



# Monthly Yorkshire Ambulance Trust Board Integrated Performance Report

February 2015



Yorkshire Ambulance Service **NHS**  
NHS Trust

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



# Section 1

## Executive Summary



Overall Trust wide Top Exceptions

RAG	Section	No of months Exception	Exceptions for month	Comments	Who	When	Year end Risk Level
RED	2.2	11/11	RED 1 Performance	RED 1 performance was 71.60% an increase of 1% on January. RED 1 demand YTD is up 0.9%. Actions being developed as part of the Spring in to Action Group focusing on Demand, Resources and Efficiency	Interim Executive Director of Operations	Ongoing	AMBER
RED	2.2	11/11	RED 2 Performance	RED 2 performance 69.98% an increase of 2.5% on January. RED 2 demand YTD is up 12.1%. Actions being developed as part of the Spring in to Action Group focusing on Demand, Resources and Efficiency. Abstractions remain high lowering base line operational hours . still a large 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	7/11	Green 2 Performance	Green 2 Performance was 81.72% an improvement of 2% on January. Improvements will form part of work of the Spring in to Action. Abstractions remain high lowering base line operational hours . The Clinical Hub supporting in assessment of G2 calls to improve response time and give comfort calls to those who have a prolonged response time.	Interim Executive Director of Operations	Ongoing	GREEN
RED	CQ1	6/11	CQUIN delivery	The 'Improving combined Red 1 and Red 2 performance in underperforming CCGs' is at risk of delivery due to performance not meeting the required standards. An external review is ongoing to validate the increase in demand reported by YAS of >than or = to 3% as per the agreed CQUIN schedule. CQUIN 1.4 (Paramedic Pathfinder) is currently rated amber due to awaiting confirmation of revised schedule regarding the 'demonstrable evidence of usage'. Quarter 3 CQUIN reports were submitted on 30/01/15 and a contract query followed. Responses were provided within required timescales and further feedback is awaited.	Interim Executive Director of Operations	Ongoing	AMBER
RED	4.6	11/11	Sickness / Absence	There was a slight improvement in absence compared to the previous month with February absence at 6.57%, still some way above the Trust's 5% target.  Highest levels of absence were in the Ancillary Division (10.34%) NHS 111 (7.66%) and A&E Operations (6.73%).  In respect of both NHS111 and A&E Operations, this represents a significant improvement compared to previous months.  Work continues with individual Associate Directors to bring about further improvement.	All Directors & Managers	Ongoing	RED
AMBER	4.10	10/11	PDR's	A revised PDR management system has been put in place which provides managers with information on the number of due PDRs for completion. As a result, further incremental improvement can be noted with the completion rate now at 72.34%.  The Clinical and Finance and Performance Directorates show the highest levels of non-compliance.  Work to address quality concerns is on -going.	All Directors & Managers	Ongoing	GREEN
RED	2.16	11/11	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

Yorkshire Ambulance Service - Executive Summary February 2015

Care Quality commission priorities	Safe	Effective	Caring	Well-led	Responsive
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Yorkshire Ambulance Service - Aims	Continuously improving patient care	Setting high standards of performance	Always learning	Spending public money wisely
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2014-15 BUSINESS PLAN OBJECTIVES		Lead Director	Apr RAG	May RAG	Jun RAG	Jul RAG	Aug RAG	Sept RAG	Oct RAG	Nov RAG	Dec RAG	Jan RAG	Feb RAG	Mar RAG	Year End Forecast
<b>Strategic Objectives</b>															
<b>1. Improve clinical outcomes for key conditions</b>															
1a	Improve survival to discharge for cardiac arrest	Julian Mark	GREEN	GREEN	GREEN	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	GREEN	GREEN	GREEN	AMBER
1c	Training and supporting our staff	Dave Macklin/ Steve Page	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN
<b>2. To deliver timely emergency and urgent care in the most appropriate setting</b>															
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	RED	RED	RED	AMBER
2b	Increase non-conveyance rates	Dave Macklin	AMBER	AMBER	AMBER	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	GREEN	AMBER	GREEN
2d	Develop care pathways for specialist groups	Julian Mark	GREEN	GREEN	GREEN	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	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	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	AMBER	AMBER	AMBER	GREEN
<b>3. To provide clinically-effective services which exceed regulatory and legislative standards</b>															
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	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	GREEN	GREEN	GREEN
3c	Continued expansion of the Clinical Hub	Dave Macklin	GREEN	GREEN	GREEN	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	RED	RED	RED	AMBER
<b>4. To provide services which exceed patient and Commissioners' expectations</b>															
4a	Improve patient involvement and experience	Steve Page	GREEN	GREEN	GREEN	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	GREEN	GREEN	GREEN
<b>5. To develop culture, systems and processes to support continuous improvement and innovation</b>															
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	AMBER	AMBER	AMBER	AMBER
5b	Implementation of Service Line Management	Alex Crickmar	AMBER	AMBER	AMBER	RED	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER
<b>6. To create, attract and retain an enhanced and skilled workforce to meet service needs now and in the future</b>															
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	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	AMBER	AMBER	AMBER
<b>7. To be at the forefront of healthcare resilience and public health improvement</b>															
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	GREEN	GREEN	GREEN
7b	Finalisation of new HART facility	Alex Crickmar	GREEN	GREEN	GREEN	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	GREEN	GREEN	GREEN
<b>8. To provide cost-effective services that contribute to the objectives of the wider health economy</b>															
8a	Deliver cost improvement programmes	Alex Crickmar	GREEN	GREEN	GREEN	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	AMBER	AMBER	AMBER
8c	Monitor sustainability of service lines	Alex Crickmar	AMBER	AMBER	AMBER	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	GREEN	GREEN	GREEN

Early Warning Indicators		Key			Page	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
		Green	Amber	Red													
A&E	Red 1 Performance	>=75%	-	<75%	2.2	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓
	Red 2 Performance				2.2	↑	↑	↑	↑	↑	↑	↑	↑	↑	↑	↑	↑
	Red 19 Performance	>=95%	-	<95%	2.3	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓
	Time to Treatment 50% (YTD) *				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) *				2.7	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓
	Time to answer 95% (YTD) *				2.7	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓
	Abandoned calls (YTD) *				2.7	↑	↑	↑	↑	↑	↑	↑	↑	↑	↑	↑	↑
	Recontact 24 hours telephone (YTD) *				2.7	↑	↑	↑	↑	↑	↑	↑	↑	↑	↑	↑	↑
PTS	PTS Arriving on time for their appointment (KPI 2) Refer tab 2.10 for Red RAG Status	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) Refer tab 2.11 for 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	RED	RED		AMBER
GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	RED	GREEN	GREEN		GREEN

**Local Quality Requirements**

Satisfaction of Providers obligations under each handover

Safeguarding Adults & Children

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

<b>GREEN</b>	Fully Completed / Appropriate actions taken
<b>AMBER</b>	Delivery at risk
<b>RED</b>	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	11/11	RED 1 Performance	RED 1 performance was 71.60% an increase of 1% on January. RED 1 demand YTD is up 0.9%. Actions being developed as part of the Spring in to Action Group focusing on Demand, Resources and Efficiency	Interim Executive Director of Operations	Ongoing	AMBER
RED	2.2	11/11	RED 2 Performance	RED 2 performance 69.98% an increase of 2.5% on January. RED 2 demand YTD is up 12.1%. Actions being developed as part of the Spring in to Action Group focusing on Demand, Resources and Efficiency. Abstractions remain high lowering base line operational hours . still a large 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	7/11	Green 2 Performance	Green 2 Performance was 81.72% an improvement of 2% on January. Improvements will form part of work of the Spring in to Action. Abstractions remain high lowering base line operational hours . The Clinical Hub supporting in assessment of G2 calls to improve response time and give comfort calls to those who have a prolonged response time.	Interim Executive Director of Operations	Ongoing	GREEN
RED	CQ1	6/11	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%. Paramedic Pathfinder CQUIN has some risk to delivery due to the schedule requirement to demonstrate usage at 75%. A revised schedule is proposed and agreed in principle with the local Commissioners to revise this requirement to a 25% increase in usage between Q3 and Q4. Formal confirmation awaited.	Interim Executive Director of Operations	Ongoing	AMBER

**Directors Comments on Actual Performance**

There was an increase in combined RED demand YTD by 11.3%. Actions being developed as part of the Spring in to Action Group focusing on Demand, Resources and Efficiency. Abstractions remain high lowering base line operational hours . still a large number of hours lost to Turnaround issues at many of the large acutes across the region.

**Business Continuity:**

Great Yorkshire Show Planning 4 days and CHFT consultancy (this closes the current arrangement,) secured another 20 days for the financial year 2015/2016  
Training with Ops Locality Managers on debriefing for the NHS111 and LCD exercise  
1 day ISO22310 and BCMS training course completed.  
Hub and Spoke BCMS meeting  
Training and review of OEE BIA with Shelagh O'Leary  
E learning programme completed and sent to Training department for role out on Business Continuity Awareness Week  
Working with Corp Comms on Business continuity awareness week, start of twitter plan  
Summary of lessons from Industrial Action Facilitation and final report for debrief for Derbyshire Bid  
Preparation for Resilience team ISO22301 re-cert audit  
Process mapping started for YAS 7 prioritised activities  
Role out of new Trust Staff mapping following lesson from Industrial Action  
Review of Resilience BC plan following self assessment

**Resilience:**

Plans and risk assessments were prepared for national day of Industrial Action on 25th February 2015.  
Preparation and planning for ISO 22301 re-certification  
Planning commenced for the Tour de Yorkshire in May  
5 Annual inspections of sports stadia carried out and During performance inspections (DPI) carried out at John Smith Stadium,Huddersfield, KC Stadium and Cravan Park Hull, and Provident Stadium Bradford.  
South Yorkshire LRF Community risk register reviewed.  
National Exercise Albeireo Pandemic Flu Exercise planning meetings commenced.

**HART:**

Eighteen staff from HART (Three teams) attended Winter Bourne Gunner to take part in the NARU Assurance Course. This allowed staff to take part in multi-agency exercises that required the use of HART PPE. The course also allows Yorkshire staff the chance to work with other teams from around the country.

The five new members of staff attended the Fire Service College to do the Extended Duration Breathing Apparatus (EDBA) course which lasted for two weeks. Having returned from the Fire Service College the new staff spent a week at the OSU doing the Civil Responder 1 course (CR1), Powered Respiratory Protection Suit (PRPS) and Ebola PPE training. This was carried out to prepare them for the HART Incident Response Unit course which they started this week.

The HART Training Manager attended RAF Leeming to take part in the annual Emergency Services Briefing Day which looks at aircraft related emergencies / accidents and the capabilities each partner agency would bring to such an incident.

All vehicle and equipment checking systems have been revised and implemented.

**Training:**

Operational JESIP course - 2  
BC ISO22301 Awareness Course – 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

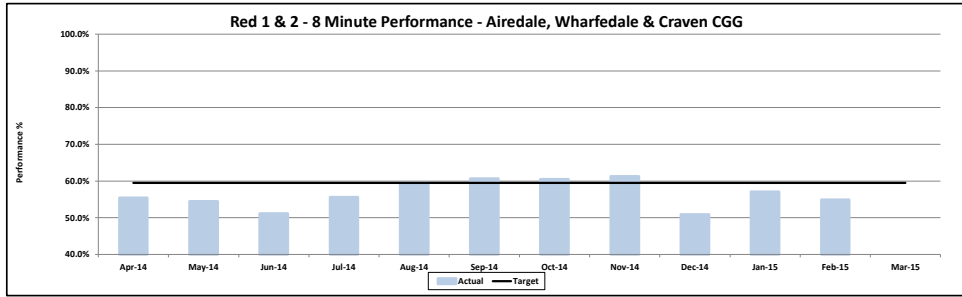
**A & E CQUINS**

	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	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	GREEN	GREEN	GREEN	GREEN		GREEN
1. (1.3) Right Care Right Place - South Yorkshire Re-contact Rates	10.00%	£395,164	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	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	AMBER	AMBER		GREEN
2. Underperforming CCG's - Red Performance	43.00%	£1,696,319	AMBER	AMBER	AMBER	RED	RED	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	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	GREEN		GREEN
4. (4.2) Friends & Family Early Implementation	4.00%	£158,066	GREEN	GREEN	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	GREEN		GREEN
<b>TOTAL</b>	<b>100.00%</b>	<b>£3,948,754</b>													

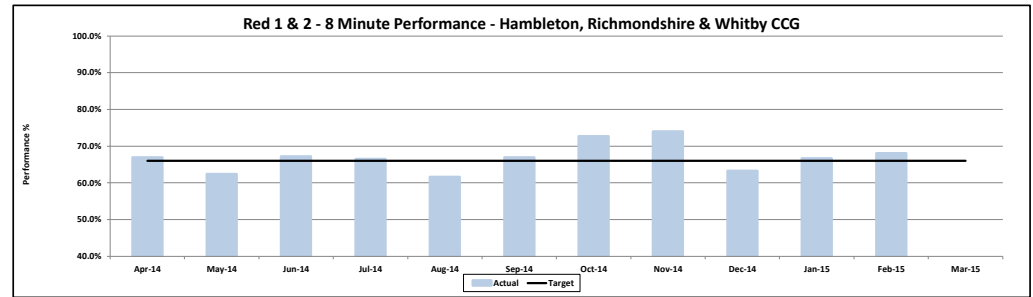
<b>GREEN</b>	Fully Completed / Appropriate actions taken
<b>AMBER</b>	Delivery at risk
<b>RED</b>	Milestone not achieved

Comments

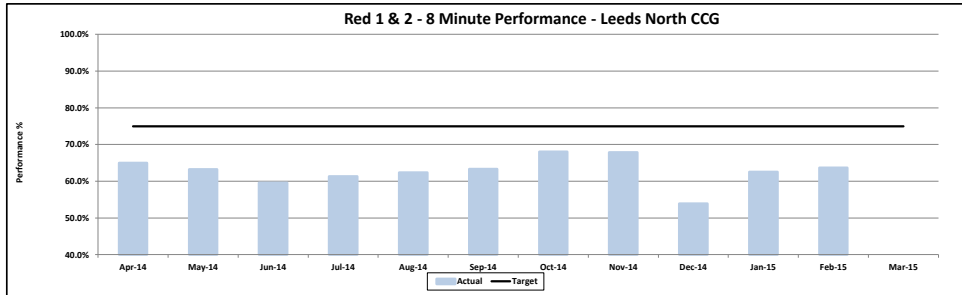
CQUIN 2 - Red Performance by CCG



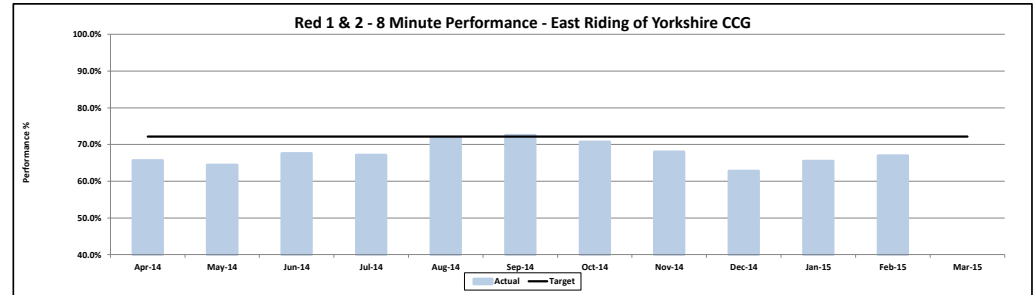
Airedale, Wharfedale & Craven CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%	59.5%
Actual	55.4%	54.5%	51.2%	55.6%	59.5%	60.7%	60.5%	61.3%	50.9%	57.1%	54.9%		56.4%



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%	68.1%		66.8%

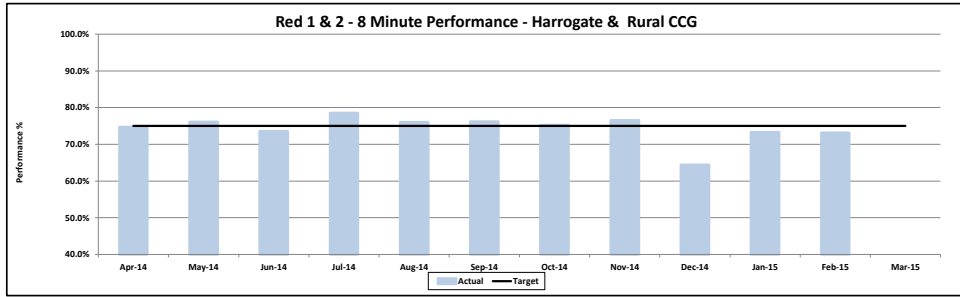


Leeds North CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual	65.0%	63.2%	59.6%	61.3%	62.4%	63.3%	68.0%	67.9%	53.9%	62.5%	63.7%		62.6%

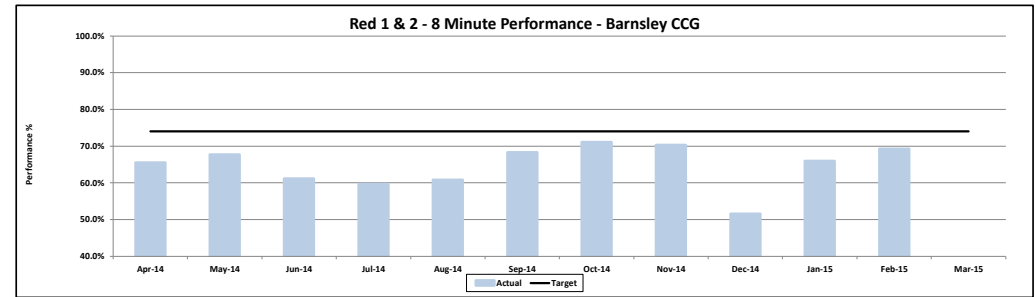


East Riding of Yorkshire CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%	72.2%
Actual	65.7%	64.5%	67.6%	67.2%	71.9%	72.6%	70.7%	68.0%	62.8%	65.5%	67.0%		67.5%

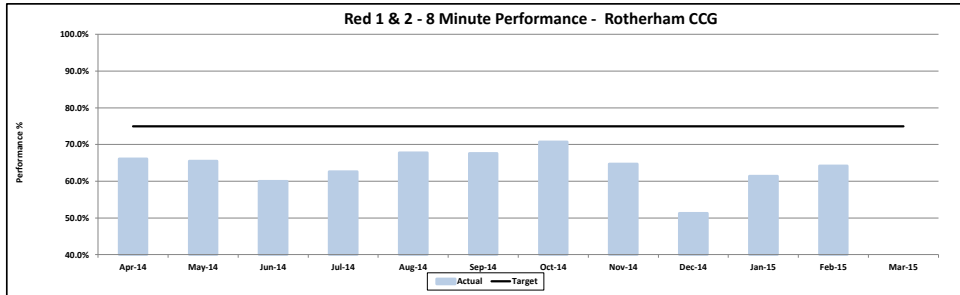
CQUIN 2 - Red Performance by CCG



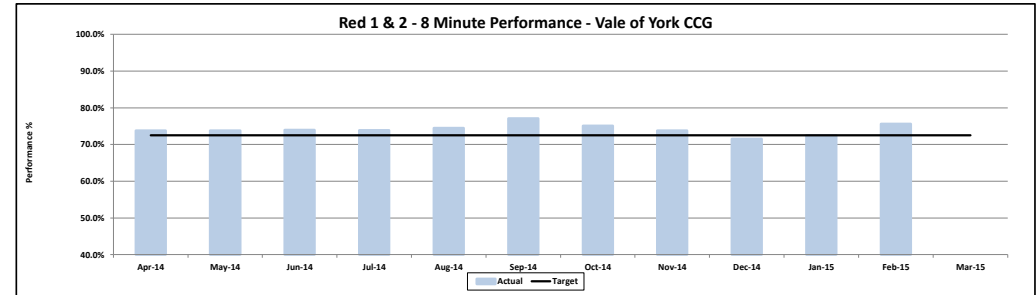
Harrogate & Rural CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual	74.7%	76.1%	73.6%	78.5%	76.0%	76.2%	75.2%	76.5%	64.4%	73.3%	73.1%		74.2%



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%	66.0%	69.3%		64.4%



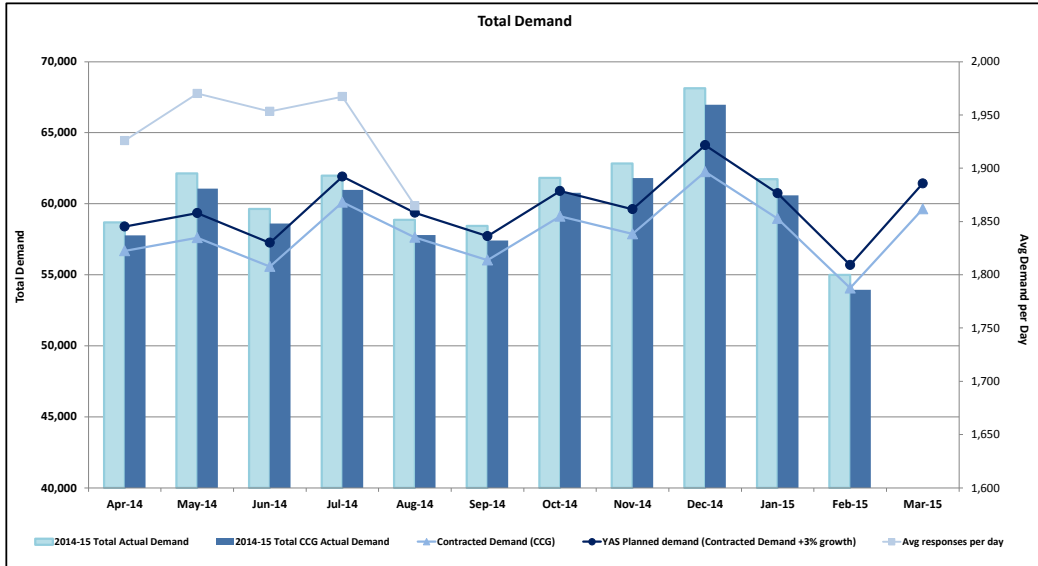
Rotherham CCG	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual	66.1%	65.5%	60.0%	62.6%	67.8%	67.6%	70.7%	64.7%	51.3%	61.4%	64.2%		63.5%



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	72.5%	72.5%	72.5%	72.5%	72.5%	77.1%	75.1%	73.8%	71.5%	72.5%	75.6%		74.1%

