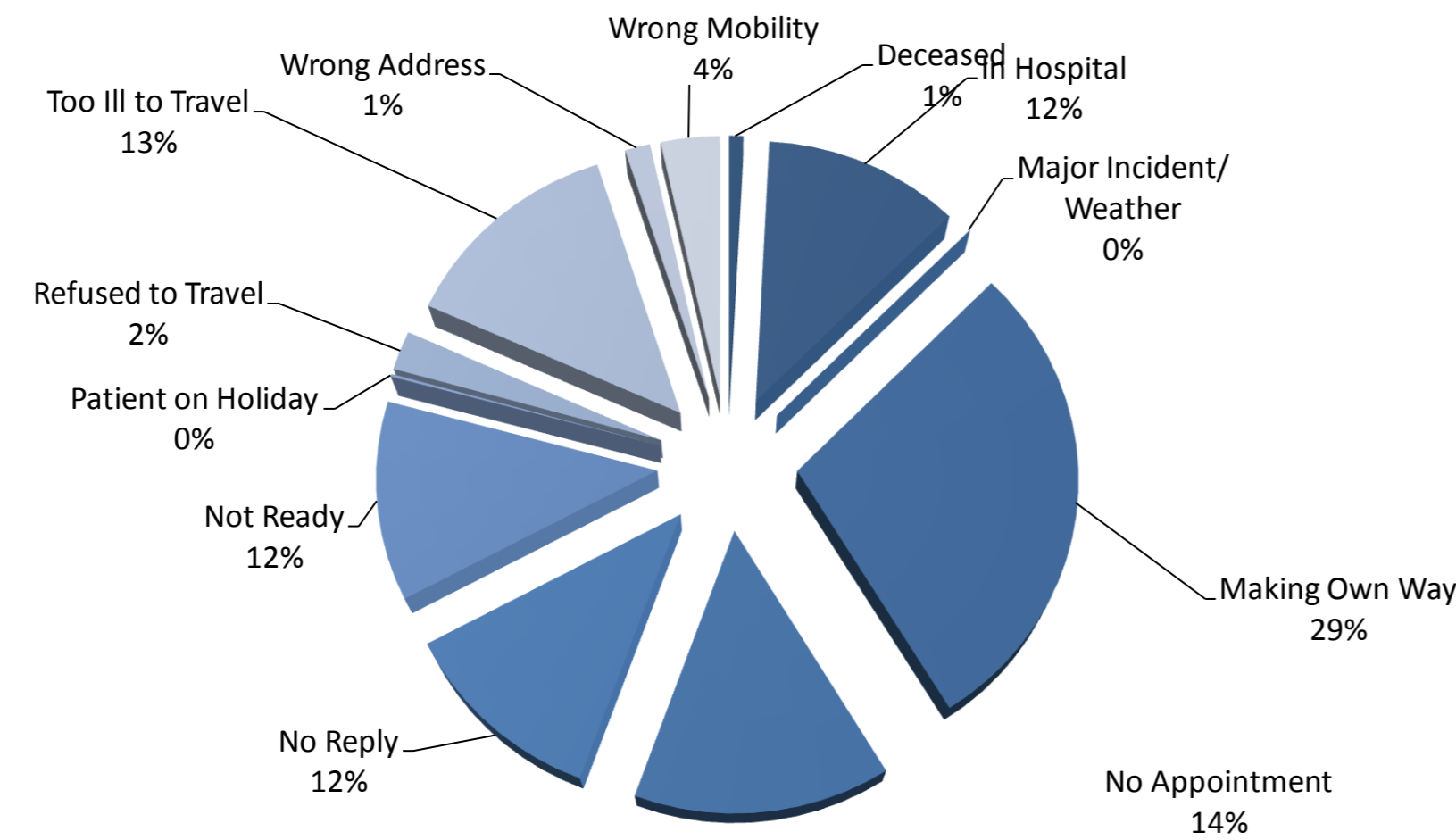


	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Calls Offered	24264	27097	28970	30379	25053	33528	27723	21064	24051			
Calls Answered	20652	20907	21168	22543	19946	20774	18182	17273	18376			
Average Answer Delay	00:01:00	00:01:55	00:02:33	00:02:27	00:01:47	00:04:30	00:03:30	00:00:57	00:01:01			
Max Answer Delay	00:58:24	00:58:55	00:59:56	00:59:05	00:58:36	00:58:24	00:56:13	00:53:14	00:53:50			
Abandoned Calls	2908	5471	7132	6882	4362	12028	8655	2979	3578			
Quality of Service	61.3%	45.2%	34.1%	35.8%	43.6%	25.4%	33.4%	52.4%	55.9%			

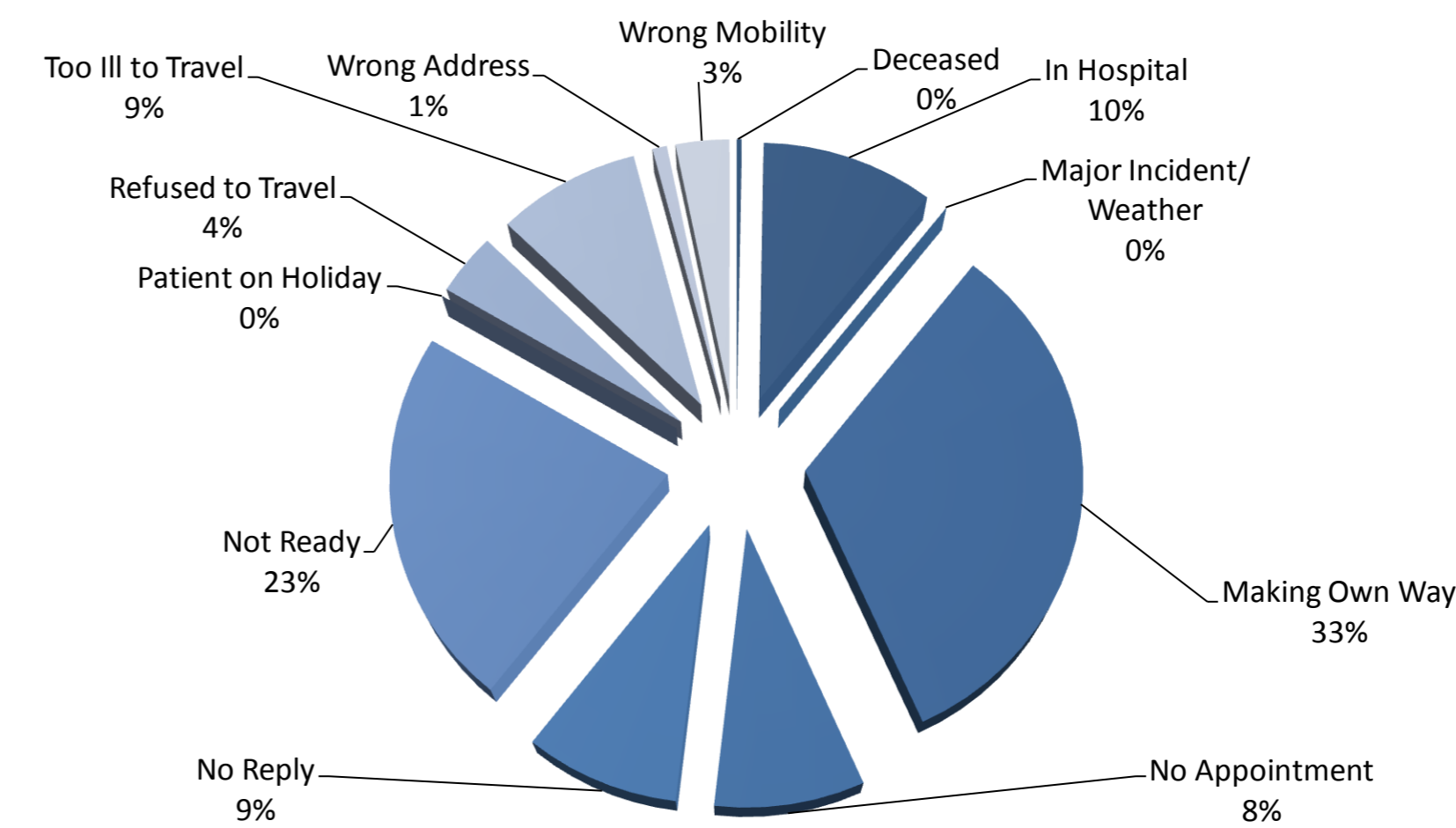
PTS Abortive journeys

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

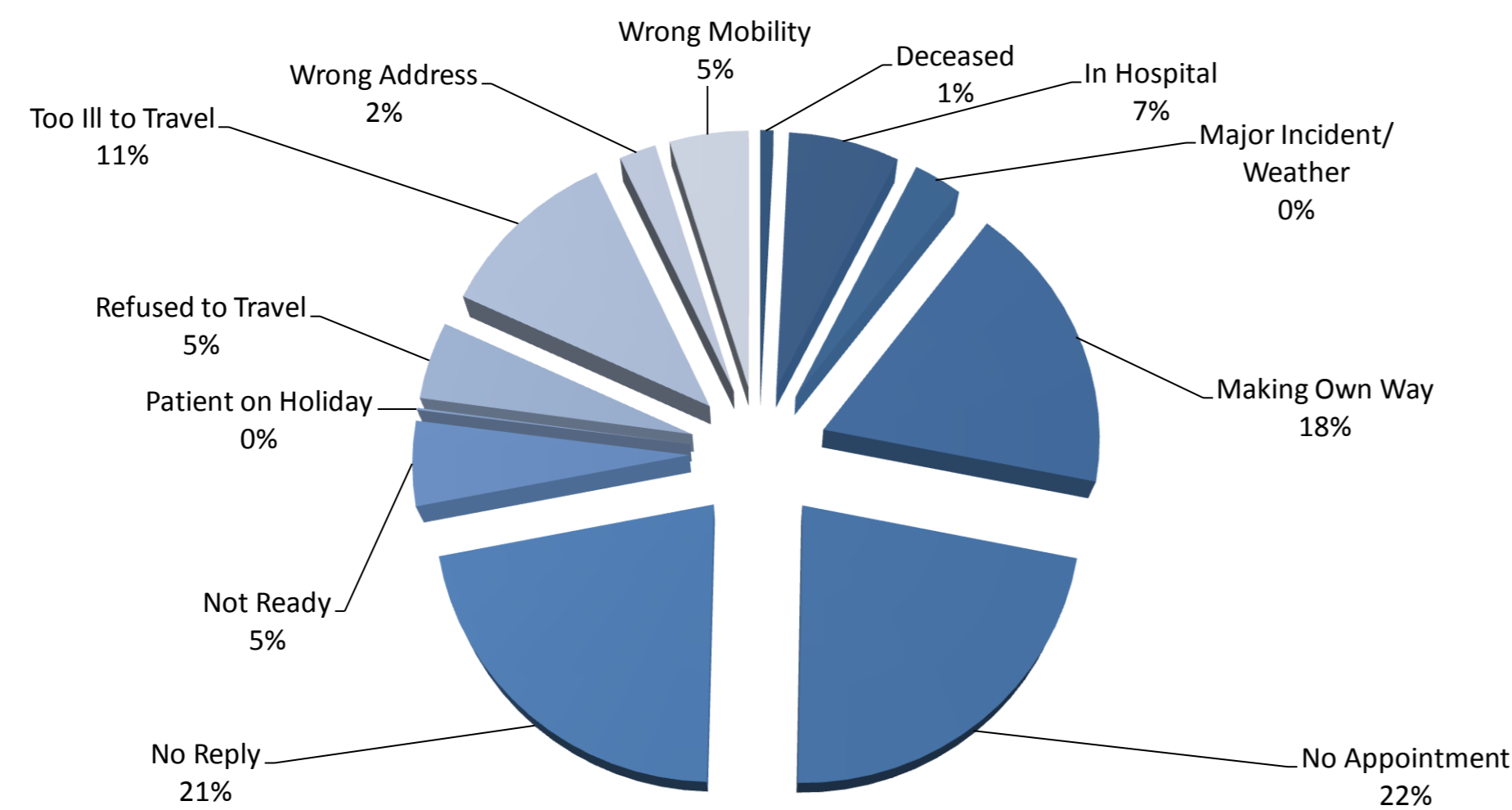
North Consortium													
Abort Reason	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Total
Deceased	5	2	3	5	3	9	1	5	5				38
In Hospital	73	67	82	82	50	61	74	57	70				616
Major Incident/Weather	0	0	0	0	0	0	0	0	0				0
Making Own Way	148	140	167	184	162	203	153	150	172				1479
No Appointment	89	65	93	117	83	97	91	78	86				799
No Reply	56	50	73	56	52	49	58	52	70				516
Not Ready	53	48	45	59	34	76	56	63	71				505
Patient on Holiday	0	0	0	0	1	1	0	0	1				3
Refused to Travel	23	25	26	36	13	24	17	13	14				191
Too Ill to Travel	63	65	59	68	55	57	73	67	80				587
Wrong Address	4	7	9	4	6	5	7	7	9				58
Wrong Mobility	11	15	10	15	11	18	17	13	21				131
Pass to MY Transport	1	0	0	0	0	0	0	0	0				1
Overall Totals	526	484	567	626	470	600	547	505	599				4924



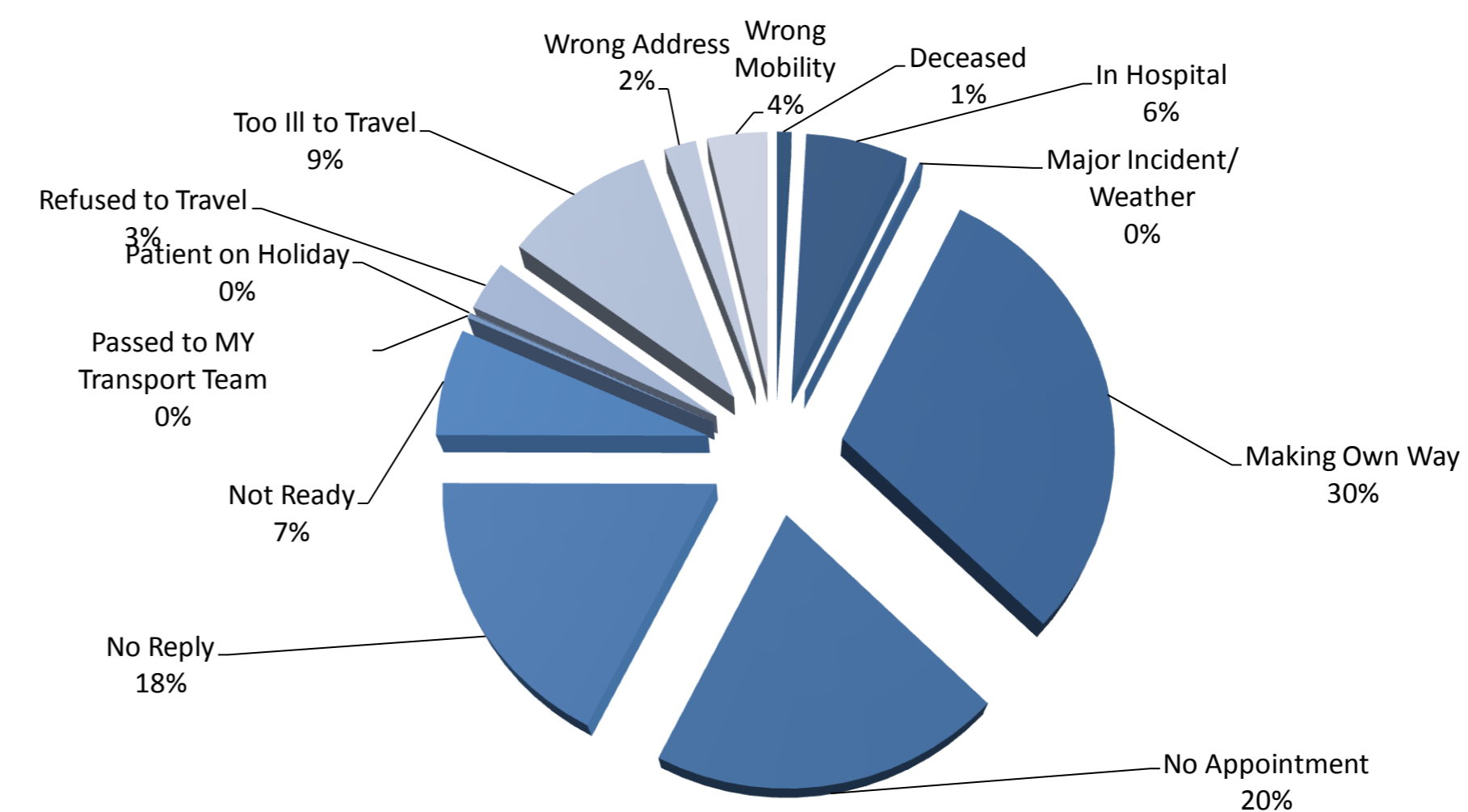
East Consortium													
Abort Reason	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Total
Deceased	2	4	2	2	1	1	0	3	2				17
In Hospital	61	58	49	46	54	50	55	40	71				484
Major Incident/Weather	0	1	0	0	0	0	0	0	0				1
Making Own Way	127	176	183	183	214	216	284	233	223				1839
No Appointment	57	54	74	62	48	47	59	50	58				509
No Reply	48	61	44	42	47	65	57	45	60				469
Not Ready	169	163	169	189	205	162	131	128	156				1472
Patient on Holiday	0	1	0	1	1	2	2	0	0				7
Refused to Travel	11	27	22	14	20	27	25	29	26				201
Too Ill to Travel	44	45	45	47	41	43	50	42	59				416
Wrong Address	6	5	6	13	5	4	6	5	6				56
Wrong Mobility	21	16	17	15	21	19	20	15	22				166
Overall Totals	546	611	611	614	657	636	689	590	683				5637



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	14	15	9	13				105
In Hospital	110	121	102	124	102	119	114	110	111				1013
Major Incident/Weather	0	1	0	0	0	0	1	0	49				51
Making Own Way	247	225	217	283	243	303	282	326	293				2419
No Appointment	334	313	372	416	343	408	411	300	368				3265
No Reply	284	293	297	325	233	337	334	291	358				2752
Not Ready	86	81	66	92	75	81	96	77	85				739
Patient on Holiday	2	4	7	8	6	3	0	0	2				32
Refused to Travel	53	39	55	66	45	69	44	51	78				500
Too Ill to Travel	129	134	142	118	111	159	129	138	184				1244
Wrong Address	33	27	38	46	34	38	36	40	37				329
Wrong Mobility	73	72	83	84	48	75	67	75	79				656
Overall Totals	1363	1319	1387	1578	1249	1606	1529	1417	1657				13105



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	34	45	27	36				291
In Hospital	303	293	310	351	250	347	300	260	253				2667
Major Incident/Weather	0	0	1	0	0	0	3	0	10				14
Making Own Way	740	772	924	1042	972	1051	1053	1096	1203				8853
No Appointment	679	710	699	766	640	728	787	754	819				6582
No Reply	592	637	591	681	551	645	726	615	707				5745
Not Ready	237	266	213	279	215	267	244	222	266				2209
Passed to MY Transport Team	8	9	8	6	6	2	2	3	11				55
Patient on Holiday	4	11	6	4	13	9	8	5	1				61
Refused to Travel	110	109	131	150	104	129	128	95	125				1081
Too Ill to Travel	262	279	258	295	226	277	276	291	377				2541
Wrong Address	78	79	83	105	76	100	72	101	79				773
Wrong Mobility	148	145	152	150	135	170	200	147	148				1395
Overall Totals	3190	3343	3417	3855	3208	3759	3844	3616	4035				32267





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	9/9	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 and further discussions on resourcing of the clinical service are continuing through established contract processes.	AD NHS 111/Urgent Care	Ongoing	RED
RED	2.16	3/3	Total % of calls answered within 60 seconds (Target >= 95%)	Call volumes rose to 33% above the normal monthly rate in December, above the seasonal rise anticipated, creating significant pressures on response times a. Additional staff to manage the demand were in the recruitment and training process and are now in post, with performance now stabilised at above 95%. During the periods of intense pressure additional clinical staff were rostered to support triage and management of patients and to maintain the delivery of a safe service.	AD NHS 111/Urgent Care	Jan-15	AMBER
RED	2.16	1/1	Total % of calls abandoned after 30 seconds (Target <=5%)	Call volumes rose to 33% above the normal monthly rate in December, above the seasonal rise anticipated, creating significant pressures on response times a. Additional staff to manage the demand were in the recruitment and training process and are now in post, with the call abandonment rate now stabilised below 5%. During the periods of intense pressure additional clinical staff were rostered to support triage and management of patients and to maintain the delivery of a safe service.	AD NHS 111/Urgent Care	Jan-15	GREEN

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	107,670	107,670	107,670	107,670				
Total number of Calls Offered	116,583	122,083	109,737	110,065	110,896	103,393	113,758	124,394	153,497				
Total number of Calls answered	114,451	119,321	107,833	107,738	109,515	101,416	111,253	119,286	143,324				
Variation to Contract Flat Rate	6.3%	10.8%	0.2%	0.1%	1.7%	-5.8%	3.3%	10.8%	33.1%				
Variation to Contract Flat Rate (Quarter)	5.8%			-1.3%			15.7%						
Total number of Calls answered within 60 seconds	108,872	112,218	104,093	101,572	106,271	96,409	103,836	102,686	111,601				
Total % of calls answered within 60 seconds (Target >= 95%)	95.1%	94.0%	96.5%	94.3%	97.0%	95.1%	93.3%	91.4%	77.9%				
Total number of abandoned calls after 30 seconds	1,203	1,528	871	1,413	700	1,146	1,488	3,595	8,427				
Total % of calls abandoned after 30 seconds (Target <=5%)	1.0%	1.3%	0.8%	1.3%	0.6%	1.1%	1.3%	2.9%	5.5%				
Total number of calls triaged	97,629	101,065	91,068	90,805	92,446	86,014	95,435	104,683	125,080				
Total number of calls completed in 1 contact	98,272	101,041	91,309	90,573	95,006	87,085	94,696	102,145	121,106				
Total number of calls transferred to a clinical advisor (DX Calls)	21,634	20,771	19,757	20,594	20,380	19,474	21,235	22,041	25,486				
Total % of calls which were transferred to a clinical advisor (DX Calls)	18.9%	17.4%	18.3%	19.1%	18.6%	19.2%	19.1%	18.5%	17.8%				
Total number of calls which were warm transferred to a clinical advisor	7,895	5,104	5,257	5,218	7,727	6,832	6,511	6,537	5,579				
Total % of Warm transfers (Target 95%)	36.5%	24.6%	26.6%	25.3%	37.9%	35.1%	30.7%	29.7%	21.9%				
Total % of Call Backs (Target 95%) in 10 Mins (KPI)	37.1%	31.8%	32.6%	29.3%	31.4%	29.4%	24.6%	24.0%	19.7%				
Total % of Call Backs (Target 95%) in 120 Mins (Internal)	94.1%	93.7%	94.1%	91.6%	93.0%	92.4%	89.5%	87.8%	83.9%				
Total % of Call Backs (Target 65%) in 10 Mins and Warm Transferred	60.0%	48.6%	50.5%	47.3%	57.4%	54.2%	47.8%	46.6%	37.3%				
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	04:56:54	05:26:16	05:58:06	08:10:20				
Average call back time by a clinical advisor	00:39:09	00:42:02	00:40:58	00:46:04	00:41:18	00:42:34	00:51:38	00:52:55	01:06:27				
Total number of calls directed to 999 - RED	4,181	4,468	4,003	3,924	3,912	3,536	4,049	4,636	5,319				
Total number of calls directed to 999 - GREEN	5,350	5,481	5,055	5,270	5,051	4,743	5,415	6,246	6,879				
Total number of calls directed to 999	9,531	9,949	9,058	9,194	8,963	8,279	9,464	10,882	12,198				
Total number of calls recommended to attend an A&E	6,538	6,665	6,556	6,990	6,531	6,413	6,693	7,192	7,387				
Total number of calls directed to see GP	39,627	40,708	35,491	34,554	35,561	32,401	37,021	42,590	52,387				
Total number of calls directed to speak to GP	10,176	10,034	8,627	7,863	8,773	8,080	9,325	10,655	12,804				
Total number of calls directed to 999 - RED (%)	3.7%	3.7%	3.7%	3.6%	3.6%	3.5%	3.6%	3.9%	3.7%				
Total number of calls directed to 999 - GREEN (%)	4.7%	4.6%	4.7%	4.9%	4.6%	4.7%	4.9%	5.2%	4.8%				
Total number of calls directed to 999 (%)	8.3%	8.3%	8.4%	8.5%	8.2%	8.2%	8.5%	9.1%	8.5%				
Total number of calls recommended to attend an A&E (%)	5.7%	5.6%	6.1%	6.5%	6.0%	6.3%	6.0%	6.0%	5.2%				
Total number of calls directed to see GP (%)	34.6%	34.1%	32.9%	32.1%	32.5%	31.9%	33.3%	35.7%	36.6%				
Total number of calls directed to speak to GP (%)	8.9%	8.4%	8.0%	7.3%	8.0%	8.0%	8.4%	8.9%	8.9%				



Section 2d

Support Services Performance



ICT Summary

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	Service Delivery Activity	2014 - 2015 ICT Summary with Rag Indicators											
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Our Service	SLA	%90 of Items Resolved within SLA	81%	88%	78%	90%	88%	88%	87%	87%	87%			
		Incidents (Logged)	766	962	1252	1457	1781	1991	2008	1950	1871			
		Service Request (Logged)	1612	1497	1394	1689	863	899	928	872	713			
		Total Activity (Logged)	2378	2459	2646	3146	2644	2890	2936	2822	2584			
		SLA Notes				Terry Parker SLA figures subject to verification Manual calculation	Terry Parker SLA figures subject to verification Manual calculation	Terry Parker SLA figures subject to verification Manual calculation	Terry Parker SLA figures subject to verification Manual calculation	Terry Parker SLA Amber. Daily monitoring and reporting in place for December/January SLA figures subject to verification Manual Adjustments/Calculation	SLA Amber. Daily monitoring and reporting in place for January. Underlying Team improvements seen which will filter through in January's figures. Focus on clearing backlog which is impacting current performance			
	Customer Feedback	% of either Very Good or Good	95%	95%	90%	0%	0%	100%	93%	94%	94%			
		Number of Survey Returned	310	164	19	0	0	27	128	93	95			
		Positive Score	293	156	15	0	0	27	119	87	89			
		Negative Score	17	8	4	0	0	0	9	6	6			
	Customer Contact	Average Speed to Answer	6	4	6	7	5	5	8	8	6			
Customer Contact Notes														
Infrastructure	Network Availability	Over 99.5%	100	100	100	100	99.8	100	90.32	100	100			
		This Period Unplanned Downtime	0	0	0	0	1	0	72	0	0			
		Next Period Planned Downtime	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A			
		Network Availability Notes				Ola Zahran Roth HQ link has been ceased by mistake by BT	Ola Zahran	Ola Zahran: link down ceased in error by BT						
	System Availability	Over 99.5%	99.5	99.9	99.9	100	100	99.92	99.25	100	100			
		This Period Unplanned Downtime	0.5	0	0	0	0	0.3	5.6	0	0			
		Next Period Planned Downtime	N/A	N/A	N/A	N/A	2	N/A	1.5	N/A	N/A			
		System Availability Notes				Ola Zahran	Ola Zahran:	CAD outage	Ola Zahran: CAD outage Hardware upgrade to stratus Servers	Ola Zahran				
	Telecoms Availability	Over 99.5%	100	100	99.7	99.5	100	100	100.00	99.68	100			
		This Period Unplanned Downtime	0	0	2	3	0	0	0	4.6	0			
		Next Period Planned Downtime	N/A	N/A	N/A	N/A	2	0	0	0	0			
		Telecoms Availability Notes				Andy M	Andy M: BC test	Andy M	Andy M	Andy M	York, North & East site outages caused by Infrastructure failure (BT fibre link at SH1)			
Radio Availability	Over 99.5%	100	100	100	100	100	100	99.50	100	100				
	This Period Planned Downtime	0	0	0	0	0	0	4	0	0				
	Next Period Planned Downtime	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				
	Radio Availability Notes				Andy M	Andy M	Andy M	Andy M	N/A	N/A				
Budget Management	Current Budget Position Net of CIP	-4,339	-23,652	42,465	15,589	21,322	-41,703	-227,261	-59,748	1,037				

Task ID	Projects	2014 - 2015 Active Projects											
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
P14	Roll-out of ECS (West Yorkshire)					30%	30%	50%	50%	52%			
P11	Estates Reconfigurations – HART	50%	55%	55%	55%	60%	95%	95%	95%	95%			
P29	Estates Reconfigurations – Hub & Spoke					20%	20%	20%	20%	23%			
P24	Rolling out of Mobile Phones		10%	10%	10%	20%	55%	70%	70%	100%			
P30	ICT Asset Management					5%	5%	5%	20%	20%			
P4	ade South Remote sites links	35%	65%	75%	75%	75%	75%	75%	75%	75%			
P13	Implement ITIL Yr1	5%	15%	18%	18%	20%	20%	25%	25%	40%			
P27	New YAS Intranet				40%	40%	40%	50%	75%	75%			
P7	Airwave to callFlex DR site	30%	60%	60%	70%	70%	100%						
P33	Telematics				0%	20%	20%	20%		20%			
P1	Migration to Thin Client Terminals on Remote Sites	90%	90%	90%	90%	100%							
P19	Wireless Network		10%	10%	10%	20%	25%	30%	30%	40%			
P17	Clinical Web Site (PathFinder)		5%	5%	5%	40%	40%	40%	40%	40%			
P21	Mobile Data Refresh and VDO Replacement	5%	7%	7%	22%	25%	25%	50%	50%	50%			
P18	Resweb	70%	70%	80%	80%	100%							
P22	Board Pad												
P23	EOC Wall Board System		10%	25%	30%	50%	80%	90%	90%	90%			
P26	Blaydon Walk-in Centre Adastra Deployment		5%	10%	15%	20%	25%	30%	40%	60%			
P28	New Build Reception SH2			5%	15%	15%	15%	15%	15%	15%			
P34	ISO-22301- Standard - Business Continuity				5%	20%	35%	45%	45%	50%			
P31	GRS to MIS Interface					15%	15%	15%	15%	15%			
P35	PTS Call Flex Moves (PTS Transformation)				0%	15%	35%	80%	80%	80%			
P36	PTS PDA Replacement (PTS Transformation)							20%	20%	20%			
P37	SMS Enterprise							10%	25%	25%			
P38	Dell Blade Enclosure - CAD Servers					10%	15%	30%	50%	50%			
P39	CYFAS Implementation - Wakefield									30%			
P40	Airwave Handset Replacement									40%			
P41	APN Upgrade - 100MB									30%			

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%	3%		96%	1%	1% overcrowded relates to Scarborough station
		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. Additional capital bids have been submitted for various electrical resilience works at Springhill and York Fairfields and for Resurfacing at Harrogate station. Phase 1 of the electrical resilience works (UPS battery replacement in Springhill 2) and Phase 2 (Generator control panels) are completed, Phase 3 (DSE change over panels replacement) is to start shortly following change control sign off. The resurfacing works at Harrogate is progressing and a contractor has been appointed with a projected start date early in the new year (to avoid disruption to the site leading up to Christmas and New Year). Further Capital bids have been submitted for approval.
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	GREEN	GREEN	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	8549 Tonnes CO2		6815 tonnes of CO2	Aim to reduce carbon emissions by 10% by 2015 from the 2009 figures. YAS has been awarded a E166k 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)

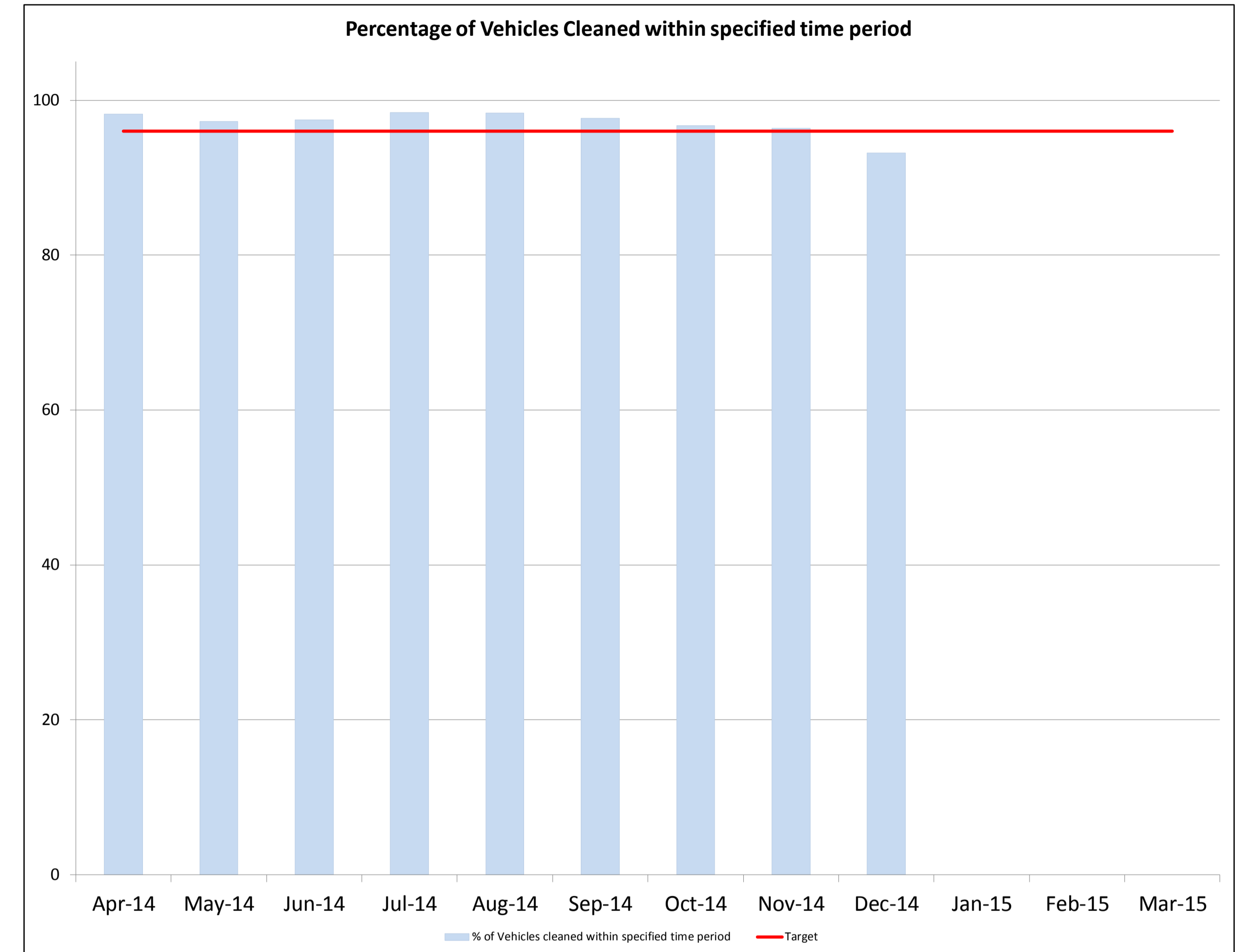
E3 Fleet		RAG Status	Plan YTD	Actual YTD	Var YTD	Plan Mth	Actual Mth	Var Mth	Notes
Vehicle Availability % Plan vs. Actual *									
E3.1	A&E	GREEN	92%	94%	2%	92%	93%	1%	
E3.1	PTS	GREEN	94%	96%	2%	94%	95%	1%	

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	GREEN	15	22		43 DMA Vehicles currently in build from 2013/14 procurement. These vehicles have been delivered and put into service. Approval has been given to order 40 A&E vans in 2014/15, anticipated delivery Feb/March 15. Legal procurement challenge has now been lifted.
E3.1	A&E - Other	GREEN	7	9		9 ECP cars - Replacements ordered and delivery expected December 14/January 15
E3.1	PTS	RED	17	124		There are 124, 6 year old vehicles currently leased by the Trust that are on contracts that expire during 2014/15. These vehicles will 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 124 vehicles in excess of 9 years old on the PTS fleet and the aim is to remove most of these vehicles by means of leasing 85 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	17	3.08%	
E3.2	Vehicle Services Outside "Window" at end of period	GREEN	16	4.30%	
E3.1	Vehicle Cleans Outside "Window" at end of period	GREEN	165	6.80%	
E3.4	Defibrillator servicing Outside "Window" at end of period	RED	2	0.32%	Note 2 devices had been moved from their audited location, had these devices been present there would have been none overdue (at 0% Green) Despite intensive searching, only one of these two defibrillators have been located thus leaving one defib that we have been unable to find.
E3.5	Suction Unit servicing Outside "Window" at end of period	GREEN	22	3.51%	
E3.6	Parapac servicing Outside "Window" at end of period	GREEN	10	3.14%	
E3.7	Microvent servicing Outside "Window" at end of period	RED	91	29.74%	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. This is to happen along with the rollout of GEMAC 600/AED programme through October/November and December

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	GREEN	GREEN	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	97.7	96.7	96.4	93.2			

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	20	23	21	20				186
Variance	-5	-1	-2	5	1	0	-3	9	10	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	3.1	1/1	The Safeguarding Children Level 2 Workbook was introduced 3 years ago. As a result, a number of staff are now due to complete the update, resulting in the 23% decrease in compliance since October.	The issue has been highlighted to managers, together with the need to check the compliancy levels of their staff and ensure that training is completed where appropriate. The Safeguarding team is working with managers to prioritise the completion of refresher training.	Associate Director of Quality and Nursing	Feb-15	GREEN

Comments on Quality**New Incidents Reported**

Overall incident numbers have increased during December in comparison to November, in line with activity, although the rate of reporting remains unchanged. Key themes relate to staff meal breaks, delayed response incidents and inappropriate bookings. Since June the data reflects incidents as well as issues/concerns and near misses reported. Despite the inclusion of additional reporting elements, the underlying rate of incident reporting has overall increased since June which is highlighted as a positive development for the Trust.