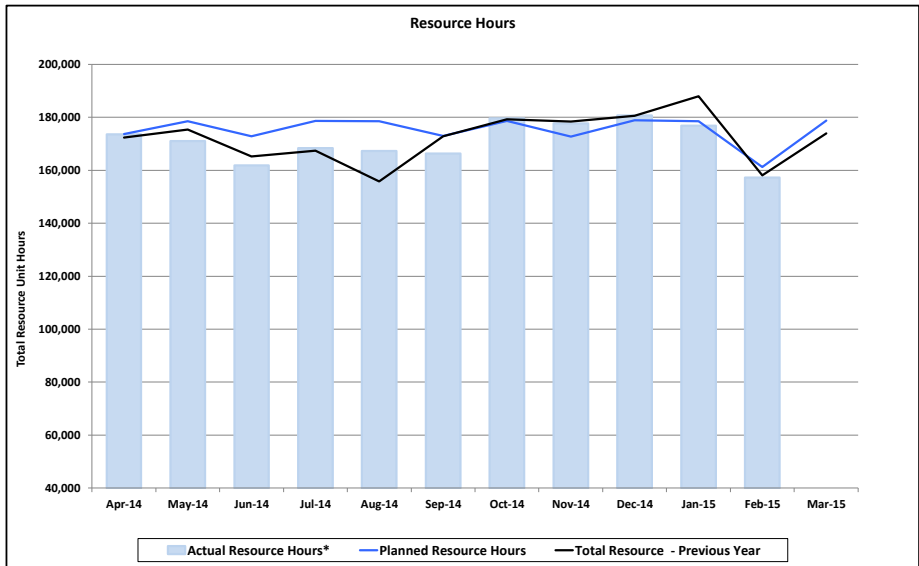
Total Demand

YTD RAG	GREEN
MTD RAG	GREEN



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	646,350	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	61,728	54,980	60,316	669,237	
% Variance Current Year to Last Year	1.7%	5.8%	5.3%	1.0%	0.6%	2.8%	3.0%	6.9%	8.0%	3.1%	0.3%		3.5%	
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	635,937	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	655,015	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	60,595	53,935	60,316	657,714	
Variance to Contracted Demand	1.9%	6.0%	5.4%	1.5%	0.3%	2.4%	2.8%	6.8%	7.6%	2.8%	-0.2%		3.4%	
Variance to YAS Planned Demand	-1.0%	2.9%	2.4%	-1.5%	-2.6%	-0.5%	-0.2%	3.7%	4.4%	-0.2%	-3.1%		0.4%	
Avg responses per day	1,926	1,970	1,953	1,967	1,864	1,914	1,960	2,061	2,160	1,955	1,926			

	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	176,793	157,202		1,880,441
	DCA	99,706	102,595	97,070 *	100,740 *	101,582 *	69,342 *	76,258 *	106,230 *	105,064 *	106,446 *	93,878 *		1,058,910
	RRV	70,854	65,655	62,397	65,324	63,820	50,785	53,615	67,833	70,974	64,523	57,518		693,298
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	5,703	5,614		
Total Resource - Previous Year	TOTAL	172,362	175,407	165,255	167,459	155,817	172,854	179,240	178,421	180,534	188,022	158,079	173,986	2,067,435

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

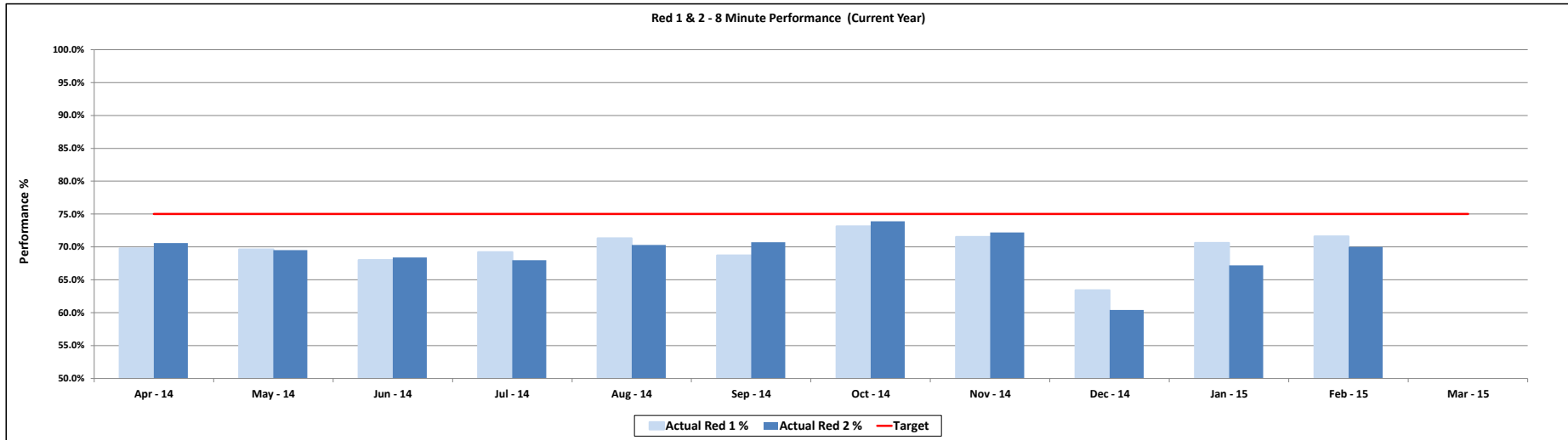
PLEASE NOTE: YAS Planned demand is based on Contracted Demand + 3% growth (a response is a distinct count of a resource arriving at scene, a resource is either a vehicle or a triaged call). Actual demand is a distinct count of a resource that has arrived scene, again this could be either a vehicle or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

Category Red 1 - 8 Minute Performance HQU03\_01

	YTD RAG	RED
▲	MTD RAG	RED

Category Red 2 - 8 Minute Performance HQU03\_01

	YTD RAG	RED
▲	MTD RAG	RED



RED 1		EWI	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Target			75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual Red 1 %	Current Year		69.8%	69.6%	68.0%	69.2%	71.3%	68.7%	73.1%	71.5%	63.4%	70.6%	71.6%		69.6%
	Previous Year		75.3%	76.8%	75.6%	80.7%	83.1%	81.6%	79.3%	76.2%	72.7%	76.4%	73.3%	71.8%	77.4%
% Variance Current Year to Last Year			-5.5%	-7.2%	-7.6%	-11.5%	-11.8%	-12.9%	-6.2%	-4.7%	-9.3%	-5.8%	-1.7%		-7.8%
National Average															

RED 2		EWI	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Target			75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual Red 2 %	Current Year		70.6%	69.5%	68.4%	68.0%	70.3%	70.7%	73.9%	72.2%	60.4%	67.2%	70.0%		69.0%
	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%	-8.9%	-2.5%		-6.1%
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%	73.0%	73.5%		72.4%
	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%	-9.6%	-4.3%		-8.7%
Airedale Bradford & Leeds	Current Year	67.2%	69.7%	66.4%	69.3%	72.1%	66.7%	70.0%	69.4%	61.8%	70.9%	65.7%		68.1%
	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%	-4.1%	-6.4%		-8.4%
North Yorkshire	Current Year	75.5%	72.3%	68.1%	71.3%	70.2%	74.7%	75.9%	71.4%	68.3%	70.5%	80.9%		72.4%
	Previous Year	66.1%	74.3%	71.3%	77.6%	78.6%	82.1%	77.5%	71.9%	73.9%	74.3%	69.1%	72.7%	74.8%
	% Variance	9.4%	-2.0%	-3.2%	-6.3%	-8.4%	-7.4%	-1.6%	-0.5%	-5.6%	-3.8%	11.8%		-2.4%
The Humber	Current Year	72.2%	70.1%	72.4%	72.6%	73.6%	66.1%	71.6%	73.6%	63.1%	70.9%	72.4%		70.8%
	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%	-3.3%	-0.1%		-8.3%
South Yorkshire	Current Year	66.8%	63.8%	64.4%	67.1%	66.8%	69.3%	77.2%	69.2%	61.1%	68.8%	71.4%		67.7%
	Previous Year	77.4%	75.5%	77.7%	78.8%	82.3%	79.6%	77.9%	76.1%	71.6%	75.3%	74.7%	68.8%	76.6%
	% Variance	-10.6%	-11.7%	-13.3%	-11.7%	-15.5%	-10.3%	-0.8%	-6.9%	-10.5%	-6.5%	-3.3%		-8.9%

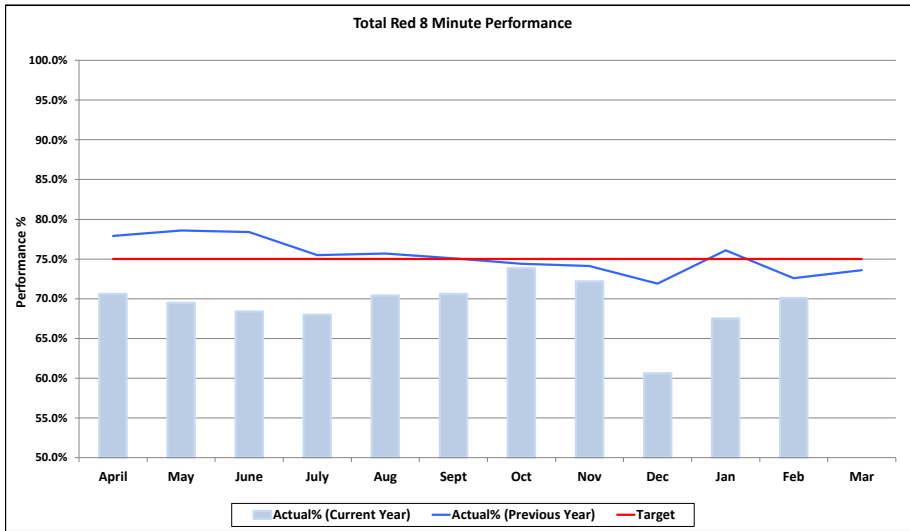
Please Note: National Average will always be 1 month in arrears

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%	65.8%	69.9%		68.8%
	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%	-13.1%	-4.4%		-8.4%
Airedale Bradford & Leeds	Current Year	68.1%	67.6%	65.8%	65.1%	68.6%	68.5%	72.9%	70.6%	59.0%	65.4%	67.7%		67.1%
	Previous Year	77.3%	78.6%	78.5%	75.2%	76.5%	74.9%	74.6%	73.8%	73.2%	75.9%	73.2%	74.5%	75.5%
	% Variance	-9.2%	-11.0%	-12.7%	-10.1%	-7.9%	-6.4%	-1.7%	-3.2%	-14.2%	-10.5%	-5.5%		-8.4%
North Yorkshire	Current Year	73.6%	72.8%	74.8%	74.4%	73.0%	75.8%	75.7%	75.4%	70.2%	73.2%	74.3%		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%	0.8%	0.3%		2.0%
The Humber	Current Year	74.2%	72.7%	75.2%	74.9%	78.6%	78.7%	76.7%	73.0%	68.1%	71.8%	74.3%		74.2%
	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%	-6.6%	-2.0%		-3.5%
South Yorkshire	Current Year	68.6%	67.8%	64.2%	65.2%	68.5%	68.4%	73.2%	70.8%	55.7%	65.2%	68.4%		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%	-10.7%	-0.3%		-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

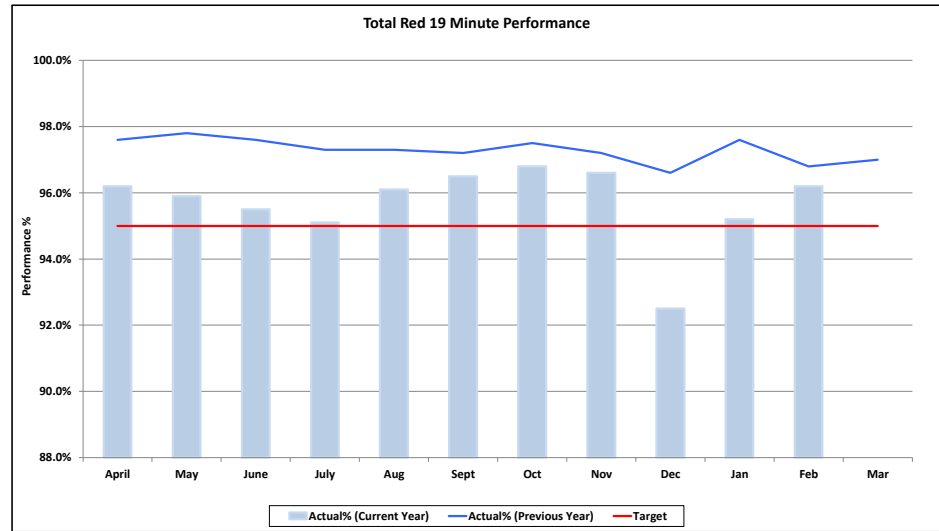


RED 8	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
Actual% (Current Year)	70.6%	69.5%	68.4%	68.0%	70.4%	70.6%	73.8%	72.2%	60.6%	67.5%	70.1%		69.1%
Actual% (Previous Year)	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%	-8.6%	-2.5%		-6.2%

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%	66.4%		69.0%	
	Previous Year	79.8%	81.2%	80.5%	77.0%	77.0%	77.4%	76.2%	76.8%	73.6%	79.2%	74.5%	76.9%	77.5%
	% Variance	-6.3%	-10.5%	-10.9%	-9.9%	-8.1%	-8.4%	-3.8%	-2.4%	-14.7%	-12.8%	-4.3%		-8.5%
Airedale Bradford & Leeds	Current Year	68.1%	67.8%	65.8%	65.4%	68.8%	68.4%	72.8%	70.5%	59.2%	65.8%		67.1%	
	Previous Year	77.1%	78.5%	78.3%	75.5%	77.1%	75.3%	74.9%	73.8%	73.1%	75.9%	73.1%	74.4%	75.6%
	% Variance	-9.0%	-10.7%	-12.5%	-10.1%	-8.3%	-6.9%	-2.2%	-3.3%	-13.9%	-10.1%	-5.5%		-8.5%
North Yorkshire	Current Year	73.7%	72.8%	74.4%	74.2%	72.8%	75.7%	75.7%	75.1%	70.0%	73.0%	74.7%		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%	73.2%	72.2%
	% Variance	1.1%	-3.2%	1.2%	1.7%	3.6%	3.3%	6.8%	3.3%	-0.3%	0.5%	1.0%		1.6%
The Humber	Current Year	74.1%	72.5%	75.0%	74.7%	78.2%	77.9%	76.4%	73.0%	67.8%	71.7%	74.2%		74.0%
	Previous Year	82.8%	82.0%	81.1%	80.0%	78.4%	77.0%	78.1%	78.6%	71.2%	78.1%	76.1%	72.3%	77.8%
	% Variance	-8.7%	-9.5%	-6.1%	-5.3%	-0.2%	0.9%	-1.7%	-5.6%	-3.4%	-6.4%	-1.9%		-3.8%
South Yorkshire	Current Year	68.5%	67.5%	64.2%	65.3%	68.4%	68.4%	73.5%	70.7%	56.1%	65.4%		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%	71.5%	74.3%
	% Variance	-9.5%	-9.5%	-14.9%	-9.0%	-7.3%	-6.0%	-0.8%	-1.7%	-14.9%	-10.4%	-0.4%		-7.6%

Category Red 1 & 2 19 Minute Performance HQU03\_02

YTD RAG	GREEN
MTD RAG	GREEN

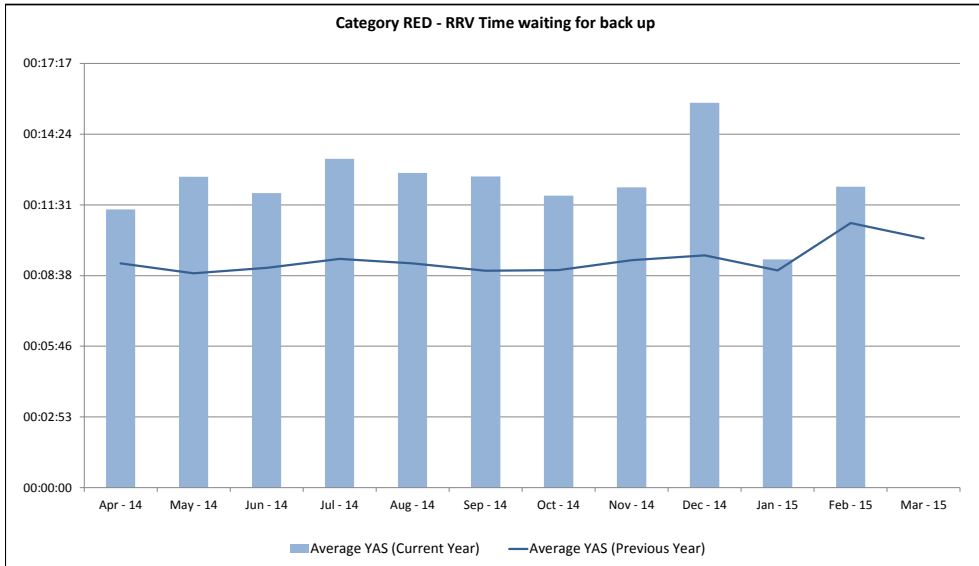


RED 19	EWI	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15
Target		95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%
Actual% (Current Year)		96.2%	95.9%	95.5%	95.1%	96.1%	96.5%	96.8%	96.6%	92.5%	95.2%	96.2%		95.6%
Actual% (Previous 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%	-2.4%	-0.6%		-1.7%
National Average														

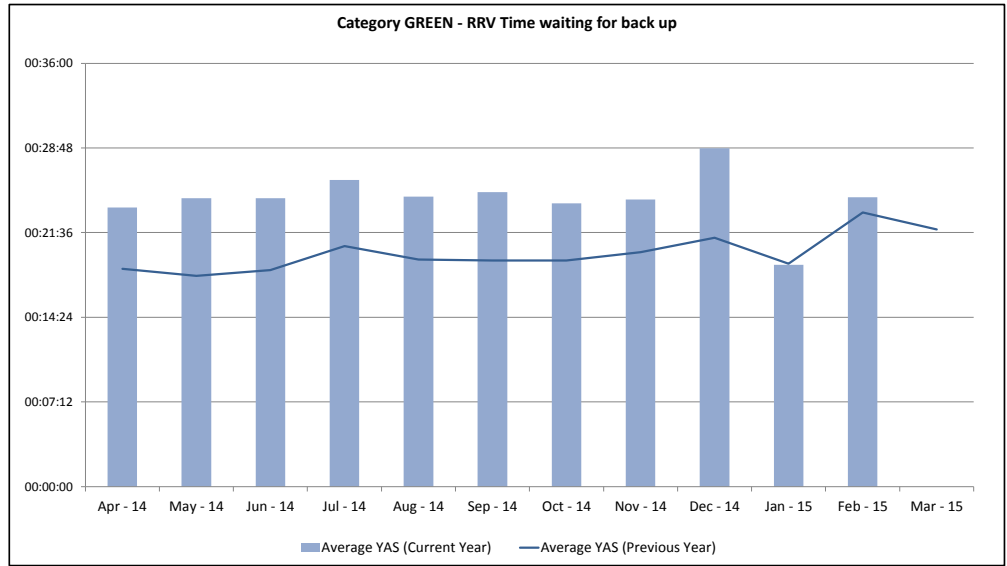
RED 19 by CBU	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD 14/15	
Calderdale, Kirklees & Wakefield	Current Year	97.3%	96.9%	96.5%	95.2%	96.6%	97.1%	97.2%	97.6%	92.8%	95.9%	97.0%		96.3%
	Previous Year	98.5%	98.5%	98.6%	97.9%	98.3%	98.3%	98.2%	97.9%	97.7%	98.5%	97.4%	98.2%	98.2%
	% Variance	-1.2%	-1.6%	-2.1%	-2.7%	-1.7%	-1.2%	-1.0%	-0.3%	-4.9%	-2.6%	-0.4%		-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%	96.7%	97.1%		96.4%
	Previous Year	98.2%	98.5%	98.0%	98.4%	98.4%	98.0%	98.2%	98.1%	97.5%	98.5%	97.7%	97.9%	98.1%
	% Variance	-2.0%	-1.6%	-2.1%	-2.8%	-1.7%	-1.0%	-0.4%	-0.5%	-3.9%	-1.8%	-0.6%		-1.7%
North Yorkshire	Current Year	94.1%	93.0%	93.6%	92.8%	93.1%	93.8%	93.6%	93.3%	91.3%	92.3%	93.5%		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%	93.6%	93.9%
	% Variance	-0.7%	-2.0%	-0.7%	-0.4%	0.5%	-0.1%	-0.4%	-0.6%	-2.0%	-2.3%	-0.8%		-0.8%
The Humber	Current Year	95.0%	93.1%	94.5%	93.7%	95.6%	95.5%	94.9%	94.5%	90.8%	92.8%	94.1%		94.0%
	Previous Year	96.4%	96.7%	96.4%	95.9%	95.7%	95.2%	95.9%	96.1%	94.0%	96.4%	95.3%	95.3%	95.7%
	% Variance	-1.4%	-3.6%	-1.9%	-2.2%	-0.1%	0.3%	-1.0%	-1.6%	-3.2%	-3.6%	-1.2%		-1.7%
South Yorkshire	Current Year	97.1%	97.1%	96.2%	96.4%	97.3%	97.4%	98.2%	97.6%	92.5%	95.8%	97.1%		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%	97.9%	98.3%
	% Variance	-1.3%	-1.5%	-2.6%	-1.9%	-1.2%	-1.1%	-0.6%	-0.4%	-5.0%	-2.4%	-0.5%		-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	00:09:18	00:12:15	
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	00:28:20	00:36:12	
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	00:18:51	00:24:36	
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	00:52:32	01:03:37	
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	00:08:30	00:13:09	
	Previous Year	00:09:11	00:08:36	00:09:10	00:09:17	00:08:57	00:08:52	00:08:48	00:08:59	00:08:49	00:08:07	00:10:11	00:08:49
Leeds & Bradford	Current Year	00:11:47	00:11:48	00:12:05	00:13:52	00:13:17	00:13:18	00:12:44	00:12:42	00:16:38	00:09:27	00:12:47	
	Previous Year	00:09:33	00:09:10	00:09:39	00:08:55	00:08:45	00:08:53	00:08:41	00:09:19	00:09:15	00:09:10	00:10:13	00:10:13
North Yorkshire	Current Year	00:09:50	00:10:32	00:10:38	00:10:26	00:10:18	00:09:18	00:09:42	00:10:17	00:11:37	00:07:44	00:09:52	
	Previous Year	00:07:28	00:06:37	00:06:51	00:07:38	00:07:59	00:07:30	00:07:34	00:08:00	00:07:39	00:06:53	00:09:23	00:08:51
The Humber	Current Year	00:08:57	00:09:51	00:09:34	00:10:29	00:09:25	00:09:48	00:10:01	00:10:56	00:12:36	00:08:13	00:09:13	
	Previous Year	00:06:38	00:06:48	00:07:02	00:07:36	00:07:29	00:07:00	00:07:29	00:07:38	00:08:49	00:07:53	00:08:58	00:08:56
South Yorkshire	Current Year	00:13:40	00:17:41	00:17:01	00:15:27	00:15:31	00:14:26	00:12:29	00:13:08	00:17:27	00:10:38	00:13:28	
	Previous Year	00:10:09	00:09:46	00:09:25	00:11:04	00:10:54	00:10:04	00:10:08	00:10:39	00:11:21	00:10:09	00:13:35	00:12:14

Average GREEN by CBU		Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Calderdale, Kirklees & Wakefield	Current Year	00:21:34	00:23:12	00:22:29	00:27:39	00:25:10	00:25:56	00:24:23	00:23:46	00:29:09	00:16:30	00:26:30	
	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	00:19:33
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	00:20:06	00:25:25	
	Previous Year	00:19:45	00:18:41	00:19:51	00:19:33	00:18:37	00:19:25	00:19:57	00:20:43	00:20:55	00:20:22	00:23:25	00:23:44
North Yorkshire	Current Year	00:17:32	00:19:24	00:18:24	00:18:29	00:17:40	00:18:06	00:19:58	00:18:41	00:20:44	00:13:03	00:18:04	
	Previous Year	00:12:38	00:11:51	00:12:21	00:15:27	00:15:25	00:14:02	00:15:38	00:14:25	00:15:49	00:13:12	00:18:07	00:15:43
The Humber	Current Year	00:19:28	00:19:13	00:19:29	00:20:14	00:17:25	00:19:40	00:22:19	00:24:26	00:29:25	00:17:59	00:21:25	
	Previous Year	00:13:18	00:11:57	00:15:26	00:15:58	00:15:34	00:15:57	00:16:37	00:17:37	00:22:47	00:17:04	00:23:03	00:20:35
South Yorkshire	Current Year	00:28:09	00:29:54	00:31:15	00:29:46	00:27:23	00:26:42	00:24:40	00:26:38	00:31:42	00:21:05	00:26:28	
	Previous Year	00:20:50	00:20:46	00:19:57	00:24:31	00:22:35	00:22:23	00:21:18	00:23:01	00:22:47	00:21:37	00:26:49	00:24:43

A&E Operational Delivery Model

Item	Apr-13	Apr-14	May-13	May-14	Jun-13	Jun-14	Jul-13	Jul-14	Aug-13	Aug-14	Sep-13	Sep-14	Oct-13	Oct-14	Nov-13	Nov-14	Dec-13	Dec-14	Jan-14	Jan-15	Feb-14	Feb-15	Mar-14	Mar-15
<b>Demand</b>																								
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	60,595	53,646	53,935	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	61,728	54,804	54,980	60,316	
% Variance from CCG Demand to CCG Contracted <small>(See Finance Section 5.3)</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%	2.8%	2.6%	-0.2%	-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%	1.6%	-2.0%	-1.3%	-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	£290,310	£276,570	£262,215	£-345,846	
<b>Job Cycle</b>																								
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	01:10:05	01:02:55	01:08:43	01:02:23	
<b>Actual Resource (Vehicle hours)</b>	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	176,793	158,079	157,202	173,986	
<b>Planned Staff (Establishment) FTE</b>	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
<b>Actual Staff FTE</b>	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	2,118	2,092	2,118	2,085	£2,113	2,621	
<b>Actual Overtime (Staff Hours)</b>	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	23,876	20,453	27,360	26,466	
<b>Front line staff overspend / (underspend) after overtrade has been applied</b>	(£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	(£384,411)	(£1,005,838)	(£255,092)	£658,141	£931,374	(£259,773)	
<b>Planned Abstractions %</b>	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%
<b>Actual Abstractions %</b>	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%	23.1%	30.3%	25.0%	27.9%	
<b>UHU (Unit Hour Utilisation)</b>	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	0.34	0.33	0.34	0.34	0.34
<b>Performance</b>																								
*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%	67.5%	72.6%	70.1%	73.6%	

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

Comments

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A&E Operational Delivery Model

Item		Apr-13	Apr-14	May-13	May-14	Jun-13	Jun-14	Jul-13	Jul-14	Aug-13	Aug-14	Sep-13	Sep-14	Oct-13	Oct-14	Nov-13	Nov-14	Dec-13	Dec-14	Jan-14	Jan-15	Feb-14	Feb-15	Mar-14	Mar-15	
Resource	Clinical Hub/ NHSD Calls																									
	Total Planned number of calls (Clinical Hub)	2,965	1,369	2,965	1,820	2,965	1,846	2,965	1,851	2,965	1,818	2,965	1,884	2,965	1,901	2,965	1,823	2,965	1,941	2,965	1,880	2,965	1,904	2,965	1,974	
	Total Actual number of calls (Clinical Hub/NHSD)	2,376	1,794	2,410	2,173	2,194	2,013	2,503	1,812	2,164	1,564	1,952	1,416	1,898	2,422	1,922	3,478	2,183	5,267	1,761	3,666	1,735	3,239	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%	10.4%	4.0%	10.6%	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	3,666	1,735	3,239	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)

February 2015	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	105	90.5%	421	86.0%	12	75.0%	323	64	1
HARROGATE & RURAL CCG	105	83.8%	380	87.1%	20	80.0%	327	71	0
SCARBOROUGH & RYEDALE CCG	100	90.0%	353	92.1%	17	100.0%	288	55	0
VALE OF YORK CCG	202	90.1%	943	90.0%	46	84.8%	580	164	9
<b>NORTH YORKSHIRE CBU</b>	<b>512</b>	<b>89.9%</b>	<b>2097</b>	<b>89.0%</b>	<b>95</b>	<b>85.3%</b>	<b>1518</b>	<b>354</b>	<b>10</b>
ERY CCG	266	88.3%	744	85.8%	32	87.5%	657	152	1
HULL CCG	212	84.9%	844	82.2%	48	83.3%	582	195	4
<b>EAST YORKSHIRE CBU</b>	<b>478</b>	<b>86.6%</b>	<b>1588</b>	<b>83.9%</b>	<b>80</b>	<b>85.0%</b>	<b>1219</b>	<b>347</b>	<b>5</b>
CALDERDALE CCG	162	80.2%	648	75.6%	20	85.0%	430	169	23
GREATER HUDDERSFIELD CCG	181	87.3%	596	78.4%	23	60.9%	416	151	16
NORTH KIRKLEES CCG	121	86.8%	456	80.9%	23	78.3%	347	116	28
WAKEFIELD CCG	257	89.1%	979	85.3%	37	89.2%	817	202	63
<b>CALD / KIRK &amp; WAKEFIELD CBU</b>	<b>721</b>	<b>86.3%</b>	<b>2679</b>	<b>80.7%</b>	<b>103</b>	<b>79.6%</b>	<b>2010</b>	<b>638</b>	<b>130</b>
AIREDALE, WHARFEDALE & CRAVEN CCG	130	81.5%	396	73.2%	9	88.9%	274	75	11
BRADFORD CITY CCG	107	81.3%	336	76.2%	21	71.4%	117	107	0
BRADFORD DISTRICTS CCG	247	86.2%	842	74.0%	36	75.0%	490	235	12
LEEDS NORTH CCG	168	82.7%	527	77.4%	20	75.0%	344	175	3
LEEDS SOUTH & EAST CCG	279	87.5%	882	81.2%	55	85.5%	651	256	6
LEEDS WEST CCG	221	80.5%	895	77.8%	39	74.4%	436	225	1
<b>LEEDS BRADFORD &amp; AIREDALE CBU</b>	<b>1152</b>	<b>83.9%</b>	<b>3878</b>	<b>77.1%</b>	<b>180</b>	<b>78.3%</b>	<b>2312</b>	<b>1073</b>	<b>33</b>
BARNSELY CCG	199	92.0%	719	83.2%	24	75.0%	458	164	3
DONCASTER CCG	321	87.9%	939	84.7%	49	73.5%	571	247	53
ROTHERHAM CCG	237	88.6%	784	81.0%	39	84.6%	434	183	4
SHEFFIELD CCG	439	86.7%	1514	80.9%	83	82.0%	961	424	6
<b>SOUTH YORKSHIRE CBU</b>	<b>1196</b>	<b>88.2%</b>	<b>3956</b>	<b>82.2%</b>	<b>195</b>	<b>79.6%</b>	<b>2424</b>	<b>1018</b>	<b>66</b>
ECP	34		173		6		364		
OOA/UNKNOWN	14	64.3%	71	85.9%	0	#DIV/0!	30	131	7
<b>YORKSHIRE AMBULANCE SERVICE</b>	<b>4107</b>	<b>86.5%</b>	<b>14442</b>	<b>80.7%</b>	<b>659</b>	<b>80.7%</b>	<b>9877</b>	<b>3561</b>	<b>251</b>

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	1118	77.6%	5038	87.2%	260	87.3%	4081	554	12
HARROGATE & RURAL CCG	1035	82.2%	4935	88.5%	289	88.9%	4095	613	11
SCARBOROUGH & RYEDALE CCG	1021	79.8%	4368	89.9%	379	88.9%	3588	522	18
VALE OF YORK CCG	2462	80.2%	11053	88.9%	721	87.4%	7151	1528	141
<b>NORTH YORKSHIRE CBU</b>	<b>5636</b>	<b>80.0%</b>	<b>25394</b>	<b>88.7%</b>	<b>1649</b>	<b>88.0%</b>	<b>18915</b>	<b>3217</b>	<b>182</b>
ERY CCG	2725	77.0%	10022	83.9%	544	82.7%	7901	1315	17
HULL CCG	2725	78.0%	10834	81.3%	797	83.1%	7373	2175	48
<b>EAST YORKSHIRE CBU</b>	<b>5450</b>	<b>77.5%</b>	<b>20856</b>	<b>82.6%</b>	<b>1341</b>	<b>82.9%</b>	<b>15274</b>	<b>3490</b>	<b>65</b>
CALDERDALE CCG	1856	75.2%	7346	77.5%	397	84.6%	5797	1277	233
GREATER HUDDERSFIELD CCG	1955	76.5%	7673	77.5%	388	73.2%	5249	1540	290
NORTH KIRKLEES CCG	1558	77.7%	5720	76.8%	293	79.2%	4291	1206	324
WAKEFIELD CCG	3152	79.7%	12193	81.8%	702	80.6%	10058	2127	890
<b>CALD / KIRK &amp; WAKEFIELD CBU</b>	<b>8521</b>	<b>77.6%</b>	<b>32932</b>	<b>79.0%</b>	<b>1780</b>	<b>79.7%</b>	<b>25395</b>	<b>6150</b>	<b>1737</b>
AIREDALE, WHARFEDALE & CRAVEN CCG	1355	71.1%	5057	75.2%	203	75.4%	3765	691	137
BRADFORD CITY CCG	1262	74.8%	4248	73.0%	342	74.0%	1407	1213	2
BRADFORD DISTRICTS CCG	3126	74.8%	11371	73.0%	517	74.0%	5639	2400	127
LEEDS NORTH CCG	1806	75.1%	6649	73.3%	318	77.7%	4410	1401	16
LEEDS SOUTH & EAST CCG	2893	77.7%	10990	76.8%	733	80.8%	7705	2534	81
LEEDS WEST CCG	2666	75.2%	10907	73.1%	507	72.4%	5831	2205	11
<b>LEEDS, BRADFORD &amp; AIREDALE CBU</b>	<b>13108</b>	<b>75.2%</b>	<b>49222</b>	<b>73.6%</b>	<b>2620</b>	<b>76.0%</b>	<b>28757</b>	<b>10444</b>	<b>374</b>
BARNSELY CCG	2310	77.1%	8812	80.7%	425	75.5%	5684	1425	45
DONCASTER CCG	3524	76.6%	10876	82.2%	819	82.1%	7296	2187	760
ROTHERHAM CCG	2718	75.7%	9513	76.6%	528	75.4%	5144	1847	27
SHEFFIELD CCG	5146	74.3%	19586	75.7%	1279	77.2%	12278	4097	90
<b>SOUTH YORKSHIRE CBU</b>	<b>13698</b>	<b>78.1%</b>	<b>48787</b>	<b>78.1%</b>	<b>3051</b>	<b>77.9%</b>	<b>30402</b>	<b>9556</b>	<b>922</b>
ECPs	305		1752		92		4239		
OOA/UNKNOWN	189	73.0%	767	86.8%	39	87.2%	283	513	89
<b>YORKSHIRE AMBULANCE SERVICE</b>	<b>46907</b>	<b>76.6%</b>	<b>179710</b>	<b>79.1%</b>	<b>10572</b>	<b>80.0%</b>	<b>123265</b>	<b>33370</b>	<b>3369</b>

\*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		GREEN	GREEN
Emergency Plans	GREEN	GREEN	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		GREEN	GREEN
Information Provision	GREEN	GREEN	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		GREEN	GREEN
Training	GREEN	GREEN	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	5/8	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 38.2% YTD which remains the highest in England for the sixth consecutive month.	Head of Clinical Effectiveness	On-going
2.7	2/8	Stroke - 60	No change from previous reports.	Head of Clinical Effectiveness	On-going
2.7	6/8	STEMI - 150	YAS achieved 87.4% in October for STEMI 150 with five of the 11 breaches due to YAS operational delays, two of which were related to delayed back up of RRVs by a conveying resource.	Head of Clinical Effectiveness	On-going

Comments

**Top Third**

Time to Answer - 50%  
 95 Percentile Red 1 only Response Time  
 Cat Red 19 minute response  
 Time to Treat - 95%  
 Time to Treat - 99%  
 STEMI - Care  
 Resolved by Telephone  
 Cardiac - STD  
 Cardiac - STD Utstein  
 Recontact 24hrs Telephone  
 Recontact 24hrs on Scene

**Middle Third**

Time to Answer - 95%  
 Time to Answer - 99%  
 Abandoned calls  
 Time to Treat - 50%  
 Stroke - Care  
 Frequent caller \*  
 Non A&E  
 ROSC - Utstein

**Bottom Third**

Cat Red 8 minute response - RED 1  
 Cat Red 8 minute response - RED 2  
 STEMI - 150  
 ROSC  
 Stroke - 60

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	January
Time to Answer - 95%	EWI	mm:ss	0:14	0:13	0:01	0:12	0:53	0:27	0:32	0:25	0:18	0:05	0:23	6	January
Time to Answer - 99%		mm:ss	0:52	0:59	0:09	0:56	1:41	1:15	1:38	1:05	0:57	0:44	1:11	7	January
Abandoned calls	EWI	%	0.47	0.81	1.21	0.38	3.33	4.02	2.30	0.76	0.84	0.71	1.42	7	January
Cat Red 8 minute response - RED 1		%	71.7	70.1	80.8	67.6	69.7	69.4	75.1	75.2	74.4	77.4	69.4	8	January
Cat Red 8 minute response - RED 2		%	70.4	61.9	75.4	59.8	73.5	70.1	74.2	74.2	73.0	74.3	69.0	8	January
95 Percentile Red 1 only Response Time		mm:ss	14:38	15:37	9:07	19:06	13:59	14:43	15:21	14:06	14:44	11:51	14:17	4	January
Cat Red 19 minute response		%	92.8	90.7	96.4	92.0	94.5	93.5	95.4	95.3	94.0	96.8	95.6	2	January
Time to Treat - 50%	EWI	mm:ss	9:01	7:21	5:59	7:28	6:19	6:36	6:00	5:59	5:58	6:05	6:20	6	January
Time to Treat - 95%		mm:ss	17:37	23:02	16:54	20:54	20:55	20:46	18:14	18:59	20:17	16:25	16:27	2	January
Time to Treat - 99%		mm:ss	27:30	36:09	21:14	38:09	34:30	38:16	30:32	28:36	33:16	25:08	25:27	2	January
STEMI - Care		%	80.6	81.6	84.8	72.8	90.7	87.0	70.8	77.3	89.4	76.2	83.1	4	October
Stroke - Care		%	98.6	96.8	95.5	96.6	98.8	99.4	98.8	94.1	97.5	93.6	97.8	5	October
Frequent caller *		%	0.18	0.21	1.17	1.66	1.18	0.77	1.93	0.00	0.00	0.00	2.50	5	January
Resolved by telephone		%	7.2	6.8	8.3	13.2	6.6	3.5	5.8	11.1	7.6	5.4	7.5	4	January
Non A&E		%	31.4	42.5	47.6	34.4	31.2	27.4	42.3	43.2	52.3	37.8	32.9	7	January
STEMI - 150		%	91.3	94.3	57.1	95.2	86.9	78.5	90.6	92.0	78.9	87.2	85.7	8	October
Stroke - 60		%	60.6	56.7	54.6	60.8	72.1	69.8	56.0	68.2	58.0	47.9	56.4	8	October
ROSC		%	18.6	23.0	26.0	31.7	28.6	28.9	41.3	30.7	24.3	29.3	22.3	9	October
ROSC - Utstein		%	34.4	45.9	42.1	57.9	62.3	45.8	54.2	61.8	44.1	47.5	48.9	5	October
Cardiac - STD		%	5.0	6.9	8.2	8.7	3.9	8.3	17.5	9.1	9.7	9.0	10.3	2	October
Cardiac - STD Utstein		%	13.1	18.1	26.3	30.7	22.4	21.7	30.6	29.4	27.0	27.0	38.2	1	October
Recontact 24hrs Telephone	EWI	%	7.1	10.7	4.4	1.9	13.9	11.3	11.5	10.1	13.6	11.4	6.2	2	January
Recontact 24hrs on Scene	EWI	%	4.5	5.6	3.4	7.6	5.5	5.9	4.9	4.4	5.9	5.4	3.7	1	January

\*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	2.10	5/11	East	KPI 2 - Patients arriving on time for their appointment	Achieved 75.5% against target 76.53% - 2.0% higher than January and on target YDT	Locality Manager East Yorkshire	On-going	GREEN
RED	2.10	11/11	South	KPI 2 - Patients arriving on time for their appointment	Achieved 93.7% against target of 96.00% - 0.5% higher than January	Locality Manager South Yorkshire	On-going	RED
RED	2.11	2/11	West	KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 90.8% against target of 91.0% - YTD holds firm at 92.3%	Locality Manager West Yorkshire	On-going	GREEN
RED	2.11	10/11	East	KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 88.7% against target 89.26% - 2.0% higher than January	Locality Manager East Yorkshire	On-going	RED
RED	2.11	11/11	South	KPI 3 - Patients collected within 90 mins (Planned Journeys)	Achieved 85.8% against target of 95.00%, Higher KPI targets in South consortia proves difficult to achieve this KPI within financial target..	Locality Manager South Yorkshire	On-going	RED
RED	2.12	4/11	West	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 94.9% against target of 96.0% YTD holds firm at 96.4%	Locality Manager West Yorkshire	On-going	GREEN
RED	2.12	6/11	East	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Poor data collection negatively affects East Yorks KPI 4	Locality Manager East Yorkshire	On-going	RED
RED	2.12	11/11	North	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 94.7% against target of 99.0% - 95.6%YTD Poor data collection invalidates this KPI	Locality Manager North Yorkshire	On-going	AMBER
RED	2.12	11/11	South	KPI 4 - Patients collected within 120 mins (On the day & short notice journeys)	Achieved 92% against target of 98.0% -3.8% higher than January	Locality Manager South Yorkshire	On-going	RED
RED	2.9	5/11	East	KPI 1 Patients Picked up within 120 minutes before Appointment	Achieved 93.3% against 93.85% YTD remains strong at 93.9%	Locality Manager East Yorkshire	On-going	GREEN
RED	2.9	10/11	South	KPI 1 Patients Picked up within 120 minutes before Appointment	Achieved 93.7% against target of 96.00 - increase on January and 94.5 YTD	Locality Manager South Yorkshire	On-going	AMBER

**Directors Comments on Actual Performance****West Yorkshire**

All four KPI's remain very positive either on line or 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 challenge 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.

The introduction of new renal rotas in November had a slight negative impact on the renal KPIs for January, however recruitment into the renal vacancies is now near complete which has since delivered a sustained increase in performance throughout February.

**South Yorkshire**

Has shown a slight increase against all KPIs for February; however the monthly downward trend reflects South Yorkshire's higher than the Yorkshire average threshold for KPI compliance. 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**

Achieved KPIs 1-2 & 3 for February with the exception of KPI 4 where we strive to improve on data capture. The sustained increase in the number of patient's booked double crew / Stretcher is affecting the finance available to move more complex patients.

**East Yorkshire**

KPI 1&2 remains very positive YTD 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.

Higher than average VOR rates have been a constant issue throughout all areas January and February. This has impacted on overall performance and increased costs due to backfill with taxi transport.