Patient Related Incidents

Overall incident numbers have increased during December in comparison to November, in line with activity, although the rate of reporting remains unchanged. Reporting is being encouraged throughout the Trust and these incidents mainly refer to inappropriate bookings and delayed responses.

Staff Related Incidents

There is no significant change in the rate of staff related incidents this month. The majority of these incidents, as expected are within the A&E Operations service and there has been an increase in the number reported relating to missed meal breaks or staff welfare related. This is in part due to the busy periods of demand experienced over recent months. RIDDOR reportable incidents have risen in number and primarily relate to moving and handling injuries, or slips, trips and falls.

Never Events

No never events have been identified during this period.

Serious Incidents

A total of 7 SIs were reported in December, of which 4 related to delayed responses. The monthly figure is slightly above the normal monthly range seen by the Trust. All SIs are reviewed by the Executive Director of Standards and Compliance and Executive Medical Director and are subject to full investigation and root cause analysis.

RIDDOR

RIDDOR reportable incidents have risen in number and primarily relate to moving and handling injuries, or slips, trips and falls.

Medication related incidents

There were 24 Controlled drug incidents in December, including 17 morphine breakages, three key losses and the temporary loss of one vehicle CD book. Of greater concern is the loss of one out of date morphine vial and one box of diazepam; both incidents are under investigation. The high incidence of breakages could be due to high demand, and reflects a similar temporary increase in 2013.

The incidence of incorrect intravenous fluid administration is being addressed with the replacement of 500ml bags of saline 0.9% for 11 bags to differentiate between saline 0.9% and glucose 10% solutions, both of which are clear fluids. There were a total of 65 incidents for the month of November, all of which are reviewed at Medicines Management Group.

Complaints and concerns

There has been an increase in EOC cases received, back to October levels, and a higher percentage of amber graded cases for EOC. A&E cases received have decreased this month, whilst the numbers of 111 Clinical cases have increased.

Response times continue to improve gradually in A&E and PTS. 60% of A&E cases were resolved within the 25 working day timescale compared to 56% last month and PTS have improved from 53% to 63%. Unfortunately, the large number of outstanding cases in EOC from the autumn, as a result of significant increases in cases received over the year, will continue to impact on EOC case response times in this and subsequent reports for the next few months.

Patient experience

The A&E service Friends and Family Test results are at their highest for the year to date, although it remains impossible to discern a specific trend in the monthly results.

IPC Audit

"Issues arising from the lower percentage results for vehicle audits are as follows:

Hull & East PTS vehicles - exterior vehicle cleanliness and upholstery damage

Leeds PTS vehicles - vehicle cleanliness

A&E Humber vehicles - exterior vehicle cleanliness, lack of no steri wipes on vehicle and audit display

SY and Bassetlaw station - general station tidiness and storage issues"

Clinical Audit Programme

Currently, PRF validation is up to date, CPIs and ACQIs are up to date and were submitted on time.

Safeguarding

"The Safeguarding Children Level 2 Workbook was introduced 3 years ago. As a result, a number of staff are now due to complete the update, resulting in the 23% decrease in compliance since October. The issue has been highlighted to managers, together with the need to check the compliance levels of their staff and ensure that training is completed where appropriate. The Safeguarding team is working with managers to prioritise the completion of refresher training. Adult referrals from December 2013 include Community Care Assessment (CCA) referrals, which are requests for an assessment of a patient's care / support needs. However, following a change in reporting, the adult figures for June to December inclusive do not include the CCA referrals. The issue is yet to be resolved.

Freedom of Information

"November saw a dip in performance as a result of a higher than usual number of requests being complex and multi-part with contributions required from a number of teams, particularly business intelligence and workforce intelligence. The increased pressure on these teams coincides with requirements to support CQC preparation work. One open case is for documents shared with Police forces (re Police and Paramedic schemes) and we are awaiting a response from their FOI teams about releasing these documents.

This month performance has been affected by staff sickness which has now been remedied and by operational pressures requiring significant attention from the Corporate Comms team.

A new FOI administrator starts in post on 22 January

Within the responses due in January 2015 there are 14 from Unite the Union.

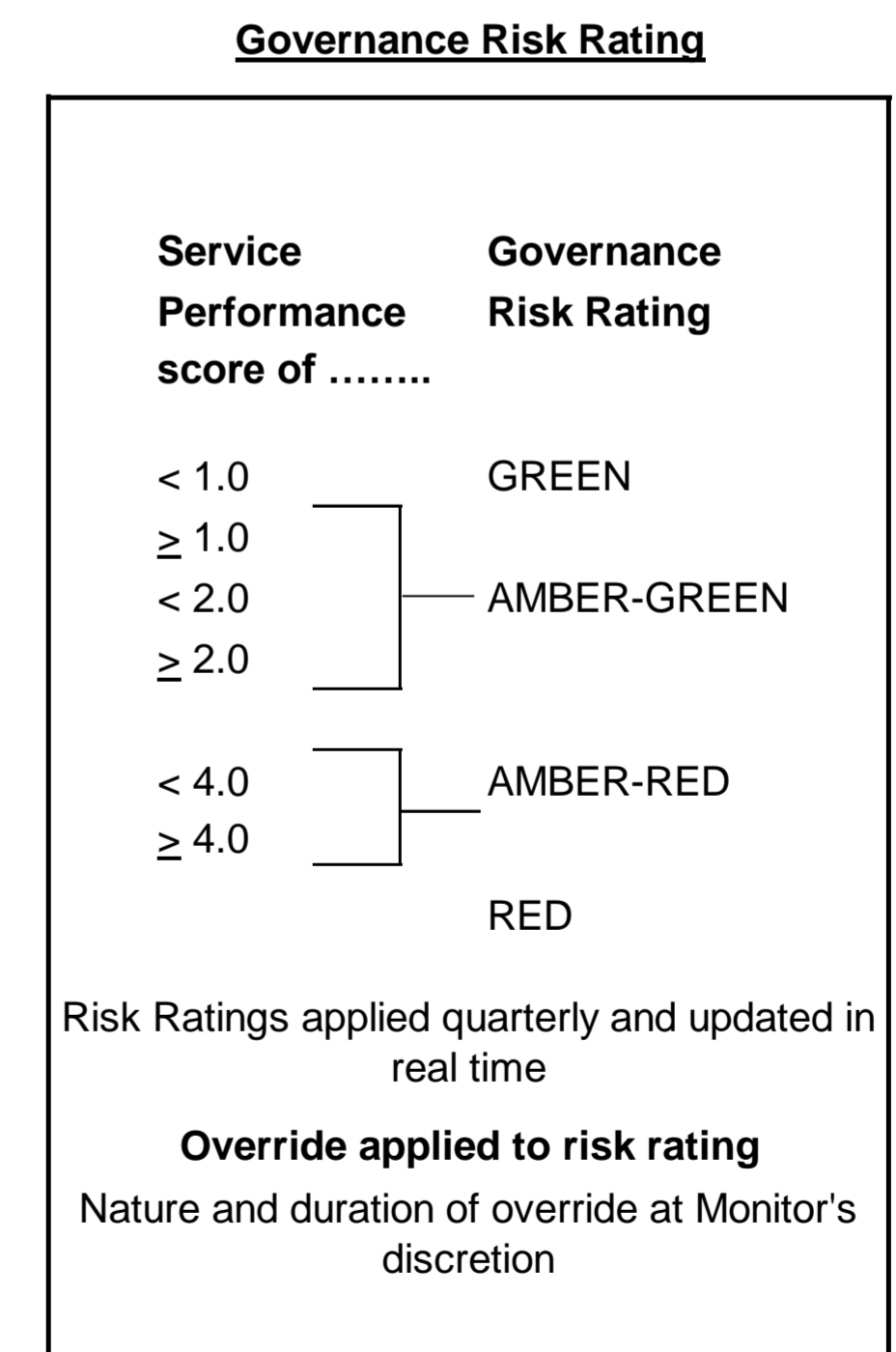
"

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	Q3 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	AMBER	GREEN	GREEN	GREEN				GREEN	GREEN
1.2	Clinical Effectiveness	<ul style="list-style-type: none"> • Clinical Performance Indicators (National) • Clinical Audit Programme 	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN	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	AMBER	AMBER	AMBER				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	AMBER	AMBER	AMBER				GREEN	GREEN

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	GREEN/AMBER	GREEN/AMBER	GREEN/AMBER	GREEN/AMBER				

Deriving the governance risk rating

Monitoring	Service performance score
1 Performance against national measures -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 Care quality Commission *1 following non-compliance with essential standards -Major impacts on patients = +2.0 -Enforcement action = +4.0 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	
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 -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															
HS1	Programme Team and Governance	ED Ops													
HS2	Strategic Outline Business Case	ED Finance													The SOC was reviewed by the Trust Board on 16.12.14. Details of Project Team OBC costs and the Make Ready Business Case for Manor Mill Co-location will be presented to the Trust Board on 27.1.15.
HS3	Full business Case	ED Finance													
HS4	Communications	ED Ops													The Comms and Engagement consultancy work is to be re-tendered in February and commence in March after Trust Board approval is received.
HS5	ORH Modelling	ED Ops													ORH modelling is to be refreshed to confirm locations for the three SOC shortlisted options.
HS6	Financial Modelling	ED Finance													Development of project benefit costs/savings is to commence in January. Full financial modelling of the shortlisted options will be carried out during the last two months of the OBC schedule following review/confirmation of capital and revenue costs.
HS7	Hub and Spoke Specification	ED Finance													Building specifications for station refurbishments and co-location premises are being developed.
HS8	Make Ready	ED Ops													Make Ready specification and costs have commenced and will continue in January.
HS9	Fleet and Ancillary	ED Finance													Fleet requirements will be assessed in January in line with the Make Ready specification.
HS10	ICT	ED Ops													Make Ready IT requirements will be developed in February once the Make Ready specification is agreed.
HS11	EOC Deployment Models	ED Ops													EOC requirements within the Make Ready system will be assessed in January.
HS12	Operational Support Functions	ED Ops													The personnel implications of the project will be assessed in the OBC. Initial staff review plan will be developed in January.
HS13	Estates	ED Finance													Assessment of potential co-location opportunities and the development of detailed construction/running costs for the OBC options have commenced.
HS14	Benefits and Realisation	ED Ops													The Benefits Register has been established and benefit costs/savings are to be developed by the project workstreams.
OD and Leadership - Executive Director of People and Engagement															
ODL1	Management & Leadership	ED PR & E													Engagement strategy approved by Quality Committee and Cultural Audit launched All changes to the PDR fully implemented with evaluation results for QTR2 much improved when benchmarked against the previous 3 QTSs.
ODL2	Service Line Development	ED PR & E													No progress during reporting period
ODL3	Developing Clinical Leadership	EMD													
ODL3a	Support Development of Independent Clinical Practice	EMD													Meeting held with Clinical Development Managers regarding supporting roll-out of clinical supervision model, this will commence in January 2015.
ODL3b	Development of Clinical Career Framework for Frontline Clinicians	EMD													No progress during December due to operational demands
ODL3c	Support Development and Implementation of evidence based best practice by frontline clinicians	EMD													All forums continue to be held
ODL 3d	Support the Development of Clinical Appraisal and Professional Portfolio Development	EMD													PDR objectives written and CSs now using this process. Support for doctor revalidation continues.
ODL4	Staff Engagement and Communications	ED PR & E													Have your Say' sessions now complete. Employee Engagement strategy approved by Quality Committee on 4 December 2014. The second staff FFT has been notified .
Urgent Care - Executive Director of Standards and Compliance															
UC1	Paramedic Pathfinder/ePRF	ED S&C													All plans on track with proposal drafted for consideration by TEG for 2015-16 roll-out plan.
UC2	NHS 111+/Care Coordination	ED S&C													Approved funding for continuation of pilot until March 2015
UC3	Technology Enabled Services	ED S&C													
UC3a	Telehealth	ED S&C													No further update or movement to report this month
UC3b	Telecare	ED S&C													Clear understanding of Telecare products and services to be marketed / sold under YAS / Joint brand (23 December 2014). Also, discussion on integrating customer leads into YAS / Welbeing systems.
UC4	Community ECPs and Advanced Paramedics	ED S&C													Barnsley scheme implemented, York scheme increased by 4 UCPs, preparatory work undertaken to support the implementation of Bradford and Rotherham UCP schemes
UC5	Urgent Care Transport	ED S&C													No further update or movement to report this month
UC6	Managed Services Portfolio	ED S&C													Update reports provided

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%	100%	99%	98%	99%			
	Premise	99%	96%	96%	99%	99%	97%	99%	100%	100%			
	Vehicle	97%	98%	99%	99%	99%	100%	100%	99%	99%			
North Yorkshire and York	Hand Hygiene	97%	97%	99%	97%	98%	99%	96%	I/Data	99%			
	Premise	100%	97%	97%	100%	99%	94%	100%	I/Data	98%			
	Vehicle	96%	94%	96%	94%	96%	99%	95%	I/Data	96%			
Humber	Hand Hygiene	98%	99%	100%	99%	100%	99%	100%	100%	99%			
	Premise	99%	97%	100%	98%	97%	98%	98%	100%	99%			
	Vehicle	98%	98%	100%	99%	98%	92%	91%	97%	87%			
Airedale, Bradford, Leeds	Hand Hygiene	98%	99%	95%	96%	93%	97%	97%	100%	100%			
	Premise	94%	98%	98%	100%	98%	98%	100%	100%	100%			
	Vehicle	99%	98%	96%	95%	94%	99%	100%	100%	95%			
South Yorkshire and Bassetlaw	Hand Hygiene	99%	99%	100%	98%	99%	98%	99%	100%	98%			
	Premise	96%	96%	94%	96%	96%	98%	99%	92%	90%			
	Vehicle	99%	97%	99%	99%	98%	97%	98%	100%	99%			
YAA	Hand Hygiene	100%	100%	100%	100%	100%	100%	100%	100%	100%			
	Premise	100%	100%	100%	100%	100%	100%	100%	100%	100%			
	Vehicle	100%	100%	100%	100%	100%	100%	100%	100%	100%			
Resilience and Special Operations	Hand Hygiene	99%	99%	99%	100%	100%	100%	100%	100%	100%			
	Premise	90%	90%	95%	100%	95%	95%	100%	95%	100%			
	Vehicle	100%	100%	100%	100%	100%	100%	93%	100%	100%			
Private & Events	Hand Hygiene	100%	100%	100%	100%	100%	100%	100%	100%	100%			
	Vehicle	100%	100%	100%	100%	100%	100%	100%	100%	100%			
PTS Leeds	Hand Hygiene	100%	100%	100%	99%	100%	100%	100%	100%	100%			
	Vehicle	98%	96%	100%	100%	94%	95%	94%	97%	89%			
PTS Mid Yorkshire	Hand Hygiene	99%	100%	100%	99%	99%	99%	99%	100%	100%			
	Vehicle	95%	93%	96%	94%	97%	99%	93%	97%	96%			
PTS Bradford / Airedale	Hand Hygiene	100%	99%	99%	100%	99%	99%	99%	98%	99%			
	Vehicle	99%	99%	100%	99%	99%	99%	100%	99%	95%			
PTS Calderdale / Huddersfield	Hand Hygiene	99%	100%	99%	100%	100%	100%	100%	100%	100%			
	Vehicle	98%	100%	100%	99%	100%	97%	100%	I/Data	100%			
PTS North Yorkshire	Hand Hygiene	100%	99%	98%	99%	98%	98%	98%	100%	99%			
	Vehicle	98%	98%	100%	98%	97%	95%	95%	93%	94%			
PTS Hull & East	Hand Hygiene	100%	98%	100%	99%	98%	99%	99%	94%	99%			
	Vehicle	92%	93%	96%	95%	95%	94%	91%	96%	91%			
PTS Sheffield / Barnsley	Hand Hygiene	99%	100%	99%	100%	99%	100%	99%	100%	100%			
	Vehicle	100%	100%	98%	99%	97%	97%	99%	100%	100%			
PTS Rotherham / Doncaster	Hand Hygiene	100%	100%	100%	100%	100%	100%	100%	100%	100%			
	Vehicle	99%	100%	100%	100%	100%	100%	100%	99%	99%			
Overall Compliance (Current Year)	Hand Hygiene	99%	99%	99%	99%	99%	99%	99%	99%	99%			
	Premise	97%	96%	97%	99%	98%	97%	99%	98%	98%			
	Vehicle	98%	98%	99%	98%	98%	98%	97%	98%	96%			
Overall Compliance (Previous Year)	Hand Hygiene	99%	100%	98%	99	98%	99%	99%	98%	99%	99%	99%	99%
	Premise	97%	96%	98%	98	99%	99%	98%	97%	96%	84%	96%	99%
	Vehicle	96%	98%	98%	92	92%	97%	97%	96%	98%	98%	97%	97%

Key for IPC Audit: Pre April 2012

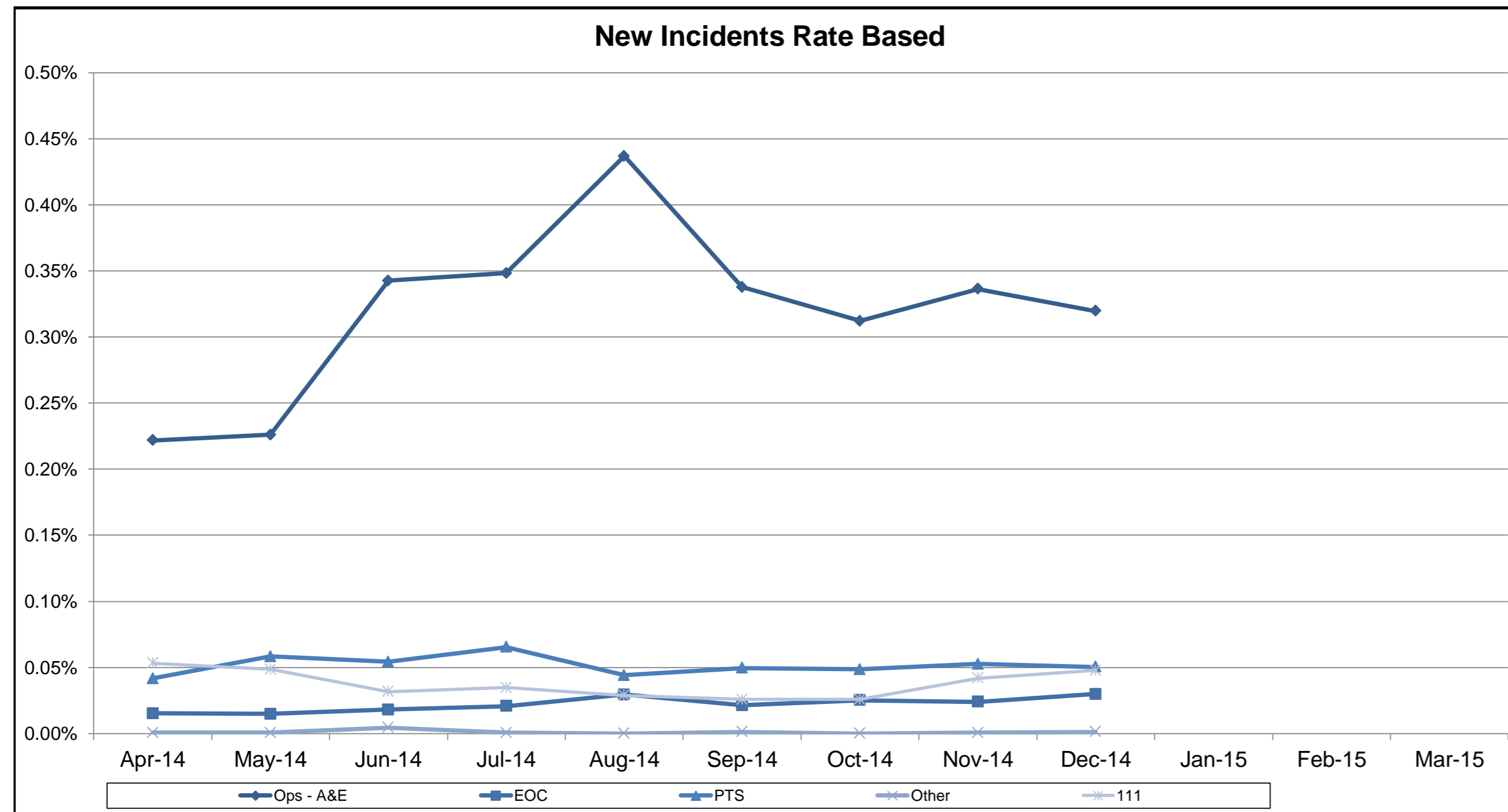
I/Data	Insufficient Data - Minimum Audit requirements not met
	No Audits Completed or minimum audit requirements met with compliance <75%
	Minimum audit requirements met with compliance 75% to 89%
	Minimum audit requirements met with compliance >89%

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 <80%
	Minimum audit requirements met with compliance 80% to 94%
	Minimum audit requirements met with compliance >94%

New Incidents Reported

EWI

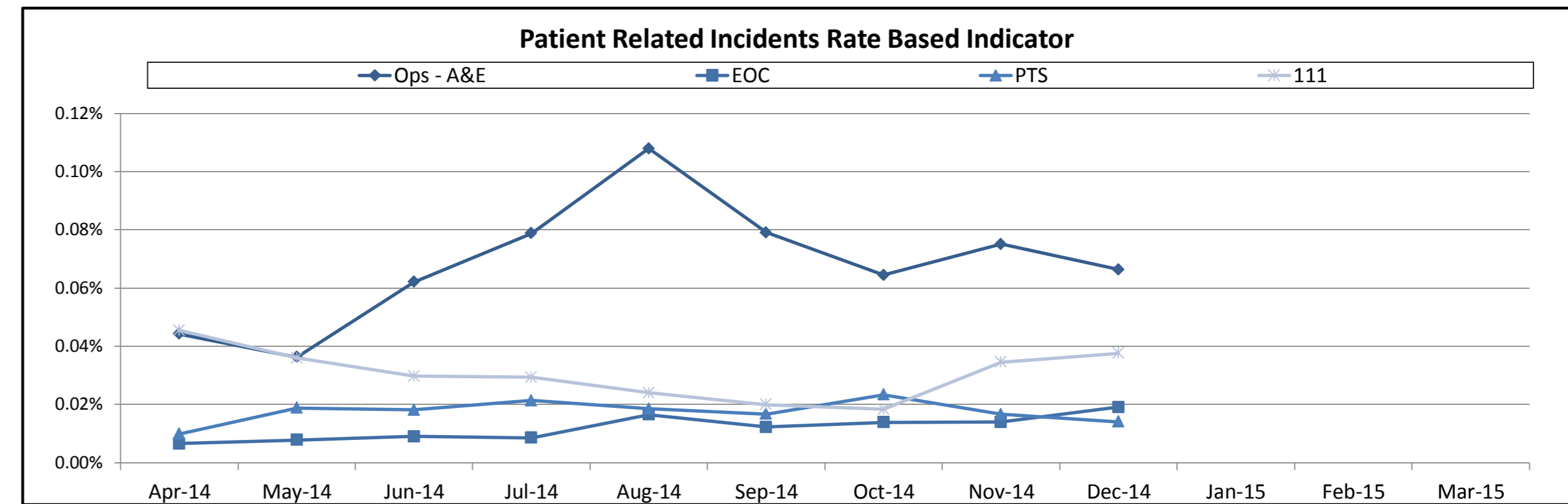


New Incidents Reported	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Ops - A&E	336 (0.22%)	349 (0.23%)	530 (0.34%)	570 (0.35%)	635 (0.44%)	525 (0.34%)	494 (0.31%)	506 (0.34%)	501 (0.32%)			
EOC	23 (0.02%)	23 (0.01%)	28 (0.02%)	34 (0.02%)	43 (0.03%)	33 (0.02%)	40 (0.03%)	36 (0.02%)	47 (0.03%)			
PTS	63 (0.04%)	90 (0.06%)	84 (0.05%)	107 (0.07%)	64 (0.04%)	77 (0.05%)	77 (0.05%)	79 (0.05%)	79 (0.05%)			
111	62 (0.05%)	58 (0.05%)	49 (0.03%)	57 (0.03%)	42 (0.03%)	40 (0.03%)	41 (0.03%)	63 (0.04%)	75 (0.05%)			
Finance	1 (0%)	1 (0%)	7 (0%)	1 (0%)	0 (0%)	2 (0%)	0 (0%)	1 (0%)	2 (0%)			
Medical - Operations	4 (0%)	4 (0%)	9 (0.01%)	2 (0%)	6 (0%)	6 (0%)	1 (0%)	3 (0%)	1 (0%)			
Quality & Patient Experience	2 (0%)	1 (0%)	4 (0%)	0 (0%)	1 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)			
Resilience & Specialist Services	8 (0.01%)	5 (0%)	5 (0%)	11 (0.01%)	6 (0%)	4 (0%)	9 (0.01%)	6 (0%)	7 (0%)			
Support Services	1 (0%)	0 (0%)	2 (0%)	5 (0%)	4 (0%)	0 (0%)	2 (0%)	0 (0%)	0 (0%)			
Foundation Trust	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)			
Human Resources	0 (0%)	1 (0%)	0 (0%)	1 (0%)	1 (0%)	0 (0%)	3 (0%)	1 (0%)	1 (0%)			
Organisational Effectiveness and Education	2 (0%)	1 (0%)	3 (0%)	3 (0%)	1 (0%)	0 (0%)	0 (0%)	2 (0%)	1 (0%)			
Risk & Safety	2 (0%)	0 (0%)	1 (0%)	1 (0%)	0 (0%)	1 (0%)	2 (0%)	1 (0%)	0 (0%)			
ICT	1 (0%)	0 (0%)	1 (0%)	1 (0%)	1 (0%)	1 (0%)	0 (0%)	1 (0%)	1 (0%)			
Business Intelligence	0 (0%)	0 (0%)	0 (0%)	1 (0%)	1 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)			
Fleet	5 (0%)	3 (0%)	0 (0%)	5 (0%)	1 (0%)	3 (0%)	6 (0%)	5 (0%)	3 (0%)			
Legal	0 (0%)	0 (0%)	0 (0%)	1 (0%)	0 (0%)	0 (0%)	0 (0%)	2 (0%)	0 (0%)			
Transformation	1 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0%)	0 (0%)	0 (0%)	0 (0%)			
Procurement	1 (0%)	1 (0%)	0 (0%)	1 (0%)	1 (0%)	0 (0%)	2 (0%)	0 (0%)	0 (0%)			
Corporate Communications	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0%)	0 (0%)	0 (0%)			
TOTALS	512	537	723	801	807	693	678	706	720			
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%)	123 (0.08%)	102 (0.06%)	113 (0.08%)	104 (0.07%)			
EOC	10 (0.01%)	12 (0.01%)	14 (0.01%)	14 (0.01%)	24 (0.02%)	19 (0.01%)	22 (0.01%)	21 (0.01%)	30 (0.02%)			
PTS	15 (0.01%)	29 (0.02%)	28 (0.02%)	35 (0.02%)	27 (0.02%)	26 (0.02%)	37 (0.02%)	25 (0.02%)	22 (0.01%)			
111	53 (0.05%)	43 (0.04%)	46 (0.03%)	48 (0.03%)	35 (0.02%)	31 (0.02%)	29 (0.02%)	52 (0.03%)	59 (0.04%)			
Medical Operations	1 (0%)	2 (0%)	4 (0%)	0 (0%)	3 (0%)	6 (0%)	1 (0%)	2 (0%)	0 (0%)			
OTHER	4 (0%)	3 (0%)	1 (0%)	4 (0%)	6 (0%)	1 (0%)	3 (0%)	0 (0%)	6 (0%)			
TOTALS (Current Year)	150	145	189	230	252	206	194	213				
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

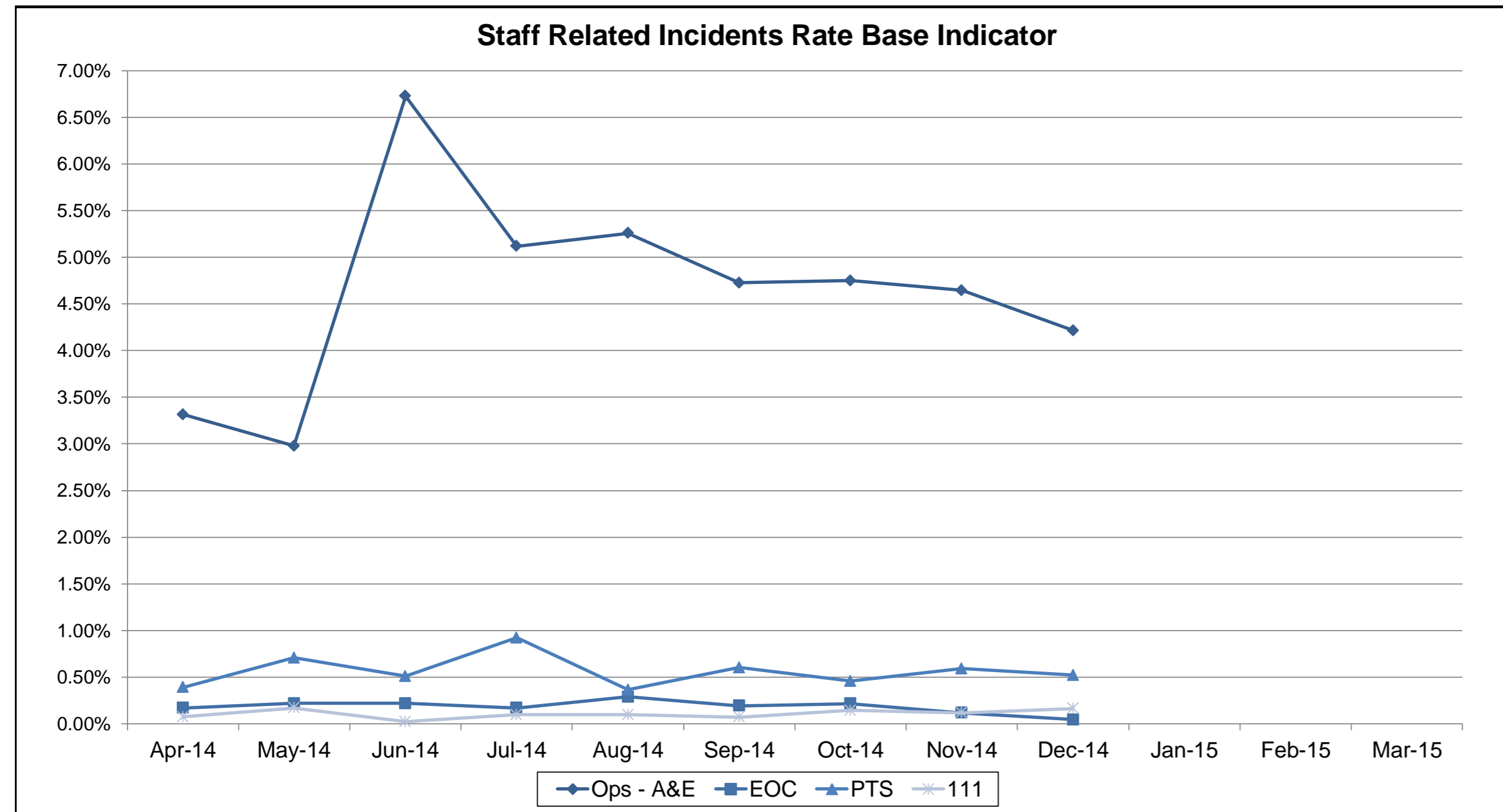
Number of Medication Incidents	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Current Year	39	40	48	75	59	37	41	37	65			
Previous Year	23	26	30	34	29	23	30	27	50	29	30	37

Morphine Related Incidents

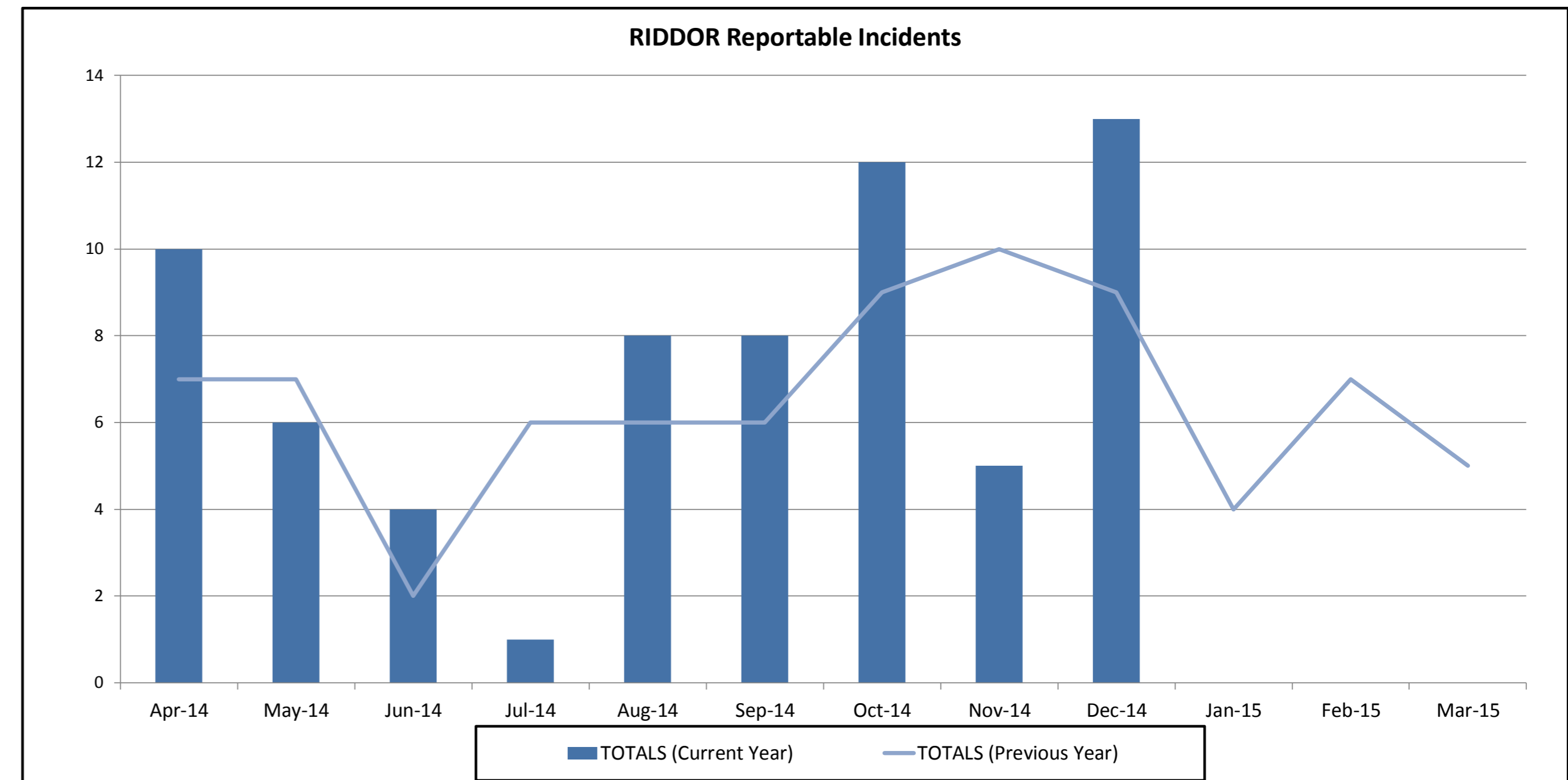
OBJ REF 3

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	6	10	10	18			
Administrative errors	6	3	3	4	4	1	2	0	1			
Loss	2	1	1	3	2	1	0	4	5			
Clinical	0	0	3	0	0	0	0	0	0			
Other	2	1	0	15	0	2	0	0	0			
TOTAL (Current Year)	19	20	25	35	18	10	12	14	24			
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%)	196 (4.73%)	197 (4.75%)	196 (4.64%)	178 (4.22%)			
EOC	7 (0.17%)	9 (0.22%)	9 (0.22%)	7 (0.17%)	12 (0.29%)	8 (0.19%)	9 (0.22%)	5 (0.12%)	2 (0.05%)			
PTS	16 (0.39%)	29 (0.71%)	21 (0.51%)	38 (0.92%)	15 (0.36%)	25 (0.6%)	19 (0.46%)	25 (0.59%)	22 (0.52%)			
111	3 (0.07%)	7 (0.17%)	1 (0.02%)	4 (0.1%)	4 (0.1%)	3 (0.07%)	6 (0.14%)	5 (0.12%)	7 (0.17%)			
Finance	0 (0%)	1 (0.02%)	1 (0.02%)	1 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)			
Medical - Operations	3 (0.07%)	1 (0.02%)	2 (0.05%)	1 (0.02%)	3 (0.07%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)			
Quality & Patient Experience	0 (0%)	0 (0%)	2 (0.05%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)			
Resilience & Specialist Services	4 (0.1%)	2 (0.05%)	1 (0.02%)	1 (0.02%)	3 (0.07%)	2 (0.05%)	3 (0.07%)	3 (0.07%)	2 (0.05%)			
Support Services	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	1 (0.02%)	0 (0%)	1 (0.02%)	0 (0%)	0 (0%)			
Foundation Trust	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)			
Human Resources	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0.02%)	0 (0%)	0 (0.02%)	0 (0.02%)	1 (0.02%)			
Organisational Effectiveness and Education	1 (0.02%)	1 (0.02%)	1 (0.02%)	3 (0.07%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)			
Risk & Safety	1 (0.02%)	0 (0%)	0 (0%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)			
ICT	0 (0%)	0 (0%)	1 (0.02%)	1 (0.02%)	0 (0%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)			
Procurement	1 (0.02%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)	0 (0.02%)	1 (0.02%)	0 (0%)	2 (0.05%)			
FLEET	2 (0.05%)	1 (0.02%)	0 (0%)	1 (0.02%)	0 (0%)	1 (0.02%)	0 (0.02%)	1 (0.02%)	1 (0.02%)			
TOTALS (Current Year)	174	174	316	269	257	236	238	237	216			
TOTALS (Previous Year)	108	106	101	101	129	109	171	142	170			

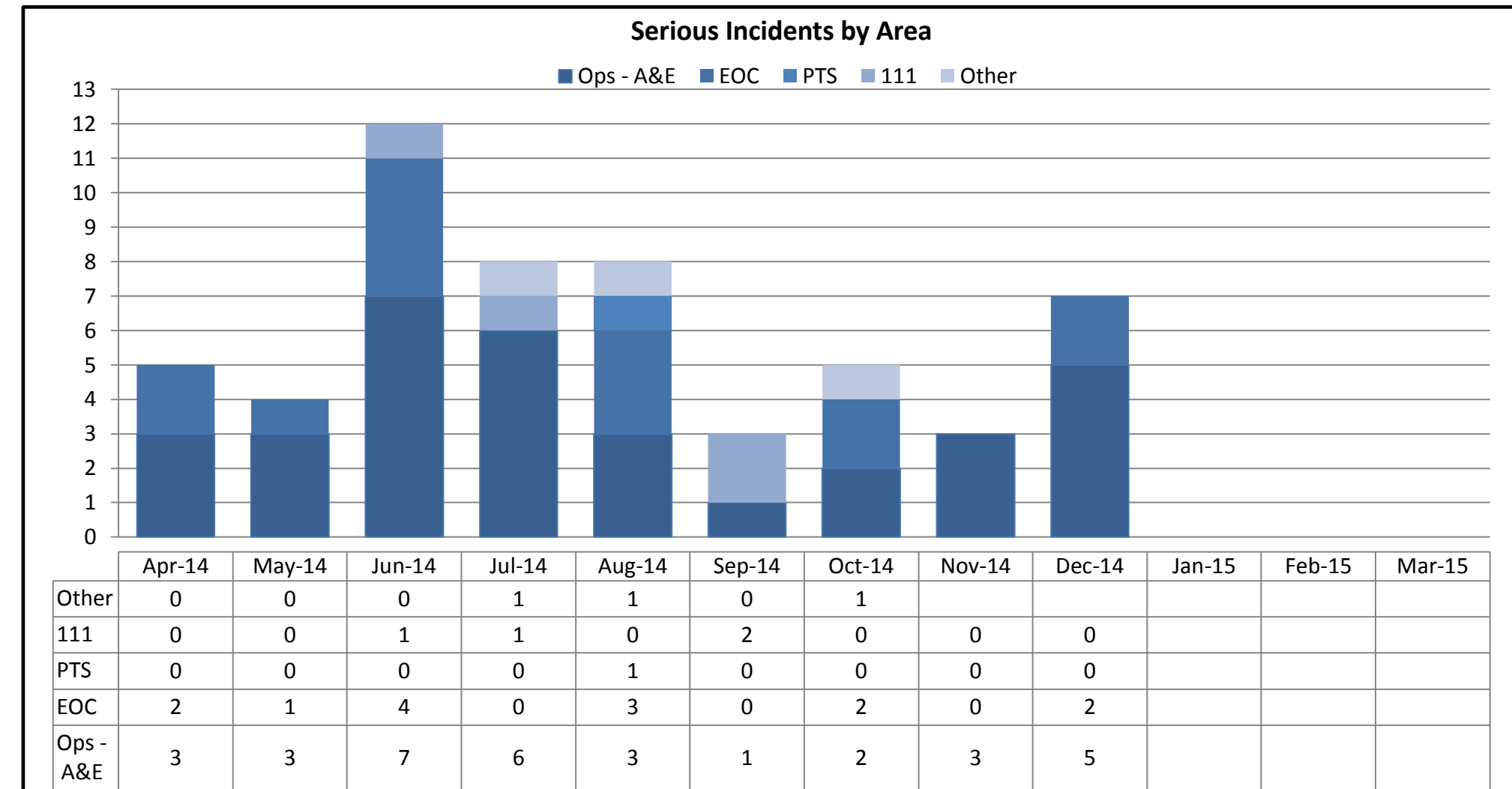
Staff Related Incidents Percentage is the number of staff related incidents divided by the total WTE per month

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	1	2	1	1			
East Riding of Yorkshire CBU	1	0	1	1	2	1	2	0	2			
Leeds & Wakefield CBU	1	1	1	0	1	2	2	1	0			
Bradford, Calderdale and Kirklees CBU	6	2	0	0	0	1	3	2	4			
South Yorkshire CBU	1	1	1	0	1	1	3	0	2			
Operations PTS	1	0	0	0	2	2	0	1	3			
Other Directorates	0	1	0	0	0	0	0	0	1			
TOTALS (Current Year)	10	6	4	1	8	8	12	5	13			
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	0	0	0	0			
Hit by a moving, flying or falling object	0	1	0	0	0	0	0	1	0			
Hit by a moving vehicle	0	0	0	0	0	0	0	0	0			
Hit by something fixed or stationary	0	0	0	0	0	0	0	0	0			
Injured while handling, lifting or carrying	7	2	2	1	4	5	10	2	8			
Slip, trip or fall on the same level	2	1	2	0	3	2	0	1	5			
Fall from a height	0	1	0	0	0	1	0	0	0			
Trapped by something collapsing	0	0	0	0	0	0	0	0	0			
Drowned or asphyxiated	0	0	0	0	0	0	0	0	0			
Exposed to or in contact with a harmful substance	0	0	0	0	0	0	0	1	0			
Exposed to fire	0	0	0	0	0	0	0	0	0			
Exposed to an explosion	0	0	0	0	0	0	0	0	0			
Contact with electricity or an electrical discharge	0	0	0	0	0	0	0	0	0			
Injured by an animal	0	0	0	0	0	0	0	0	0			
Physically assaulted by a person	0	0	0	0	0	0	1	0	0			
Another kind of accident	1	1	0	0	1	0	1	0	0			
Total	10	6	4	1	8	8	12	5	13			

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	3	5	3	7			
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	1	2	2	4			
Road Traffic Collision	0	1	0	0	0	0	1	0	0			
Clinical care	1	0	1	1	0	0	0	0	0			
Inadequate clinical assessment	1	0	2	1	0	2	0	0	1			
Violence & aggression	0	0	0	0	0	0	0	0	0			
Data protection breach	0	0	0	1	1	0	0	0	0			
Adverse media attention	0	0	0	0	0	0	0	0	0			
Medication related	0	0	0	0	0	0	0	0	0			
Patient Fall	0	0	0	0	1	0	0	0	0			
Maternity issue	0	0	0	0	0	0	0	0	0			
Other	0	0	0	0	0	0	2	1	2			
Total	5	4	12	8	8	3	5	3	7			

Training Position

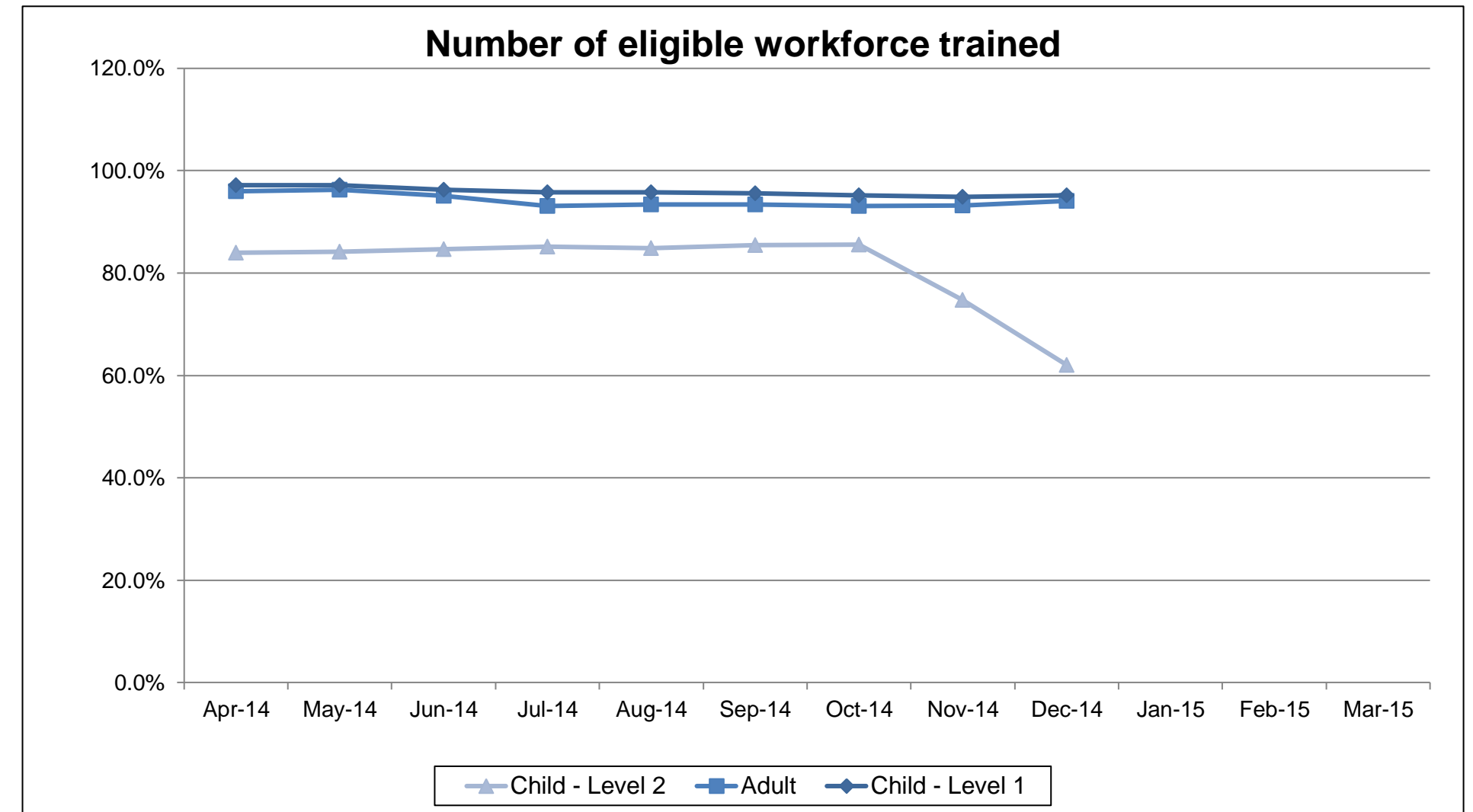
YTD RAG

GREEN

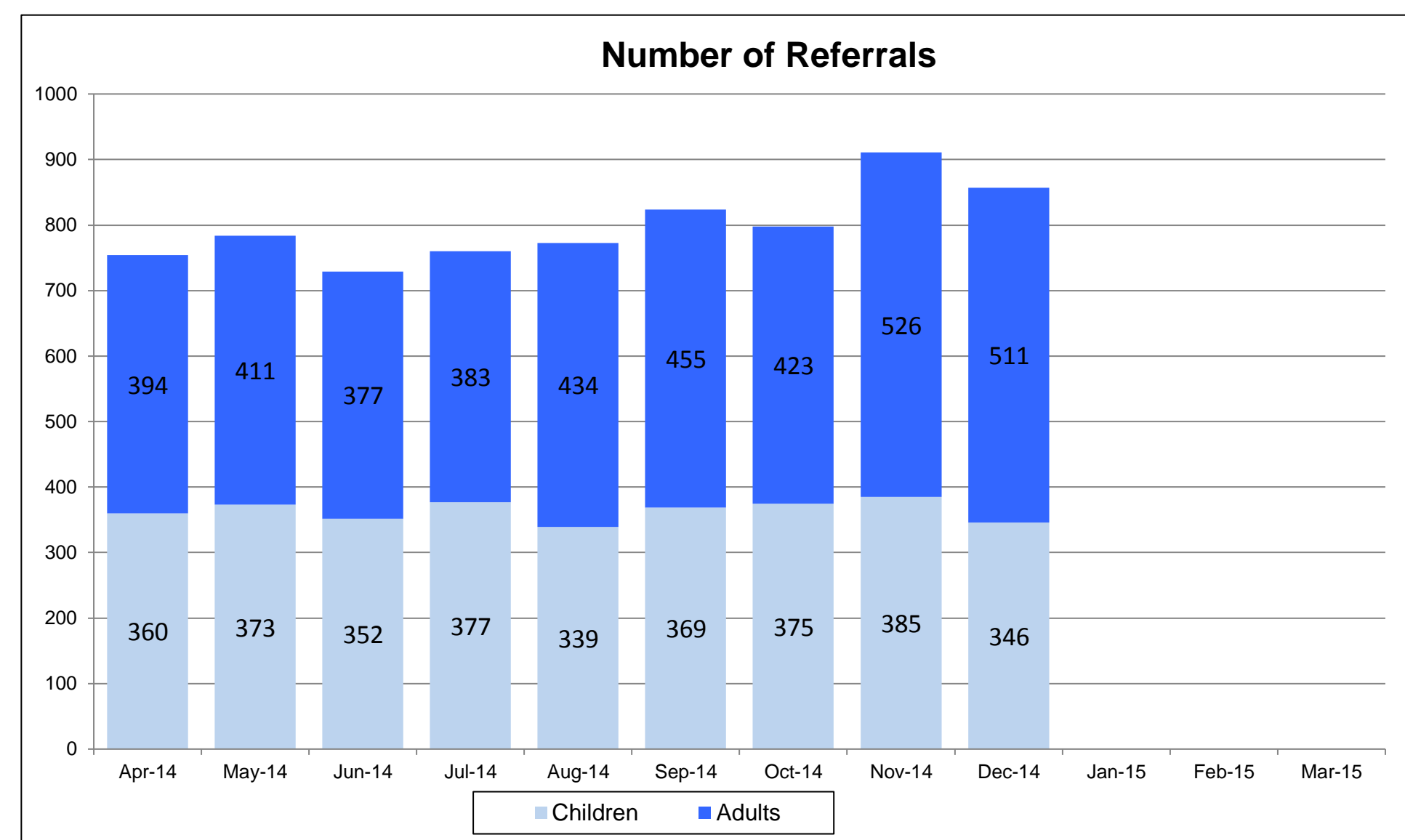


MTD RAG

GREEN



Number of Child and Adult Referrals



Clinical Performance Indicators - National

OBJ REF

1.2 : 3

The latest reported CPI is the Elderly Falls Pilot . The E3 element was dropped together with the Care bundle element from this report due to inconsistent data and non submission by some Trusts nationally.

Elderly Falls (Pilot)	CYCLE 13% Results	
	Sep-14	National Average %
E1- Primary Obs recorded	91.7	88.7
E2- Recorded Assessment Cause of Fall	99.7	92.8
E3- History of Falls	N/A	N/A
E4- 12 Lead ECG Assessment	93.7	84.8
E5- Recorded Assessment of Mobility	69.3	73.4
E6- Direct Referral to an appropriate Healthcare professional	52.0	49.6
FC- Care Bundle For Elderly Falls (E1+E2+E3+E4+E5+E6)	N/A	N/A

Note: Elderly Falls Pilot Replaces Hypo CPI from Cycle 13, Due for November submission

Note: In Cycle 11 changes were made nationally to both criteria and care bundles

Clinical Audit Programme

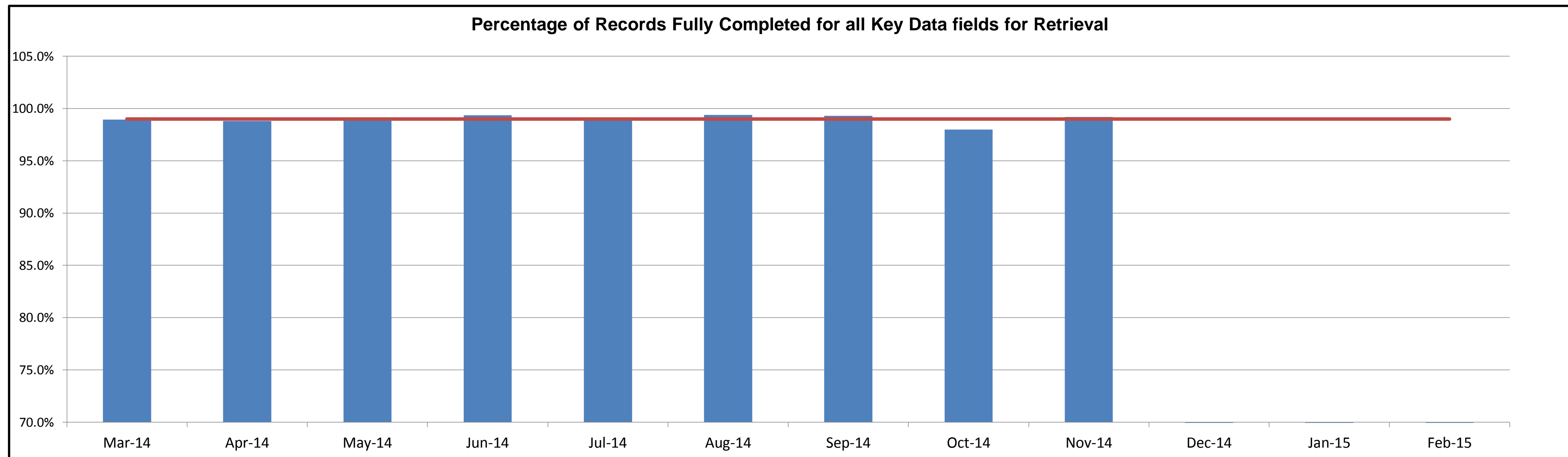
National Audit Programme

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

Internal Clinical 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
Monthly Local CPis	Other See Audit Plan	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG
Cardiac Arrest outcomes		AMBER	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN			
National Requirements													

Patient Report Form Audit



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	51,515	51,034	53893	53998			
Total of forms with key data incomplete	658	738	602	262	547	301	366	1059	271			
% of Completed Forms	98.9%	98.8%	99.1%	99.4%	98.9%	99.4%	99.3%	98.0%	99.2%			

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	2	2	0	1				12
	Telephone Manner		0	2	1	5	0	0	1	1	0				10
EOC Call Handling	Red AMPDS		0	0	0	0	3	1	1	2	0				7
	Green AMPDS		0	1	1	0	1	1	5	4	1				14
	Green Clinical Hub		1	1	2	4	5	4	3	1	0				21
	Green 111 triage		0	0	0	0	0	0	1	1	0				2
	HCP Request		3	1	4	2	5	1	3	4	2				25
EOC Delayed Response	Red		2	5	5	5	7	2	5	2	7				40
	Green 1, 2, 3, 4		24	24	31	23	13	12	29	20	44				220
	IHT		0	7	5	3	7	2	3	6	1				34
	Admission		6	4	8	6	6	2	4	1	3				40
	Take Home		1	1	0	3	1	0	0	1	0				7
Other		7	0	3	0	0	3	1	1	0				15	
EOC TOTAL			44	48	61	52	51	30	58	44	59				447
Demand Activity (Based on Number of Calls)			67571	71947	69623	73605	67861	67493	71584	71377	81238				642299
% Rate			0.07%	0.07%	0.09%	0.07%	0.08%	0.04%	0.08%	0.06%	0.07%				0.07%
A&E Attitude	Lack of Care		4	6	2	1	6	3	5	3	2				32
	Communication Skills		8	8	16	9	4	12	9	20	10				96
A&E Clinical	Assessment		1	6	7	5	6	11	3	3	4				46
	Clinical Handover		1	0	0	0	1	0	1	0	0				3
	Treatment		9	3	3	4	4	6	2	3	1				35
	Moving & Handling		1	0	3	1	1	5	4	1	0				16
A&E Operations	Pathways		9	6	8	4	2	0	7	3	2				41
	Operational Procedures		14	11	13	8	10	3	11	11	6				87
	Vehicles & Stretchers		0	1	2	1	1	2	2	1	3				13
	Driving		9	7	8	6	4	4	8	10	5				61
	Other		0	1	0	2	0	2	1	0	1				7
A&E TOTAL			56	49	62	41	39	48	53	55	34				437
Demand Activity (Based on Number of Responses)			58695	62128	59626	61987	58869	58443	60761	62830	68124				551463
% Rate			0.10%	0.08%	0.10%	0.07%	0.07%	0.08%	0.09%	0.09%	0.05%				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	0	0	0	0				1	
		South	0	2	0	0	0	0	0	0	0	0				2
		Hull & East	0	0	1	0	0	0	0	0	0	0				1
		ABL	0	0	0	0	0	0	0	0	0	0				0
		CKW	0	0	0	0	0	0	0	0	0	0				0
		EOC	0	0	1	0	2	0	0	0	3	2				8
		Total	0	2	2	1	2	0	0	3	2				12	
	Amber	North	3	0	1	0	1	1	0	0	0					6
		South	4	0	3	0	2	1	0	2	2					14
		Hull & East	2	1	2	1	0	1	1	1	0	0				8
		ABL	0	1	2	0	0	3	1	1	1	1				9
		CKW	2	0	0	2	0	3	0	2	0	0				9
		EOC	1	3	5	4	4	1	6	0	8					32
		Total	12	5	13	7	7	10	8	5	11				78	
	Yellow	North	4	6	9	7	4	4	4	8	1	3				46
		South	4	4	7	4	4	7	4	6	3					43
		Hull & East	5	2	1	6	2	1	6	6	0					29
		ABL	7	3	7	7	9	5	4	4	4	7				53
		CKW	8	8	8	4	5	2	2	6	2					45
		EOC	27	21	36	24	25	11	23	18	18					203
		Total	55	44	68	52	49	30	47	41	33				419	
	Green	North	5	4	4	0	4	5	5	7	5					39
		South	3	6	6	2	2	3	3	7	2					34
		Hull & East	2	4	1	1	2	2	2	8	3					25
ABL		0	4	4	2	3	6	10	5	3					37	
CKW		7	4	6	4	1	3	6	0	3					34	
EOC		16	23	19	24	20	19	29	23	31					204	
	Total	33	45	40	33	32	38	55	50	47				373		

Compliments			Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
A&E/EOC TOTAL			64	50	64	33	54	19	0	0	104				388