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

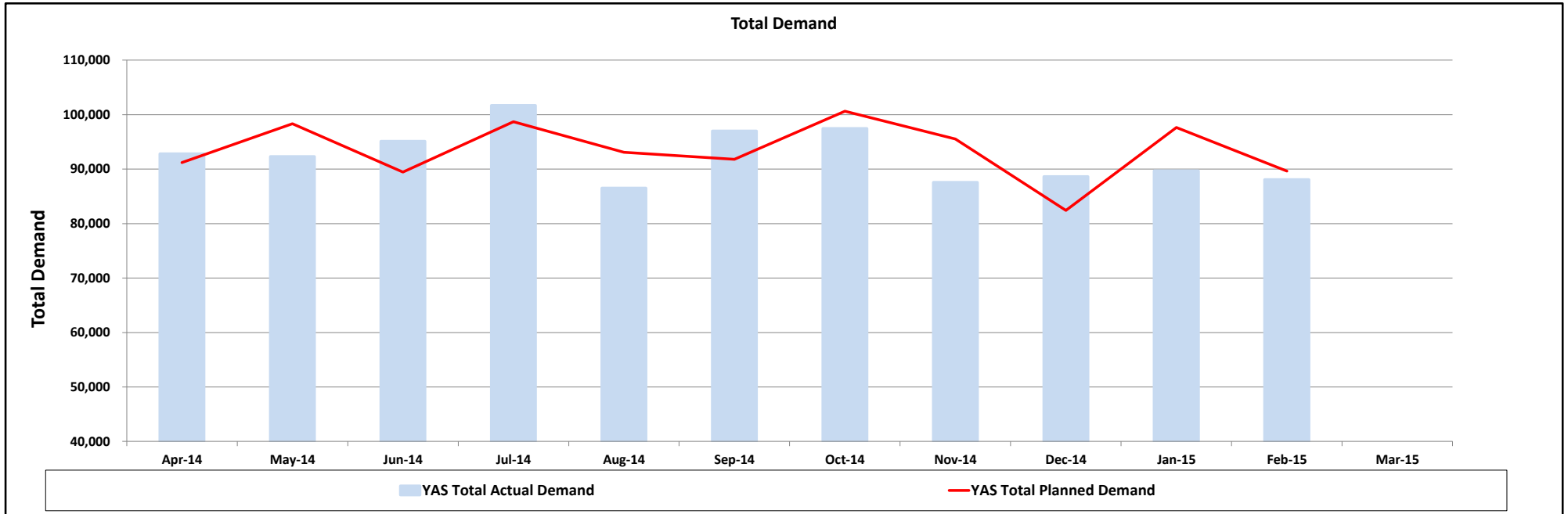
		Goal weighting (% of CQUIN scheme available)	Expected Financial Value of Goal	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Year End	
1. Friends and Family - Implementation of Staff FFT	North Consortia	20.00%	£27,284	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN		GREEN	
	South Consortia		£27,284	GREEN	GREEN	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	GREEN		GREEN
	West Consortia		£61,993	GREEN	GREEN	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	GREEN		GREEN	
	South Consortia		£54,568	GREEN	GREEN	GREEN	AMBER	GREEN	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN		GREEN	
	East Consortia		£34,121	GREEN	GREEN	GREEN	AMBER	GREEN	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN		GREEN	
	West Consortia		£122,186	GREEN	GREEN	GREEN	AMBER	GREEN	AMBER	GREEN	GREEN	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	GREEN		GREEN	
	South Consortia		£54,568	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN		GREEN	
	East Consortia		£34,121	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN		GREEN	
	West Consortia		£122,186	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN		GREEN	
<b>TOTAL</b>		<b>100.00%</b>	<b>£637,430</b>														

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

Comments
Progress against the CQUIN for 2014-15 is going well with the final reports currently being drafted. Following a review meeting with the commissioners to discuss the Q2 report we were issued with a contract query by South and North Yorkshire commissioners requesting changes to be made to the Q2 report RAG ratings and raising some additional questions about the development of the complex patient algorithm. A formal reply has been sent, the Q2 report has been amended (favourably based on the commissioners feedback) and a further review meeting is currently being arranged to collaboratively review all the feedback received on the algorithm development. Work is continuing relating to the formal sign off of the 2015-16 schemes

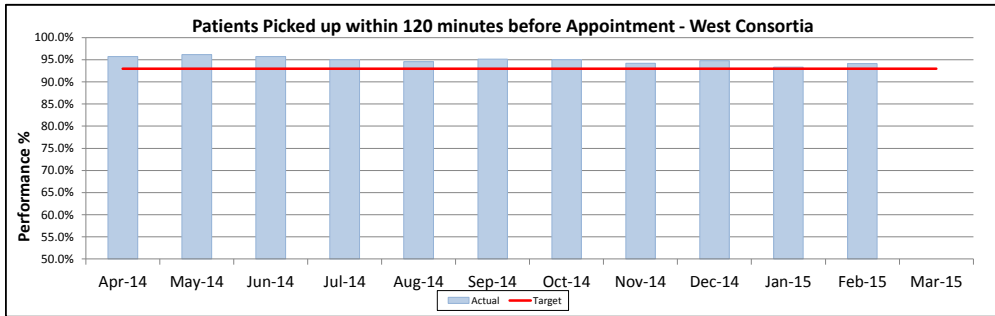
PTS Demand

↔	YTD RAG	GREEN
	MTD RAG	GREEN

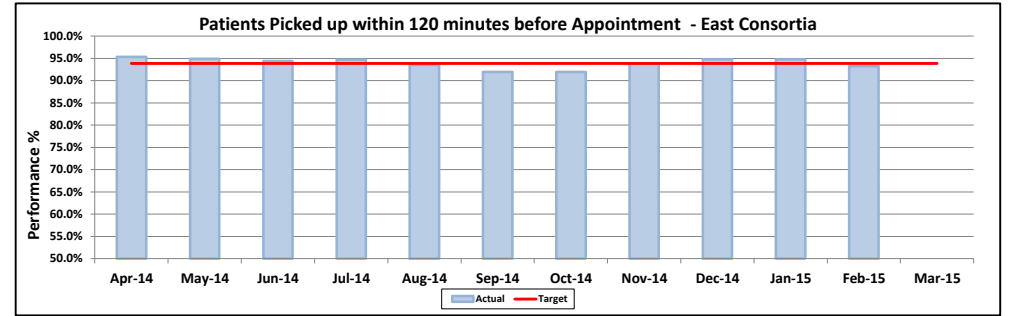


PTS Demand by Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	YTD
West Consortia Planned Demand	45,344	51,587	45,016	49,662	49,790	46,201	51,860	49,486	41,189	49,883	46,955		526,973
West Consortia Actual Demand	48,069	48,150	49,702	52,711	44,734	49,637	51,298	46,176	47,278	47,030	45,584		530,369
East Consortia Planned Demand	9,276	9,372	8,715	9,645	8,559	9,224	9,748	9,201	8,504	9,562	8,542		100,348
East Consortia Actual Demand	9,223	9,253	9,153	9,575	8,566	9,146	9,295	8,530	8,421	8,867	8,450		98,479
South Consortia Planned Demand	25,060	25,397	24,132	26,762	23,149	24,661	26,559	24,925	21,859	25,643	23,089		271,236
South Consortia Actual Demand	24,071	23,829	24,629	26,826	22,733	26,285	25,280	22,631	22,134	22,424	22,803		263,645
North Consortia Planned Demand	11,510	11,985	11,575	12,626	11,568	11,697	12,468	11,900	10,846	12,563	11,054		129,792
North Consortia Actual Demand	11,432	11,094	11,610	12,563	10,481	11,943	11,598	10,254	10,809	11,365	11,252		124,401
YAS Total Planned Demand	91,190	98,341	89,438	98,695	93,066	91,783	100,635	95,512	82,398	97,651	89,640		1,028,349
YAS Total Actual Demand	92,795	92,326	95,094	101,675	86,514	97,011	97,471	87,591	88,642	89,686	88,089		1,016,894
% Variance Planned V Actual	1.8%	-6.1%	6.3%	3.0%	-7.0%	5.7%	-3.1%	-8.3%	7.6%	-8.2%	-1.7%		-1.1%

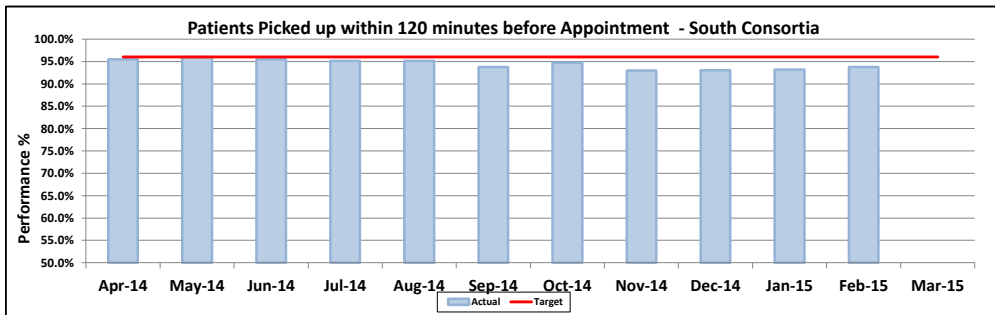
Arrival - KPI 1



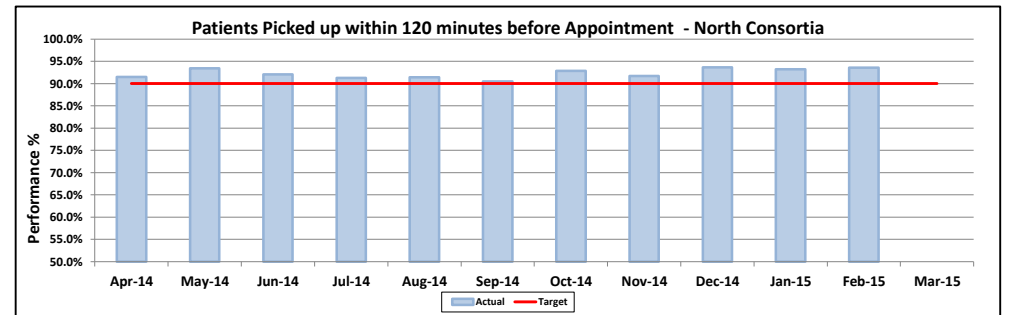
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%
Actual	95.7%	96.1%	95.7%	95.0%	94.6%	95.1%	95.0%	94.2%	94.7%	93.3%	94.1%	



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%	94.8%	93.3%	

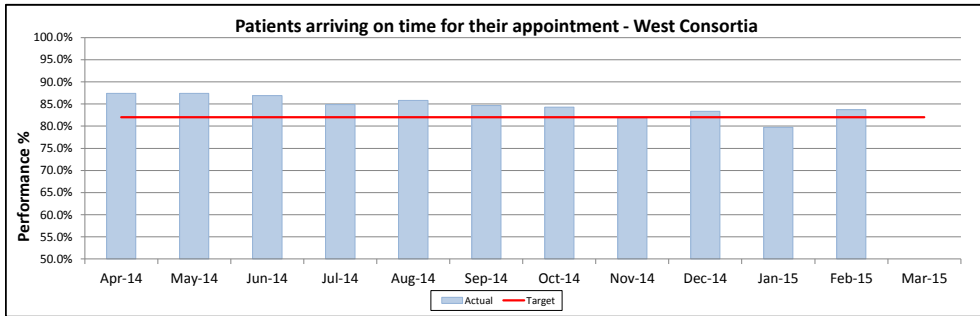


South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%
Actual	95.5%	96.0%	95.5%	95.1%	95.1%	93.8%	94.7%	93.0%	93.1%	93.2%	93.7%	

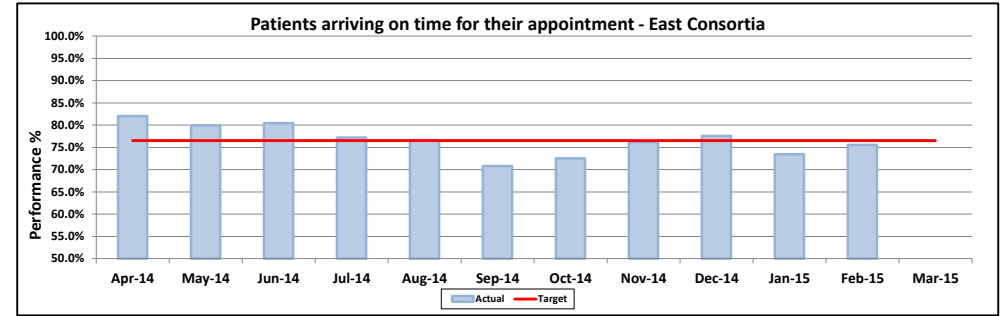


North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Actual	91.5%	93.4%	92.1%	91.3%	91.4%	90.5%	92.9%	91.7%	93.7%	93.3%	93.6%	

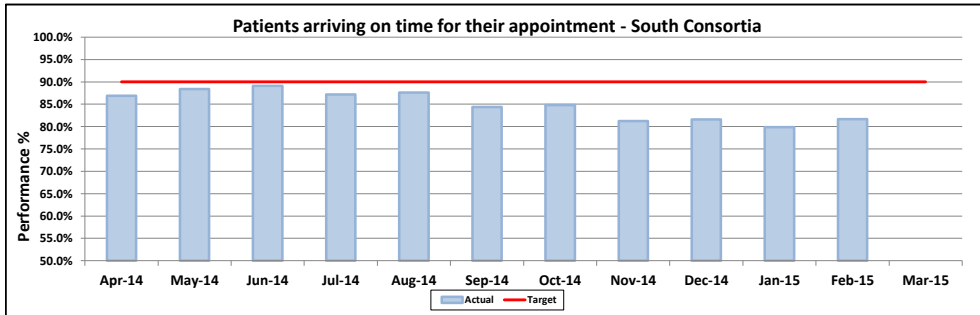
Arrival - KPI 2 EWI



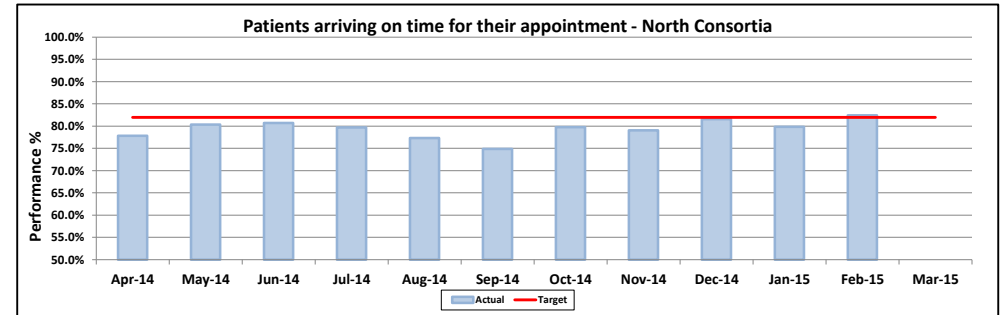
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%
Actual	87.4%	87.4%	86.9%	84.9%	85.8%	84.7%	84.3%	81.9%	83.3%	79.7%	83.7%	



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	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%	73.5%	75.5%	



South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	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%	79.9%	81.7%	

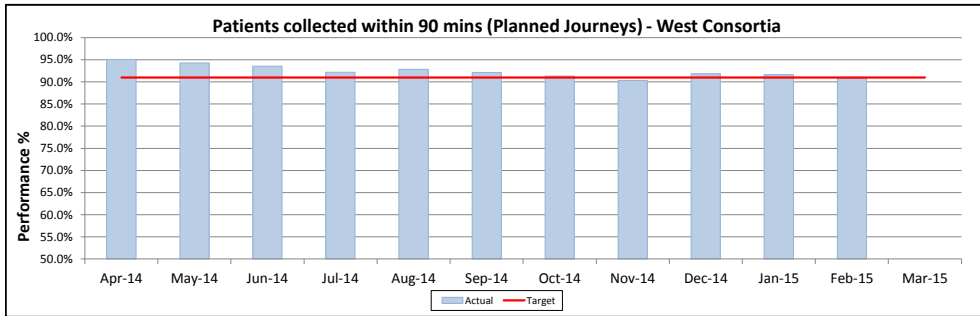


North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%	82.0%
Actual	77.9%	80.3%	80.7%	79.7%	77.4%	74.9%	79.8%	79.1%	81.6%	79.9%	82.4%	

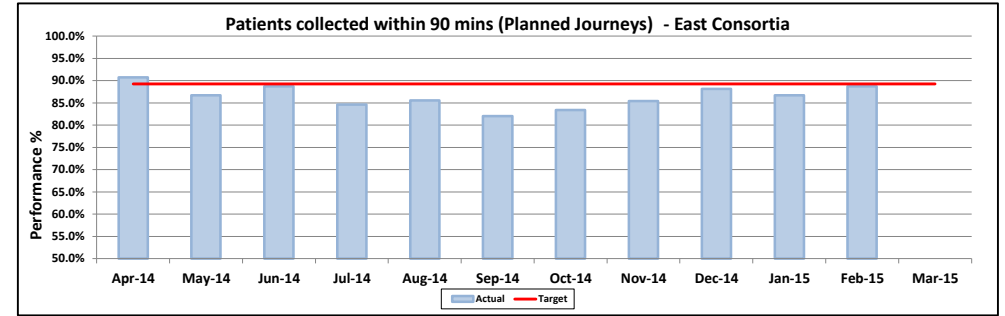
EWI Early Warning Indicator

Departure - KPI 3

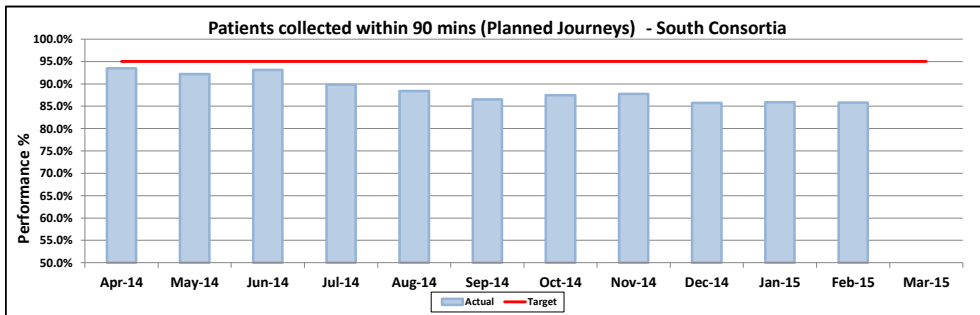
EWI



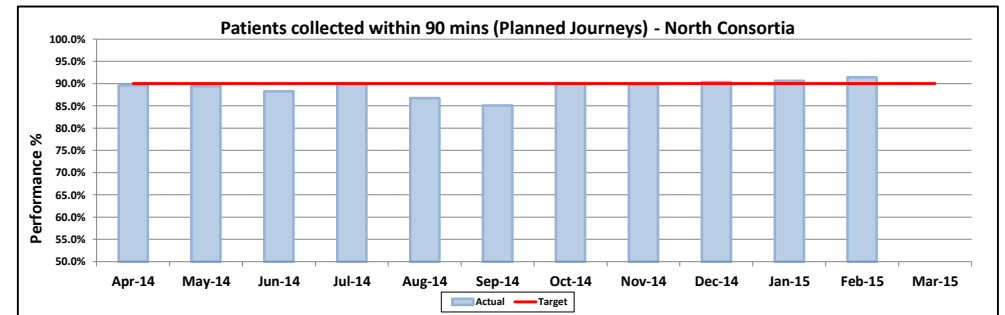
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%
Actual	95.0%	94.3%	93.5%	92.1%	92.8%	92.1%	91.3%	90.3%	91.8%	91.6%	90.8%	



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%	86.7%	88.7%	



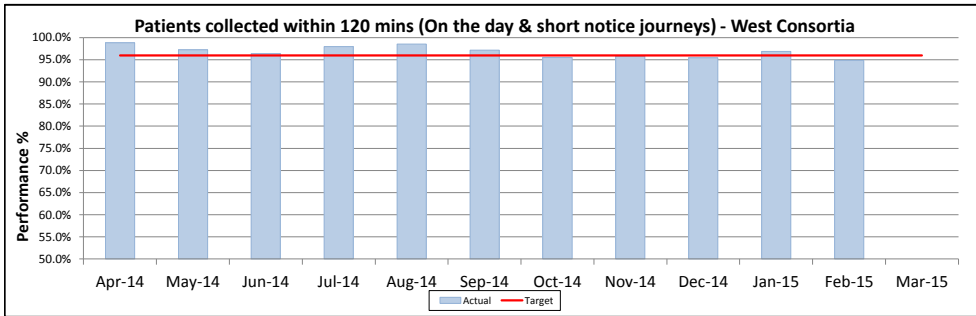
South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%
Actual	93.5%	92.2%	93.1%	89.8%	88.4%	86.5%	87.5%	87.7%	85.8%	85.9%	85.8%	



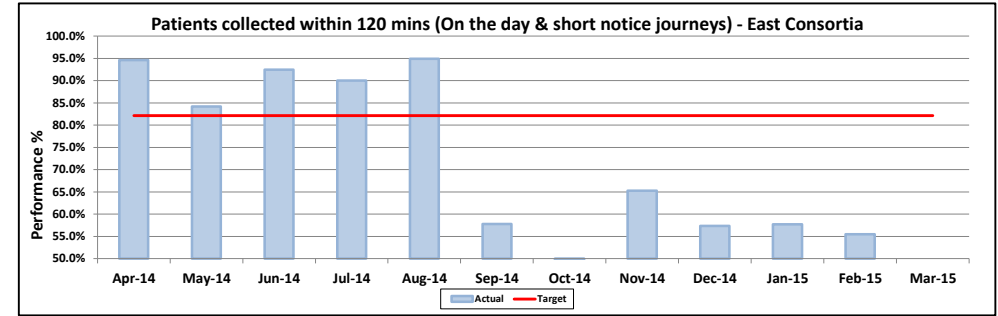
North Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%	90.0%
Actual	89.7%	89.4%	88.3%	89.9%	86.8%	85.1%	90.1%	89.8%	90.4%	90.6%	91.4%	

EWI Early Warning Indicator

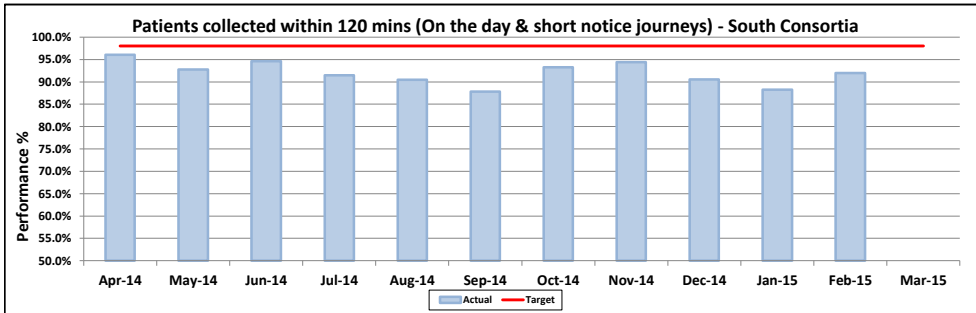
Departure - KPI 4



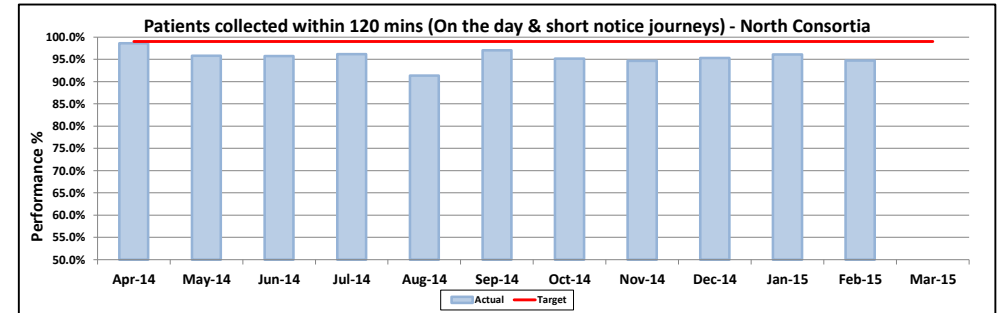
West Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%
Actual	98.8%	97.2%	96.4%	98.0%	98.6%	97.2%	95.5%	95.8%	95.4%	96.9%	94.9%	



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%	57.7%	55.5%	



South Consortia	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Target	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%	88.2%	92.0%	



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%	96.1%	94.7%	



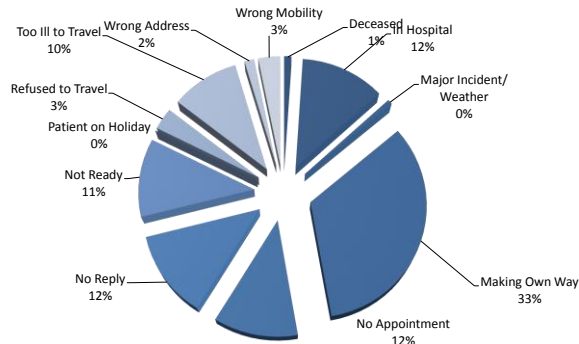
West Renal KPIs

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%	66.5%	72.1%	
	0-60 mins early	100%	91.6%	89.9%	89.9%	90.9%	90.8%	89.7%	88.8%	84.5%	83.4%	83.1%	87.3%	
	up to 30 mins late	0%	0.6%	0.9%	1.0%	1.1%	0.9%	0.8%	1.3%	2.6%	3.2%	3.2%	1.4%	
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%	85.5%	87.5%	
	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%	94.3%	95.7%	
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%	96.1%	96.5%	

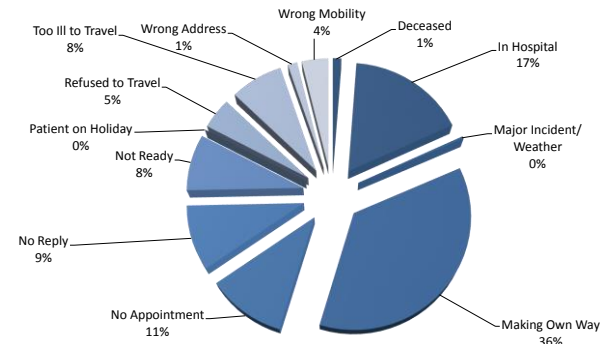
PTS Abortive journeys

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

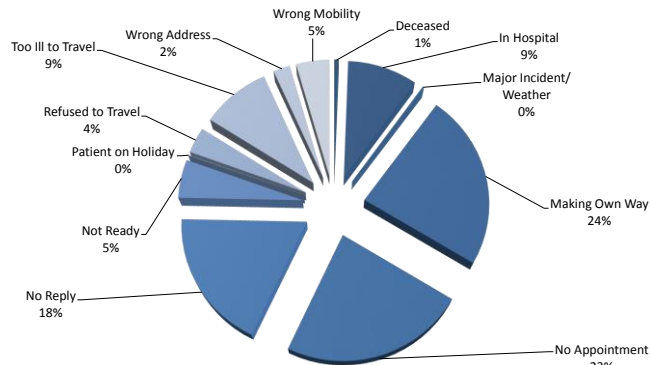
North Consortium													
Abort Reason	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Total
Deceased	5	2	3	5	3	9	1	5	5	8	6		52
In Hospital	73	67	82	82	50	61	74	57	70	91	69		776
Major Incident/Weather	0	0	0	0	0	0	0	0	0	10	4		14
Making Own Way	148	140	167	184	162	203	153	150	172	165	189		1833
No Appointment	89	65	93	117	83	97	91	78	86	96	65		960
No Reply	56	50	73	56	52	49	58	52	70	63	70		649
Not Ready	53	48	45	59	34	76	56	63	71	71	64		640
Patient on Holiday	0	0	0	0	1	1	0	0	1	0	0		3
Refused to Travel	23	25	26	36	13	24	17	13	14	20	18		229
Too Ill to Travel	63	65	59	68	55	57	73	67	80	80	56		723
Wrong Address	4	7	9	4	6	5	7	7	9	5	8		71
Wrong Mobility	11	15	10	15	11	18	17	13	21	31	18		180
Pass to MY Transport	1	0	0	0	0	0	0	0	0	0	0		1
<b>Overall Totals</b>	<b>526</b>	<b>484</b>	<b>567</b>	<b>626</b>	<b>470</b>	<b>600</b>	<b>547</b>	<b>505</b>	<b>599</b>	<b>640</b>	<b>567</b>		<b>6131</b>



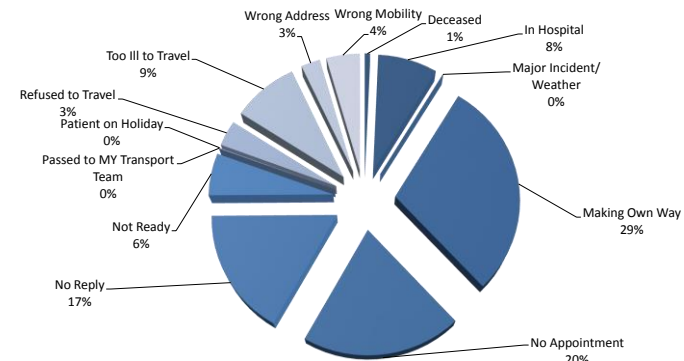
East Consortium													
Abort Reason	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Total
Deceased	2	4	2	2	1	1	0	3	2	1	7		25
In Hospital	61	58	49	46	54	50	55	40	71	57	98		639
Major Incident/Weather	0	1	0	0	0	0	0	0	0	0	2		3
Making Own Way	127	176	183	183	214	216	284	233	223	223	210		2272
No Appointment	57	54	74	62	48	47	59	50	58	62	62		633
No Reply	48	61	44	42	47	65	57	45	60	57	54		580
Not Ready	169	163	169	189	205	162	131	128	166	115	47		1634
Patient on Holiday	0	1	0	1	1	2	2	0	0	0	0		7
Refused to Travel	11	27	22	14	20	27	25	29	26	21	26		248
Too Ill to Travel	44	45	45	47	41	43	50	42	59	52	44		512
Wrong Address	6	5	6	13	5	4	6	5	6	8	8		72
Wrong Mobility	21	16	17	15	21	19	20	15	22	32	22		220
<b>Overall Totals</b>	<b>546</b>	<b>611</b>	<b>611</b>	<b>614</b>	<b>657</b>	<b>636</b>	<b>689</b>	<b>590</b>	<b>683</b>	<b>628</b>	<b>580</b>		<b>6845</b>



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	16	10		131
In Hospital	110	121	102	124	102	119	114	110	111	120	153		1286
Major Incident/Weather	0	1	0	0	0	0	1	0	49	122	3		176
Making Own Way	247	225	217	283	243	303	282	326	293	361	385		3165
No Appointment	334	313	372	416	343	408	411	300	368	425	383		4073
No Reply	284	293	297	325	233	337	334	291	358	380	300		3432
Not Ready	86	81	66	92	75	81	96	77	85	77	84		900
Patient on Holiday	2	4	7	8	6	3	0	0	2	1	1		34
Refused to Travel	53	39	55	66	45	69	44	51	78	72	57		629
Too Ill to Travel	129	134	142	118	111	159	129	138	184	169	152		1565
Wrong Address	33	27	38	46	34	38	36	40	37	42	37		408
Wrong Mobility	73	72	83	84	48	75	67	75	79	72	73		801
<b>Overall Totals</b>	<b>1363</b>	<b>1319</b>	<b>1387</b>	<b>1578</b>	<b>1249</b>	<b>1606</b>	<b>1529</b>	<b>1417</b>	<b>1657</b>	<b>1857</b>	<b>1638</b>		<b>16600</b>

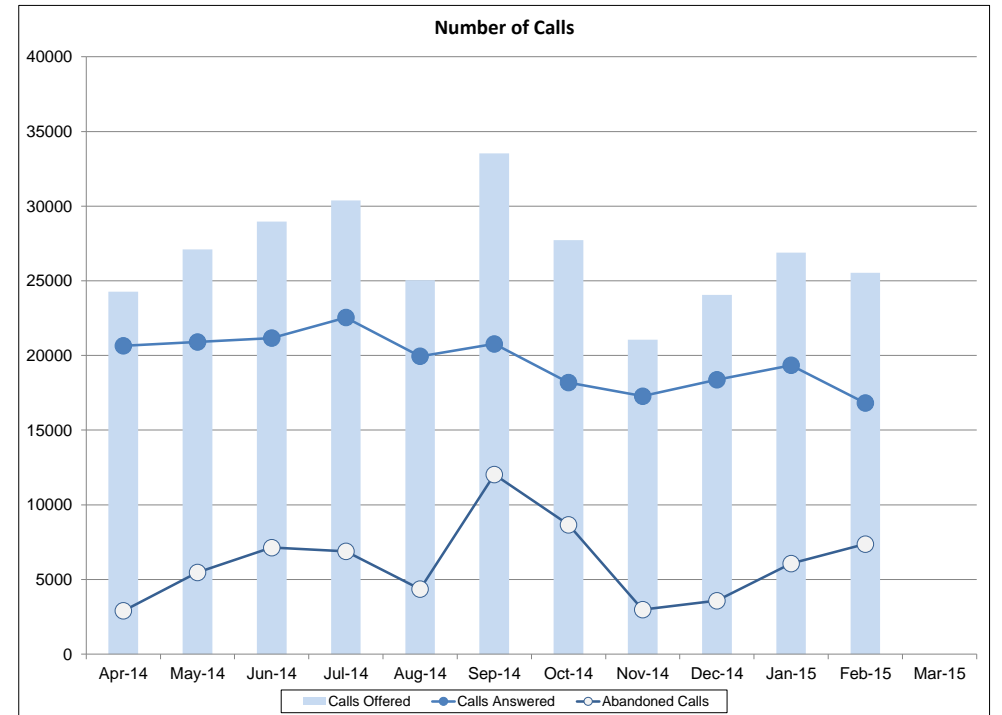
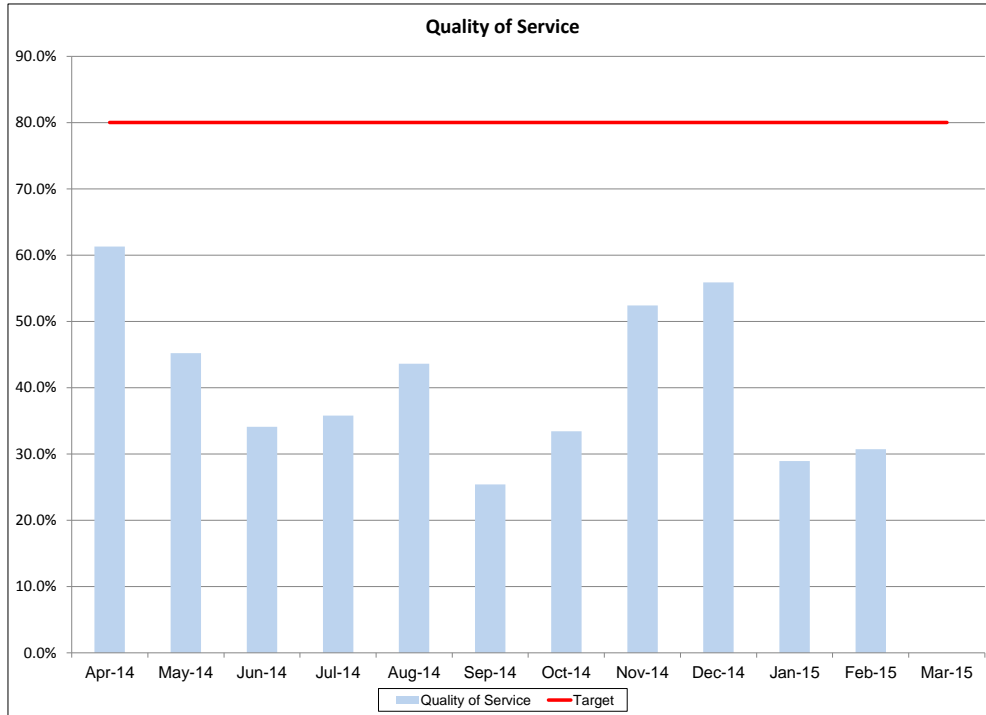


West Consortium													
Abort Reason	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Total
Deceased	29	33	41	26	20	34	45	27	36	37	26		354
In Hospital	303	283	310	351	250	347	300	260	253	329	292		3288
Major Incident/Weather	0	0	1	0	0	0	3	0	10	149	3		166
Making Own Way	740	772	924	1042	972	1051	1053	1096	1203	1115	1072		11040
No Appointment	679	710	699	766	640	728	787	754	819	816	738		8136
No Reply	592	637	591	681	551	645	726	615	707	702	612		7059
Not Ready	237	266	213	279	215	267	244	222	266	207	207		2623
Passed to MY Transport Team	8	9	8	6	6	2	2	3	11	1	2		58
Patient on Holiday	4	11	6	4	13	9	8	5	1	1	2		64
Refused to Travel	110	109	131	150	104	129	128	95	125	139	126		1346
Too Ill to Travel	262	279	258	295	226	277	276	291	377	337	325		3203
Wrong Address	78	79	83	105	76	100	72	101	79	99	94		966
Wrong Mobility	148	145	152	150	135	170	200	147	148	169	164		1728
<b>Overall Totals</b>	<b>3190</b>	<b>3343</b>	<b>3417</b>	<b>3855</b>	<b>3208</b>	<b>3759</b>	<b>3844</b>	<b>3616</b>	<b>4035</b>	<b>4101</b>	<b>3663</b>		<b>40031</b>



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	26893	25539	
Calls Answered	20652	20907	21168	22543	19946	20774	18182	17273	18376	19344	16820	
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	00:02:17	00:03:13	
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	00:57:46	01:00:00	
Abandoned Calls	2908	5471	7132	6882	4362	12028	8655	2979	3578	6061	7369	
Quality of Service	61.3%	45.2%	34.1%	35.8%	43.6%	25.4%	33.4%	52.4%	55.9%	28.9%	30.7%	



# 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	11/11	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

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	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	130,709	114,146		
Total number of Calls answered	114,451	119,321	107,833	107,738	109,515	101,416	111,253	119,286	143,324	129,030	112,793		
Variation to Contract Flat Rate	6.3%	10.8%	0.2%	0.1%	1.7%	-5.8%	3.3%	10.8%	33.1%	19.8%	4.8%		
Variation to Contract Flat Rate (Quarter)		5.8%			-1.3%			15.7%			12.3%		
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	124,124	109,412		
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%	96.2%	97.0%		
Total number of abandoned calls after 30 seconds	1,203	1,528	871	1,413	700	1,146	1,488	3,595	8,427	1,030	898		
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%	0.8%	0.8%		
Total number of calls triaged	97,629	101,065	91,068	90,805	92,446	86,014	95,435	104,683	125,080	111,519	97,483		
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	110,151	95,240		
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	24,708	22,269		
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%	19.1%	19.7%		
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	7,804	6,833		
Total % of Warm transfers (Target 95%)	36.5%	24.6%	26.6%	25.3%	37.9%	35.1%	30.7%	29.7%	21.9%	31.6%	30.7%		
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%	30.1%	30.7%		
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%	91.8%	93.2%		
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%	52.2%	52.0%		
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	05:48:38	07:14:07		
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	00:44:40	00:41:04		
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	4,802	4,017		
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	6,352	5,722		
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	11,154	9,739		
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	7,844	6,940		
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	45,090	39,809		
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	11,642	9,725		
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%	3.7%	3.6%		
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%	4.9%	5.1%		
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%	8.6%	8.6%		
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%	6.1%	6.2%		
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%	34.9%	35.3%		
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%	9.0%	8.6%		



# 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.

		2014 - 2015 ICT Summary with Rag Indicators													
Key Areas	Performance Activity	Service Delivery Activity	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Our Service	SLA	%80 of Items Resolved within SLA	81%	88%	78%	90%	88%	88%	87%	87%	87%	94%	86%		
		Incidents (Logged)	766	962	1252	1467	1781	1991	2008	1950	1871	2028	2063		
		Service Request (Logged)	1612	1497	1394	1689	863	895	928	872	713	907	705		
		Total Activity (Logged)	2378	2459	2646	3146	2644	2890	2936	2822	2584	2935	2768		
		SLA Notes	SLA figures subject to verification Manual calculation												
		SLA Notes	SLA Amber, Daily monitoring and reporting in place for December/January. Underlying Team improvements seen which will filter through in January's figures. Focus on clearing backlog which is impacting current performance figures. SLA figures subject to verification Manual Adjustments/Calculation												
		Customer Feedback	% of either Very Good or Good	95%	95%	90%	0%	0%	100%	83%	94%	94%	92%	90%	
			Number of Survey Returned	310	164	19	0	0	27	126	93	95	123	120	
			Positive Score	293	156	15	0	0	27	119	87	89	113	108	
			Negative Score	17	8	4	0	0	0	9	6	6	10	12	
		Customer Feedback notes	Terry Parker: 01/09/2014 Insufficient data												
	Customer Contact	Average Speed to Answer	8	4	5	7	5	5	8	5	5	5	8		
		Customer Contact Notes													
Infrastructure	Network Availability	Over 99.5%	100	100	100	100	99.8	100	99.32	100	100	100	100		
		This Period Unplanned Downtime	0	0	0	0	1	0	72	0	0	0	0		
		Next Period Planned Downtime	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	0		
		Network Availability Notes	Ola Zahran: link down ceased by mistake by BT												
	System Availability	Over 99.5%	99.5	99.9	99.9	100	100	99.92	99.92	100	100	100	100	100	
		This Period Unplanned Downtime	0.5	0	0	0	0	0.3	5.6	0	0	0	0	0	
		Next Period Planned Downtime	N/A	N/A	N/A	N/A	2	N/A	1.5	0	0	0	0	0	
		System Availability Notes	Ola Zahran: CAD outage Hardware upgrade to stratus Servers												
	Telecoms Availability	Over 99.5%	100	100	99.7	99.5	100	100	100.00	99.68	100	100	100	100	
		This Period Unplanned Downtime	0	0	2	3	0	0	0	4.6	0	0	0	0	
		Next Period Planned Downtime	N/A	N/A	N/A	N/A	2	0	0	0	0	0	0	0	
		Telecoms Availability Notes	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	100	100	100	
		This Period Planned Downtime	0	0	0	0	0	0	0	4	0	0	0	0	
		Next Period Planned Downtime	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	0	3	
	Radio Availability Notes	Andy M: Planned downtime in March for PTS CYFAS radio system upgrade.													
Budget Management		Current Budget Position Net of CIP	-4,339	-23,862	-42,466	-15,994	-21,322	-41,703	-227,261	-39,748	-1,607	-2,959	-50,400		

		2014 - 2015 Active Projects											
Task ID	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%	52%	70%	
P11	Estates Reconfigurations – HART	80%	85%	84%	80%	60%	95%	95%	95%	95%	99%	100%	
P29	Estates Reconfigurations – Hub & Spoke					20%	20%	20%	20%	23%	28%	28%	
P24	Rolling out of Mobile Phones		10%	10%	10%	20%	50%	70%	70%	100%			
P30	ICT Asset Management					4%	4%	20%	20%	40%	40%	50%	
P4	Upgrade South Remote sites links	35%	65%	75%	75%	75%	75%	75%	75%	75%	90%	90%	
P13	Implement ITIL Yr1	5%	15%	15%	15%	20%	20%	25%	25%	40%	40%	40%	
P27	New YAS Intranet				40%	40%	40%	50%	75%	75%	75%	90%	
P7	Airwave to callflex DR site	30%	60%	60%	70%	70%	100%						
P33	Telematics				0%	20%	20%	20%		20%	25%	30%	
P1	Migration to Thin Client Terminals on Remote Sites	80%	90%	90%	90%	100%							
P19	Wireless Network		10%	10%	10%	20%	25%	30%	30%	40%	55%	70%	
P17	Clinical Web Site (PathFinder)		5%	5%	40%	40%	40%	40%	40%	40%	55%	70%	
P21	Mobile Data Refresh and VDO Replacement	5%	7%	7%	22%	25%	25%	50%	50%	50%	60%	80%	
P18	Reswap		70%	70%	80%	100%							
P22	Board Pad			10%	25%	30%	50%	80%	90%	90%	100%		
P23	EOC Wall Board System			5%	10%	15%	20%	25%	30%	40%	60%	100%	
P26	Blaydon Walk-in Centre Adastra Deployment			30%	100%								
P28	New Build Reception SH2				5%	15%	15%	15%	15%	15%	15%	15%	
P34	ISO-22301- Standard - Business Continuity				5%	20%	35%	45%	45%	50%	60%	80%	
P31	GRS to MIS Interface					15%	15%	15%	15%	18%	45%	45%	
P35	PTS Call Flex Moves (PTS Transformation)				0%	15%	35%	80%	80%	80%	80%	85%	
P36	PTS PDA Replacement (PTS Transformation)							20%	20%	20%	20%	50%	
P37	SMS Enterprise							10%	25%	25%	25%	50%	
P38	Dell Blade Enclosure - CAD Servers					10%	15%	30%	50%	50%	50%	80%	
P39	CYFAS Implementation - Wakefield								30%	50%	50%	85%	
P40	Airwave Handset Replacement								40%	40%	40%	80%	
P41	APN Upgrade - 100MB								30%	35%	35%	35%	
P42	MOTO Pandemic FLU Control								30%	80%	100%		
P43	OHIO to GRS Interface											15%	
P44	Adastra ODH Cloud Hosting											9%	



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%	66%		13%	4%	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. Bramley boiler should be replaced during March 2015.
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						22014 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) has started, with one of the three panels replaced, further works are progressing. The resurfacing works at Harrogate is progressing and a contractor has been appointed with a projected start date of Mid March. Due to problems with the roofing at Bainbridge station the solar panel installation at this site has now been cancelled and moved to Kirkbymoorside (KMS) station but unfortunately a problem has been encountered at KMS and therefore an alternative is now being sought. The construction of a new reception to Springhill 2 is progressing and the refurbishment of a large first floor area of Springhill 1 to accommodate various departmental moves is also progressing. The refurbishment of Selby, Bramley, Menston and Rotherham is progressing. Further Capital bids have been submitted for boiler replacements at various sites and the installation of a bulk oil fuel tank for the generator at Callflex has been completed.
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	GREEN	GREEN	

Fleet

←	YTD RAG	GREEN
→	MTD RAG	AMBER

E1 Carbon Management		RAG Status	Baseline 2009	Oct-14	Forecast	Quarter 3 Actual	Notes
E1.1	Carbon Emissions (Fuel)	AMBER	11518 Tonnes CO2	8549 Tonnes CO2		10411 tonnes of CO2	Aim to reduce carbon emissions by 10% by 2015 from the 2009 figures. YAS has been awarded a £166k grant to install solar panels on 175 vehicles, and will be establishing a contractor and installation plan. The target date for contractor award is 27/04/2015. 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 dependent on degree days (ie heating/energy requirements due to time of year) and can be weather dependant (ie winter vs summer)

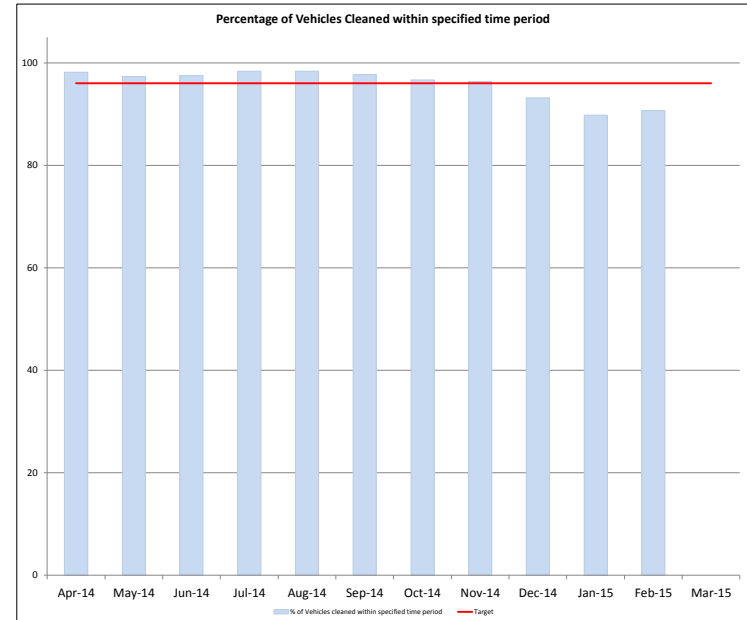
E3 Fleet		RAG Status	Plan YTD	Actual YTD	Var YTD	Plan Mth	Actual Mth	Var Mth	Notes
E3.1	A&E	GREEN	92%	94%	2%	92%	94%	2%	
E3.1	PTS	AMBER	94%	95%	1%	94%	93%	-1%	This KPI has been missed due to a high number of larger mechanical jobs and road traffic collisions this has increased the vehicle downtime during this period, a change in working patterns to cover more weekend time when the vehicles are not being used will increase availability.