Concerns, Complaints, Comments and Compliments - PTS

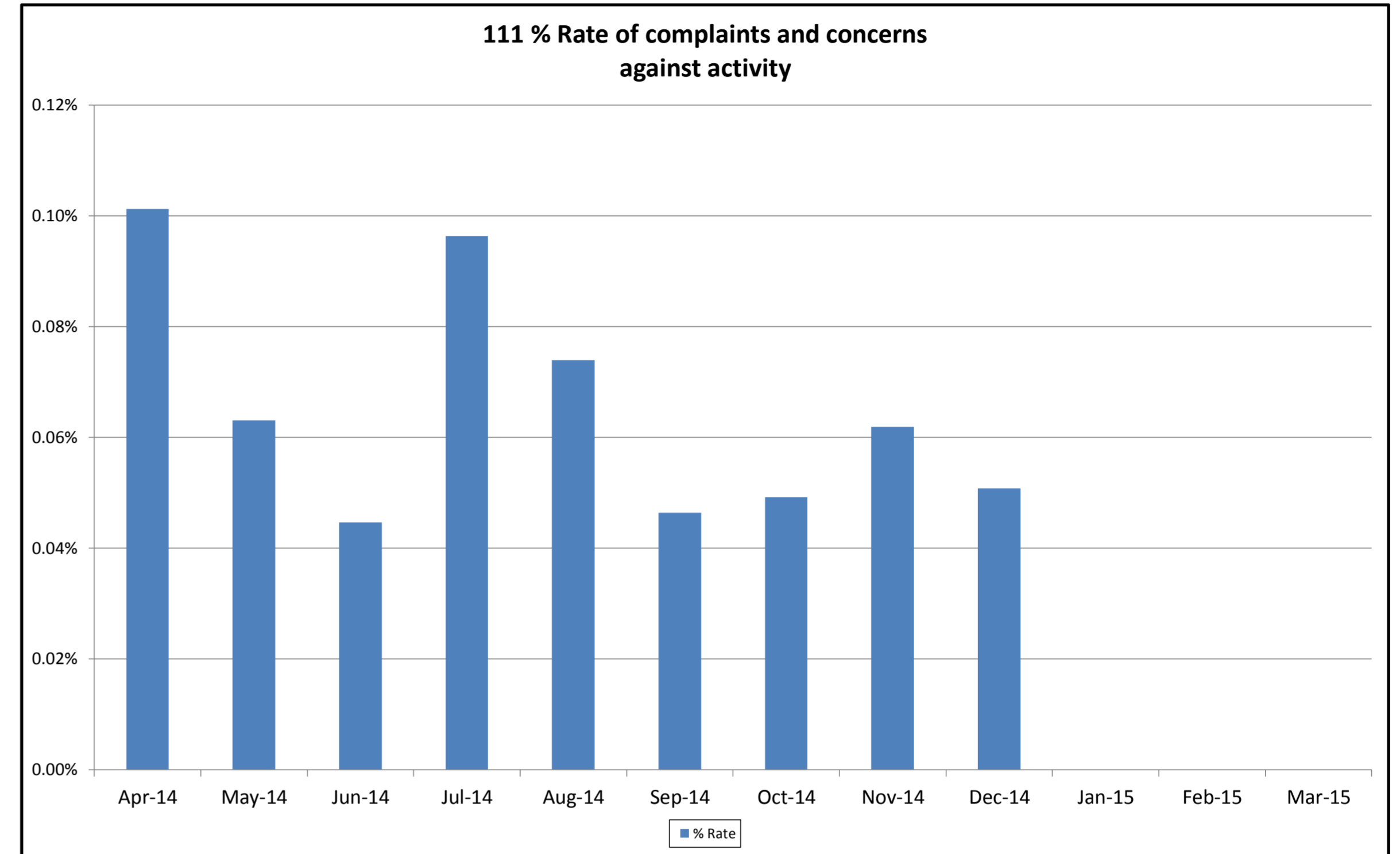
Complaints, Concerns and Comments		EWI	Codes	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
PTS Communications	Attitude		C	2	0	3	0	1	1	2	0	2				11
	Administration Error		A	4	4	5	2	2	7	6	3	2				35
	Call Handling		J	1	0	1	2	1	4	1	2	0				12
PTS Operations	Attitude		B	6	3	8	6	8	10	9	6	4				60
	Driving		I	5	2	2	3	1	5	5	4	2				29
	Vehicle Condition/Comfort		E	1	0	0	0	0	0	1	0	0				2
	Non-Attendance/Late to Collect Patient from Home		F H U	4	6	11	15	8	23	19	15	14				115
	Patient Early/Late for Appointment		T S	5	4	5	3	2	2	3	6	3				33
	Non-Attendance/Late to Collect Patient from Clinic/Hospital		D G V	11	7	21	8	15	22	26	22	20				152
	Patient Injury		M N	0	1	2	3	2	2	1	4	0				15
	Patient Care		O	9	1	4	4	3	4	7	8	5				45
	Vehicle Unsuitable		W	5	3	3	3	4	2	7	2	6				35
Time on Vehicle		P	1	2	2	0	0	0	1	0	2				8	
PTS Other				1	1	0	1	0	2	0	0	1				6
SUB TOTAL 4Cs				55	34	67	50	47	84	88	72	61				558
PTS Service-to-Service				35	16	48	20	41	59	-	58	56				333
TOTAL				90	50	115	70	88	143	88	130	117				891
Demand Activity				92795	92326	95094	101675	86516	97011	97471	87591	88642				839121
% Rate				0.10%	0.05%	0.12%	0.07%	0.10%	0.15%	0.09%	0.15%	0.13%				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	0	0	0				0
		South	0	0	0	0	0	0	0	0	0				0
		East	0	0	0	0	0	0	0	0	0				0
		West	0	0	0	0	0	0	0	0	0				0
		Total	0	0	0	0	0	0	0	0	0	0			0
	Amber	North	1	0	0	0	0	0	0	0	0				1
		South	1	0	0	0	0	0	0	1	0				2
		East	0	0	0	2	0	2	0	0	0				4
		West	0	2	1	1	2	0	1	4	0				11
		Total	2	2	1	3	2	2	1	5	0				18
	Yellow	North	0	1	1	0	0	2	3	1	1				9
		South	2	1	3	2	2	0	1	5	1				17
		East	2	0	2	5	7	10	5	4	1				36
		West	8	6	11	11	6	7	14	8	7				78
		Total	12	8	17	18	15	19	23	18	10				140
	Green	North	9	3	6	1	6	10	5	7	1				48
		South	3	4	7	6	4	9	9	11	10				63
		East	10	8	13	10	10	24	15	6	8				104
		West	20	9	23	12	10	19	37	25	30				185
		Total	42	24	49	29	30	62	66	49	49				400

Compliments		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
PTS TOTAL		7	1	5	0	5	6	1	0	12				37

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	3	2	1	3				20
Clinical	8	5	7	7	8	7	4	9	15				70
Operations	8	6	2	1	5	11	7	7	12				59
Sub Total	16	12	12	13	15	21	13	17	30				149
HCP Complaints & Concerns	102	65	37	93	67	27	43	60	48				542
GRAND TOTAL	118	77	49	106	82	48	56	77	78				691
Call Activity	116,583	122,083	109,737	110,065	110,896	103,393	113,758	124,394	153,497				1,064,406
% RATE	0.10%	0.06%	0.04%	0.10%	0.07%	0.05%	0.05%	0.06%	0.05%				0.06%



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	1	3	0	0				8
Clinical	6	5	5	11	8	8	11	6	7				67
Operations	2	7	5	2	6	9	4	5	6				46
Sub Total	9	12	13	13	14	18	18	11	13				121
HCP Complaints & Concerns	1	4	5	2	3	3	6	6	1				31
GRAND TOTAL	10	16	18	15	17	21	24	17	14				152
Call Activity	24337	25058	21072	19548	21328	18707	20530	24471	27619				202670
% RATE	0.04%	0.06%	0.09%	0.08%	0.08%	0.11%	0.12%	0.07%	0.05%				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	11	14	10	3	9				88
LCD	1	1	0	0	0	3	1	1	3				10

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	2	1	0	1				9
	2 - 24 Working Days	3	1	2	6	2	2	5	7	6				34
	>25 Working Days	17	10	9	8	4	5	4	5	1				63
South	Within 1 Working Day	1	1	0	3	0	1	0	2	2				10
	2 - 24 Working Days	6	2	2	7	3	2	1	3	9				35
	>25 Working Days	22	8	9	6	5	5	9	2	4				70
Hull & East	Within 1 Working Day	0	0	1	0	0	0	0	0	0				1
	2 - 24 Working Days	3	2	2	4	1	1	1	3	4				21
	>25 Working Days	10	7	4	1	7	3	3	5	10				50
ABL	Within 1 Working Day	0	0	0	2	0	0	0	0	1				3
	2 - 24 Working Days	9	2	4	2	2	7	9	9	5				49
	>25 Working Days	11	6	4	9	7	5	5	6	4				57
CKW	Within 1 Working Day	5	1	0	1	0	0	1	1	0				9
	2 - 24 Working Days	10	6	9	6	2	5	2	3	5				48
	>25 Working Days	19	9	3	7	8	1	5	4	3				59
EOC	Within 1 Working Day	6	4	3	2	0	0	0	3	2				20
	2 - 24 Working Days	3	6	3	6	11	4	4	21	6				64
	>25 Working Days	35	34	42	53	41	47	27	35	35				349

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	0	1	1	0				4
	2 - 24 Working Days	1	6	1	4	0	3	5	4	2				26
	>25 Working Days	4	3	3	3	0	3	5	5	0				26
South	Within 1 Working Day	7	0	0	0	1	0	2	1	0				11
	2 - 24 Working Days	3	4	3	5	2	3	2	2	14				38
	>25 Working Days	8	1	3	5	5	3	5	7	3				40
East	Within 1 Working Day	1	0	0	1	0	4	3	2	0				11
	2 - 24 Working Days	3	5	3	8	13	7	21	10	8				78
	>25 Working Days	3	7	4	6	4	6	11	9	6				56
West	Within 1 Working Day	3	2	0	2	0	2	2	0	0				11
	2 - 24 Working Days	18	16	7	10	14	8	15	30	20				138
	>25 Working Days	29	10	10	23	10	8	9	24	17				140

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	3	2	0	5				19
EOC	1	2	0	2	1	7	0	0	2				15
PTS	0	3	1	1	2	0	5	0	0				12
111	0	3	1	1	0	2	2	0	2				11

Ombudsman Referrals - A&E													
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
Referral notified	1	1	0	0	0	1	0	0	1				4
Referral accepted	0	0	0	1	0	1	0	0	0				2
Referral rejected	0	0	0	0	0	0	0	0	0				0
Case upheld	0	0	0	0	0	0	0	0	0				0
Case not upheld	0	0	0	0	0	1	0	0	0				1
Outstanding	0	0	0	3	0	0	0	0	1				4

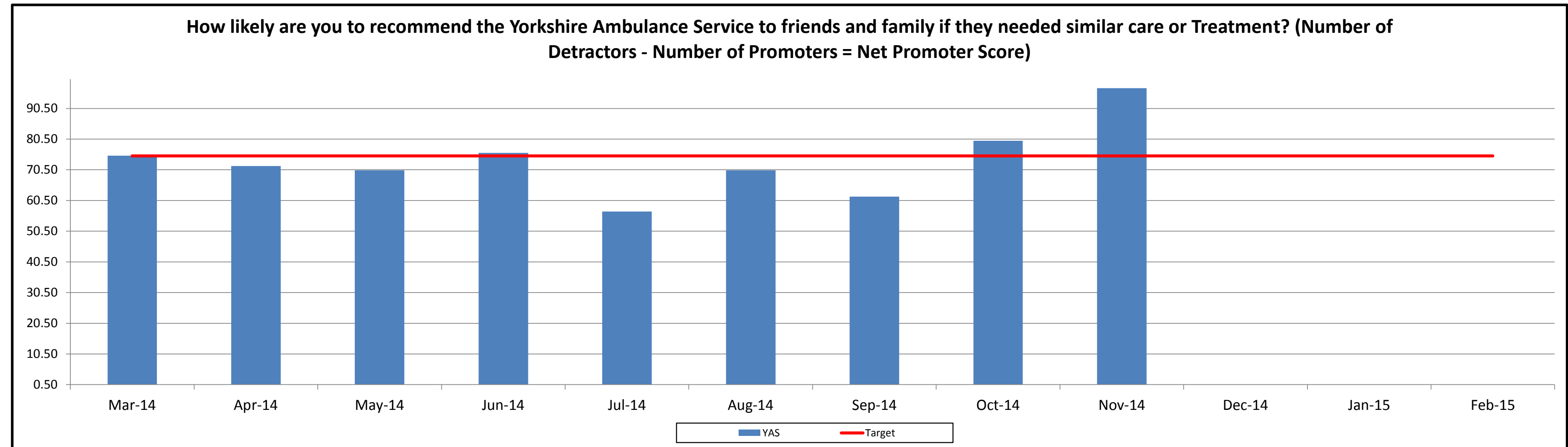
Ombudsman Referrals - EOC													
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
Referral notified	0	0	0	0	0	0	0	0	1				1
Referral accepted	0	0	0	0	0	0	0	0	0				0
Referral rejected	0	0	0	0	0	0	0	0	0				0
Case upheld	0	0	0	0	0	0	0	0	0				0
Case not upheld	0	0	0	0	0	0	0	0	0				0
Outstanding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

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

A&E Patient Experience Survey

	YTD RAG	AMBER
↑	MTD RAG	GREEN

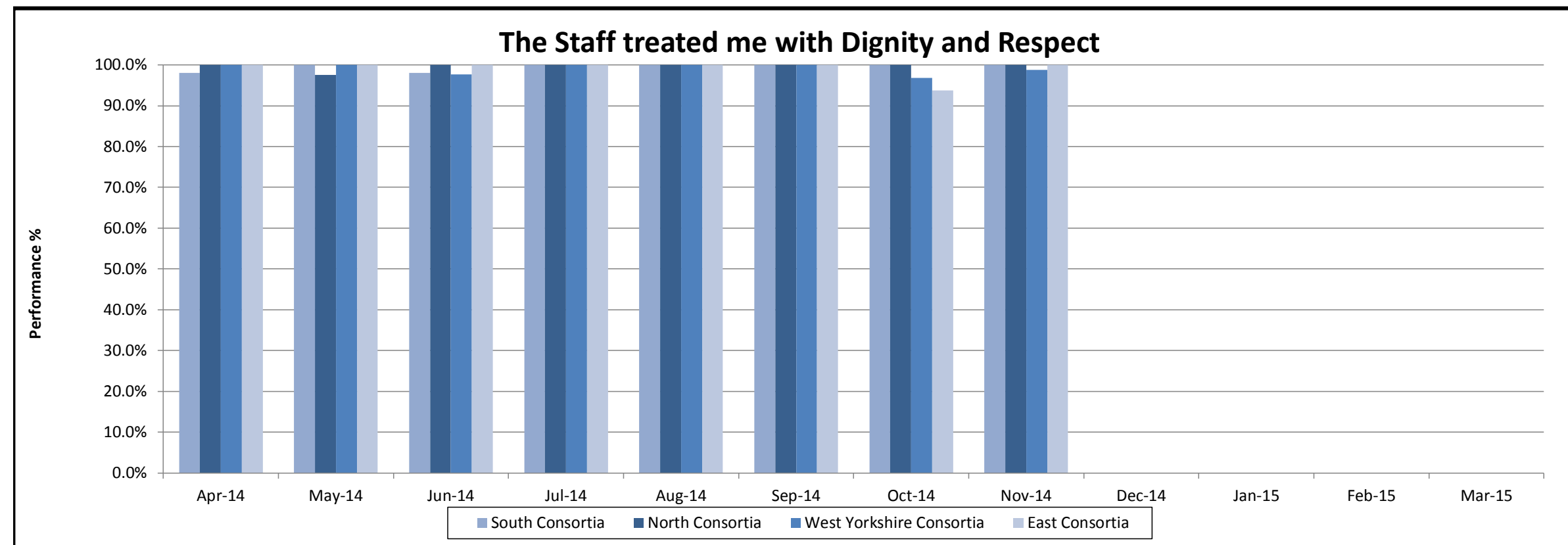


Overall Service	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
North Yorkshire CBU	72.70	61.30	83.33	83.33	68.75	90.91	93.75	74.07	100.00			
East Yorkshire CBU	89.50	78.60	60.00	86.67	68.75	58.33	50.00	85.71	90.00			
Calderdale, Kirklees & Wakefield CBU	82.10	82.10	84.62	80.00	77.27	58.82	72.73	82.76	100.00			
Leeds, Bradford & Airedale CBU	70.00	67.60	35.71	84.62	62.50	75.00	68.00	94.12	91.30			
South Yorkshire CBU	65.40	83.30	69.70	72.22	52.00	79.17	78.13	81.40	98.33			
Unknown Area	82.10	41.20	70.97	71.43	36.11	65.79	21.88	56.25	96.43			
YAS	75.10	71.70	70.29	76.03	56.91	70.34	61.73	80.00	97.06			
YAS variance to previous Month	5.60	-3.40	-1.44	5.74	-19.12	13.43	-8.61	18.27	17.06			

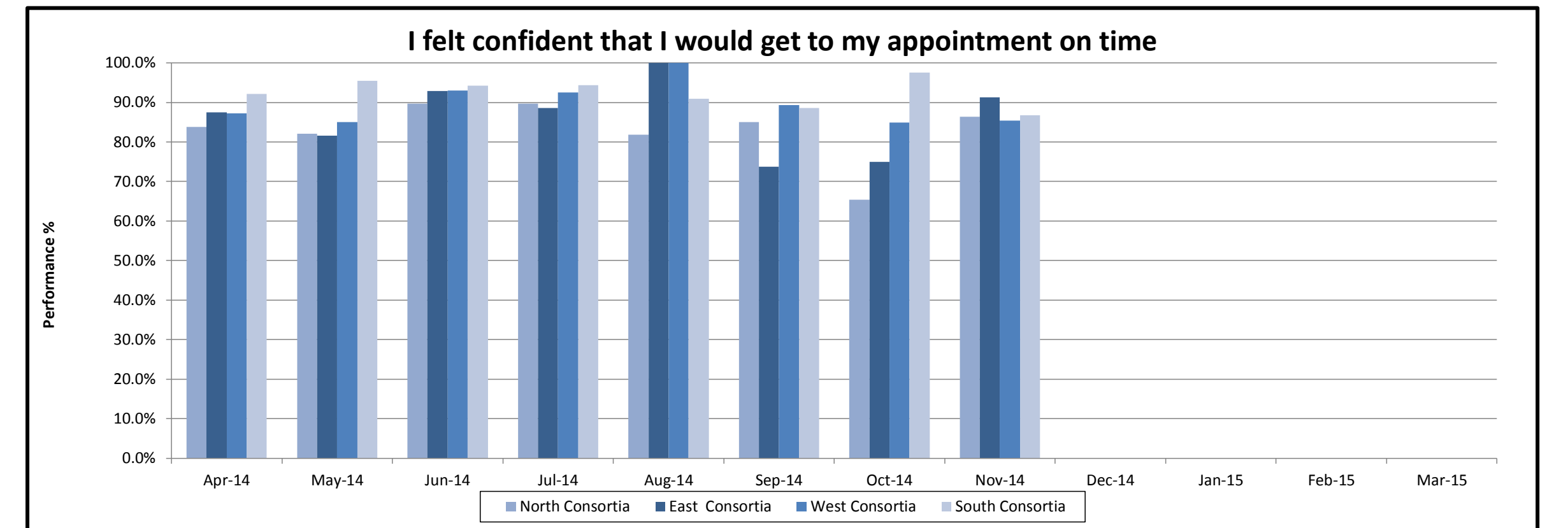
Please note: This will be 1 month in arrears
 In November 2012 the rating scale used for this question was changed from 1 to 10 to a descriptive scale (extremely likely, likely, neither likely nor unlikely, unlikely, not at all, don't know)

PTS Patient Experience Survey

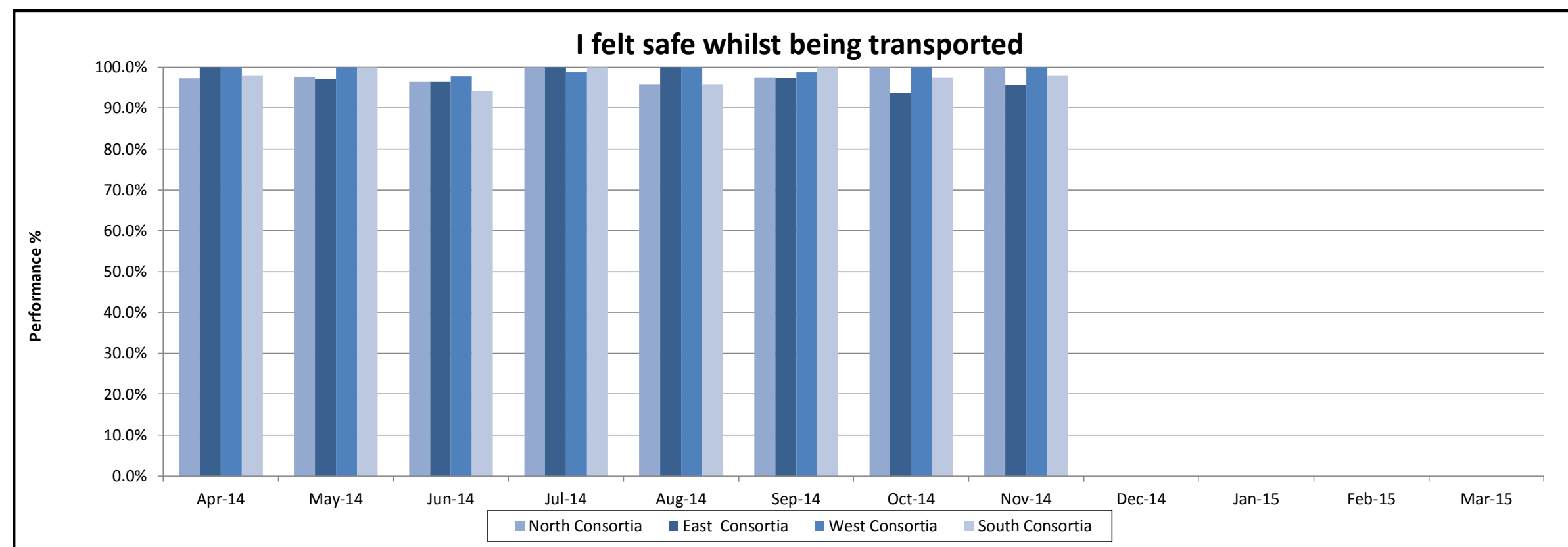
	YTD RAG	N/A
←	MTD RAG	N/A



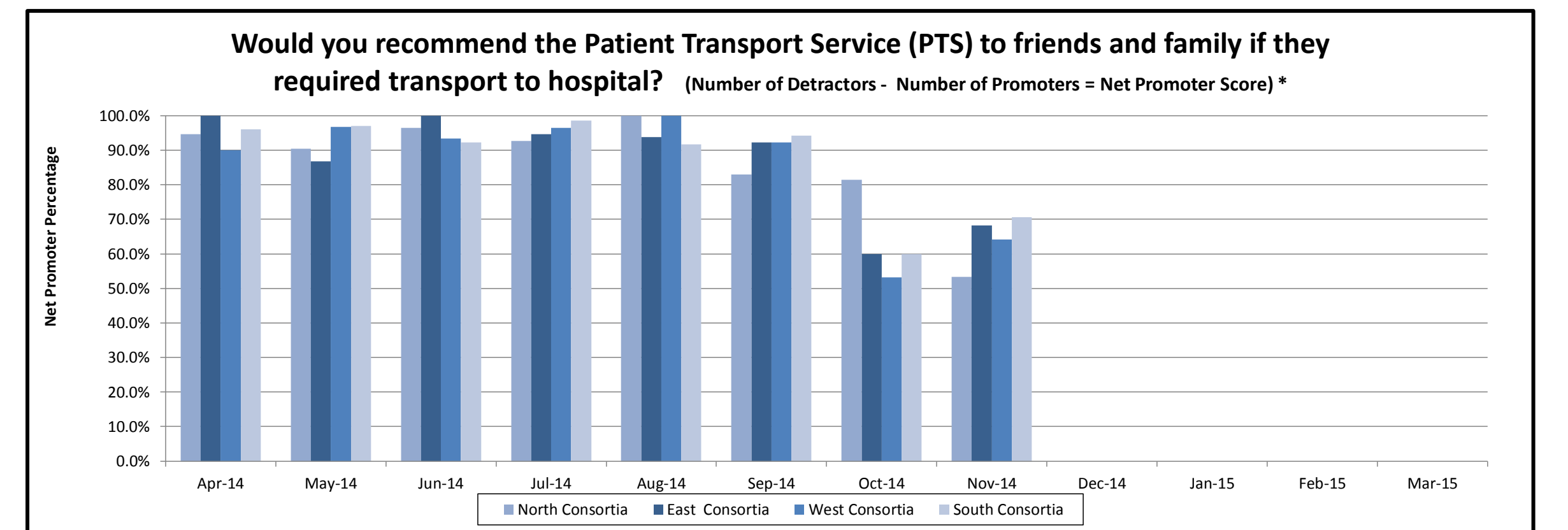
	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
North Consortia	100.0%	97.6%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%				
East Consortia	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	93.8%	100.0%				
West Yorkshire Consortia	100.0%	100.0%	97.7%	100.0%	100.0%	100.0%	96.8%	98.8%				
South Consortia	98.0%	100.0%	98.1%	100.0%	100.0%	100.0%	100.0%	100.0%				



	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 Consortia	83.8%	82.1%	89.7%	89.7%	81.8%	85.0%	65.4%	86.4%				
East Consortia	87.5%	81.6%	92.9%	88.6%	100.0%	73.7%	75.0%	91.3%				
West Consortia	87.3%	85.0%	93.0%	92.5%	100.0%	89.3%	84.8%	85.4%				
South Consortia	92.2%	95.5%	94.2%	94.3%	90.9%	88.6%	97.5%	86.7%				



	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 Consortia	97.3%	97.6%	96.6%	100.0%	95.8%	97.5%	100.0%	100.0%				
East Consortia	100.0%	97.2%	96.6%	100.0%	100.0%	97.4%	93.8%	95.7%				
West Consortia	100.0%	100.0%	97.8%	98.8%	100.0%	98.7%	100.0%	100.0%				
South Consortia	98.0%	100.0%	94.1%	100.0%	95.8%	100.0%	97.5%	98.0%				



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

	Recommended	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 Consortia	Recommended	94.6%	90.5%	96.6%	92.7%	100.0%	82.9%	81.5%	53.3%				
East Consortia	Recommended	100.0%	86.8%	100.0%	94.6%	93.8%	92.3%	60.0%	68.2%				
West Consortia	Recommended	90.0%	96.8%	93.3%	96.4%	100.0%	92.3%	53.1%	64.2%				
South Consortia	Recommended	96.1%	97.1%	92.3%	98.6%	91.7%	94.3%	60.0%	70.6%				

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

Registration Regulations & Outcomes

	YTD RAG	
←	MTD RAG	

Comments	
Developments since last report	Changes from previous report As part of the Yorkshire Ambulance Service Quality Governance Framework assurance plan, an internal audit has been carried out and reported. This audit covered planned year 2013/14 and the report issued to Yorkshire Ambulance Service: August 2014. In accordance with the Clinical Governance structure, this Internal Audit Report was presented to the Quality Committee in September 2014, outlining the Internal Audit report and the summary of the QGF Assessment Scores, as outlined below (audit carried out using May 14 data sets).
Notifications to CQC	None

Quality Governance Rating				
	Criteria	Overall rating		
		Jul-12	Feb-13	May-14
Strategy	Does Quality drive the Trusts strategy	0.5	0.5	0.5
	Is the Board aware of potential risks to quality?	0.5	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	0.5
	Does the Board promote a quality focused culture throughout the Trust?	0.5	0.0	0.5
Processes & structures	Are there clear roles and responsibilities in relationship to quality governance?	0.5	0.5	0.0
	Are there clear well defined, well understood processes for escalating and resolving issues and managing quality?	0.5	0.5	0.5
	Does the Board actively engage patients, staff, and other key stakeholders on quality?	0.0	0.0	0.0
Processes & structures (measurement)	Is appropriate quality information being analysed and challenged?	0.0	0.0	0.0
	Is the Board assured of the robustness of the quality information?	0.5	0.5	0.5
	Is quality information used effectively?	0.0	0.0	0.0
Final overall score		3.5	3.0	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 are outlined as above (May 2014 data set).

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	24	35	27	25			
Number of cases due this month and responded to in time	22	21	25	28	21	16	30	17	6			
Number of cases due this month and responded to out of time	2	7	5	1	2	7	5	7	4			
Number of out of time (prior to this month) cases responded to this month	3	1	0	0	0	0	1	0	0			
Number of out of time cases still open	1	0	0	0	0	1	0	3	15			
Number of internal reviews open	4	9	4	2	1	1	0	0	1			
Number of internal reviews closed this month	0	2	7	3	1	1	2	0	1			
Information Commissioner (IC) Referrals	0	0	0	1	1	0	0	0	0			
Outcome of IC referral - Upheld	0	0	0	0	0	0	0	0	0			
Outcome of IC referral - not upheld	0	0	0	0	0	1	0	1	0			
Data Protection Act (DPA) Requests	Workload			Compliance								
Subject Access Requests	Cases Awaiting		Year to Date		Compliance with 21 day DoH guidance (%)	Compliance with 40 day DPA legislative requirement (%)						
Solicitor Requests	62		505		90%	96%						
Police requests	135		1139									
Witness Statements / Police Interviews	31		294									
	This Month		Year to Date									
Coroner Requests	27		278									

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%	81%	81%	81%	81%			

Comments

Legal Services

Freedom of Information (FOI) Requests

November saw a dip in performance as a result of a higher than usual number of requests being complex and multi-part with contributions required from a number of teams, particularly business intelligence and workforce intelligence. The increased pressure on these teams coincides with requirements to support CQC preparation work. One open case is for documents shared with Police forces (re Police and Paramedic schemes) and we are awaiting a response from their FOI teams about releasing these documents.

This month as seen the FOI administrator off sick for an extended period, myself off sick for part of the month and operational pressures requiring significant attention from the Corporate Comms team.

A substantive FOI administrator starts in post on 22 January and I am personally overseeing FOI request responses in the mean time. The support received from colleagues in the Quality Team, Business Intelligence and Workforce Intelligence continues to be much appreciated during this period.

Within the responses due in January 2015 there are 14 from Unite the Union.



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	4.6	9/9/	Sickness / Absence	<p>December was another poor month in terms of absence due to sickness with absence rising from 6.74% in November to 7.21%.</p> <p>Highest levels of absence were in NHS 111 (10.55%), A&E EY (9.55%) Ancillary Division (8.25%) and PTS (7.37%)</p> <p>It appears that Ambulance Services nationally have seen an increase in sickness absence through December and this may be a reflection on the demand pressures that have been experienced by the services through the month.</p> <p>The Director of People & Engagement is to hold formal meetings with all Associate Directors who's directorates are failing to achieve attendance targets with a view to exploring further actions that can be taken.</p>	All Directors & Managers	Ongoing	RED
RED	4.1	7/7	PDR's	<p>The Director of People & Engagement has written to all Directors following the last Quality Committee asking them to take action to ensure improved compliance through December. Whilst there has been a small improvement, (65.5% to 69.3%) a number of areas remain below target. The most significant areas of concern are:</p> <p>Finance Division 32% Fleet 67% A&E NY 64% A&E SY 49% EOC 68% NHS 111 68%</p> <p>Directors are working with their Associate Directors to remedy this.</p>	All Directors & Managers	Ongoing	AMBER

Comments on Workforce**The IPR identifies a number of key workforce performance issues for Board consideration:**

Lost working time due to sickness absence: The overall level of sickness absence sits at 7.21% showing an increase reduction from November. Long-term sickness absence is the greater proportion of sickness absence in operations, with the East Yorkshire CBU being of particular note. Anxiety, depression and associated mental health issues together with musculoskeletal problems are the main reasons for sickness absence across the Trust.

Highest levels of absence were in NHS 111 (10.55%), A&E EY (9.55%) Ancillary Division (8.25%) and PTS (7.37%)

Performance Development Reviews (PDRs) - The overall completion rates for PDRs has improved slightly in December to 69.3% against the Trust target of 75%. This reflects the overall number of PDRs scheduled to be undertaken during this stage of the year and the current necessary focus on operational performance. There are a number of measures in place to respond to the drop in completion rates, balanced against the work taking place to ensure that the quality of the appraisal process continues to be enhanced. Work will commence shortly to better align the PDR process to the business planning cycle.