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	17	57		There are currently 40 A&E vans in build with the anticipated delivery April/May 2015.
E3.1	A&E - Other	GREEN	7	9		9 ECP cars - Replacements ordered and delivery expected April 2015
E3.1	PTS	RED	17	125		From the 14/15 capital plan 102 vehicles have been purchased from lease during February, these vehicles will be retained for a further 3 years releasing revenue to lease a number of new vehicles which will be suitably specified by PTS, a further 46 vehicle replacements are to be purchased in 15/16, this will bring the PTS fleet within age profile by the end of FY 2015/16.
E3.1	Other	GREEN	7	6		

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

E3.2 Compliance / Safety		RAG Status	Number	% Total	Notes
E3.2	Safety Checks Outside "Window" at end of period	GREEN	22	3.98%	
E3.2	Vehicle Services Outside "Window" at end of period	GREEN	18	4.84%	
E3.1	Vehicle Cleans Outside "Window" at end of period	RED	166	90.07%	The primary reason for below KPI deliver is due to the unavailability of vehicles to our teams due to operational requirements. We do have secondary issues regarding staffing, but following our new Framework agreement with Manpower UK for the provision of temporary cover, this issue will be minimised over the next month. We also have a number of Absence issues, but these are being managed as per current Attendance Procedures.
E3.4	Defibrillator servicing Outside "Window" at end of period	RED	2	0.32%	One defibrillator has not been found despite significant efforts to locate it. The unit has now been officially reported to the Police as lost/stolen. A second unit was due for service on 20th Feb 2015 and has not yet been located. It is not on the vehicle that it was allocated to and the unit has been escalated to Operational management to assist to locate it.
E3.5	Suction Unit servicing Outside "Window" at end of period	GREEN	14	2.17%	
E3.6	Parapac servicing Outside "Window" at end of period	AMBER	15	4.79%	Note 8 devices had been moved from their audited location, had these devices been present there would have been 7 devices overdue (at 2.23% Green)
E3.7	Microvent servicing Outside "Window" at end of period	RED	72	25.81%	Note 80 devices have been removed from their audited location, had these devices been present there would have been 0 overdue (at 0% Green) 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

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	AMBER	AMBER	



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	89.8	90.7	

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	37	14		237
Variance	-5	-1	-2	5	1	0	-3	9	10	-7	16		



# 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

**Comments on Quality****New Incidents Reported**

Overall incident figures have decreased from January to February. The largest drop in incidents reported is in the Trust Vehicle Related category, reducing by a third from January to February which may relate to less inclement weather conditions. Incidents with a severity of Moderate and above make up 1.6% of all reported incidents which remains consistent. A&E Ops incidents represent 62% of all reported incidents.

**Patient Related Incidents**

The top four categories of patient-related incidents are Response-related, care pathway, moving and handling, and slips, trips and falls, and these make up two-thirds of all incidents reported in the patient-related group.

**Staff Related Incidents**

Staff related incidents have seen a drop from November in the A&E Operations service, with all other areas remaining steady.

Moving and handling (29%), and violence and aggression (30%) represent the majority of staff-related incidents reported. Moderate and above graded incidents remain in line with the previous 5 months at 1%.

**Never Events**

No Never Events have been reported during February 2015.

**Serious Incidents**

SI themes are around Delayed Response/backup with learning around frequency of Resource Allocation checks in EOC, and Patient Falls in PTS

**RIDDOR**

Quality checking is pro-active in identification of potential RIDDOR reportable incidents, and the Health and Safety Manager has provided training to the Quality and Risk Team in this regard. Potential RIDDOR incidents are tracked on Datix and investigations followed up.

**Medication related incidents**

There were 22 Controlled Drug incidents in February including 11 morphine breakages, two diazepam breakages, one loss of four vials of morphine (Police informed), three key losses and one vehicle book lost. Full investigations are ongoing for all the losses. There were three incidents of documentation/failure to return morphine to the safe. There were a number of ampoules which shattered with one injury to a member of staff. The Trust Pharmacist has informed the MHRA and is awaiting a response.

There were four clinical errors, all of which are under investigation. No patient harm has been identified.

There were a total of 49 incidents for the month of February. All are reviewed at Medicines Management Group.

**Complaints and concerns**

There has been a decrease in cases received for all services this month with the exception of service to service enquiries for PTS which has increased by 55%.

This month performance against response times has improved slightly with 57% of A&E cases and 36% of EOC cases achieving the 25 working day timescale. Response times for PTS cases has deteriorated at 51% this month. The revised policy timescales have now been implemented which recognises the need for some investigations to take longer and others can be completed much quicker with the timescale being agreed in advance with the complainant. The new target will be to achieve an average of 25 working days across all cases. The intention is to commence reporting against the new policy targets from April 2015."

**Patient experience**

Patient experience survey results including th Friends and family Test score remain positive overall, with some variation in PTS localities. Detailed feedback on results and issues is fed back to the relevant management teams.

**IPC Audit**

Hull & East PTS - vehicles audited with upholstery damage.

Mid Yorks PTS - vehicles audited had no deep cleaning schedule displayed in vehicle

**Clinical Audit Programme**

CPIs and ACQIs are up to date and were submitted on time. There is up to a five week backlog in processing PRFs.

**Safeguarding**

The Safeguarding Children Level 2 Workbook was introduced 3 years ago. As a result, there are a number of staff who are no longer compliant, resulting in the 23% decrease in compliance between October and December. This is now being addressed with e-mail reminders to Managers requesting that they check the compliancy levels of their staff and continued close monitoring by the safeguarding team, and completion rates have risen in January and February.

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"> <li>Infection, Prevention and Control</li> <li>Patients Incidents</li> <li>Medication Incidents</li> <li>Staff Incidents</li> <li>RIDDOR</li> <li>Serious Incidents</li> </ul>	GREEN	GREEN	AMBER	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN		GREEN	GREEN
1.2	Clinical Effectiveness	<ul style="list-style-type: none"> <li>Clinical Performance Indicators (National)</li> <li>Clinical Audit Programme</li> </ul>	AMBER	AMBER	AMBER	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN		GREEN	GREEN
1.2	Patient Involvement and Experience	<ul style="list-style-type: none"> <li>Concerns, Complaints and Compliments</li> <li>Patient Experience</li> <li>Local Involvement Networks/Overview &amp; Scrutiny Committees</li> </ul>	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	AMBER	AMBER	AMBER	AMBER	AMBER		GREEN	GREEN
3	CQC and Other Registration / Legislation Standards	<ul style="list-style-type: none"> <li>Registration Regulations &amp; Outcomes</li> <li>NHS Litigation Authority</li> </ul>	AMBER	AMBER	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	GREEN/AMBER	GREEN/AMBER		

Deriving the governance risk rating

Monitoring

Service performance score

Governance Risk Rating

<b>1 Performance against national measures</b>	-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
<b>2. Third Parties</b>	<b>Care quality Commission *1</b> following non-compliance with essential standards -Major impacts on patients = +2.0 -Enforcement action = +4.0  <b>NHS Litigation Authority *2</b> -Failure to maintain, or certify a minimum published CNST level of 1.0 or have in place appropriate alternative arrangements: +2.0
<b>3. Mandatory Services</b>	-Declared risk of, or actual, failure to deliver mandatory services: +4.0
<b>4. Other board statement failures</b>	-If not covered above, failure to either (i) provide or (ii) subsequently comply with annual or quarterly board statements
<b>5. Other factors</b>	-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

<b>Service Performance score of .....</b>	<b>Governance Risk Rating</b>
< 1.0	GREEN
≥ 1.0	AMBER-GREEN
< 2.0	
≥ 2.0	AMBER-RED
< 4.0	
≥ 4.0	RED
Risk Ratings applied quarterly and updated in real time	
<b>Override applied to risk rating</b>	
Nature and duration of override at Monitor's discretion	

\*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	
<b>Hub and Spoke - Deputy Chief Executive, Executive Director of Finance and Performance</b>															
HS1	Programme Team and Governance	ED Ops													
HS2	Strategic Outline Business Case	ED Finance													Resource Plan with three approaches to resourcing the OBC has been developed. The tender specifications for the OBC consultancy work will be drafted after the preferred approach and budget is confirmed and approved by the Trust Board.
HS3	Full business Case	ED Finance													
HS4	Communications	ED Ops													The Comms and Engagement tender will be launched on 2.3.15 with contract commencement expected on 27.4.15.
HS5	ORH Modelling	ED Ops													ORH modelling is to be refreshed to confirm locations for the three SOC shortlisted options. This work is now expected to commence in late March once the Operations ORH modelling is completed.
HS6	Financial Modelling	ED Finance													Budget and Capital allocations for 2014/15 reviewed. The underspend in year on capital has been reallocated within the overall YAS Capital plan. A review of 2015/16 allocation will take place on approval of the resource plan to deliver the OBC
HS7	Hub and Spoke Specification	ED Finance													Presentation of the Hub & Spoke project to PTS staff was held on 18.2.15. EOC staff presentation is to be held on 9.3.15.
HS8	Make Ready	ED Ops													Make Ready draft specification due to be completed in March. Workshops with Operations, EOC, Clinical Governance, Quality, Risk, Health & Safety, Support Services and Procurement will be held in April to review and update as agreed.
HS9	Fleet and Ancillary	ED Finance													A working group has been set up to assess current data availability, understand core need, develop action plan to supply missing data required. Fleet requirements to be assessed in line with Make Ready specification
HS10	ICT	ED Ops													Initial discussions regarding the Make Ready IT requirements have commenced with ICT. Detailed specifications will commence once the Make Ready specification is agreed.
HS11	EOC Deployment Models	ED Ops													EOC requirements will be assessed in line with the Make Ready specification.
HS12	Operational Support Functions	ED Ops													Change Management strategy and framework required for the OBC is under construction. A meeting with Nigel Hopps has been arranged to discuss how this work will engage with Transformation.
HS13	Estates	ED Finance													Estates project schedule has been reviewed and updated. Estates is currently assessing property title, lease and legal restrictions as required for BAU which will inform the OBC. External consultancy work is scheduled to commence after resource plan approval by the Trust Board.
HS14	Benefits and Realisation	ED Ops													Benefits Register has been reviewed. Work is continuing to develop measures and identify further benefits.
<b>OD and Leadership - Executive Director of People and Engagement</b>															
ODL1	Management & Leadership	ED PR & E													Additional programme on track
ODL2	Service Line Development	ED PR & E													Project removed from work stream via Change Request
ODL3	Developing Clinical Leadership	EMD													
ODL3a	Support Development of Independent Clinical Practice	EMD													Model agreed at TEG. This is being embedded by CDMs and the revised PDR process. Various CPD sessions held by the Clinical Directorate and best practice days held.
ODL3b	Development of Clinical Career Framework for Frontline Clinicians	EMD													SOPs for Specialist and Advanced (for new UCPs) Paramedics to be presented at March CGG. JD reviewed and discussions held against expected and actual work flows.
ODL3c	Support Development and Implementation of evidence based best practice by frontline clinicians	EMD													Model agreed at TEG and being embedded by CDMs and the revised PDR process. Various CPD and best practice days held.
ODL3d	Support the Development of Clinical Appraisal and Professional Portfolio Development	EMD													Andy Pountney continues to support doctor revalidation. Nurse revalidation steering group established to lead on the implementation of nurse revalidation across YAS.
ODL4	Staff Engagement and Communications	ED PR & E													The Employee Wellbeing strategy approved by TMG and Quality Committee in February 2015. Launch planned for March 2015.
<b>Urgent Care - Executive Director of Standards and Compliance</b>															
UC1	Paramedic Pathfinder/ePRF	ED S&C													Front end is now complete and final data testing has been formally completed and audited. The app will go live W/C 9/3/15 Initial communication in ops update, learning material prepared. Risk that the CQUIN trajectory will not be reached by April.
UC2	NHS 111+Care Coordination	ED S&C													Complete
UC3	Technology Enabled Services	ED S&C													
UC3a	Telehealth	ED S&C													
UC3b	Telecare	ED S&C													Wellbeing provided comments to YAS's second draft on 25 February, still a number of commercial points unresolved; to re-submit by 6 March. Site visit to Wellbeing facilities on 2/3 March.
UC4	Community ECPs and Advanced Paramedics	ED S&C													Main contract still in negotiation – delays likely
UC5	Urgent Care Transport	ED S&C													
UC6	Managed Services Portfolio	ED S&C													Negotiating packages to get staff on board. Unable to recruit permanent members until long term contract negotiations completed.

RAG key	
Green	Project actions and benefits delivery on track
Yellow	Project actions and benefits delivery slippage - mitigations in place
Red	Project actions and benefits delivery slippage - further action required
Blue	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%	99%	99%	
	Premise	99%	96%	96%	99%	99%	97%	99%	100%	100%	100%	99%	
	Vehicle	97%	98%	99%	99%	99%	100%	100%	99%	99%	100%	95%	
North Yorkshire and York	Hand Hygiene	97%	97%	99%	97%	98%	99%	96%	I/Data	99%	98%	94%	
	Premise	100%	97%	97%	100%	99%	94%	100%	I/Data	98%	98%	99%	
	Vehicle	96%	94%	96%	94%	96%	99%	95%	I/Data	96%	94%	95%	
Humber	Hand Hygiene	98%	99%	100%	99%	100%	99%	100%	100%	99%	99%	100%	
	Premise	99%	97%	100%	98%	97%	98%	98%	100%	99%	99%	98%	
	Vehicle	98%	98%	100%	99%	98%	92%	91%	97%	87%	91%	96%	
Airedale, Bradford, Leeds	Hand Hygiene	98%	99%	95%	96%	93%	97%	97%	100%	100%	90%	100%	
	Premise	94%	98%	98%	100%	98%	98%	100%	100%	100%	100%	99%	
	Vehicle	99%	98%	96%	95%	94%	99%	100%	100%	95%	95%	99%	
South Yorkshire and Bassetlaw	Hand Hygiene	99%	99%	100%	98%	99%	98%	99%	100%	98%	98%	94%	
	Premise	96%	96%	94%	96%	96%	98%	99%	92%	90%	99%	98%	
	Vehicle	99%	97%	99%	99%	98%	97%	98%	100%	99%	99%	95%	
YAA	Hand Hygiene	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	Premise	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	Vehicle	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
Resilience and Special Operations	Hand Hygiene	99%	99%	99%	100%	100%	100%	100%	100%	100%	100%	99%	
	Premise	90%	90%	95%	100%	95%	95%	100%	95%	100%	100%	100%	
	Vehicle	100%	100%	100%	100%	100%	100%	93%	100%	100%	100%	100%	
Private & Events	Hand Hygiene	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	Vehicle	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
PTS Leeds	Hand Hygiene	100%	100%	100%	99%	100%	100%	100%	100%	100%	99%	100%	
	Vehicle	98%	96%	100%	100%	94%	95%	94%	97%	89%	96%	97%	
PTS Mid Yorkshire	Hand Hygiene	99%	100%	100%	99%	99%	99%	99%	100%	100%	98%	99%	
	Vehicle	95%	93%	96%	94%	97%	99%	93%	97%	96%	94%	90%	
PTS Bradford / Airedale	Hand Hygiene	100%	99%	99%	100%	99%	99%	99%	98%	99%	99%	99%	
	Vehicle	99%	99%	100%	99%	99%	99%	100%	99%	95%	99%	99%	
PTS Calderdale / Huddersfield	Hand Hygiene	99%	100%	99%	100%	100%	100%	100%	100%	100%	100%	100%	
	Vehicle	98%	100%	100%	99%	100%	97%	100%	I/Data	100%	100%	100%	
PTS North Yorkshire	Hand Hygiene	100%	99%	99%	99%	98%	98%	98%	100%	99%	99%	100%	
	Vehicle	98%	98%	100%	98%	97%	95%	95%	93%	94%	91%	97%	
PTS Hull & East	Hand Hygiene	100%	98%	100%	99%	98%	99%	99%	94%	99%	97%	99%	
	Vehicle	92%	93%	96%	95%	95%	94%	91%	96%	91%	92%	94%	
PTS Sheffield / Barnsley	Hand Hygiene	99%	100%	99%	100%	99%	100%	99%	100%	100%	99%	99%	
	Vehicle	100%	100%	98%	99%	97%	97%	99%	100%	100%	99%	99%	
PTS Rotherham / Doncaster	Hand Hygiene	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	Vehicle	99%	100%	100%	100%	100%	100%	100%	99%	99%	100%	100%	
Overall Compliance (Current Year)	Hand Hygiene	99%	99%	99%	99%	99%	99%	99%	99%	99%	98%	99%	
	Premise	97%	96%	97%	99%	98%	97%	99%	98%	98%	99%	99%	
	Vehicle	98%	98%	99%	98%	98%	98%	98%	97%	98%	96%	97%	
Overall Compliance (Previous Year)	Hand Hygiene	99%	100%	98%	99%	98%	99%	99%	98%	99%	99%	99%	
	Premise	97%	96%	98%	98%	98%	99%	98%	97%	96%	84%	96%	
	Vehicle	96%	98%	98%	92%	92%	97%	97%	96%	98%	98%	97%	

Key for IPC Audit: Pre April 2012

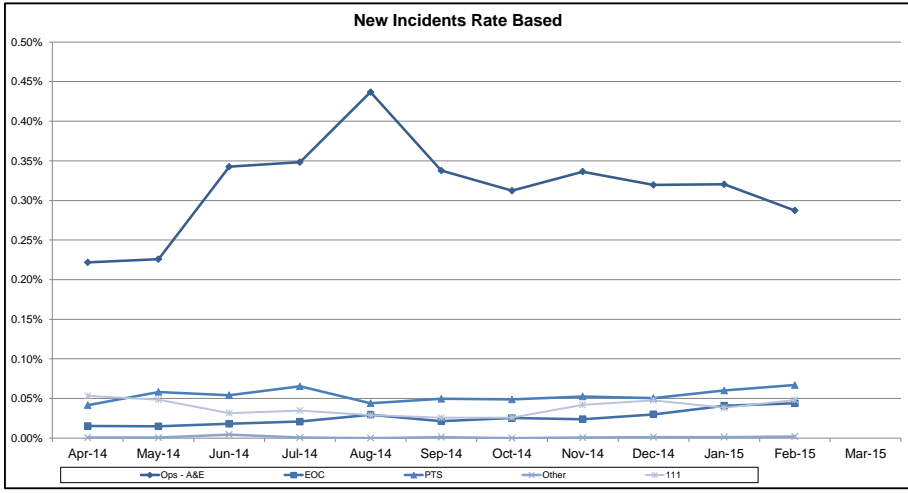
I/Data	Insufficient Data - Minimum Audit requirements not met
	No Audits Completed or minimum audit requirements met with compliance <75%
	Minimum audit requirements met with compliance 75% to 89%
	Minimum audit requirements met with compliance >89%

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



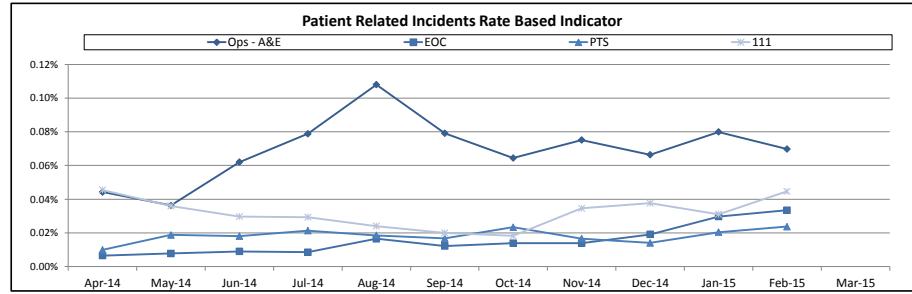
New Incidents Reported EWI



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%)	485 (0.32%)	412 (0.29%)	
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%)	62 (0.04%)	63 (0.04%)	
PTS	63 (0.04%)	90 (0.06%)	84 (0.05%)	107 (0.07%)	64 (0.04%)	42 (0.03%)	77 (0.05%)	79 (0.05%)	79 (0.05%)	91 (0.06%)	96 (0.07%)	
111	62 (0.05%)	58 (0.05%)	49 (0.03%)	57 (0.03%)	42 (0.03%)	40 (0.03%)	41 (0.04%)	63 (0.05%)	75 (0.05%)	58 (0.04%)	69 (0.05%)	
Finance	1 (0%)	1 (0%)	7 (0%)	1 (0%)	0 (0%)	2 (0%)	1 (0%)	2 (0%)	2 (0%)	2 (0%)	3 (0%)	
Medical - Operations	4 (0%)	4 (0%)	9 (0.01%)	2 (0%)	6 (0%)	6 (0%)	1 (0%)	3 (0%)	1 (0%)	2 (0%)	3 (0%)	
Quality & Patient Experience	2 (0%)	1 (0%)	4 (0%)	0 (0%)	1 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	3 (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%)	9 (0.01%)	8 (0.01%)	
Support Services	1 (0%)	0 (0%)	2 (0%)	5 (0%)	4 (0%)	0 (0%)	2 (0%)	0 (0%)	0 (0%)	2 (0%)	1 (0%)	
Foundation Trust	0 (0%)	0 (0%)	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%)	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%)	0 (0%)	0 (0%)	
Risk & Safety	2 (0%)	0 (0%)	1 (0%)	1 (0%)	0 (0%)	1 (0%)	2 (0%)	1 (0%)	0 (0%)	1 (0%)	3 (0%)	
ICT	1 (0%)	0 (0%)	1 (0%)	1 (0%)	1 (0%)	1 (0%)	0 (0%)	1 (0%)	1 (0%)	3 (0%)	0 (0%)	
Business Intelligence	0 (0%)	0 (0%)	0 (0%)	1 (0%)	1 (0%)	0 (0%)	0 (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 (0.01%)	8 (0%)	6 (0%)	
Legal	0 (0%)	0 (0%)	0 (0%)	1 (0%)	0 (0%)	0 (0%)	2 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	
Transformation	1 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0%)	0 (0%)	0 (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%)	0 (0%)	0 (0%)	
Corporate Communications	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	
<b>TOTALS</b>	<b>512</b>	<b>537</b>	<b>723</b>	<b>801</b>	<b>807</b>	<b>693</b>	<b>678</b>	<b>706</b>	<b>720</b>	<b>725</b>	<b>669</b>	
<b>TOTALS (Prev Year)</b>	<b>395</b>	<b>491</b>	<b>468</b>	<b>518</b>	<b>484</b>	<b>434</b>	<b>497</b>	<b>456</b>	<b>482</b>	<b>465</b>	<b>444</b>	<b>445</b>