The most significant areas of concern are:

Finance Division 32%

Fleet 67%

A&E NY 64%

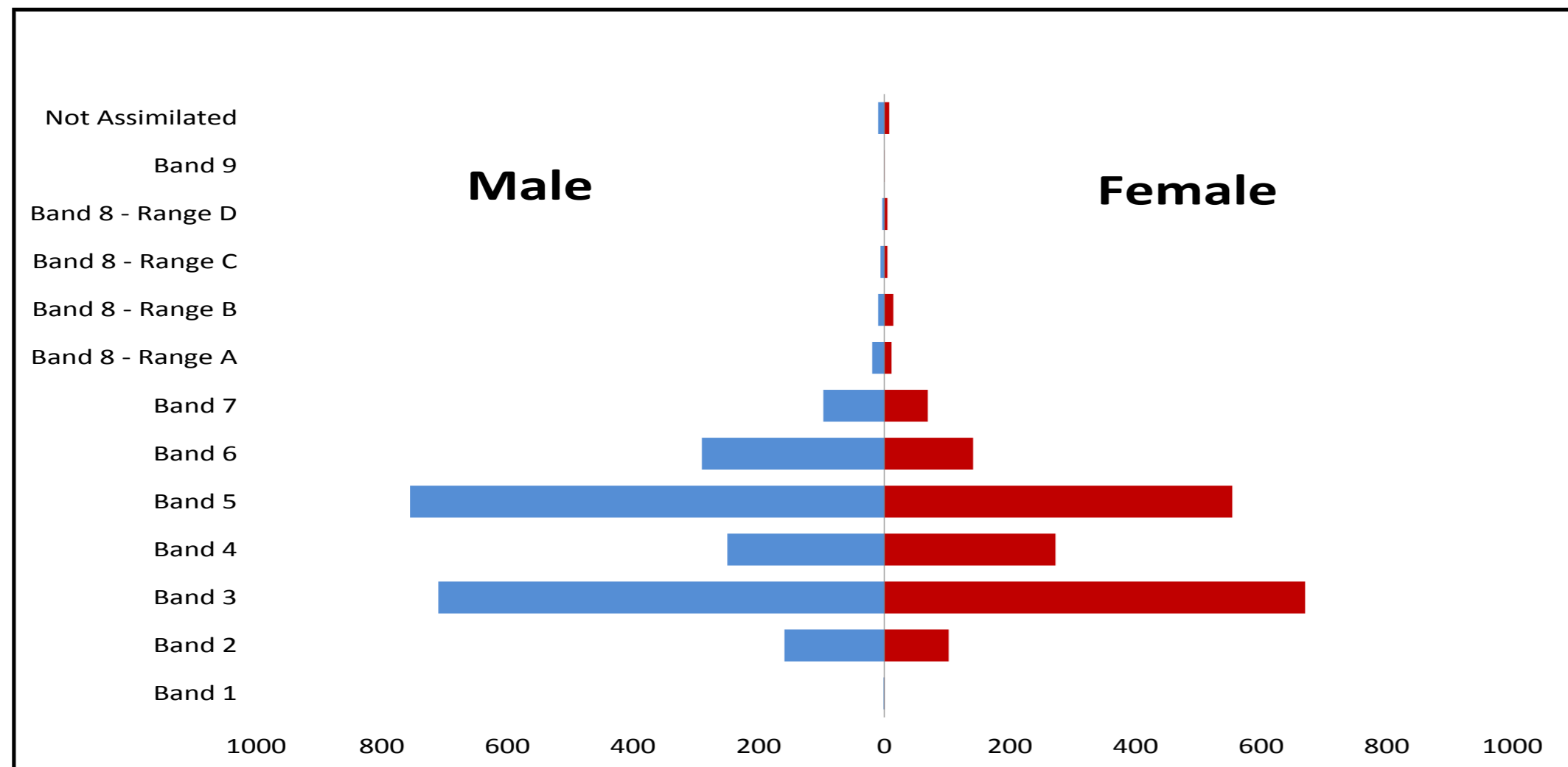
A&E SY 49%

EOC 68%

NHS 111 68%

December 2014 - YORKSHIRE AMBULANCE SERVICE SCORECARD - DATA UP TO 31 December 2014									
Indicator	Current Data - Dec-14		Previous Data - Nov-14		Target	Performance vs target	Trend	Yearly Comparison	
	Measure	Period	Measure	Period				Measure	Period
Total FTE in Post	4211.81	Dec-14	4220.05	Nov-14	4306		☹	4077.67	Dec - 13
Equality & Diversity	5.13% fte	Dec-14	5.21% fte	Nov-14	14.20%		☹	5.03% fte	Dec -13
	5.38% hcount		5.43% hcount					5.09% hcount	
Sickness Absence	7.21%	Dec-14	6.74%	Nov-14	5.00%		☹	6.37%	Dec -13
	6.51%	Jan 14 Dec 14	6.45%	Dec 13 Nov 14				5.95%	Jan 13 Dec 13
Turnover	10.14% fte	Dec-14	10.03% fte	Nov-14	7.76% Amb Trust Aver		☹	8.83% fte	Dec -13
	11.35% hcount		11.31% hcount					10.72% hcount	
Stability	90.78% fte	Dec-14	90.71% fte	Nov-14	92.22 Amb Trust Aver		☹	92.66% fte	Dec -13
	91.77% hcount		91.56% hcount					94.17% hcount	
Current PDRs	69.3%	Dec-14	65.53%	Nov-14	75%		☹	74.82%	Dec -13
Stat & Mand Workbook	88.51% (combined)	Dec-14	87.16% (combined)	Nov-14	85%		☺	87.92%	Dec -13
	87.28%	Dec-14	85.65%	Nov-14					
Overtime	£1,131,391.37	Dec-14	£1,157,332.64	Nov-14			☹	£695,047.21	Dec -13
	£11,264,207.43	Jan-14 Dec-14	£10,590,498.43	Dec-13 Nov-14				n/a	Jan 13 Dec 13

Staff in Post by Pay Band

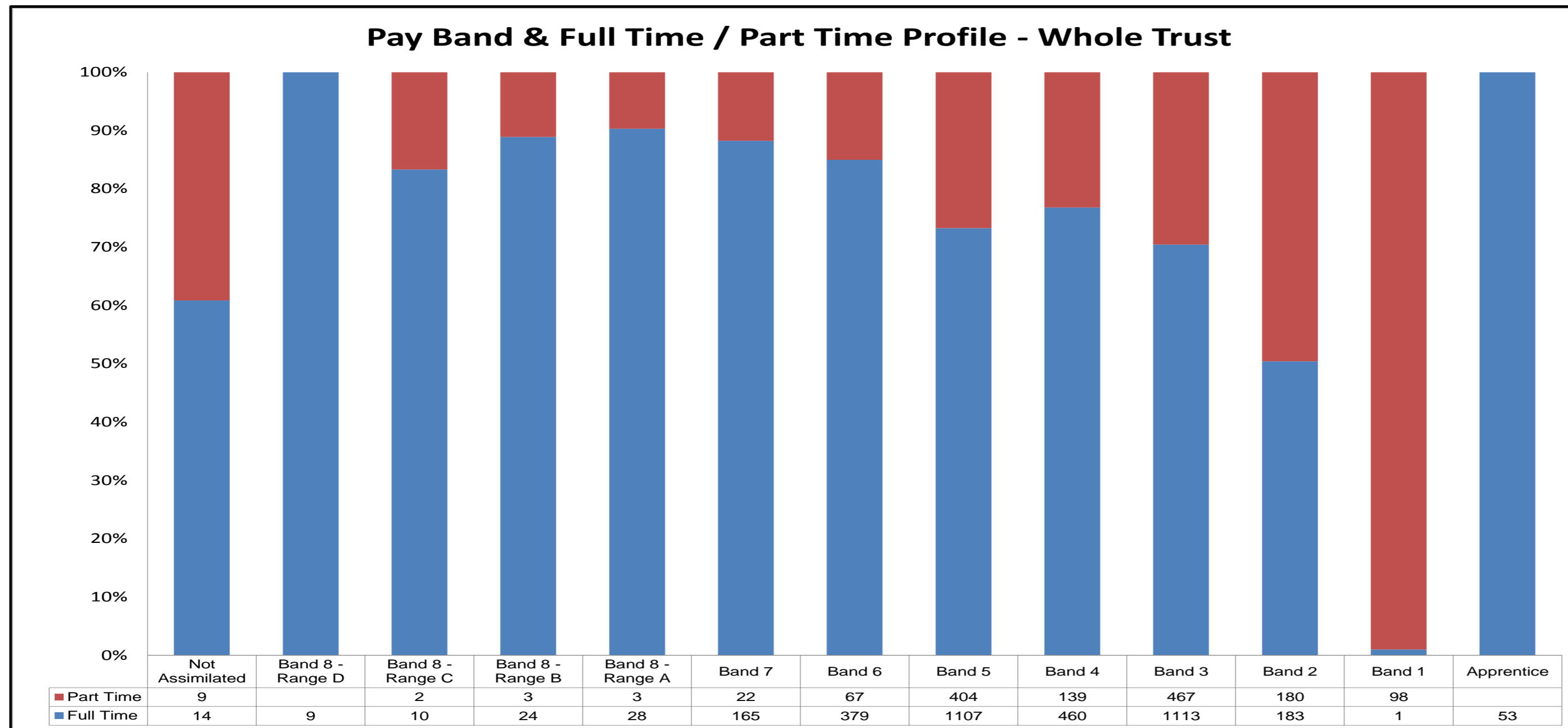


The graph opposite and the table and graph below shows all staff on 30 November 2014.

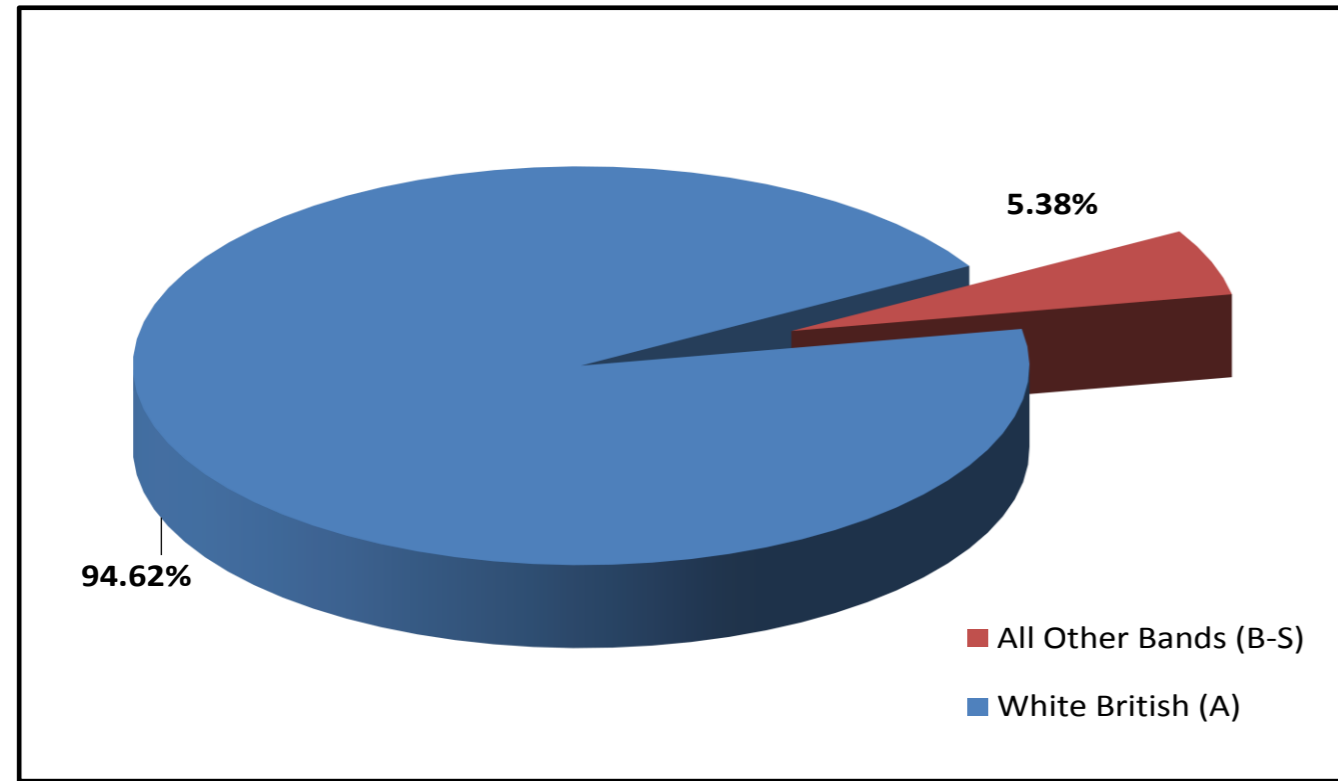
AFC Pay Band	HC	F.T.E	HC%	FTE%
Apprentice	53	53.00	1.07%	1.26%
Band 1	99	1.00	2.00%	0.02%
Band 2	363	270.76	7.35%	6.43%
Band 3	1580	1354.89	31.98%	32.17%
Band 4	599	542.89	12.13%	12.89%
Band 5	1511	1295.33	30.59%	30.75%
Band 6	446	421.58	9.03%	10.01%
Band 7	187	177.83	3.79%	4.22%
Band 8 - Range A	31	30.41	0.63%	0.72%
Band 8 - Range B	27	26.13	0.55%	0.62%
Band 8 - Range C	12	11.20	0.24%	0.27%
Band 8 - Range D	9	9.00	0.18%	0.21%
Not Assimilated	23	17.79	0.47%	0.42%
Grand Total	4940	4211.81	100.0%	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.



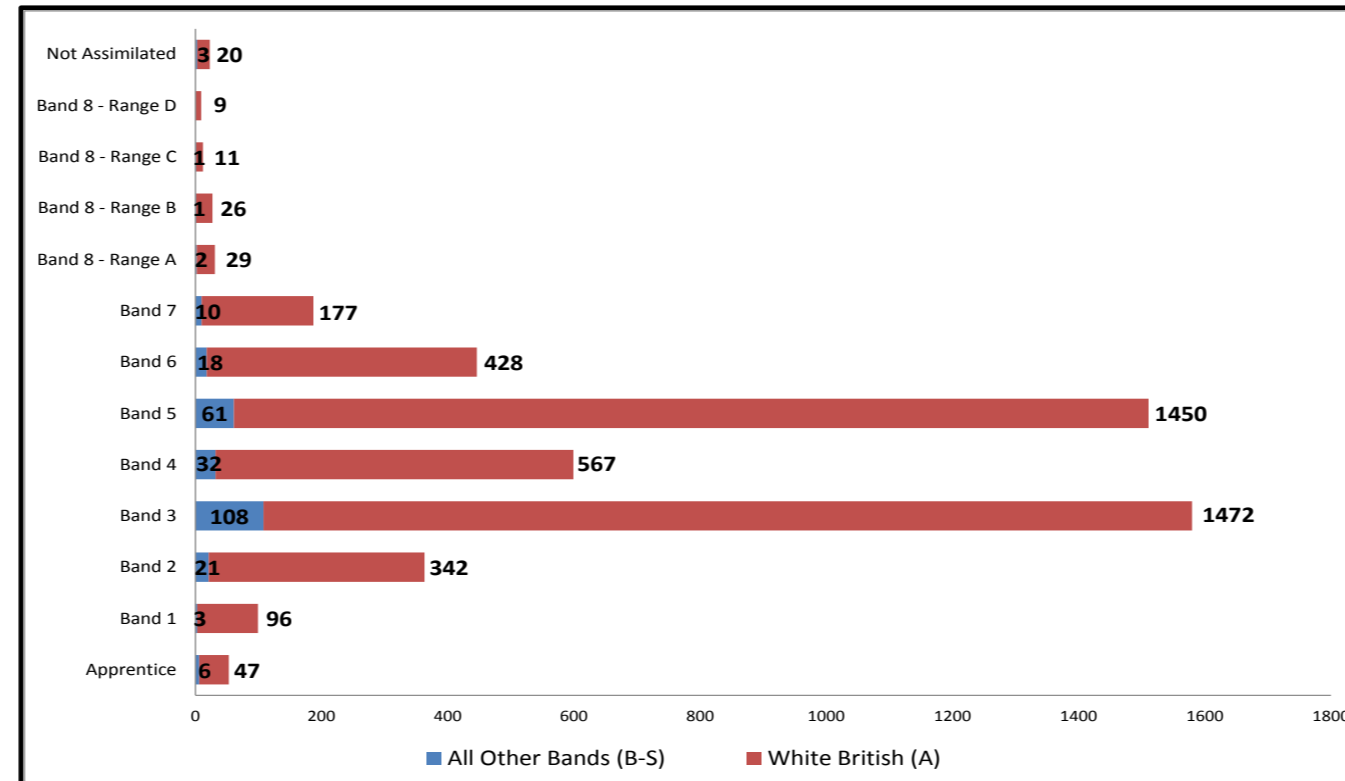
Ethnicity Profile



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	4668	3991.61	94.49%	94.77%
B White - Irish	19	16.95	0.38%	0.40%
C White - Any other White Background	38	34.17	0.77%	0.81%
CK White Italian	1	1.00	0.02%	0.02%
CP White Polish	2	2.00	0.04%	0.05%
CX White Mixed	5	5.00	0.10%	0.12%
CY White Other European	1	1.00	0.02%	0.02%
D Mixed - White & Black Caribbean	10	9.30	0.20%	0.22%
E Mixed - White & Black African	1	1.00	0.02%	0.02%
F Mixed - White & Asian	3	0.48	0.06%	0.01%
G Mixed - Any other mixed background	7	4.98	0.14%	0.12%
H Asian or Asian British - Indian	28	21.94	0.57%	0.52%
J Asian or Asian British - Pakistani	93	70.79	1.88%	1.68%
K Asian or Asian British Bangladeshi	4	1.92	0.08%	0.05%
L Asian or Asian British	3	2.53	0.06%	0.06%
LH Asian British	4	2.80	0.08%	0.07%
M Black or Black British - Caribbean	12	10.43	0.24%	0.25%
N Black or Black British - African	10	8.76	0.20%	0.21%
P Black or Black British	4	3.40	0.08%	0.08%
R Chinese	5	3.60	0.10%	0.09%
S Any Other Ethnic Group	16	14.22	0.32%	0.34%
Z Not Stated	3	2.40	0.06%	0.06%
Undefined	3	1.53	0.06%	0.04%
Grand Total	4940	4211.81	100%	100%

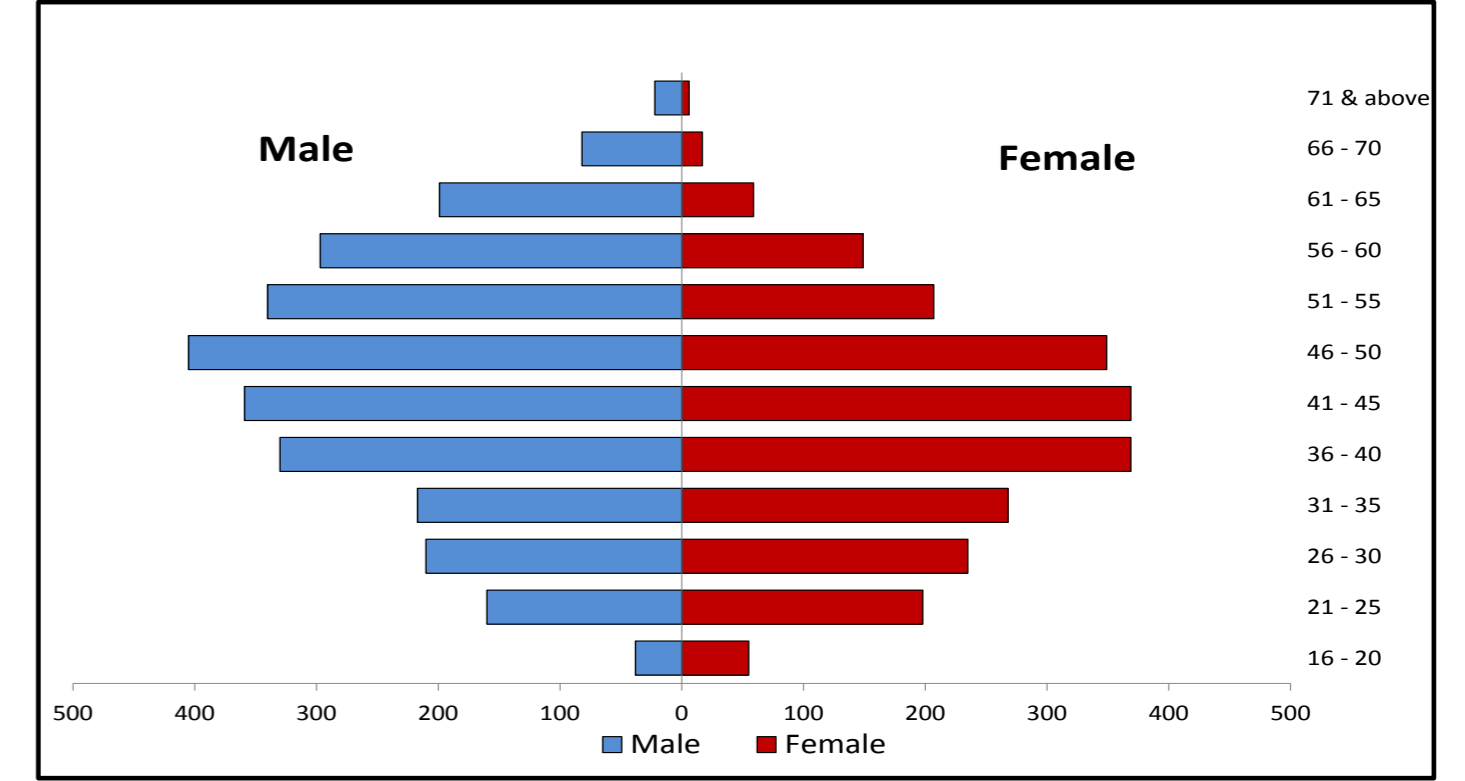
Ethnicity Profile by Pay Band



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

AFC Pay Band	All Other Bands (B-S)	White British (A)	Grand Total	% of Ethnic in AFC Band
Apprentice	6	47	53	11.32%
Band 1	3	96	99	3.03%
Band 2	21	342	363	5.79%
Band 3	108	1472	1580	6.84%
Band 4	32	567	599	5.34%
Band 5	61	1450	1511	4.04%
Band 6	18	428	446	4.04%
Band 7	10	177	187	5.35%
Band 8 - Range A	2	29	31	6.45%
Band 8 - Range B	1	26	27	3.70%
Band 8 - Range C	1	11	12	8.33%
Band 8 - Range D	0	9	9	0.00%
Not Assimilated	3	20	23	13.04%
Grand Total	266	4674	4940	5.38%

Age & Gender Profile

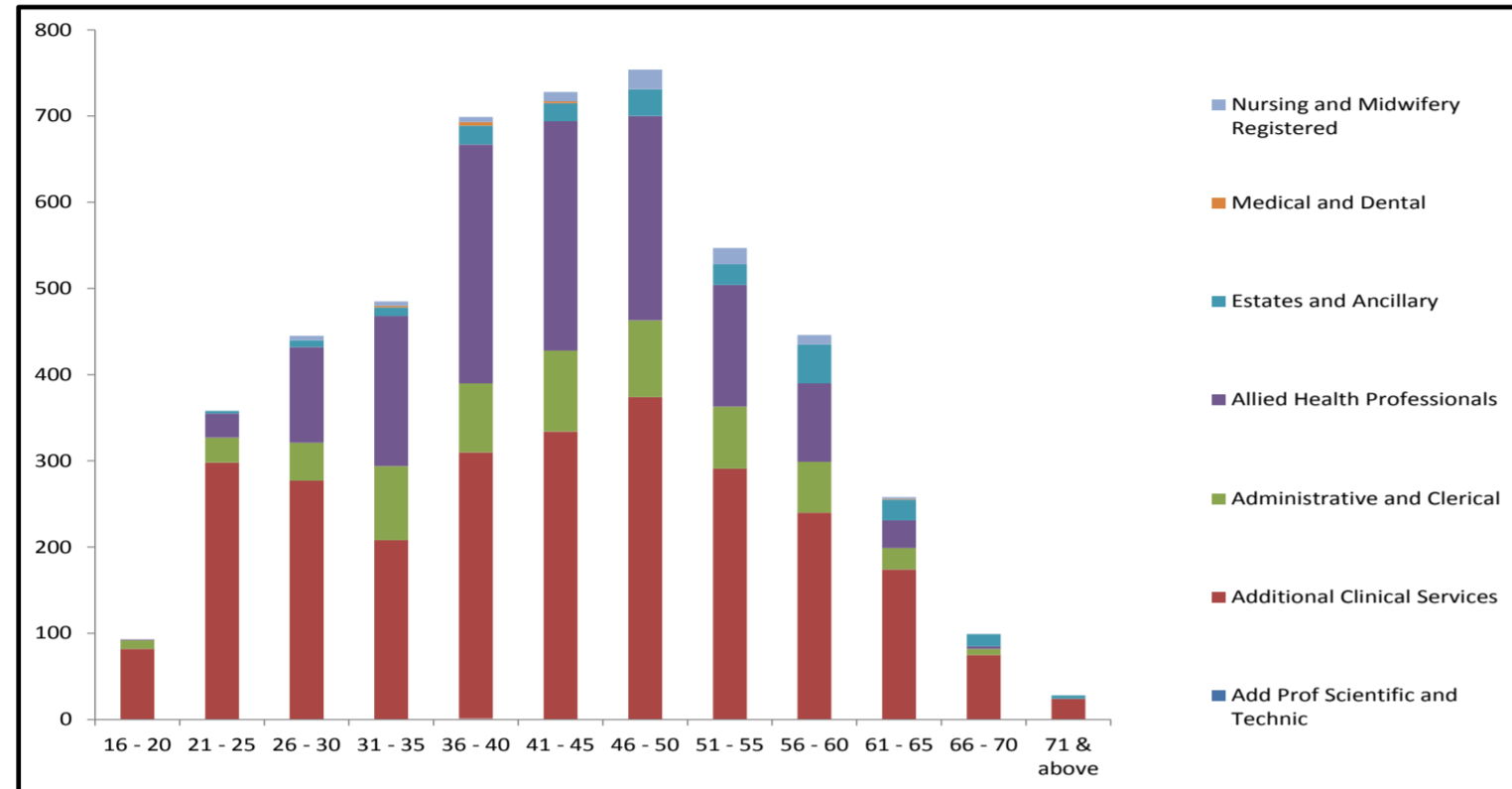


The chart above and table below show the age and gender breakdown throughout the Trust

Age Group	HC	FTE	HC %	FTE %
16 - 20	93	67.47	1.88%	1.60%
21 - 25	358	308.01	7.25%	7.31%
26 - 30	445	395.73	9.01%	9.40%
31 - 35	485	428.4	9.82%	10.17%
36 - 60	699	613.66	14.15%	14.57%
41 - 45	728	648.29	14.74%	15.39%
46 - 50	754	683.59	15.26%	16.23%
51 - 55	547	497.42	11.07%	11.81%
56 - 60	446	374.89	9.03%	8.90%
61 - 65	258	155.13	5.22%	3.68%
66 - 70	99	34.93	2.00%	0.83%
71 & above	28	4.3	0.57%	0.10%
Grand Total	4940	4211.82	100%	100%

Age & Gender Profile

Age Profile by Staff Group



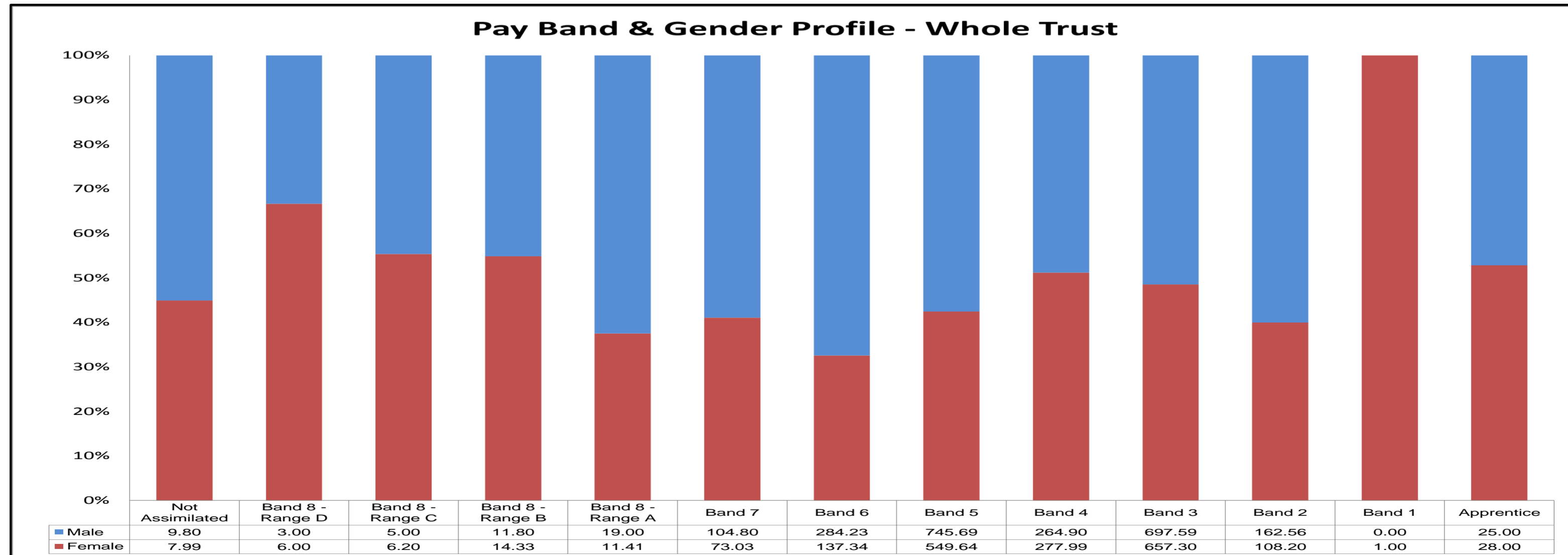
The graph opposite shows the staff group breakdown within a 5 year age bracket using FTE. This data is tabulated below in 20 year banding per staff group.

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
Add Prof Scientific and Technic		0.73			0.73
Additional Clinical Services	256.14	965.12	951.64	35.03	2207.93
Administrative and Clerical	32.50	266.71	249.01	3.60	551.82
Allied Health Professionals	18.00	718.65	482.58	2.50	1221.73
Estates and Ancillary	2.00	50.68	105.47	10.71	168.86
Medical and Dental		3.40		0.80	4.20
Nursing and Midwifery Registered		17.22	38.33	1.00	56.55
Grand Total	308.64	2022.51	1827.03	53.64	4211.82

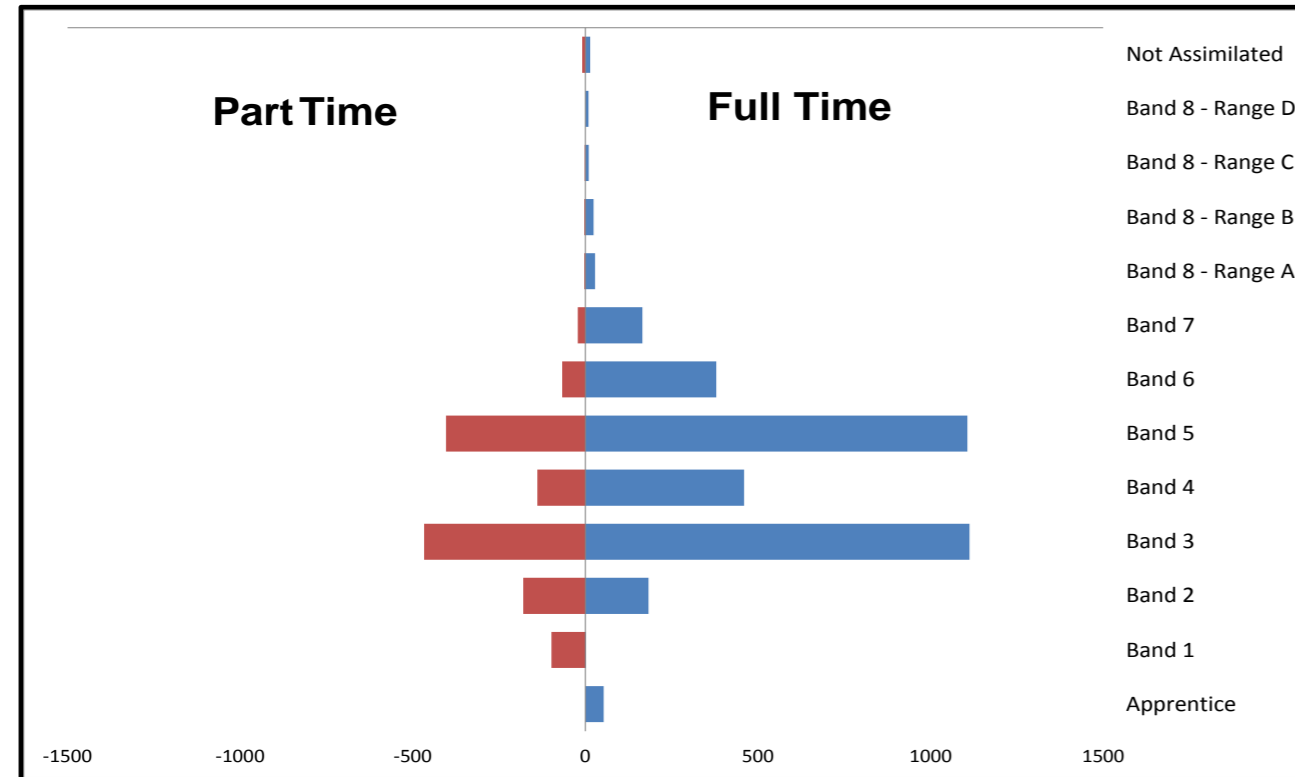
Gender 100% Profile by Pay Band

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

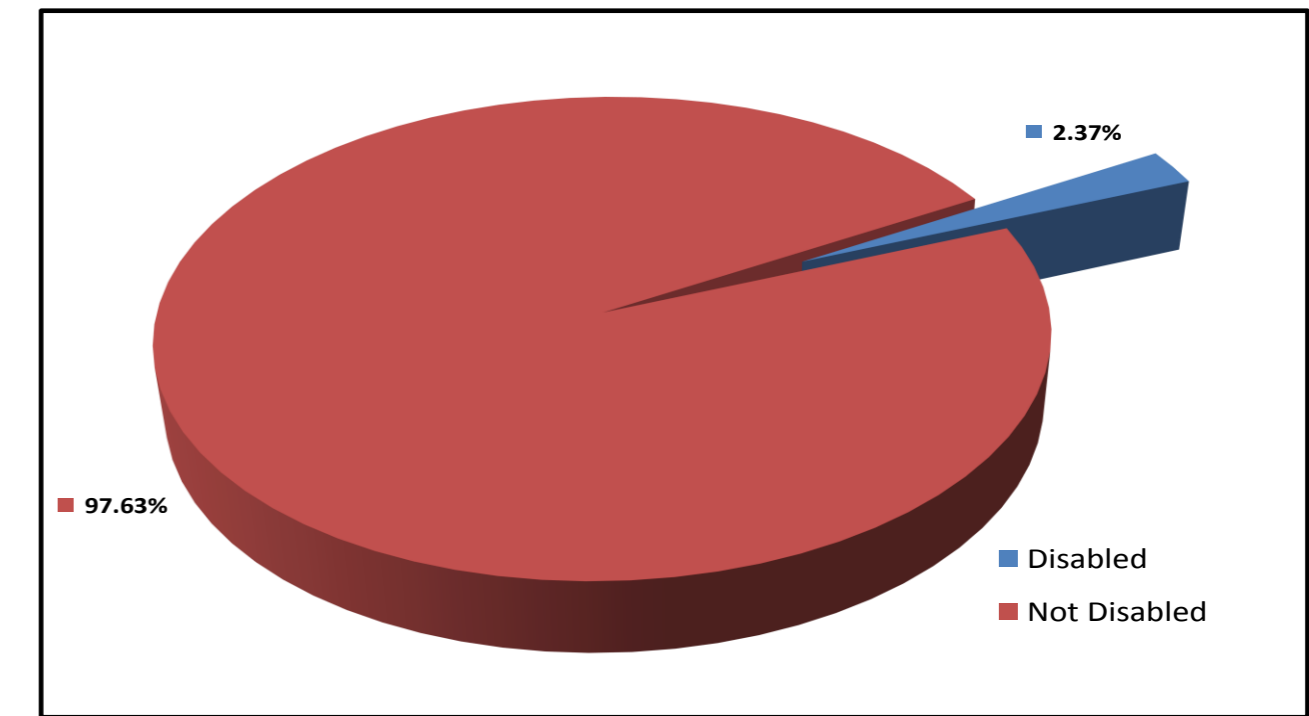
Gender	Employee Category	HC	FTE	FTE %
Female		2281.00	1878.43	100%
	Full time	1381.00	1381.00	73.52%
	Part Time	900.00	497.43	26.48%
Male		2659.00	2333.38	100%
	Full Time	2165.00	2165.00	92.78%
	Part time	494.00	168.38	7.22%

AFC Pay Band	Female	Male	Grand Total
Apprentice	28	25	53
Band 1	10	89	99
Band 2	161	202	363
Band 3	807	773	1580
Band 4	316	283	599
Band 5	677	834	1511
Band 6	154	292	446
Band 7	78	109	187
Band 8 - Range A	12	19	31
Band 8 - Range B	15	12	27
Band 8 - Range C	7	5	12
Band 8 - Range D	6	3	9
Not Assimilated	10	13	23
Grand Total	2281	2659	4940

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	53		53
Band 1	1	98	99
Band 2	183	180	363
Band 3	1113	467	1580
Band 4	460	139	599
Band 5	1107	404	1511
Band 6	379	67	446
Band 7	165	22	187
Band 8 - Range A	28	3	31
Band 8 - Range B	24	3	27
Band 8 - Range C	10	2	12
Band 8 - Range D	9	0	9
Not Assimilated	14	9	23
Grand Total	3546	1394	4940

Disability Profile



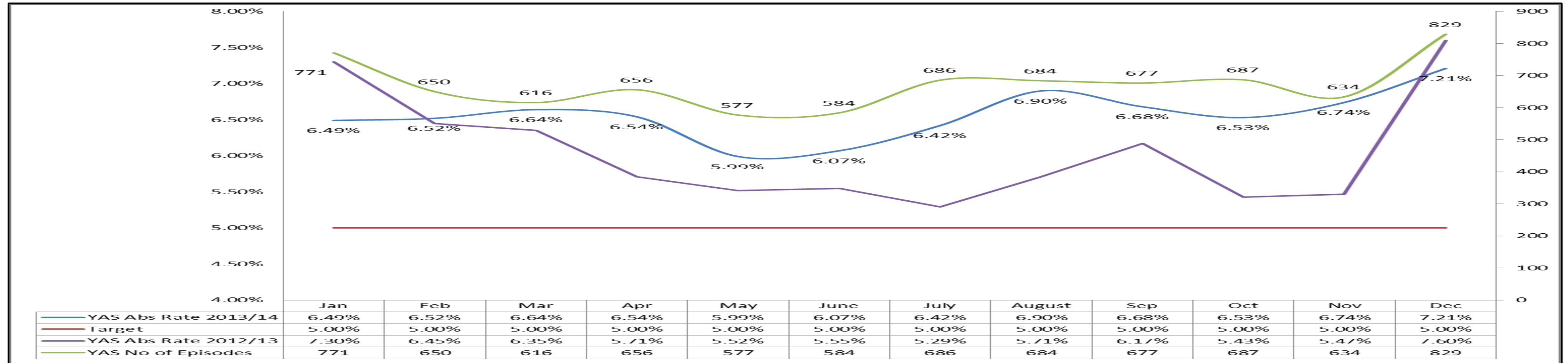
The pie chart above shows the disability profile by headcount of all staff, while the table below shows disability profile by headcount and FTE.

Disability	Head Count	FTE	Headcount %	FTE %
Disabled	117	106.8	2.37%	2.54%
Not Disabled	4823	4105.01	97.63%	97.46%
Grand Total	4940	4211.81	100%	100%

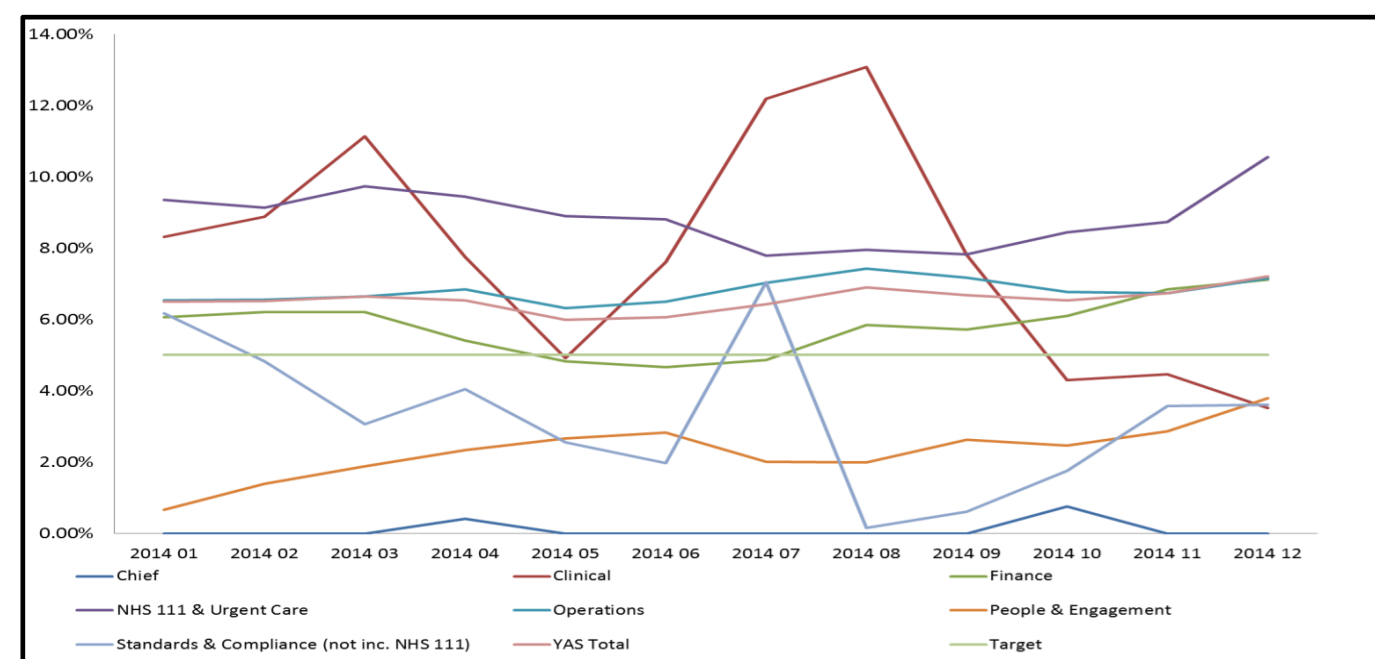
Sickness Absence

EWI

Sickness Absence Rates – 12 month trend analysis



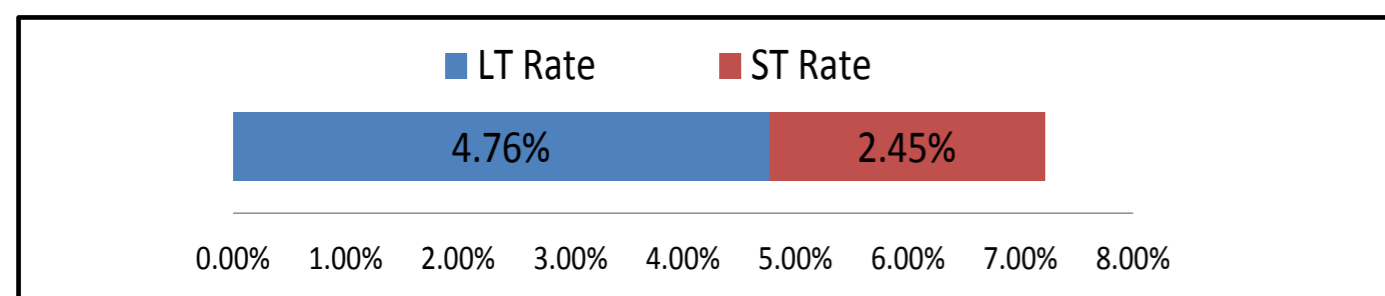
Sickness Absence Rates – Directorate 12 month trend



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
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%	5.40%	9.62%	6.88%	2.37%	4.05%	6.58%	5.00%
2014 05	0.00%	4.92%	4.81%	9.23%	6.35%	2.69%	2.56%	6.03%	5.00%
2014 06	0.00%	7.06%	4.72%	8.88%	6.51%	2.86%	2.45%	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%	7.42%	2.22%	2.52%	7.09%	5.00%
2014 09	0.00%	7.80%	6.79%	7.71%	7.07%	1.88%	0.61%	6.85%	5.00%
2014 10	0.75%	4.30%	6.25%	8.20%	6.90%	1.36%	1.70%	6.62%	5.00%
2014 11	0.00%	4.46%	6.84%	8.74%	6.73%	2.87%	3.57%	6.74%	5.00%
2014 12	0.00%	3.52%	7.11%	10.55%	7.16%	3.80%	3.61%	7.21%	5.00%

LT / ST Sickness Absence Trust Total



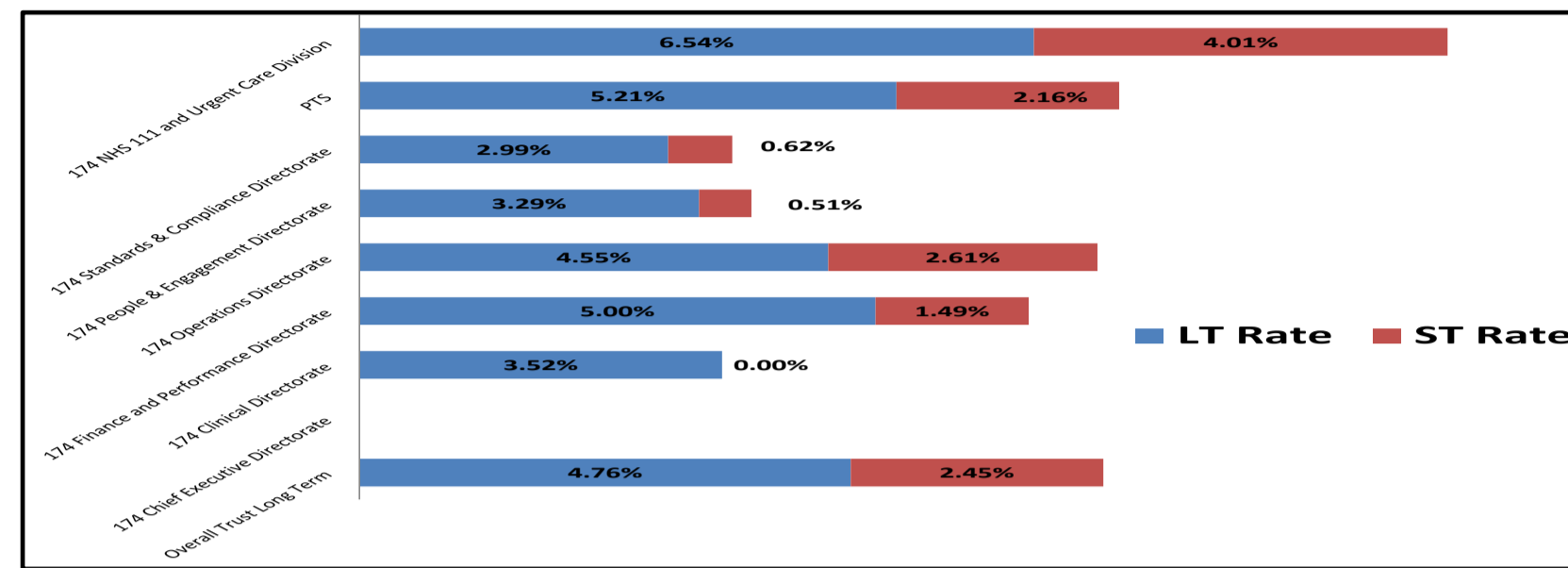
The graph opposite shows December 2014 Long Term & Short Term sickness absence rate for the whole trust.

The trust sickness rate for December is 7.21% which consists of 4.76% long term (28 days or more) and 2.45% short term.

Sickness Absence EWI

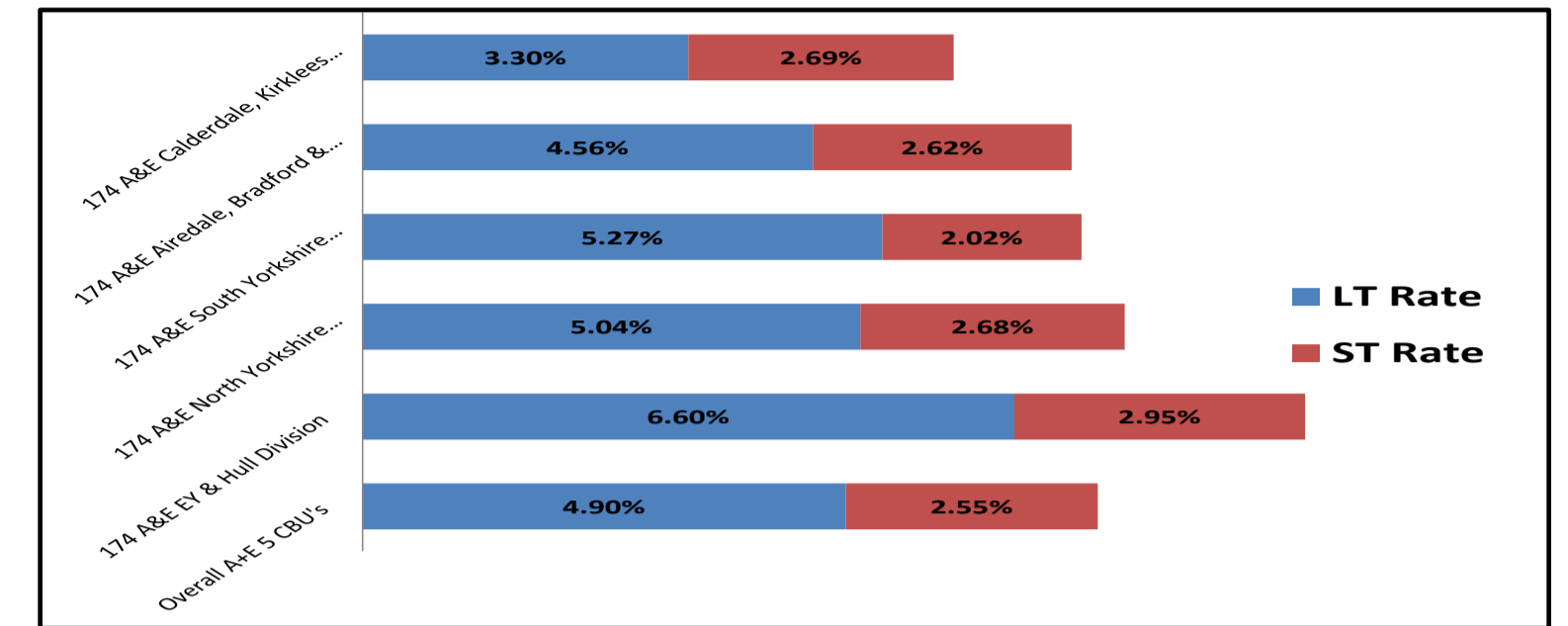
2014 07	Absence (FTE)	Available (FTE)	% Absence rate (FTE)	Calendar Days Absent	No of Episodes
174 Chief Executive Directorate	0	444.8	0.00%	0	0
174 Clinical Directorate	43.4	1234.32	3.52%	31	2
174 Finance and Performance Directorate	2,277.53	32,020.76	7.11%	2664	182
174 Operations Directorate	5,972.85	83,461.43	7.16%	6379	502
174 People & Engagement Directorate	112.13	2,949.16	3.80%	139	8
174 Standards & Compliance Directorate	52.4	1,449.69	3.61%	71	2
174 NHS111 and Urgent Care	981.33	9,299.41	10.55%	1408	130
174 Yorkshire Ambulance Service Trust	9,439.64	130,859.57	7.21%	10,692.00	829.00

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.

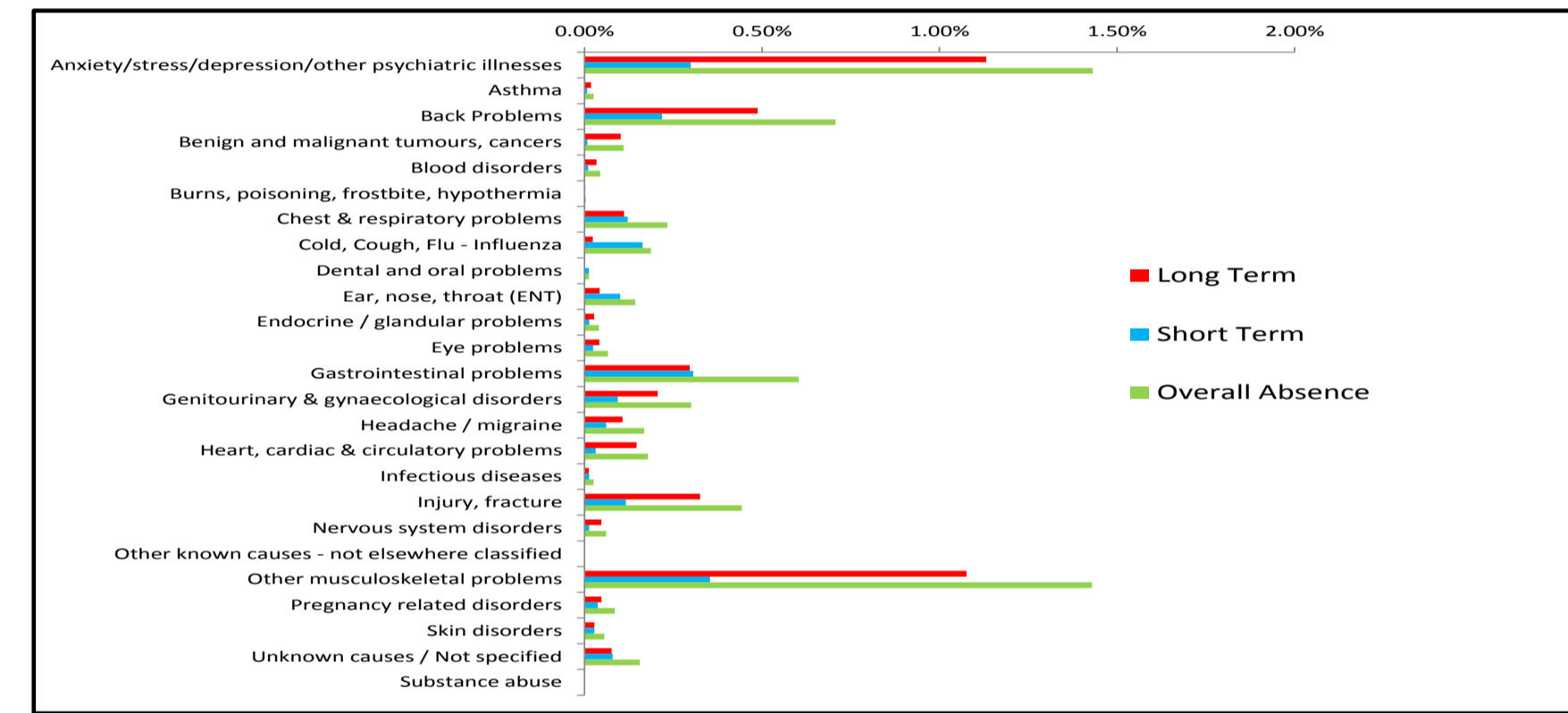
LT/ST Sickness Absence Analysis by Operations CBU



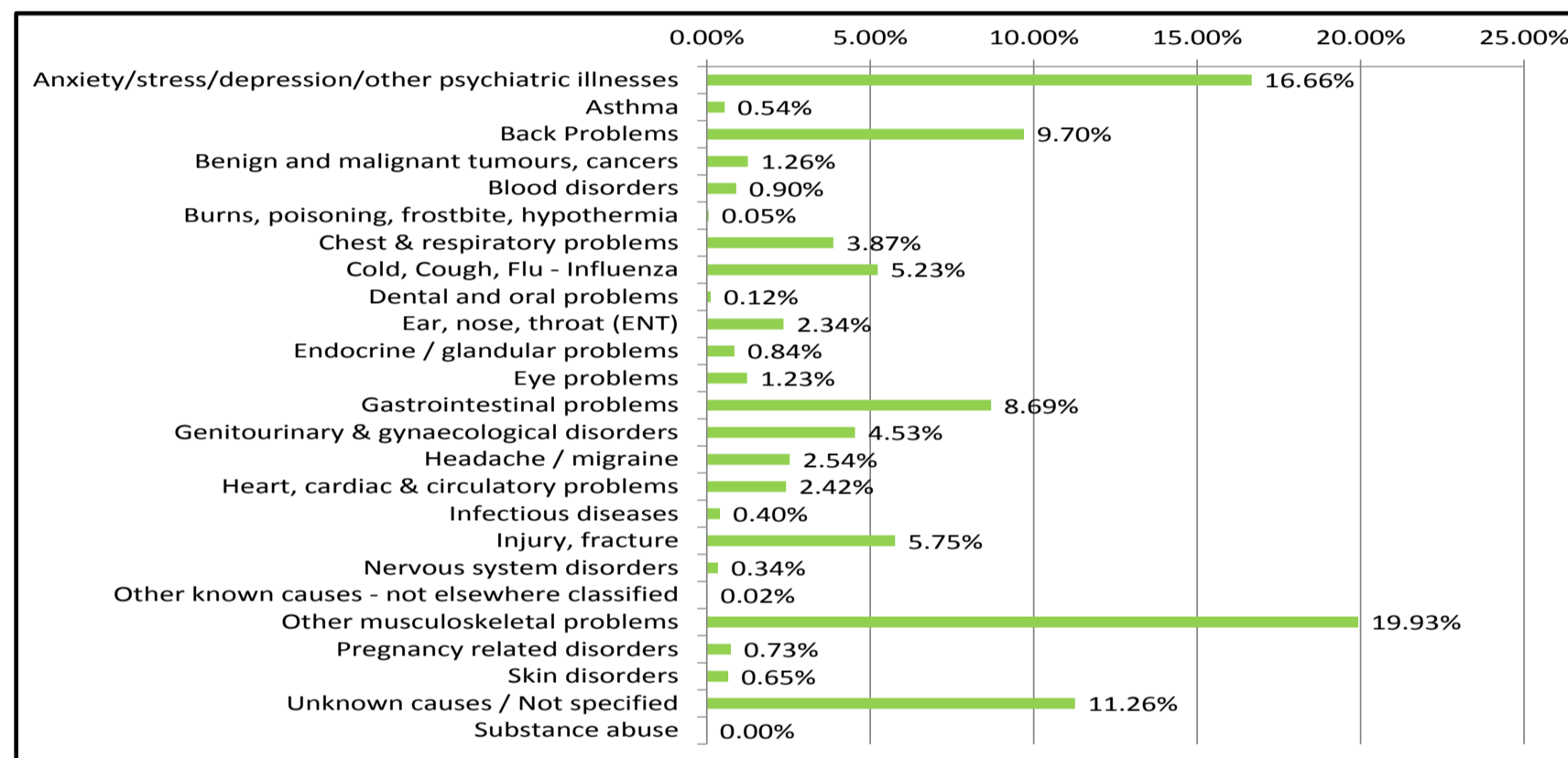
The graph below shows our LT/ST Sickness Absence Analysis for our 5 A+E CBU areas

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

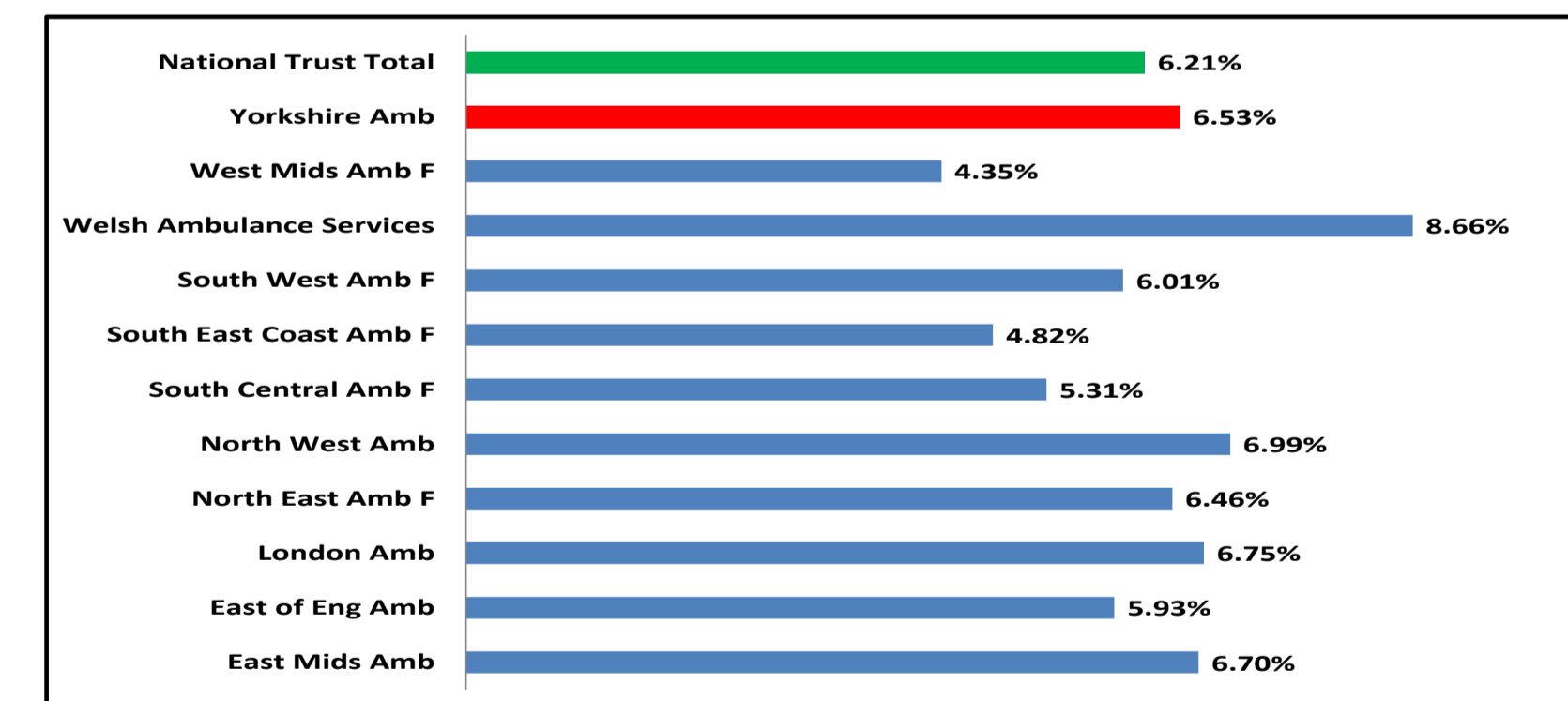
The graph opposite shows the split of Long and Short Term sickness absence rates for all Directorates for the period Jan14 – Dec14 by absence reason.



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



Benchmarking Information – September 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 September 2014 is 6.21% 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 September 2014 within I View is reported as 6.53%.

Occupational Health - Key Performance Indicators (KPI)

Please note the information for this section is for November 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 November 2014.

This indicates where we currently sit for the following; Employment Health Screenings (100%), Management Referral Appointment Lead Time (93%) and Report Return Lead Time (99%).

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
June	136	136	0	100%	143	119	24	83%	124	19	87%
July	119	119	0	100%	145	129	16	89%	145	0	100%
August	145	145	0	100%	101	99	2	98%	101	0	100%
September	147	147	0	100%	93	90	3	97%	92	1	99%
October	199	199	0	100%	113	98	15	87%	112	1	99%
November	176	176	0	100%	112	104	8	93%	111	1	99%

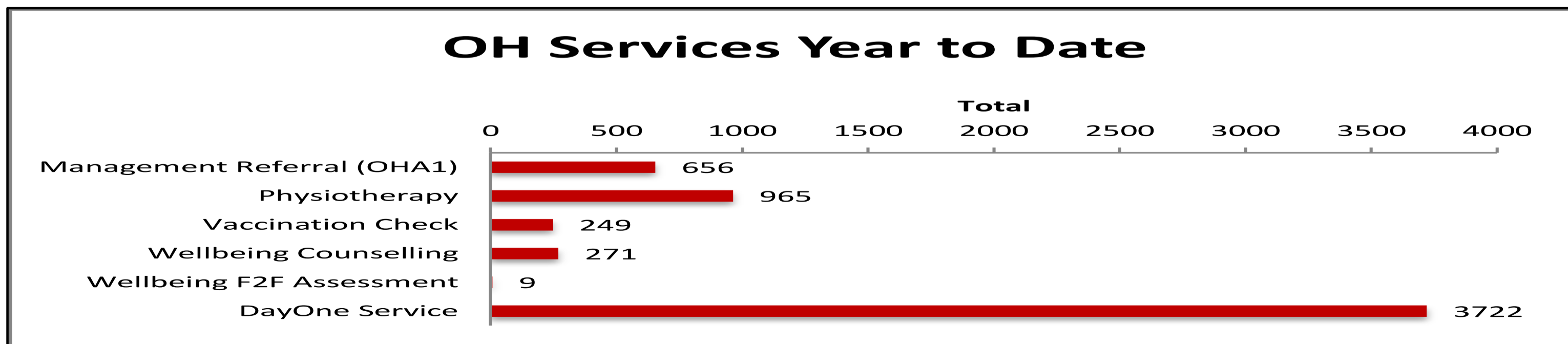
Occupational Health - DNA and Cancelled OH Service Appts

	Cancelled With Charge	Did Not Attend (DNA)	Grand Total	Month
No Of Staff	6	29	35	November
No Of Staff	6	22	28	October
No Of Staff	6	31	37	September
No Of Staff	7	28	35	August
No Of Staff	11	36	47	July
No Of Staff	2	47	49	June

The table opposite indicates the volume of staff that has either 'Cancelled' or 'Did Not Attend' their OH appointment date in November 2014. We have also included previous months to compare this months data.

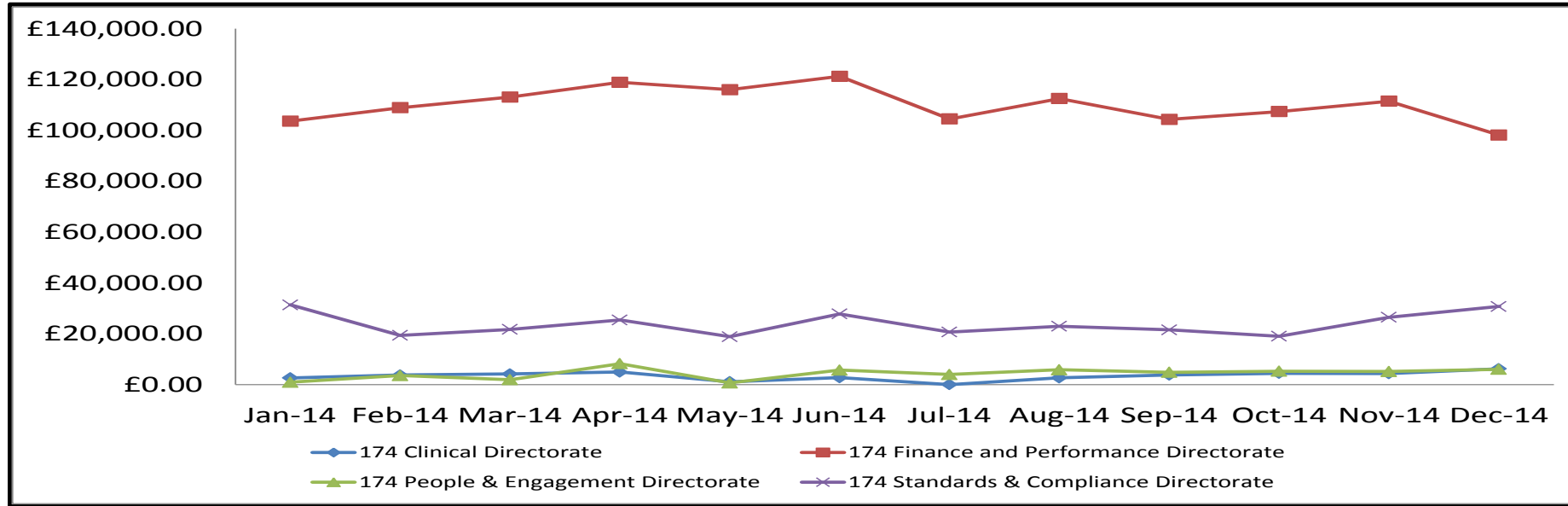
The table below indicates the core OH services used by YAS staff members for the year to date. As you can see below we had 3722 staff members who used the day one service within the financial year to date (2014/2015).