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%)	121 (0.08%)	100 (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%)	45 (0.03%)	48 (0.03%)	
PTS	15 (0.01%)	20 (0.02%)	28 (0.02%)	35 (0.02%)	27 (0.02%)	26 (0.02%)	37 (0.02%)	25 (0.02%)	22 (0.01%)	31 (0.02%)	34 (0.02%)	
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%)	47 (0.03%)	64 (0.04%)	
Medical Operations	1 (0%)	2 (0%)	4 (0%)	0 (0%)	3 (0%)	6 (0%)	1 (0%)	2 (0%)	0 (0%)	1 (0%)	2 (0%)	
OTHER	4 (0%)	3 (0%)	1 (0%)	4 (0%)	6 (0%)	1 (0%)	3 (0%)	0 (0%)	6 (0%)	3 (0%)	3 (0%)	
<b>TOTALS (Current Year)</b>	<b>150</b>	<b>145</b>	<b>189</b>	<b>230</b>	<b>252</b>	<b>206</b>	<b>194</b>	<b>213</b>	<b>221</b>	<b>248</b>	<b>251</b>	
<b>TOTALS (Previous Year)</b>	<b>105</b>	<b>90</b>	<b>72</b>	<b>82</b>	<b>91</b>	<b>60</b>	<b>91</b>	<b>100</b>	<b>72</b>	<b>101</b>	<b>73</b>	<b>69</b>

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

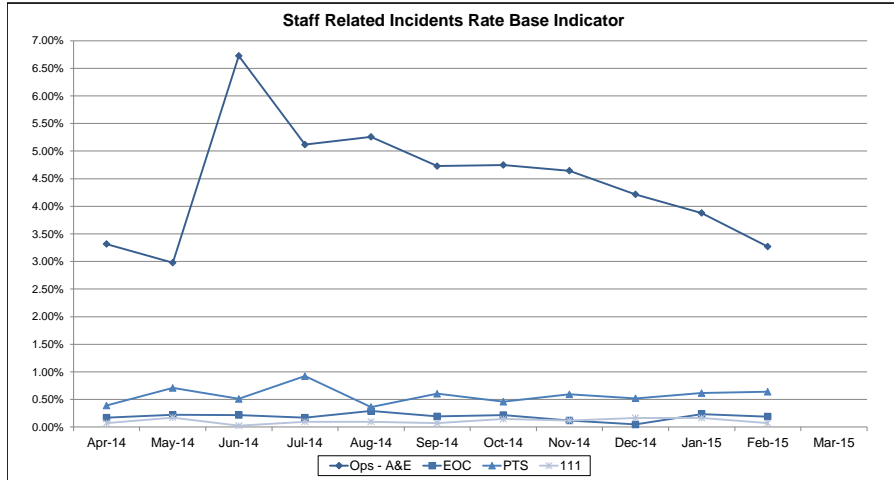
Number of Medication Incidents	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Current Year	39	40	48	75	59	37	41	37	65	53	49	
Previous Year	23	26	30	34	29	23	30	27	50	29	30	37

Morphine Related Incidents

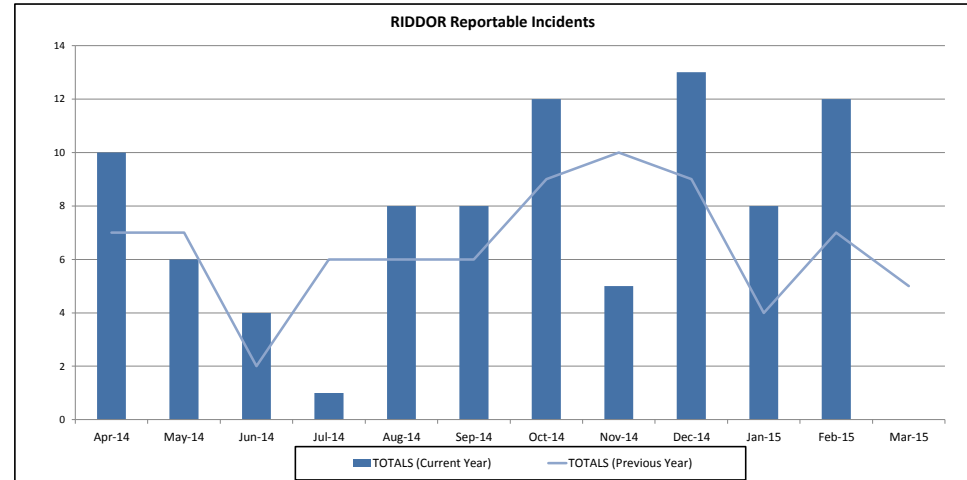
OBJ REF 3

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	16	14	
Administrative errors	6	3	3	4	4	1	2	0	1	5	1	
Loss	2	1	1	3	2	1	0	4	5	4	5	
Clinical	0	0	3	0	0	0	0	0	0	1	0	
Other	2	1	0	15	0	2	0	0	0	0	0	
<b>TOTAL (Current Year)</b>	<b>19</b>	<b>20</b>	<b>25</b>	<b>35</b>	<b>18</b>	<b>10</b>	<b>12</b>	<b>14</b>	<b>24</b>	<b>26</b>	<b>20</b>	
<b>TOTAL (Previous Year)</b>	<b>14</b>	<b>18</b>	<b>7</b>	<b>16</b>	<b>10</b>	<b>10</b>	<b>12</b>	<b>11</b>	<b>23</b>	<b>11</b>	<b>19</b>	<b>14</b>

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
<b>Ops - A&amp;E</b>	136 (3.32%)	122 (2.98%)	277 (6.73%)	211 (5.12%)	217 (5.26%)	196 (4.75%)	197 (4.64%)	196 (4.64%)	178 (4.22%)	164 (3.88%)	138 (3.27%)	
<b>EOC</b>	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%)	10 (0.24%)	8 (0.19%)	
<b>PTS</b>	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%)	26 (0.62%)	27 (0.64%)	
<b>111</b>	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%)	7 (0.17%)	3 (0.07%)	
<b>Finance</b>	0 (0%)	1 (0.02%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	1 (0.02%)	2 (0.05%)	
<b>Medical - Operations</b>	3 (0.07%)	1 (0.02%)	2 (0.05%)	1 (0.02%)	3 (0.07%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	
<b>Quality &amp; Patient Experience</b>	0 (0%)	0 (0%)	2 (0.05%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	
<b>Resilience &amp; Specialist Services</b>	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%)	3 (0.07%)	2 (0.05%)	
<b>Support Services</b>	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	1 (0.02%)	0 (0%)	1 (0.02%)	0 (0%)	0 (0%)	1 (0.02%)	1 (0.02%)	
<b>Foundation Trust</b>	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	
<b>Human Resources</b>	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	0 (0%)	0 (0%)	1 (0.02%)	0 (0%)	1 (0.02%)	0 (0%)	
<b>Organisational Effectiveness and Education</b>	1 (0.02%)	1 (0.02%)	1 (0.02%)	3 (0.07%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	0 (0%)	0 (0%)	
<b>Risk &amp; Safety</b>	1 (0.02%)	0 (0%)	0 (0%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	
<b>ICT</b>	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	2 (0.05%)	0 (0%)	
<b>Procurement</b>	1 (0.02%)	1 (0.02%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (0.02%)	0 (0%)	2 (0.05%)	0 (0%)	1 (0.02%)	
<b>FLEET</b>	2 (0.05%)	1 (0.02%)	0 (0%)	1 (0.02%)	0 (0%)	1 (0.02%)	2 (0.05%)	1 (0.02%)	1 (0.02%)	4 (0.09%)	3 (0.07%)	
<b>TOTALS (Current Year)</b>	<b>174</b>	<b>174</b>	<b>316</b>	<b>269</b>	<b>257</b>	<b>236</b>	<b>238</b>	<b>237</b>	<b>216</b>	<b>219</b>	<b>187</b>	
<b>TOTALS (Previous Year)</b>	<b>108</b>	<b>106</b>	<b>101</b>	<b>101</b>	<b>129</b>	<b>109</b>	<b>171</b>	<b>142</b>	<b>170</b>	<b>153</b>	<b>181</b>	

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

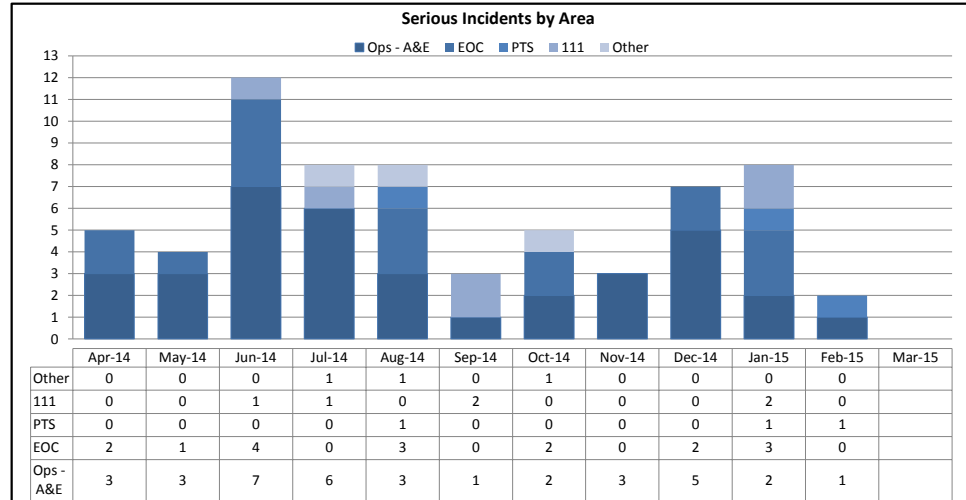
RIDDOR reportable	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
North Yorkshire CBU	0	1	1	0	2	1	2	1	1	1	2	
East Riding of Yorkshire CBU	1	0	1	1	2	1	2	0	2	0	0	
Leeds & Wakefield CBU	1	1	1	0	1	2	2	1	0	2	0	
Bradford, Calderdale and Kirklees CBU	6	2	0	0	0	1	3	2	4	2	5	
South Yorkshire CBU	1	1	1	0	1	1	3	0	2	2	2	
Operations PTS	1	0	0	0	2	2	0	1	3	1	3	
Other Directorates	0	1	0	0	0	0	0	0	1	0	0	
<b>TOTALS (Current Year)</b>	<b>10</b>	<b>6</b>	<b>4</b>	<b>1</b>	<b>8</b>	<b>8</b>	<b>12</b>	<b>5</b>	<b>13</b>	<b>8</b>	<b>12</b>	
<b>TOTALS (Previous Year)</b>	<b>7</b>	<b>7</b>	<b>2</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>9</b>	<b>10</b>	<b>9</b>	<b>4</b>	<b>7</b>	<b>5</b>

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	0	0	
Hit by a moving, flying or falling object	0	1	0	0	0	0	0	1	0	0	0	
Hit by a moving vehicle	0	0	0	0	0	0	0	0	0	0	0	
Hit by something fixed or stationary	0	0	0	0	0	0	0	0	0	1	0	
Injured while handling, lifting or carrying	7	2	2	1	4	5	10	2	8	3	7	
Slip, trip or fall on the same level	2	1	2	0	3	2	0	1	5	3	1	
Fall from a height	0	1	0	0	0	1	0	0	0	1	2	
Trapped by something collapsing	0	0	0	0	0	0	0	0	0	0	0	
Drowned or asphyxiated	0	0	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	0	0	
Exposed to fire	0	0	0	0	0	0	0	0	0	0	0	
Exposed to an explosion	0	0	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	0	0	
Injured by an animal	0	0	0	0	0	0	0	0	0	0	0	
Physically assaulted by a person	0	0	0	0	0	0	1	0	0	0	0	
Another kind of accident	1	1	0	0	1	0	1	0	0	0	2	
<b>Total</b>	<b>10</b>	<b>6</b>	<b>4</b>	<b>1</b>	<b>8</b>	<b>8</b>	<b>12</b>	<b>5</b>	<b>13</b>	<b>8</b>	<b>12</b>	

Yorkshire Ambulance Service - Quality - Safety

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

Yorkshire Ambulance Service - Quality - Safeguarding

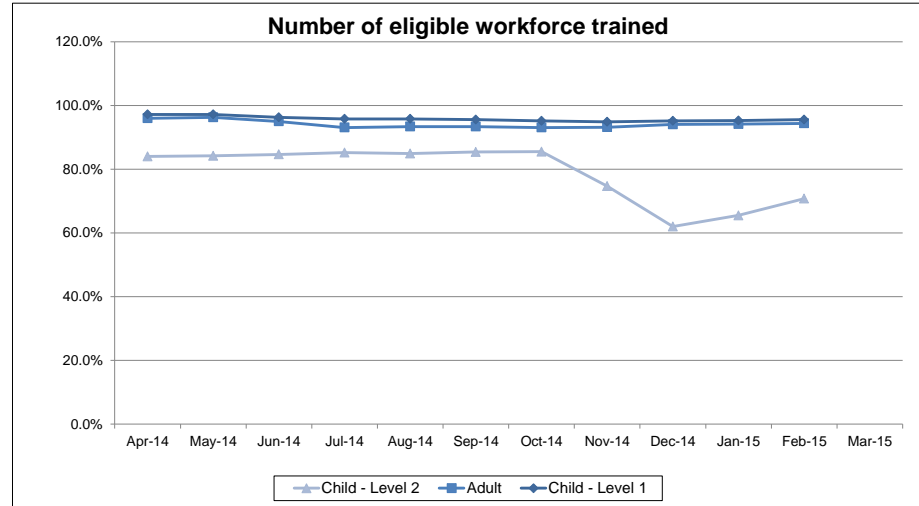
February 2015

Training Position

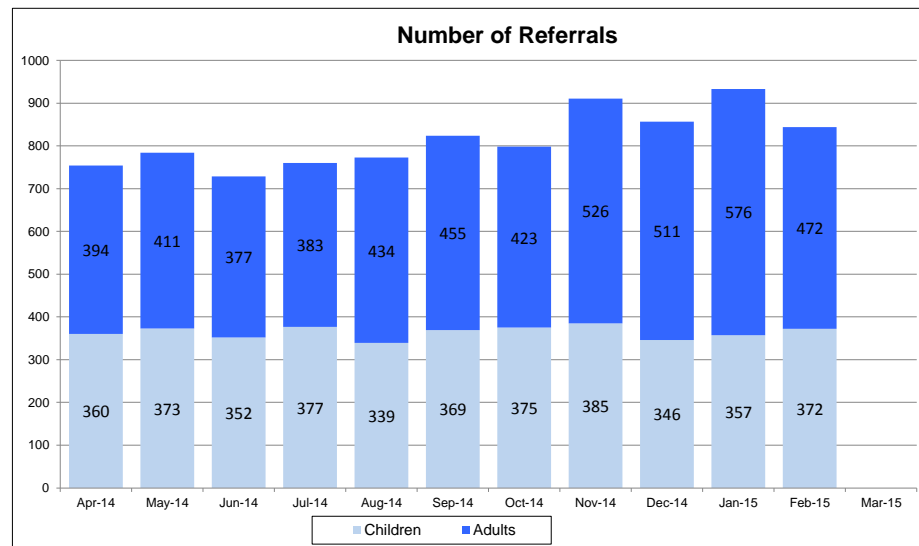
YTD RAG GREEN



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

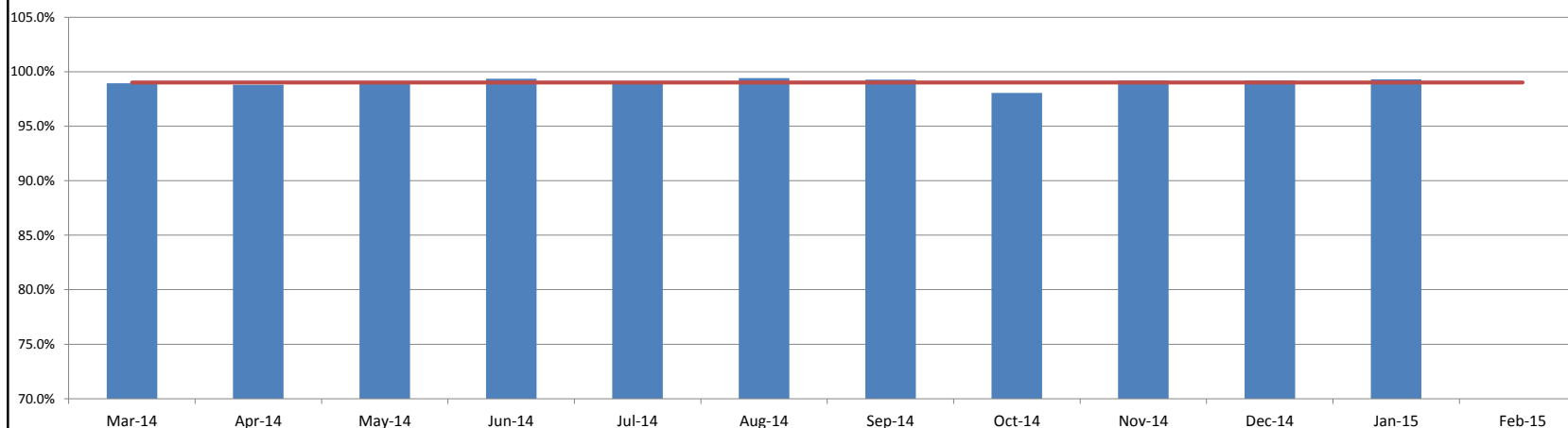
National Ambulance CPis: National clinical ACQIs	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Febrile convulsions Cardiac arrest outcomes	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG	RAG
Below the knee # Stroke	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN	GREEN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

Internal Clinical Audit Plan

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

Patient Report Form Audit

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



Percentage of Records Fully Completed For All Key Data Fields Used For Retrieval	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
Total Forms Scanned	61,873	61,280	63,395	40701	50,534	51,515	51,034	53893	53998	57188	51452	
Total of forms with key data incomplete	658	738	602	262	547	301	366	1059	438	465	365	
% of Completed Forms	98.9%	98.8%	99.1%	99.4%	98.9%	99.4%	99.3%	98.0%	99.2%	99.2%	99.3%	

\*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	2	2		16
	Telephone Manner		0	2	1	5	0	0	1	1	0	3	0		13
EOC Call Handling	Red AMPDS		0	0	0	0	3	1	1	2	0	0	0		7
	Green AMPDS		0	1	1	0	1	1	5	4	1	7	2		23
	Green Clinical Hub		1	1	2	4	5	4	3	1	0	2	2		25
	Green 111 triage		0	0	0	0	0	0	1	1	0	1	1		4
	HCP Request		3	1	4	2	5	1	3	4	2	1	0		26
EOC Delayed Response	Red		2	5	5	5	7	2	5	2	7	4	3		47
	Green 1, 2, 3, 4		24	24	31	23	13	12	29	20	44	25	16		261
	IHT		0	7	5	3	7	2	3	6	1	5	4		43
	Admission		6	4	8	6	6	2	4	1	3	3	3		46
	Take Home		1	1	0	3	1	0	0	1	0	0	1		8
Other		7	0	3	0	0	3	1	1	0	0	0		15	
<b>EOC TOTAL</b>			<b>44</b>	<b>48</b>	<b>61</b>	<b>52</b>	<b>51</b>	<b>30</b>	<b>58</b>	<b>44</b>	<b>59</b>	<b>53</b>	<b>34</b>		<b>534</b>
<b>Demand Activity (Based on Number of Calls)</b>			<b>67571</b>	<b>71947</b>	<b>69623</b>	<b>73605</b>	<b>67861</b>	<b>67493</b>	<b>71584</b>	<b>71377</b>	<b>81238</b>	<b>70130</b>	<b>62223</b>		<b>774652</b>
<b>% Rate</b>			<b>0.07%</b>	<b>0.07%</b>	<b>0.09%</b>	<b>0.07%</b>	<b>0.08%</b>	<b>0.04%</b>	<b>0.08%</b>	<b>0.06%</b>	<b>0.07%</b>	<b>0.08%</b>	<b>0.05%</b>		<b>0.07%</b>
A&E Attitude	Lack of Care		4	6	2	1	6	3	5	3	2	5	6		43
	Communication Skills		8	8	16	9	4	12	9	20	10	13	5		114
A&E Clinical	Assessment		1	6	7	5	6	11	3	3	4	0	6		52
	Clinical Handover		1	0	0	0	1	0	1	0	0	1	0		4
	Treatment		9	3	3	4	4	6	2	3	1	0	2		37
	Moving & Handling		1	0	3	1	1	5	4	1	0	0	1		17
A&E Operations	Pathways		9	6	8	4	2	0	7	3	2	4	4		49
	Operational Procedures		14	11	13	8	10	3	11	11	6	20	18		125
	Vehicles & Stretchers		0	1	2	1	1	2	2	1	3	3	3		19
	Driving		9	7	8	6	4	4	8	10	5	7	6		74
	Other		0	1	0	2	0	2	1	0	1	0	0		7
<b>A&amp;E TOTAL</b>			<b>56</b>	<b>49</b>	<b>62</b>	<b>41</b>	<b>39</b>	<b>48</b>	<b>53</b>	<b>55</b>	<b>34</b>	<b>53</b>	<b>51</b>		<b>541</b>
<b>Demand Activity (Based on Number of Responses)</b>			<b>58695</b>	<b>62128</b>	<b>59626</b>	<b>61987</b>	<b>58869</b>	<b>58443</b>	<b>60761</b>	<b>62830</b>	<b>68124</b>	<b>61728</b>	<b>54980</b>		<b>668171</b>
<b>% Rate</b>			<b>0.10%</b>	<b>0.08%</b>	<b>0.10%</b>	<b>0.07%</b>	<b>0.07%</b>	<b>0.08%</b>	<b>0.09%</b>	<b>0.09%</b>	<b>0.05%</b>	<b>0.09%</b>	<b>0.09%</b>		<b>0.08%</b>