Occupational Health - Core Service Usage



Overtime, Vacancies & Turnover

Gross Overtime Costs by Directorate (exc Operations)



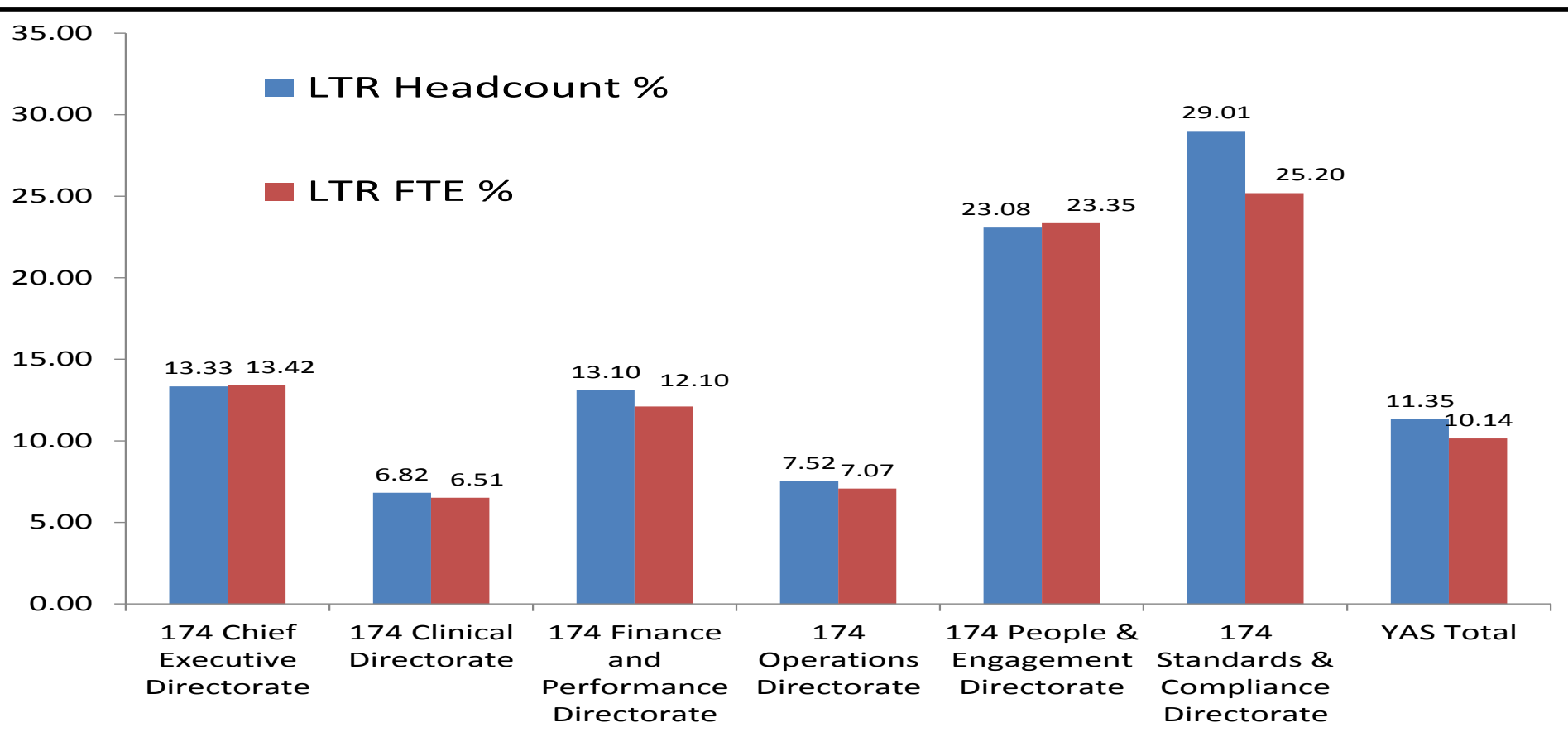
This chart above shows the YAS gross overtime costs across a 12 month period from Jan 13 – Dec14 for all directorate excluding Operations.

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

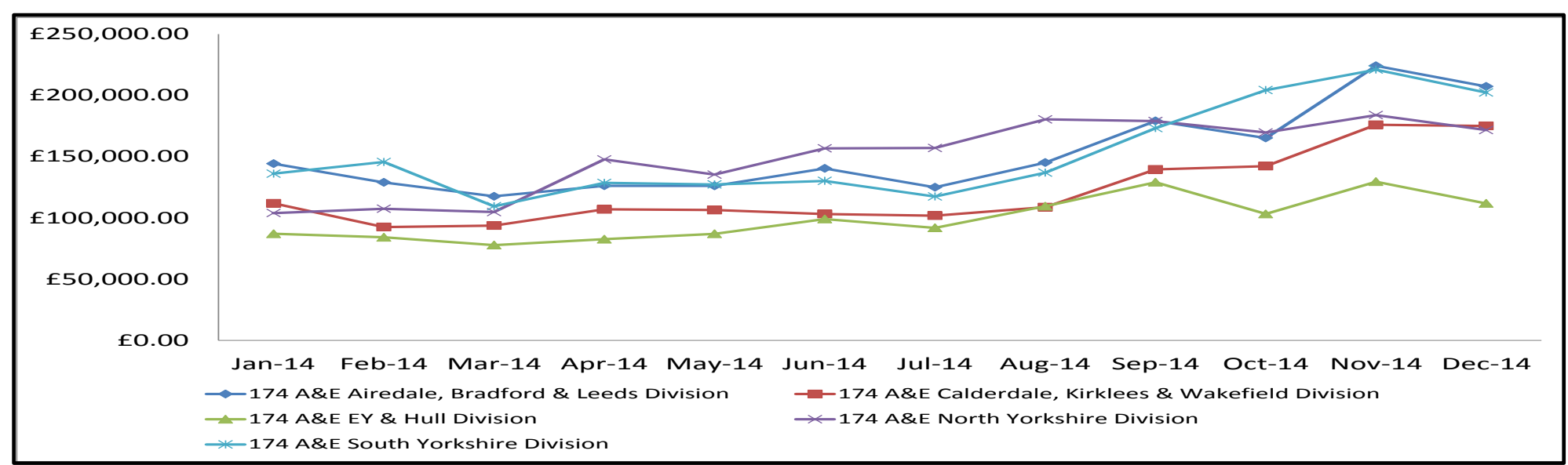
As you may see below there is a current discrepancy with the directorate figures for Budget vs Worked which is currently being investigated by Finance and MI.

Directorate	Budget	Staff in Post	Staff in Post	Worked	Worked
	WTE	WTE	Headcount	WTE	Hours
Chief Executive	15.80	14.80	15	9.80	1,433.92
Clinical	54.49	41.57	49	39.03	5,104.00
Finance & Performance	1,130.97	1,033.14	1,313	1,109.42	176,080.79
Operations	2,780.53	2,684.60	2,978	2,976.49	484,240.31
Standards and Compliance	375.25	342.34	473	411.33	57,587.15
People and Engagement	114.07	95.36	112	107.78	16,375.41
Total	4,471.11	4,211.81	4,940	4,653.85	740,821.58

Turnover by Directorate



Gross Overtime Costs Operations



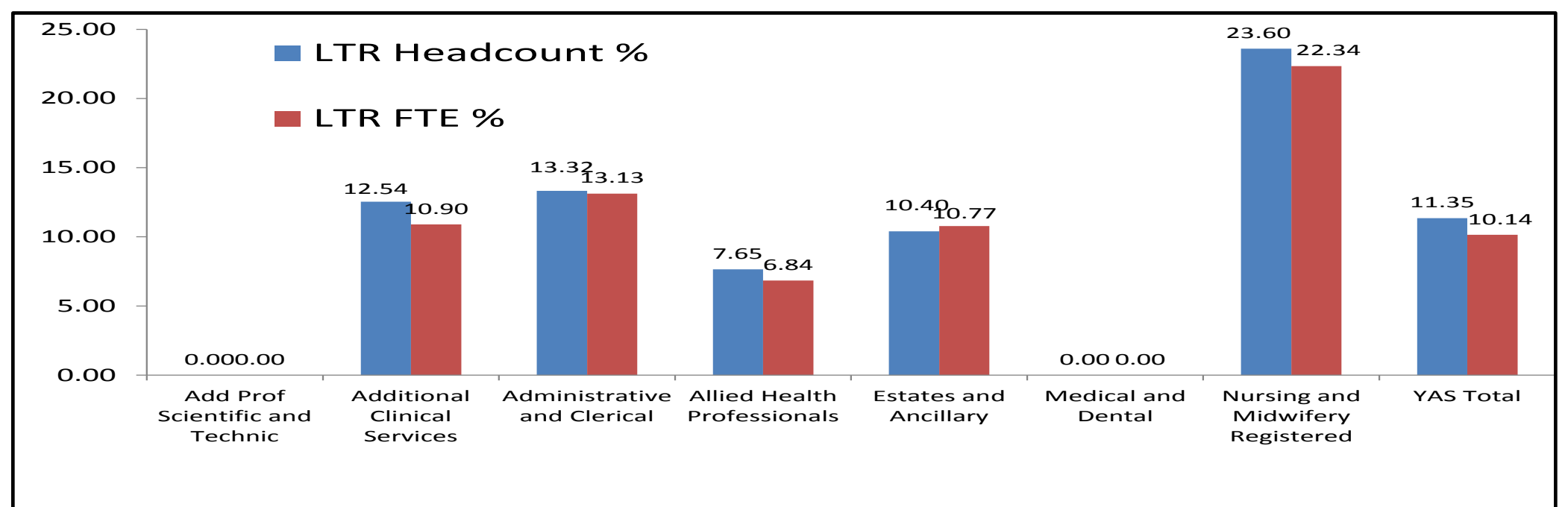
The table below shows the gross cost for overtime from ESR for the month of December 2014 across all directorates.

The chart above show the YAS gross overtime costs across a 12 month period from Jan 14 – Dec14 for all the major operations divisions.

Directorate	Dec-14
174 Clinical Directorate	£6,250.76
174 Operations Directorate	£98,170.74
174 People & Engagement Directorate	£990,165.25
174 Standards & Compliance (Not inc. NHS 111)	£6,050.66
174 Finance and Performance (Not inc. PTS)	£30,753.96
Grand Total	£1,131,391.37

Turnover by Staff Group

This charts opposite and below shows the turnover rate for the period Jan 14 to Dec14 by both Directorate and Staff Group.

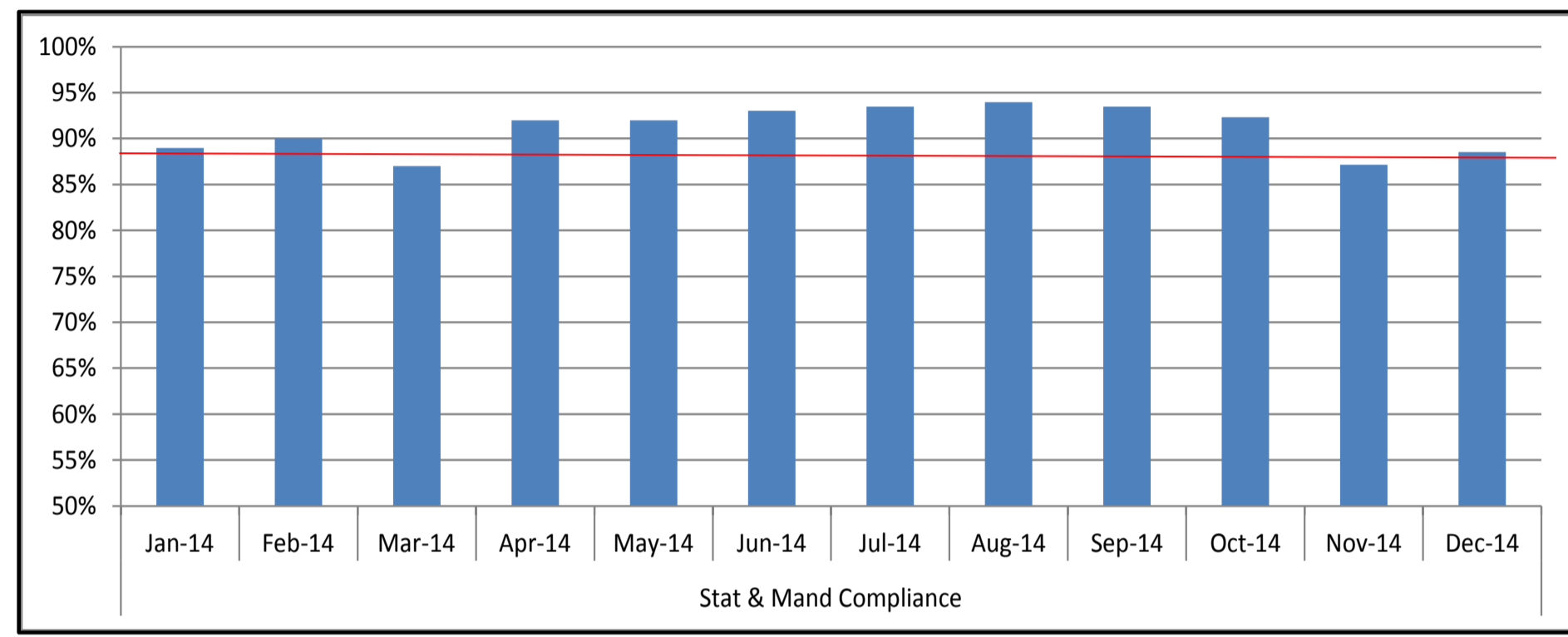


Paramedics and ECPs sit within our Allied Health Professionals. ECAs and Technicians are shown under the staff group Additional Clinical Services

Learning and Development EWI

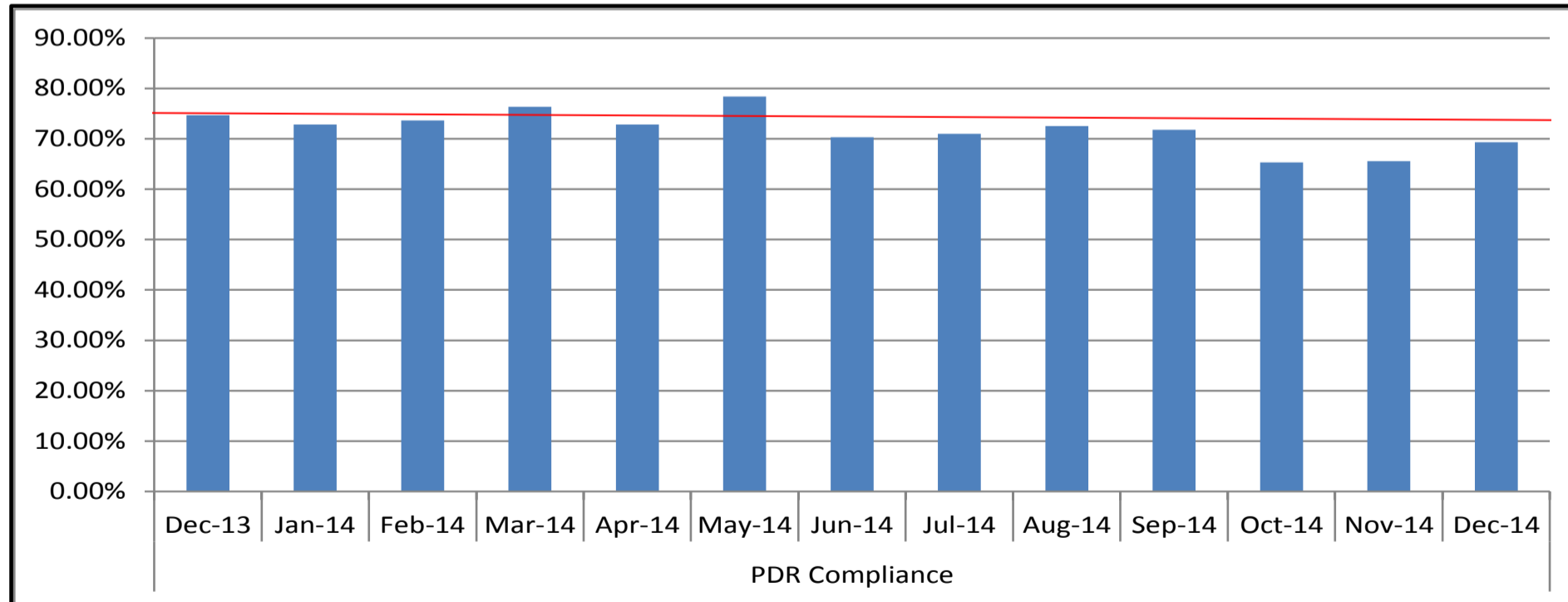
Statutory & Mandatory Training Workbook Combined

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



PDR Compliance from Jan 2014 to Dec 2014

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

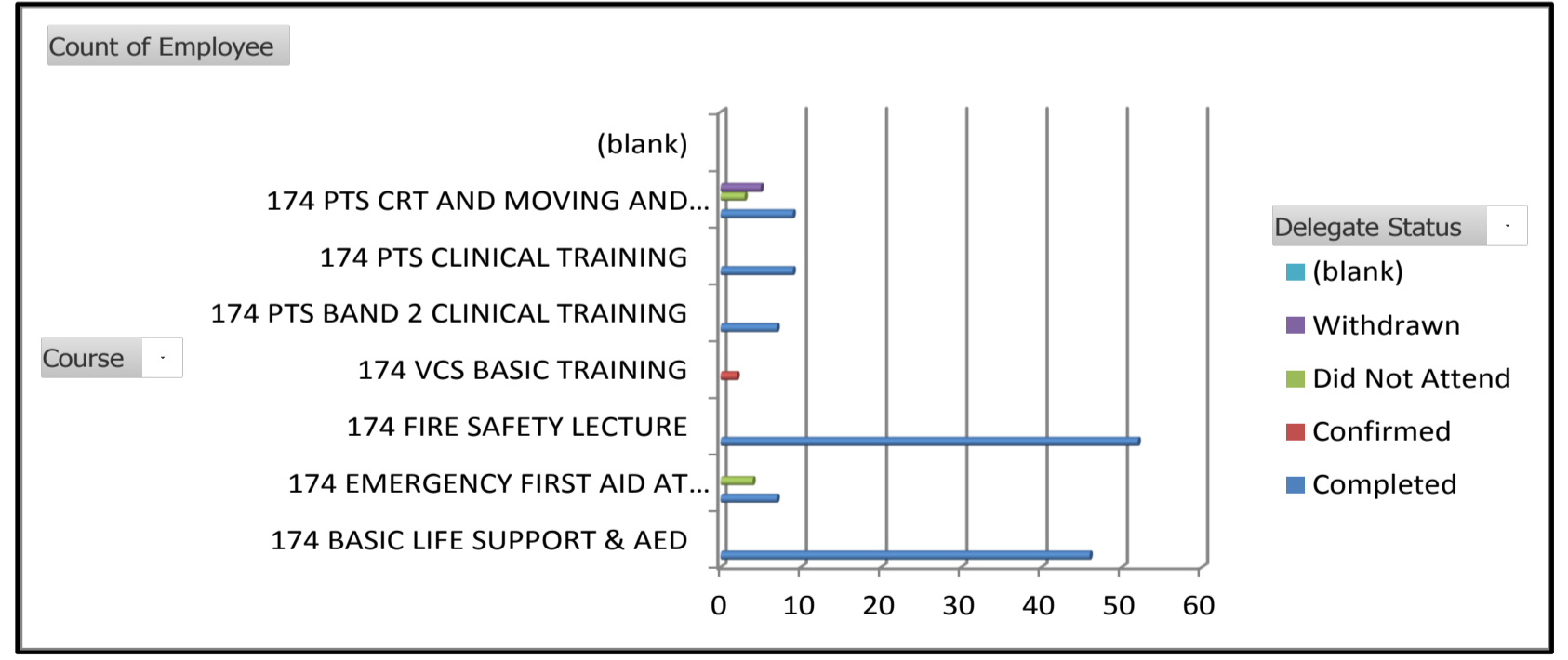


Staff Appraisals

Directorates	Compliant	Overdue	No PDR Recorded
174 Chief Executive Directorate	100.00%	0.00%	0.00%
174 Clinical Directorate	76.19%	23.81%	0.00%
174 Finance and Performance Directorate	72.81%	19.98%	7.21%
174 Operations Directorate	67.98%	27.60%	4.42%
174 People & Engagement Directorate	78.26%	14.13%	7.61%
174 Standards & Compliance Directorate	65.00%	23.24%	11.76%
Grand Total	69.30%	24.96%	5.74%

This month 2862 assignments of the possible 4130 (69.30 %) have an in- date PDR recorded in ESR for the current appraisal period.

The table below 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 October 2014 and 31 December 2014.





Section 5

Finance



	Reference
EBITDA	
<ul style="list-style-type: none"> The Trust's Earnings before Interest Tax Depreciation and Amortisation (EBITDA), for the year to date, is £10.536m (5.9%). 	5.4
<ul style="list-style-type: none"> This is £0.256m ahead of the YTD plan of £10.280m (5.9%). 	5.4
SURPLUS	
<ul style="list-style-type: none"> The Trust has reported a surplus as at the end of December 2014 of £2.512m against a planned surplus of £1.319m. This is prior to the application of penalties associated with A & E under performance against Red 1 and 2 targets. Penalties to date total £2.914m and if applied would amend the position to a deficit of £0.402m, an adverse variance against plan of £1.721m. 	5.4
<ul style="list-style-type: none"> The forecast surplus for the year is £2.913m, which is in line with plan. Red 1 and 2 penalties for the year total £3.887m and, if applied to the forecast surplus, would amend the forecast position to a deficit of £0.974m. 	5.4
CASH	
<ul style="list-style-type: none"> The Trust had cash and cash equivalents of £20.970m at 31st December 2014 against a plan of £20.309m. 	5.8 / 5.11
NHS TDA ACCOUNTABILITY FRAMEWORK	
<ul style="list-style-type: none"> Overall the Trust has achieved a Green rating (Amber in November). 	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. 109% delivery of the CIP target was achieved in Month 9 against plan and 92% of this was achieved through recurrent schemes. This creates an favourable variance against plan of £741k. Reserve schemes have achieved £1,355k of the savings made year to date. Forecast CIP delivery is £11.050m which is 107% of plan. 	5.7

	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 Green rating. Whilst recurrent CIPs are under achieving, non-recurrent reserve schemes generate an overall year to date and forecast over 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	Actual / Forecast	Variance	RAG Rating
	£000s	£000s	£000s	
NHS Financial Performance				
1a) Forecast Outturn, Compared to Plan	2,913	2,913	(0)	GREEN
1b) Year to Date, Actual compared to Plan	1,319	2,512	1,193	GREEN
Financial Efficiency				
2a) Actual Efficiency for Year to Date compared to Plan	7,849	8,590	741	AMBER
- Recurrent Efficiencies Year to Date compared to Plan	7,849	7,727	(122)	
2b) Forecast Outturn Efficiency compared to Plan	10,351	11,050	698	AMBER
- Recurrent Efficiencies for Forecast Outturn compared to Plan	10,351	10,090	(261)	
Underlying Revenue Position				
3) Forecast Outturn Underlying Revenue Position compared to Plan	2,913	2,913	(0)	GREEN
Cash and Capital				
4) Forecast Year End Charge to Capital Resource Limit	12,547	11,047	1,500	GREEN
5) Temporary PDC for Liquidity Purposes (cumulative sum)		0		GREEN
Trust Overall RAG Rating				GREEN

Financial Criteria	Metric	Year to December 14	Rating	Weight	Weighted score	Actual statistic	Comments	Calculation
Continuity of Service	Liquidity Ratio (days)	Actual year to date	4	50%	2	25.6	Achieving a rating of 4	Cash for liquidity purposes divided by Operating expenses
	Capital Servicing capacity (times)	Actual year to date	4	50%	2	4.92	Achieving a rating of 4	Revenue available for debt service divided by capital service costs
	Continuity of Service				4			

EXECUTIVE SUMMARY**Month 9 - YTD**

Overall at the end of Month 9 we are reporting a surplus of £2,512k against a planned surplus of £1,319k. The positive variance is due to increased activity in 111 and depreciation savings where the capital programmes have slipped.

We are presenting a YTD EBITDA of £10.536m (5.9%) which is marginally ahead of the £10.280m (5.9%) planned.

The year to date position also includes penalties related to non-performance against A&E CQUIN Goal 2. This is made up of two parts, part one relates revised performance trajectories for 8 under-performing CCGs ; part 2 relates to all other CCGs achieving the 75% target YTD. The YTD position includes a £585k under-achievement against this CQUIN. In Q1, 1 of the 8 CCGs met their trajectory, the remainder of the YTD position and the forecast position is based on 2 CCGs achieving their performance trajectory.

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 £2.914m, and if applied would amend the position to a deficit of £0.402m, an adverse variance against plan of £1.721m.

This surplus position includes adverse performance within PTS of £2.518m YTD, mainly driven by slippage in CIP achievement and dependencies on third party support. This is offset by benefits in 111 where demand is higher than expected causing a positive financial variance of £529k and Capital Charges are underspend of £917k due to slippage in the capital programme.

Month 9 - Full Year Forecast

The Trust is currently forecasting the achievement of a £2.9m surplus by year end. This is in line with the £2.9m plan and also reflects Winter Resilience funding which has been confirmed. The forecast position of £2.9m reflects

- an anticipated overspend of £3.0m in PTS and an overspend of £1.1m within A&E due to costs of £3.4m associated with the A&E Performance Improvement Plan (PIP). The current forecast also includes an assumption that A&E overtrade on contractual activity will average 3.4% for the financial year (currently 3.9% YTD).

- 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 £0.974m. The application of penalties is currently in discussion with commissioners.

Specific actions to ensure the £2.9m is achieved include:

- Hillsborough: costs associated with the Hillsborough Inquest of c£900k for 14-15 have been assumed to be fully offset by income/funding in the forecast position for 14-15. As highlighted in 5.10, this presents a risk to the forecast surplus position of the Trust should funding not be received.

- A&E: the continued development and implementation of Performance Improvement Plan (PIP) to address the poor performance to date and aim to deliver Red 1 and 2 trajectories (agreed with Commissioners) for the end of the year, thus avoiding penalties.

- PTS: operational rota redesigns are complete and implemented in all areas which should, once embedded, result in increased efficiency and identify savings. In particular vehicle profile and utilisation is being reviewed with an expectation that improvements in this area will drive a reduction in expenditure on private providers. There are also a number of other priority actions being worked through i.e. operational deployment models, embedding the billing of ECR overtrades etc. in order to improve the financial performance for the year end.

A&E - YTD £0.4m adverse and Full Year Forecast £1.1m adverse

Income :

- A&E activity is 3.9% cumulatively above contract for year to date with a value of £3,511k.
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 overall is capped at 2.5% of the contract value. At month 9 neither Red 1 or Red 2 targets have been achieved overall, therefore the full penalty risk is £3,887k for the full year. Although this is a significant risk penalties have not been included in the current year to date position. The application of penalties is currently in discussion with commissioners.

Pay :

- YTD Pay is £183k over budget and will come in £1,494k over budget for the full year. This is due to costs associated with the increased demand, winter resilience plans and the A&E Performance Improvement Plan (PIP).

Non-Pay :

- YTD Non-Pay is £1,822k above budget as a result of a change in the subsistence policy from plan and the increased use of private providers as part of the PIP. In terms of forecast outturn for year end, the same factors mean non-pay will end the year £2,824k above budget.

PTS - YTD £2.5m adverse and Full Year Forecast £3.0m adverse

Income :

- PTS YTD income is over-achieving by £114k at Month 9 which includes: £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 £38k below budget. This is offset by additional income of £215k for the Calderdale & Huddersfield extension to the unscheduled care discharge service and £18k additional income from Mid Yorkshire for winter pressures work.

Pay :

- Pay expenditure YTD is under budget by £150k due to PTS carrying 40 WTE vacancies relating to the delay in filling new rota lines post West rota reviews. For the full year we are expecting to be underspent by £203k due to an anticipated 5% vacancy level throughout the second half of the year.

Non-Pay :

- Non-Pay YTD is overspent by £2.7m with the forecast for the year showing an expected overspend of £3.5m. Driving this position is the dependency on taxis and private providers due to delays in recruitment along with the slippage in CIP delivery partially due to unidentified schemes (£610k not yet identified schemes), and VCS scheme slippage, this was planned to catch up in the later months of the year, although at present it is not reaching the expected trajectory. In order to achieve the forecast position we are targeting the removal of specific discharge service private providers, and driving better resource utilisation, as well as tasking specific areas such as Hull & East and West Yorkshire to reduce their taxi spend. The benefits of these activities are expected to be realised in the period from January. It was expected in December post rota implementation in West Yorkshire, however the new Renal rotas have required some adjustment and bedding in time.

111 - YTD £0.529m favourable and Full Year Forecast £0.496m favourable

Income :

- 111 income is over achieving by £1.062m, which is mainly driven by £608k additional income relating to increased call volumes YTD, and an additional £253k of YTD income relating to the 111 York SPA Pilot; and £164k additional winter pressures funding.

Pay :

- Due to the higher call demand 111 pay expenditure year to date is overspent against budget by £559k. For the full year, we are expecting this trend of higher demand to continue and therefore, pay is likely to be overspent against budget by £1,140k, but this will be offset by an increase in income for the full year.

Non Pay:

- In line with expectations YTD and forecast.

EOC - YTD is slightly better than budget by £7k but the Full Year Forecast is £139k adverse

Pay : YTD spend is over budget by £65k but offset by improvements in income and reduced non pay spend. We are, however, forecasting an overspend of £0.2m for the year. This is due to overtime and higher than planned agency staff as part of the A&E PIP (10 WTE).

Finance Directorate - YTD is £1.0m favourable to budget, Full Year Forecast is £0.6m favourable.

Fleet: YTD £43k below budget, Full Year forecast £438k over budget

- Pay is expected to be underspent by £204k for the full year due to carrying vacancies within the Cleaning team. Non-Pay is forecast to overspend by £533k by year end which is driven by overspends in vehicle maintenance of £2.8m offset by anticipated savings in fuel of £1.1m due to lower volumes of usage, lower fuel prices and lease cost savings. There is also non-recurrent insurance rebate of £650k included in the YTD position.

Finance Cost Centre: YTD £138k favourable and full year forecast to be £160k favourable

- Pay is currently £56k underspent, and is expected to be underspent by £46k by year end due to vacancies. Non-pay is forecast to be £94k underspent by year end mostly due to reduction of external consultancy costs and reclaimed VAT from 13/14.

Capital Charges: YTD £917k favourable and Full Year Forecast £1,342k favourable

- The Capital Charges £917k YTD underspend is mostly from the depreciation underspend due to further slippage in the capital programme in the second half of the year. We are forecasting an underspend of £1,197k on depreciation, and £145k underspend on dividends paid for the year.

Other movements:

IM&T : Forecast to be underspent by £379k, including a £94k rebate from Vodafone relating to the new mobile phone contract savings.

Finance - Claims and Other Payments is YTD £228k adverse and £673k adverse forecast based on a detailed review of claims/losses projected to year end.

Yorkshire Ambulance Service - Statement of Comprehensive Income

December 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	14,716	15,444	-728	124,989	126,582	-1,593	167,139	170,324	-3,185
Patient Transport Service	2,238	2,275	-37	20,087	20,201	-114	26,801	27,159	-358
111	2,411	2,789	-378	21,699	22,762	-1,063	28,932	30,423	-1,491
Other Income	1,064	1,053	11	7,551	7,794	-243	10,715	11,392	-677
Operating Income	20,430	21,562	-1,132	174,325	177,339	-3,014	233,587	239,298	-5,711
Pay Expenditure & reserves	-13,257	-14,628	1,371	-119,955	-119,558	-397	-159,660	-160,677	1,018
Non-Pay expenditure & reserves	-5,740	-5,586	-154	-44,090	-47,245	3,155	-58,717	-64,773	6,056
Operating Expenditure	-18,997	-20,214	1,217	-164,045	-166,803	2,758	-218,376	-225,450	7,074
EBITDA	1,433	1,348	85	10,280	10,536	-256	15,211	13,848	1,363
EBITDA %	7.0%	6.2%		5.9%	5.9%		6.5%	5.8%	
Depreciation	-922	-723	-199	-7,168	-6,366	-802	-9,918	-8,721	-1,197
Interest payable & finance costs	0	0	0	-204	-205	1	-280	-281	1
Interest receivable	3	15	-13	24	46	-22	32	53	-21
Profit on fixed asset disposal	0	6	-6	89	95	-6	138	138	0
Dividends, interest and other	-189	-177	-12	-1,702	-1,593	-109	-2,269	-2,124	-145
Retained Surplus	324	469	-145	1,319	2,512	-1,193	2,913	2,913	0
I&E Surplus %	1.6%	2.2%		0.8%	1.4%		1.2%	1.2%	

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

A&E CONTRACT - Responses	Quarter 1					Quarter 2					October 2014					November 2014					December 2014					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	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%	62	4,828	5,032	204	4.2%	37	1,646	1,596	-50	-3.0%	-9	1,598	1,603	5	0.3%	1	1,743	1,798	55	3.2%	10	14,618	15,179	561	3.8%	101
NHS Barnsley CCG	8,315	8,446	131	1.6%	19	8,365	8,484	119	1.4%	17	2,876	2,868	-8	-0.3%	-1	2,808	2,898	90	3.2%	13	3,064	3,203	139	4.5%	20	25,428	25,899	471	1.9%	68
NHS Bradford City CCG	4,243	4,311	68	1.6%	10	4,166	4,351	185	4.4%	26	1,407	1,544	137	9.7%	20	1,414	1,499	85	6.0%	12	1,506	1,643	137	9.1%	19	12,736	13,348	612	4.8%	87
NHS Bradford Districts CCG	11,145	11,439	294	2.6%	51	11,050	11,089	39	0.4%	7	3,793	3,836	43	1.1%	8	3,765	3,952	187	5.0%	33	4,178	4,597	419	10.0%	73	33,931	34,913	982	2.9%	172
NHS Calderdale CCG	7,606	7,541	-65	-0.9%	-11	7,415	7,047	-368	-5.0%	-65	2,564	2,476	-88	-3.4%	-16	2,489	2,566	77	3.1%	14	2,616	2,797	181	6.9%	32	22,690	22,427	-263	-1.2%	-46
NHS Doncaster CCG	11,273	11,634	361	3.2%	48	11,481	11,672	191	1.7%	25	3,907	3,830	-77	-2.0%	-10	3,879	3,979	100	2.6%	14	4,141	4,287	146	3.5%	18	34,681	35,402	721	2.1%	95
NHS East Riding of Yorkshire CCG	9,909	10,316	407	4.1%	76	10,322	10,474	152	1.5%	28	3,422	3,489	67	2.0%	13	3,450	3,559	109	3.2%	21	3,722	3,870	148	4.0%	27	30,825	31,708	883	2.9%	165
NHS Greater Huddersfield CCG	7,795	7,566	-229	-2.9%	-42	7,681	7,616	-65	-0.8%	-12	2,564	2,570	6	0.2%	1	2,551	2,775	224	8.8%	41	2,603	2,863	260	10.0%	47	23,194	23,390	196	0.8%	35
NHS Hambleton, Richmondshire and Whitby CCG	4,062	4,911	849	20.9%	185	4,610	4,902	292	6.3%	64	1,516	1,672	156	10.3%	35	1,471	1,518	47	3.2%	10	1,558	1,753	195	12.5%	42	13,217	14,756	1,539	11.6%	336
NHS Harrogate and Rural District CCG	4,066	4,775	709	17.4%	158	4,563	4,678	115	2.5%	26	1,510	1,570	60	4.0%	14	1,528	1,695	167	10.9%	38	1,675	1,766	91	5.4%	19	13,342	14,484	1,142	8.6%	255
NHS Hull CCG	11,257	11,353	96	0.9%	14	11,468	11,313	-155	-1.4%	-23	4,025	3,912	-113	-2.8%	-17	3,894	3,956	62	1.6%	9	4,235	4,189	-46	-1.1%	-7	34,879	34,723	-156	-0.4%	-24
NHS Leeds North CCG	6,250	6,621	371	5.9%	63	6,404	6,437	33	0.5%	6	2,146	2,237	91	4.2%	16	2,152	2,217	65	3.0%	11	2,334	2,527	193	8.3%	32	19,286	20,039	753	3.9%	128
NHS Leeds South and East CCG	11,168	11,763	595	5.3%	96	11,406	11,454	48	0.4%	8	3,940	4,198	258	6.5%	47	3,764	4,203	439	11.7%	80	4,168	4,343	175	4.2%	14	34,446	35,961	1,515	4.4%	245
NHS Leeds West CCG	10,355	10,140	-215	-2.1%	-35	10,295	9,866	-429	-4.2%	-70	3,526	3,592	66	1.9%	10	3,460	3,670	210	6.1%	31	3,568	3,746	178	5.0%	33	31,204	31,014	-190	-0.6%	-31
NHS North Kirklees CCG	5,794	5,833	39	0.7%	7	5,792	5,886	94	1.6%	17	2,033	2,100	67	3.3%	13	1,983	2,196	213	10.7%	40	2,140	2,336	196	9.2%	36	17,742	18,351	609	3.4%	113
NHS Rotherham CCG	8,806	8,906	100	1.1%	13	8,939	9,053	114	1.3%	15	2,899	3,154	255	8.8%	35	2,794	3,232	438	15.7%	59	3,116	3,619	503	16.1%	66	26,554	27,964	1,410	5.3%	188
NHS Scarborough and Ryedale CCG	4,039	4,557	518	12.8%	101	4,483	4,614	131	2.9%	25	1,492	1,487	-5	-0.3%	-1	1,365	1,483	118	8.6%	23	1,444	1,572	128	8.9%	25	12,823	13,713	890	6.9%	173
NHS Sheffield CCG	17,436	18,801	1,365	7.8%	202	17,841	18,692	851	4.8%	126	6,116	6,486	370	6.0%	56	6,019	6,666	647	10.7%	97	6,291	7,432	1,141	18.1%	167	53,703	58,077	4,374	8.1%	648
NHS Vale of York CCG	9,357	10,686	1,329	14.2%	275	10,199	10,673	474	4.6%	98	3,566	3,746	180	5.0%	38	3,526	3,711	185	5.2%	39	3,676	3,827	151	4.1%	30	30,324	32,643	2,319	7.6%	480
NHS Wakefield CCG	12,200	12,698	498	4.1%	85	12,472	12,855	383	3.1%	65	4,171	4,398	227	5.4%	45	3,968	4,438	470	11.8%	93	4,477	4,804	327	7.3%	36	37,288	39,193	1,905	5.1%	324
SUB TOTAL (CONTRACTED)	169,879	177,447	7,568	4.5%	1,377	173,780	176,188	2,408	1.4%	420	59,119	60,761	1,642	2.8%	297	57,878	61,816	3,938	6.8%	679	62,255	66,972	4,717	7.6%	739	522,911	543,184	20,273	3.9%	3,512
ECP		2,450					2,366					781					753					812					7,162			
NHS Cumbria CCG	134	181	47			122	149	27			41	52	11			44	43	-1			46	57	11			343	482	139		
OOA/UNKNOWN		371					596					233					218					283					1,701			
GRAND TOTAL*	169,879	180,449	7,615	4.5%	1,426	173,902	179,299	2,435	1.40%	445	59,160	61,827	1,653	2.79%	292	57,922	62,830	3,937	6.80%	679	62,301	68,124	4,728	7.59%	739	523,254	552,529	20,412	3.90%	3,512

Yorkshire Ambulance Service - Income and Expenditure Forecast

December 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				20,429,977	21,561,665	-1,131,688	174,324,916	177,338,635	-3,013,719	233,587,292	239,298,269
Pay											
A&E Operations	-2,267.77	-2,473.38	205.61	-8,239,474	-8,138,766	-100,708	-69,721,240	-69,904,606	183,366	-92,677,802	-94,172,108
PTS Operations	-772.01	-770.19	-1.82	-1,424,300	-1,423,738	-562	-12,818,700	-12,668,531	-150,169	-17,091,632	-16,888,202
Resilience	-127.77	-117.02	-10.75	-430,169	-432,929	2,760	-3,876,077	-3,917,163	41,086	-5,166,578	-5,225,346
EOC	-384.99	-386.09	1.10	-1,098,291	-1,135,269	36,978	-9,941,814	-10,007,066	65,252	-13,236,692	-13,456,049
Finance	-69.65	-59.64	-10.01	-218,205	-175,433	-42,772	-1,969,850	-1,677,645	-292,205	-2,624,515	-2,268,590
Estates	-42.87	-48.81	5.94	-98,888	-136,952	38,064	-889,992	-1,006,103	116,111	-1,186,661	-1,342,097
Fleet	-186.93	-176.00	-10.93	-417,228	-430,983	13,755	-3,781,845	-3,642,080	-139,765	-5,033,531	-4,829,281
IM&T	-39.98	-35.97	-4.01	-125,260	-128,620	3,360	-1,127,340	-1,107,137	-20,203	-1,503,133	-1,484,516
Procurement	-18.53	-17.81	-0.72	-39,681	-40,402	721	-357,129	-358,181	1,052	-476,175	-504,176
Standards & Compliance	-47.15	-53.46	6.31	-159,760	-171,391	11,631	-1,391,516	-1,390,283	-1,233	-1,870,801	-1,904,399
111	-328.10	-357.87	29.77	-914,747	-1,082,254	167,507	-7,708,824	-8,267,899	559,075	-10,164,061	-11,251,784
People & Engagement	-114.07	-107.78	-6.29	-366,559	-343,055	-23,504	-2,891,463	-2,792,766	-98,697	-3,991,142	-3,829,699
Clinical Directorate	-54.49	-39.03	-15.46	-268,990	-397,518	128,528	-1,441,557	-1,515,080	73,523	-2,288,389	-2,330,563
Chief Executive	-16.80	-10.80	-6.00	-93,402	-90,811	-2,591	-839,064	-803,242	-35,822	-1,119,281	-1,079,029
Reserves	0.00	0.00	0.00	637,862	-500,000	1,137,862	-1,198,310	-499,860	-698,450	-1,229,145	-111,535
Total Pay	-4,471.11	-4,653.85	182.74	-13,257,092	-14,628,121	1,371,029	-119,954,721	-119,557,642	-397,079	-159,659,538	-160,677,374
Non Pay											
A&E Operations				-155,436	-428,574	273,138	-1,220,857	-3,042,658	1,821,801	-1,602,436	-4,426,508
PTS Operations				-24,709	-365,146	340,437	288,593	-2,494,616	2,783,209	512,642	-3,015,080
Resilience				-76,371	-66,643	-9,728	-933,649	-1,190,697	257,048	-1,162,816	-1,450,203
EOC				-15,971	-9,507	-6,464	-143,739	-104,760	-38,979	-191,642	-143,092
Finance				-1,185,401	-965,122	-220,279	-9,809,843	-9,160,413	-649,430	-13,335,717	-12,722,001
Estates				-408,767	-404,819	-3,948	-3,678,892	-3,557,323	-121,569	-4,905,223	-4,763,122
Fleet				-1,650,947	-1,736,603	85,656	-14,402,118	-14,533,265	131,147	-19,178,578	-19,711,617
IM&T				-343,325	-344,374	1,049	-3,089,925	-2,962,161	-127,764	-4,119,895	-3,911,460
Procurement				-240,639	-301,795	61,156	-2,268,529	-2,475,242	206,713	-3,021,422	-3,315,643
Standards & Compliance				-105,503	-117,261	11,758	-972,071	-1,303,045	330,974	-1,288,587	-1,820,297
111				-1,409,712	-1,394,900	-14,812	-12,687,408	-12,661,800	-25,608	-16,916,537	-16,823,174
People & Engagement				-136,638	-125,829	-10,809	-1,229,744	-1,420,202	190,458	-1,639,620	-1,910,322
Clinical Directorate				-78,659	-170,657	91,998	-208,912	-201,297	-7,615	-430,487	-396,870
Chief Executive				-24,192	-33,634	9,442	-217,724	-163,854	-53,870	-290,310	-227,591
Reserves				-992,572	0	-992,572	-2,476,223	2,343	-2,478,566	-3,443,925	-1,070,829
Total Non Pay				-6,848,842	-6,464,863	-383,978	-53,051,041	-55,268,990	2,217,949	-71,014,553	-75,707,810
Total Expenditure	-4,471.11	-4,653.85	182.74	-20,105,934	-21,092,984	987,050	-173,005,762	-174,826,632	1,820,870	-230,674,091	-236,385,184
Surplus/(Deficit)				324,043	468,680	-144,637	1,319,154	2,512,004	-1,192,850	2,913,201	2,913,085

NB total non-pay includes depreciation, dividends and impairments

CIP DELIVERY

- 109% delivery of the CIP target was achieved in Month 9 against plan and 92% of this was achieved through recurrent schemes. This creates an favourable variance against plan of £741k. Reserve schemes have achieved £1,355k of the savings made year to date. Forecast CIP delivery is £11.050m which is 107% of plan.
- In A&E there is a £781k favourable variance on the A&E skill mix CIP. The CIP to remove missed meal break payments and AVPs has slipped against plan which has created an adverse variance of (£185k). Other A&E CIPs which are under achieving against plan include value for money and clinical hub schemes (£737k). A&E have identified additional savings to mitigate against the risk of non-delivery, including reduced private provider expenditure, which has achieved savings of £352k 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 (£348k). These movements have been marginally offset by the £8k 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					
Accident & Emergency	5,612	4,425	4,284	(140)	5,257
Patient Transport Service	2,279	1,591	845	(746)	1,378
Special Operations	309	226	135	(91)	194
Standards and Compliance	173	129	423	294	541
Finance	89	65	152	87	263
Clinical Directorate	54	41	41	0	54
Trust wide	1,836	1,373	1,354	(19)	1,889
Recurrent Planned Savings	10,351	7,849	7,068	(781)	9,312
Non-recurrent Planned Savings			167	167	264
Sub Total	10,351	7,849	7,235	(614)	9,577

	£000	£000	£000	£000	£000
Reserve Schemes					
111 additional CIP			287	287	382
Reduce spend on Private Providers			352	352	352
Fleet Insurance Rebate			650	650	650
Other			67	67	89
Recurrent Reserve Schemes			660	660	778
Non-recurrent Reserve Schemes			695	695	695
Sub total			1,355	1,355	1,473
Total	10,351	7,849	8,590	741	11,050

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	H Hugill	3,292	2,699	3,480	781
Increase use of clinical hub (triage)	B Holdaway	1,257	925	265	-661
Voluntary Car Scheme	J Halliwell	874	642	399	-242
Remove missed meal break payments and AVP	P Mudd	689	520	335	-185
PTS Unallocated	J Halliwell	610	406	-	-406
Total		6,721	5,191	4,479	-712

SUMMARY

Land, Buildings, Equipment and Intangibles are underspent compared to the Plan due to the slippage in the Capital Programme.

Stock, Trade & Other Receivables remain higher than plan primarily as a result of accrued income which includes A&E overtrade and estimates for the achievement of CQUINS.

Cash is slightly higher than anticipated largely as a result of slippage on the capital programme.

Creditors remain slightly higher than Plan as a result of the re-provision of 2013/14 resource for ECS in the current year and costs relating to the A&E performance improvement plan.

Borrowings reflect that the ECS Loan was not drawn in September (£2.2m) as anticipated in the Plan. The Plan recognised the first repayment that would have been made in March 2015 of £0.22m giving a net variance of £1.98m. The Trust's loan application has now been approved with draw downs in both 14/15 and 15/16, as a result no repayments will be required until 2015/16.

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, the orders have been raised and the expenditure on equipment will be incurred from December 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 £551k is due to a delayed finalisation of scheme specifics. Medical Equipment schemes are underway and ahead of the original plan.

The national framework for the supply of vehicles concluded in July and the Trust business case was submitted and approved by Finance & Investment Committee and Board in September, and the order for the Mercedes Sprinter base vans has been placed in October. The conversion element has been awarded and the order placed. The supply of the remaining 13/14 vehicles completed, as expected, in September.

The Hub & Spoke project will be progressed to Outline Business Case, the Strategic Outline Business Case has been approved by F&I and the Trust Board.

The actual net book value of asset disposals has exceeded the annual plan due to the write off of a Mercedes Sprinter with a net book value of £73k.

Statement of Financial Position			
	Plan at 31/12/2014 £000	Actual at 31/12/2014 £000	Variance £000
Land, Buildings and equipment	79,714	76,358	-3,356
Trade and other receivables (>1 yr)	880	775	-105
Non-Current assets	80,594	77,133	-3,461
Stocks, Trade and other receivables (<1 yr)	11,263	13,742	2,479
Cash and cash equivalents	20,309	20,970	661
Current assets	31,572	34,712	3,140
Creditors (< 1yr)	-14,659	-15,907	-1,248
Provisions & Deferred Income(<1 yr)	-2,595	-3,421	-826
Current Liabilities	-17,254	-19,328	-2,074
Provisions (>1 yr)	-8,974	-8,259	715
Borrowings	-7,650	-5,670	1,980
Non-Current Liabilities	-16,624	-13,929	2,695
Net Assets	78,288	78,588	300
Public Dividend Capital	78,594	78,594	0
Revaluation Reserve	5,238	5,126	-112
Donation Reserve	0	0	0
Income & Expenditure Reserve	-5,544	-5,132	412
Total Taxpayer's Equity	78,288	78,588	300

Capital Programme							
	Baseline Programme £000	Revised 14/15 Programme £000	Year to Date Plan £000	Spend to 30/11/2014 £000	Committed at 30/12/2014 £000	(Under)/ Over plan 30/12/2014 £000	Forecast Outturn 14/15 £000
<u>Major Schemes</u>							
HART	100	100		77	0	77	77
ECS	2,200	745	373	204	541	373	745
Hub & spoke	2,400	600	375	267	17	-91	600
<u>Minor Schemes</u>							
Estates	735	773	609	349	47	-213	954
IM&T	1,600	1,567	1,243	390	515	-338	1,567
Vehicles A&E	4,658	4,990	885	657	1,758	1,530	4,818
Vehicles PTS	1,290	1,090	640	0	0	-640	724
Vehicles HART	167	167	167	0	0	-167	0
Medical equipment	1,134	1,109	240	360	796	916	1,210
Total planned expenditure	14,284	11,141	4,532	2,304	3,674	1,447	10,695
NBV of Disposals	1,737	94	0	55	0		129
CRL (Including External Funds)	12,547	11,047	4,532	2,249			11,047
Total planned resources	14,284	11,141					11,176
Rating						⊗ ⊗	

Yorkshire Ambulance Service - Debtors and Payments

December 2014

DEBT SUMMARY

NHS Debt has decreased due to settlements from Harrogate & Rural District CCG and Scarborough & Ryedale CCG in relation to the 2013/14 outstanding sums. A further £42k of NHS Debt over 90 days has been settled in early January 15 and the agreement of balances exercise this month will be used to resolve the remaining balances. Work is ongoing to clear as much debt over 90 days as possible.

£000	Sep-14	Oct-14	Nov-14	Dec-14
Non NHS debt	343	376	298	276
Of which >90 days overdue	144	142	142	143
NHS debt	1,834	1,450	1,103	1,115
Of which >90 days overdue	1,152	694	467	199
Total debt	2,177	1,826	1,401	1,391
Of which >90 days overdue	1,296	836	609	342
Provision to cover this debt	1,296	836	583	342

PAYMENTS

The Trust has paid 2,154 invoices in December 2014 of which 2,095 were paid within 30 days of receipt giving a Better Payment Practice Code (BPPC) position of 97.26% for the month and 98.51% year to date. In value terms, the Trust has achieved 96.38% year to date. This is in line with the Trusts target to pay 95% of invoices are paid within 30 days. The Accounts Payable team will continue to liaise with all departments to ensure a speedy turnaround of invoices that require authorisation.

	Dec-14		Year to Date	
	Number	£000	Number	£000
Non NHS payables				
Total non NHS invoices paid in period	2,096	5,591	19,847	49,196
Total non NHS invoices paid within target	2,045	5,509	18,966	47,348
	97.57%	98.53%	95.56%	96.24%
NHS Payables				
Total NHS invoices paid in period	58	316	499	3,042
Total NHS invoices paid within target	50	310	468	3,001
	86.21%	98.10%	93.79%	98.65%
Total Payables				
Total invoices paid in period	2,154	5,907	20,346	52,238
Total invoices paid within target	2,095	5,819	19,434	50,349
	97.26%	98.51%	95.52%	96.38%

QUALITY, INFORMATION REPORTING, AND CQUIN

A&E CQUIN 2 which includes two parts. Part 1 - relating to the 8 underperforming CCGs Red performance. At Quarter 1, 7 of the 8 CCGs did not meeting their individual Red performance targets and therefore funding attached to these CCGs has not been achieved. Jul-Dec performance is that 6 out of 8 CCGs are not meeting their target - this is reflected in the YTD position. Part 2 - relating to the remaining CCGs to achieve 75% Red performance targets is also unachieved at month 9.

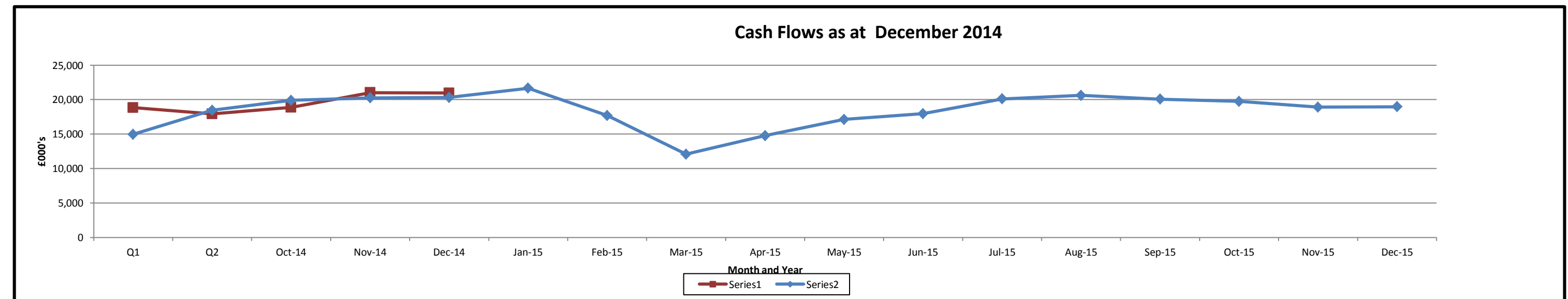
RISK SUMMARY

Description	Total Value of Risk	In Financial Position YTD	In Financial Position Forecast	Explanatory notes / Mitigation
In the Financial Position	£000	£000	£000	
CIP non-delivery by 10%	1,035	0	0	CIP achievement at Month 9 with the use of reserve schemes is 107% achievement against plan.
A&E contractual penalties - RED 1	3,887	2,914	0	Red 1 and Red 2 targets were not achieved for period to December. 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 £2,914k 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				
111 income risk (based 50% of call volume)	140	93	140	KPI non delivery has been assumed in the current financial position.
Non delivery of CQUINS - A&E	1,696	585	1,321	A&E CQUIN goal part 1 - 7 out of 8 CCGs failed their individual targets in Q1, and 6 out of 8 are under-performing as at month 9. Part 2 100% not achieved. The forecast financial position includes actual CQUIN payment for Q1 and assumes that 6 CCGs will not achieve part 1 and 100% will not achieve part 2 for the remaining year, 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	160	0	0	In the October PbR meeting it was agreed with Commissioners to cap the risk to 0.1% of the contract value.
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	3,357	2,518	2,966	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	1,164	445	1,164	This reflects the impact on A&E outturn due to the costs of the Performance Improvement Plan.
Hillsborough Costs	900	386	0	The current forecast assumption is that income will be received to fully offset the costs incurred. The value of the risk is based on the estimated expenditure that may be incurred to the end of December 2015 of c£1.5m, of which expenditure in 14-15 is expected to be c£900k. Funding has yet to be confirmed.
GRAND TOTAL	12,765	6,941	5,591	

Analysis Of Actual/Plan Cash Flows

Cash Name (£000's)	Actual Q1	Actual Q2	Actual Oct-14	Actual Nov-14	Actual Dec-14	Forecast Jan-15	Forecast Feb-15	Forecast Mar-15	Forecast Apr-15	Forecast May-15	Forecast Jun-15	Forecast Jul-15	Forecast Aug-15	Forecast Sep-15	Forecast Oct-15	Forecast Nov-15	Forecast Dec-15
Actual/Forecast Opening Cash Balance	10,142	18,839	17,924	18,866	21,017	20,309	21,667	17,710	12,075	14,765	17,142	17,979	20,112	20,628	20,070	19,752	18,908
Cash Inflows																	
Income from Activities	59,539	57,066	19,902	20,820	19,566	20,158	19,134	17,043	19,887	19,759	19,258	19,887	18,564	18,812	19,374	18,761	19,311
Interest Receivable	11	12	3	2	16	3	3	2	2	2	3	3	3	3	3	3	3
Capital Receipts	44	64	67	28	6	711	1,062	101	0	0	0	0	0	0	0	0	0
Loans	0	0	0	0	0	0	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	59,594	57,142	19,972	20,850	19,588	20,872	20,199	17,146	19,889	19,761	19,261	19,890	18,567	18,815	19,377	18,764	19,314
Cash Outflows																	
Pay	35,282	38,585	13,230	13,400	13,562	12,858	12,842	12,869	12,639	12,735	12,676	12,720	12,639	12,744	12,797	12,742	12,704
Non-pay	14,707	15,994	5,541	5,026	5,374	5,664	4,902	6,043	3,134	4,649	5,748	5,037	5,412	5,041	4,488	5,369	5,953
Interest Payable	0	58	0	0	0	0	0	78	0	0	0	0	0	66	0	0	0
PDC Dividends	0	876	0	0	0	0	0	1,135	0	0	0	0	0	1,135	0	0	0
Capital Expenditure	908	2,377	259	273	699	992	6,412	2,269	1,426	0	0	0	0	0	2,410	1,497	596
Loans	0	167	0	0	0	0	0	387	0	0	0	0	0	387	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	50,897	58,057	19,030	18,699	19,635	19,514	24,156	22,781	17,199	17,384	18,424	17,757	18,051	19,373	19,695	19,608	19,253
Net Cash Inflow/(Outflow)	8,697	-915	942	2,151	-47	1,358	-3,957	-5,635	2,690	2,377	837	2,133	516	-558	-318	-844	61
Actual Closing Cash Balance	18,839	17,924	18,866	21,017	20,970												
Forecast Closing Cash Balance (per TDL Plan)	14,962	18,445	19,905	20,262	20,309	21,667	17,710	12,075	14,765	17,142	17,979	20,112	20,628	20,070	19,752	18,908	18,969

The cash position essentially reflects the year to date slippage on the capital programme, partially offset by the deferral of the ECS loan drawdown.



Hospital	Qtr1				Qtr2				Dec-14				Qtr3				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 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 Arrivals At Destination	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	26	4	30	3407	13	2	15	1139	28	5	33	3293	75	12	87	10216
	£420	£300	£720		£520	£400	£920		£260	£200	£460		£560	£500	£1,060		£1,500	£1,200	£2,700	
BARNESLEY DISTRICT GENERAL	18	3	21	5510	26	5	31	5407	8	2	10	2038	21	4	25	5892	65	12	77	16809
	£360	£300	£660		£520	£500	£1,020		£160	£200	£360		£420	£400	£820		£1,300	£1,200	£2,500	
BRADFORD ROYAL INFIRMARY	60	14	74	9897	54	10	64	9482	38	4	42	3624	73	12	85	10039	187	36	223	29418
	£1,200	£1,400	£2,600		£1,080	£1,000	£2,080		£760	£400	£1,160		£1,460	£1,200	£2,660		£3,740	£3,600	£7,340	
CALDERDALE ROYAL HOSPITAL	26	3	29	4662	31	5	36	4417	30	2	32	1794	64	5	69	4959	121	13	134	14038
	£520	£300	£820		£620	£500	£1,120		£600	£200	£800		£1,280	£500	£1,780		£2,420	£1,300	£3,720	
HUDDERSFIELD ROYAL INFIRMARY	34	3	37	4602	28	6	34	4592	28	5	33	1589	72	8	80	4607	134	17	151	13801
	£680	£300	£980		£560	£600	£1,160		£560	£500	£1,060		£1,440	£800	£2,240		£2,680	£1,700	£4,380	
HULL ROYAL INFIRMARY	247	4	251	10918	214	11	225	10746	73	9	82	3560	211	18	229	10565	672	33	705	32229
	£4,940	£400	£5,340		£4,280	£1,100	£5,380		£1,460	£900	£2,360		£4,220	£1,800	£6,020		£13,440	£3,300	£16,740	
DEWSBURY DISTRICT HOSPITAL	15	5	20	3623	22	4	26	3619	15	2	17	1310	44	5	49	3778	81	14	95	11020
	£300	£500	£800		£440	£400	£840		£300	£200	£500		£880	£500	£1,380		£1,620	£1,400	£3,020	
PINDERFIELDS GENERAL HOSPITAL	41	10	51	8378	49	1	50	8139	15	2	17	2982	54	7	61	8669	144	18	162	25186
	£820	£1,000	£1,820		£980	£100	£1,080		£300	£200	£500		£1,080	£700	£1,780		£2,880	£1,800	£4,680	
PONTEFRACCT GENERAL INFIRMARY	1	0	1	314	1	0	1	313	3	0	3	79	3	1	4	274	5	1	6	901
	£20	£0	£20		£20	£0	£20		£60	£0	£60		£60	£100	£160		£100	£100	£200	
DONCASTER ROYAL INFIRMARY	43	7	50	7449	25	8	33	7395	13	3	16	2533	38	4	42	7306	106	19	125	22150
	£860	£700	£1,560		£500	£800	£1,300		£260	£300	£560		£760	£400	£1,160		£2,120	£1,900	£4,020	
FRIARAGE HOSPITAL	18	2	20	1562	22	1	23	1605	8	0	8	500	20	1	21	1327	60	4	64	4494
	£360	£200	£560		£440	£100	£540		£160	£0	£160		£400	£100	£500		£1,200	£400	£1,600	
HARROGATE DISTRICT HOSPITAL	21	1	22	3009	26	4	30	3004	4	1	5	1121	10	1	11	3177	57	6	63	9190
	£420	£100	£520		£520	£400	£920		£80	£100	£180		£200	£100	£300		£1,140	£600	£1,740	
LEEDS GENERAL INFIRMARY	68	12	80	6998	74	5	79	6999	31	2	33	2498	83	11	94	7635	225	28	253	21632
	£1,360	£1,200	£2,560		£1,480	£500	£1,980		£620	£200	£820		£1,660	£1,100	£2,760		£4,500	£2,800	£7,300	
ST JAMES UNIVERSITY HOSPITAL	61	8	69	9787	43	4	47	9186	28	2	30	3389	77	8	85	9875	181	20	201	28848
	£1,220	£800	£2,020		£860	£400	£1,260		£560	£200	£760		£1,540	£800	£2,340		£3,620	£2,000	£5,620	
NORTHERN GENERAL HOSPITAL	47	15	62	10085	65	5	70	10208	23	1	24	3826	45	3	48	10911	157	23	180	31204
	£940	£1,500	£2,440		£1,300	£500	£1,800		£460	£100	£560		£900	£300	£1,200		£3,140	£2,300	£5,440	
ROTHERHAM DISTRICT GENERAL HOSPITAL	19	5	24	5308	30	4	34	5488	22	2	24	2079	45	3	48	5855	94	12	106	16651
	£380	£500	£880		£600	£400	£1,000		£440	£200	£640		£900	£300	£1,200		£1,880	£1,200	£3,080	
SCARBOROUGH DISTRICT GENERAL HOSPITAL	58	3	61	4788	66	6	72	4962	12	0	12	1668	45	3	48	4865	169	12	181	14615
	£1,160	£300	£1,460		£1,320	£600	£1,920		£240	£0	£240		£900	£300	£1,200		£3,380	£1,200	£4,580	
YORK DISTRICT HOSPITAL	111	6	117	6093	107	5	112	6271	36	2	38	2298	103	9	112	6762	321	20	341	19126
	£2,220	£600	£2,820		£2,140	£500	£2,640		£720	£200	£920		£2,060	£900	£2,960		£6,420	£2,000	£8,420	
SHEFFIELD CHILDRENS HOSPITAL	2	1	3	1003	9	0	9	886	2	0	2	439	4	1	5	1194	15	2	17	3083
	£40	£100	£140		£180	£0	£180		£40	£0	£40		£80	£100	£180		£300	£200	£500	
Grand Total Handover				107502				106126				38466				110983				324611
Grand Total Breaches	911	105	1016		918	88	1006		402	41	443		1040	109	1149		2869	302	3171	
Grand Total Cost	£18,220	£10,500	£28,720		£18,360	£8,800	£27,160		£8,040	£4,100	£12,140		£20,800	£10,900	£31,700		£57,380	£30,200	£87,580	

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'