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	1		2
		South	0	2	0	0	0	0	0	0	0	1	1		4
		Hull & East	0	0	1	0	0	0	0	0	0	0	0		1
		ABL	0	0	0	0	0	0	0	0	0	0	1		1
		CKW	0	0	0	0	0	0	0	0	0	0	1		1
		EOC	0	0	1	0	2	0	0	3	2	2	1		11
	<b>Total</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>2</b>	<b>3</b>	<b>5</b>		<b>20</b>	
	Amber	North	3	0	1	0	1	1	0	0	0	0	0		6
		South	4	0	3	0	2	1	0	2	2	0	0		14
		Hull & East	2	1	2	1	0	1	1	0	0	0	0		8
		ABL	0	1	2	0	0	3	1	1	1	0	1		10
		CKW	2	0	0	2	0	3	0	2	0	0	1		10
		EOC	1	3	5	4	4	1	6	0	8	4	2		38
	<b>Total</b>	<b>12</b>	<b>5</b>	<b>13</b>	<b>7</b>	<b>7</b>	<b>10</b>	<b>8</b>	<b>5</b>	<b>11</b>	<b>4</b>	<b>4</b>		<b>86</b>	
	Yellow	North	4	6	9	7	4	4	8	1	3	4	0		50
South		4	4	7	4	4	7	4	6	3	3	2		48	
Hull & East		5	2	1	6	2	1	6	6	0	0	2		31	
ABL		7	3	7	7	9	5	4	4	7	3	0		56	
CKW		8	8	8	4	5	2	2	6	2	3	1		49	
EOC		27	21	36	24	25	11	23	18	18	16	2		221	
<b>Total</b>	<b>55</b>	<b>44</b>	<b>68</b>	<b>52</b>	<b>49</b>	<b>30</b>	<b>47</b>	<b>41</b>	<b>33</b>	<b>29</b>	<b>7</b>		<b>455</b>		
Green	North	5	4	4	0	4	5	7	5	12	7	7		58	
	South	3	6	6	2	2	3	3	7	2	4	8		46	
	Hull & East	2	4	1	1	2	2	2	8	3	5	8		38	
	ABL	0	4	4	2	3	6	10	5	3	12	9		58	
	CKW	7	4	6	4	1	3	6	0	3	6	8		48	
	EOC	16	23	19	24	20	19	29	23	31	31	29		264	
<b>Total</b>	<b>33</b>	<b>45</b>	<b>40</b>	<b>33</b>	<b>32</b>	<b>38</b>	<b>55</b>	<b>50</b>	<b>47</b>	<b>70</b>	<b>69</b>		<b>512</b>		

Compliments		Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
<b>A&amp;E/EOC TOTAL</b>		<b>64</b>	<b>50</b>	<b>64</b>	<b>33</b>	<b>54</b>	<b>19</b>	<b>0</b>	<b>0</b>	<b>104</b>	<b>132</b>	<b>152</b>		<b>672</b>

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	1	2		14
	Administration Error		A	4	4	5	2	2	7	6	3	2	4	3		42
	Call Handling		J	1	0	1	2	1	4	1	2	0	0	1		13
PTS Operations	Attitude		B	6	3	8	6	8	10	9	6	4	1	9		70
	Driving		I	5	2	2	3	1	5	5	4	2	9	0		38
	Vehicle Condition/Comfort		E	1	0	0	0	0	0	1	0	0	0	0		2
	Non-Attendance/Late to Collect Patient from Home		F H U	4	6	11	15	8	23	19	15	14	17	9		141
	Patient Early/Late for Appointment		T S	5	4	5	3	2	2	3	6	3	4	5		42
	Non-Attendance/Late to Collect Patient from Clinic/Hospital		D G V	11	7	21	8	15	22	26	22	20	15	16		183
	Patient Injury		M N	0	1	2	3	2	2	1	4	0	2	1		18
	Patient Care		O	9	1	4	4	3	4	7	8	5	10	7		62
Vehicle Unsuitable		W	5	3	3	3	4	2	7	2	6	2	5		42	
Time on Vehicle		P	1	2	2	0	0	0	1	0	2	3	1		12	
PTS Other				1	1	0	1	0	2	0	0	1	0	0		6
<b>SUB TOTAL 4Cs</b>				<b>55</b>	<b>34</b>	<b>67</b>	<b>50</b>	<b>47</b>	<b>84</b>	<b>88</b>	<b>72</b>	<b>61</b>	<b>68</b>	<b>59</b>		<b>685</b>
PTS Service-to-Service				35	16	48	20	41	59	-	58	56	49	76		458
<b>TOTAL</b>				<b>90</b>	<b>50</b>	<b>115</b>	<b>70</b>	<b>88</b>	<b>143</b>	<b>88</b>	<b>130</b>	<b>117</b>	<b>117</b>	<b>135</b>		<b>1143</b>
Demand Activity				92795	92326	95094	101675	86516	97011	97471	87591	88642	89688	88089		1016898
<b>% Rate</b>				<b>0.10%</b>	<b>0.05%</b>	<b>0.12%</b>	<b>0.07%</b>	<b>0.10%</b>	<b>0.15%</b>	<b>0.09%</b>	<b>0.15%</b>	<b>0.13%</b>	<b>0.13%</b>	<b>0.15%</b>		<b>0.1%</b>

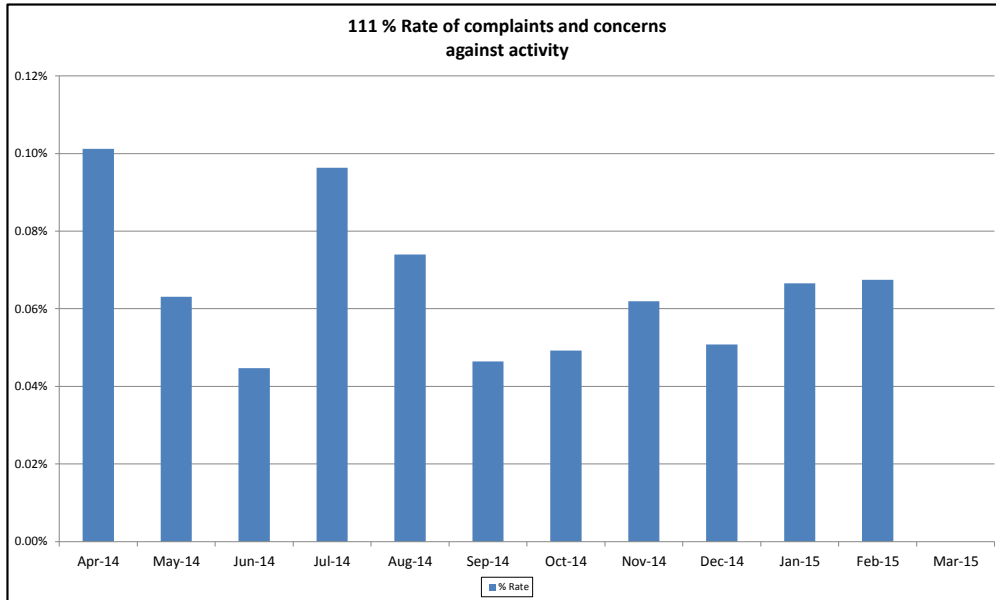
Grade Profile			Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	
Complaints, Concerns & Comments (Not Service to Service)	Red	North	0	0	0	0	0	0	0	0	0	0	0	0	0	
		South	0	0	0	0	0	0	0	0	0	0	0	0	0	
		East	0	0	0	0	0	0	0	0	0	0	0	0	0	
		West	0	0	0	0	0	0	0	0	0	0	0	0	0	
		<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
	Amber	North	1	0	0	0	0	0	0	0	0	0	0	0	0	1
		South	1	0	0	0	0	0	0	0	1	0	0	1	0	3
		East	0	0	0	2	0	2	0	0	0	0	0	0	0	4
		West	0	2	1	1	2	0	1	4	0	2	0	0	0	13
		<b>Total</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>5</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>21</b>
	Yellow	North	0	1	1	0	0	2	3	1	1	1	2	0	0	11
		South	2	1	3	2	2	0	1	5	1	3	1	1	0	21
		East	2	0	2	5	7	10	5	4	1	1	1	1	0	38
		West	8	6	11	11	6	7	14	8	7	3	4	4	0	85
		<b>Total</b>	<b>12</b>	<b>8</b>	<b>17</b>	<b>18</b>	<b>15</b>	<b>19</b>	<b>23</b>	<b>18</b>	<b>10</b>	<b>9</b>	<b>6</b>	<b>6</b>	<b>0</b>	<b>155</b>
	Green	North	9	3	6	1	6	10	5	7	1	5	7	7	0	60
		South	3	4	7	6	4	9	9	11	10	7	8	8	0	78
		East	10	8	13	10	10	24	15	6	8	16	10	10	0	130
		West	20	9	23	12	10	19	37	25	30	29	27	27	0	241
		<b>Total</b>	<b>42</b>	<b>24</b>	<b>49</b>	<b>29</b>	<b>30</b>	<b>62</b>	<b>66</b>	<b>49</b>	<b>49</b>	<b>57</b>	<b>52</b>	<b>52</b>	<b>0</b>	<b>509</b>

Compliments			Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
<b>PTS TOTAL</b>			<b>7</b>	<b>1</b>	<b>5</b>	<b>0</b>	<b>5</b>	<b>6</b>	<b>1</b>	<b>0</b>	<b>12</b>	<b>10</b>	<b>9</b>		<b>56</b>

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	2	4		26
Clinical	8	5	7	7	8	7	4	9	15	8	9		87
Operations	8	6	2	1	5	11	7	7	12	17	9		85
Sub Total	16	12	12	13	15	21	13	17	30	27	22		198
HCP Complaints & Concerns	102	65	37	93	67	27	43	60	48	60	55		657
GRAND TOTAL	118	77	49	106	82	48	56	77	78	87	77		855
Call Activity	116,583	122,083	109,737	110,065	110,896	103,393	113,758	124,394	153,497	130,709	114,146		1,309,261
% RATE	0.10%	0.06%	0.04%	0.10%	0.07%	0.05%	0.05%	0.06%	0.05%	0.07%	0.07%		0.07%

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	1	0		9
Clinical	6	5	5	11	8	8	11	6	7	6	7		80
Operations	2	7	5	2	6	9	4	5	6	7	11		64
Sub Total	9	12	13	13	14	18	18	11	13	14	18		153
HCP Complaints & Concerns	1	4	5	2	3	3	6	6	1	5	2		38
GRAND TOTAL	10	16	18	15	17	21	24	17	14	19	20		191
Call Activity	24337	25058	21072	19548	21328	18707	20530	24471	27619	23131	19702		245503
% RATE	0.04%	0.06%	0.09%	0.08%	0.08%	0.11%	0.12%	0.07%	0.05%	0.08%	0.10%		0.08%



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	8	3		99
LCD	1	1	0	0	0	3	1	1	3	0	5		15



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	0	0		9
	2 - 24 Working Days	3	1	2	6	2	2	5	7	6	3	9		46
	>25 Working Days	17	10	9	8	4	5	4	5	1	5	7		75
South	Within 1 Working Day	1	1	0	3	0	1	0	2	2	0	0		10
	2 - 24 Working Days	6	2	2	7	3	2	1	3	9	2	3		40
	>25 Working Days	22	8	9	6	5	5	9	2	4	5	5		80
Hull & East	Within 1 Working Day	0	0	1	0	0	0	0	0	0	0	1		2
	2 - 24 Working Days	3	2	2	4	1	1	1	3	4	1	2		24
	>25 Working Days	10	7	4	1	7	3	3	5	10	2	2		54
ABL	Within 1 Working Day	0	0	0	2	0	0	0	0	1	0	1		4
	2 - 24 Working Days	9	2	4	2	2	7	9	9	5	3	8		60
	>25 Working Days	11	6	4	9	7	5	5	6	4	8	6		71
CKW	Within 1 Working Day	5	1	0	1	0	0	1	1	0	1	1		11
	2 - 24 Working Days	10	6	9	6	2	5	2	3	5	2	5		55
	>25 Working Days	19	9	3	7	8	1	5	4	3	2	3		64
EOC	Within 1 Working Day	6	4	3	2	0	0	0	3	2	4	0		24
	2 - 24 Working Days	3	6	3	6	11	4	4	21	6	12	19		95
	>25 Working Days	35	34	42	53	41	47	27	35	35	42	34		425

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	0	0		4
	2 - 24 Working Days	1	6	1	4	0	3	5	4	2	2	1		29
	>25 Working Days	4	3	3	3	0	3	5	5	0	0	4		30
South	Within 1 Working Day	7	0	0	0	1	0	2	1	0	1	0		12
	2 - 24 Working Days	3	4	3	5	2	3	2	2	14	10	4		52
	>25 Working Days	8	1	3	5	5	3	5	7	3	0	6		46
East	Within 1 Working Day	1	0	0	1	0	4	3	2	0	1	0		12
	2 - 24 Working Days	3	5	3	8	13	7	21	10	8	6	9		93
	>25 Working Days	3	7	4	6	4	6	11	9	6	2	5		63
West	Within 1 Working Day	3	2	0	2	0	2	0	0	0	2	2		15
	2 - 24 Working Days	18	16	7	10	14	8	15	30	20	15	19		172
	>25 Working Days	29	10	10	23	10	8	9	24	17	19	18		177

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	1	1		21
EOC	1	2	0	2	1	7	0	0	2	2	5		22
PTS	0	3	1	1	2	0	5	0	0	2	3		17
111	0	3	1	1	0	2	2	0	2	1	0		12

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	0	1		5
Referral accepted	0	0	0	1	0	1	0	0	0	0	1		3
Referral rejected	0	0	0	0	0	0	0	0	0	0	0		0
Case upheld	0	0	0	0	0	0	0	0	0	0	0		0
Case not upheld	0	0	0	0	0	1	0	0	0	0	0		1
Outstanding	0	0	0	3	0	0	0	0	1	0	1		5

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	0	3		4
Referral accepted	0	0	0	0	0	0	0	0	0	0	3		3
Referral rejected	0	0	0	0	0	0	0	0	0	0	0		0
Case upheld	0	0	0	0	0	0	0	0	0	0	0		0
Case not upheld	0	0	0	0	0	0	0	0	0	0	0		0
Outstanding	0	0	0	0	0	0	0	0	1	0	0		1

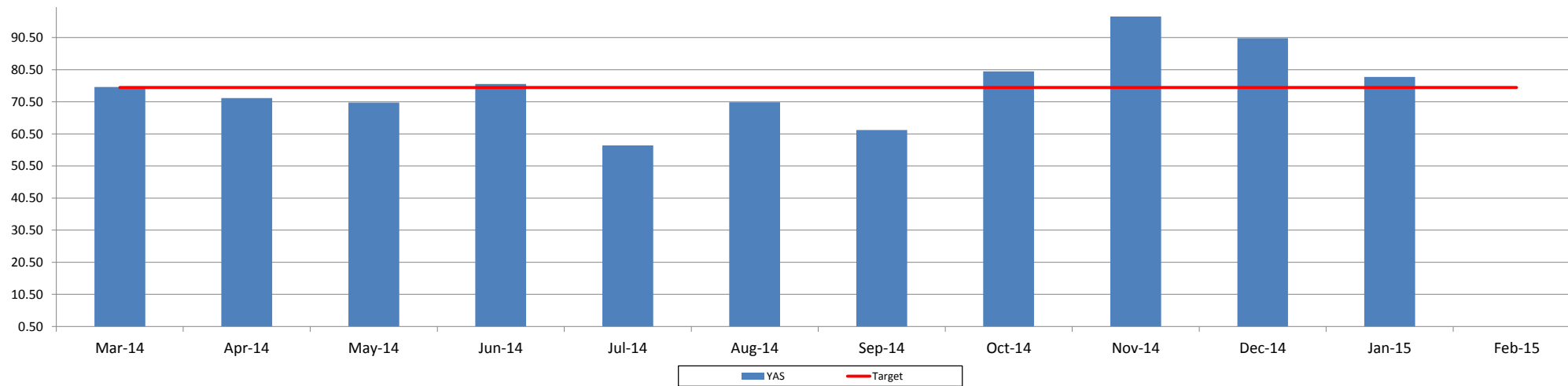
Ombudsman Referrals - PTS													
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD
Referral notified	0	0	0	0	0	0	0	0	0	0	0		0
Referral accepted	0	0	0	0	0	0	0	0	0	0	0		0
Referral rejected	0	0	0	0	0	0	0	0	0	0	0		0
Case upheld	0	0	0	0	0	0	0	0	0	0	0		0
Case not upheld	0	0	0	0	0	0	0	0	0	0	0		0
Outstanding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

A&E Patient Experience Survey

	YTD RAG	GREEN
↑	MTD RAG	GREEN

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



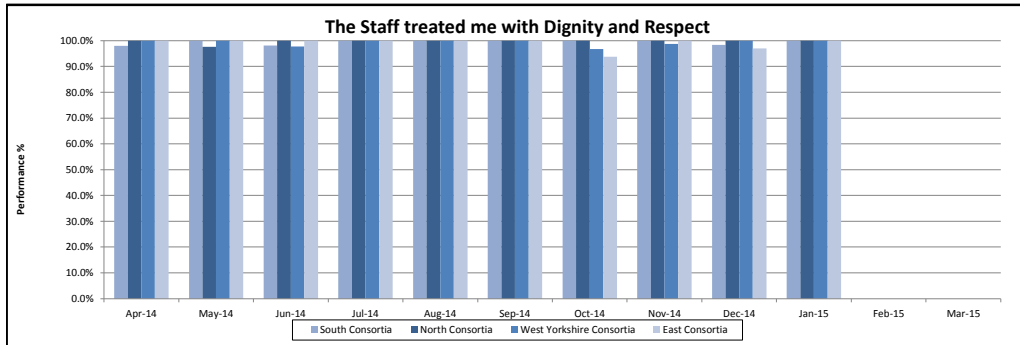
Overall Service	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15
North Yorkshire CBU	72.70	61.30	83.33	83.33	68.75	90.91	93.75	74.07	100.00	95.65	94.74	
East Yorkshire CBU	89.50	78.60	60.00	86.67	68.75	58.33	50.00	85.71	90.00	92.31	86.49	
Calderdale, Kirklees & Wakefield CBU	82.10	82.10	84.62	80.00	77.27	58.82	72.73	82.76	100.00	96.15	91.43	
Leeds, Bradford & Airedale CBU	70.00	67.60	35.71	84.62	62.50	75.00	68.00	94.12	91.30	89.47	75.76	
South Yorkshire CBU	65.40	83.30	69.70	72.22	52.00	79.17	78.13	81.40	98.33	86.49	71.79	
Unknown Area	82.10	41.20	70.97	71.43	36.11	65.79	21.88	56.25	96.43	83.33	53.33	
<b>YAS</b>	<b>75.10</b>	<b>71.70</b>	<b>70.29</b>	<b>76.03</b>	<b>56.91</b>	<b>70.34</b>	<b>61.73</b>	<b>80.00</b>	<b>97.06</b>	<b>90.37</b>	<b>78.24</b>	
<b>YAS variance to previous Month</b>	<b>5.60</b>	<b>-3.40</b>	<b>-1.44</b>	<b>5.74</b>	<b>-19.12</b>	<b>13.43</b>	<b>-8.61</b>	<b>18.27</b>	<b>17.06</b>	<b>-6.69</b>	<b>-12.13</b>	

Please note: This will be 1 month in arrears

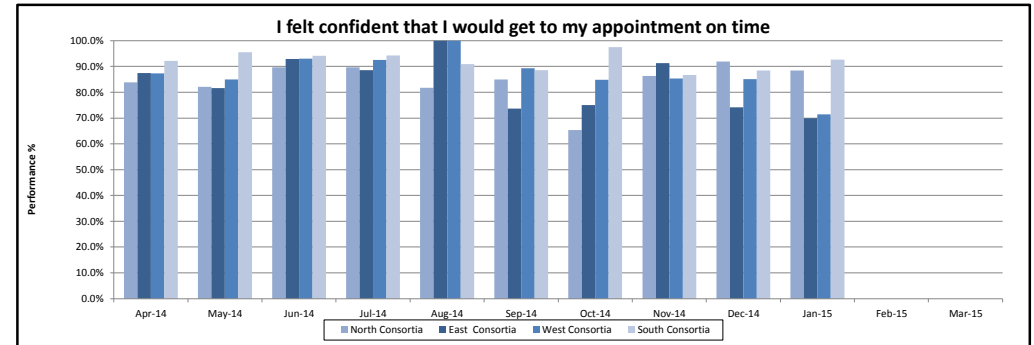
In November 2012 the rating scale used for this question was changed from 1 to 10 to a descriptive scale (extremely likely, likely, neither likely nor unlikely, unlikely, not at all, don't know)

PTS Patient Experience Survey

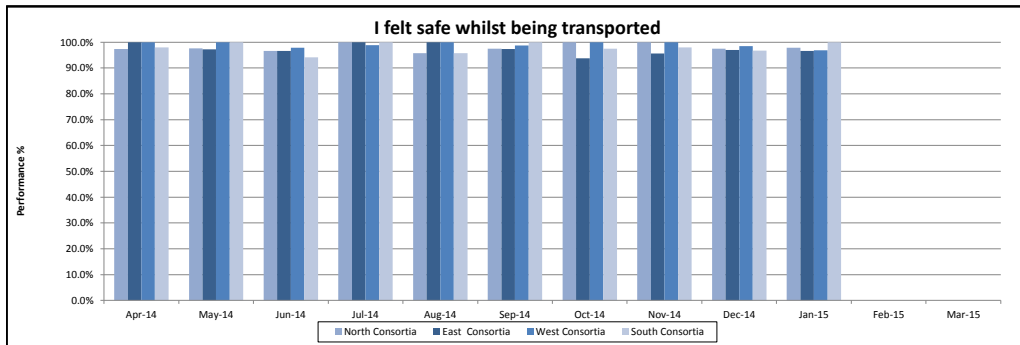
	YTD RAG	N/A
←	MTD RAG	N/A



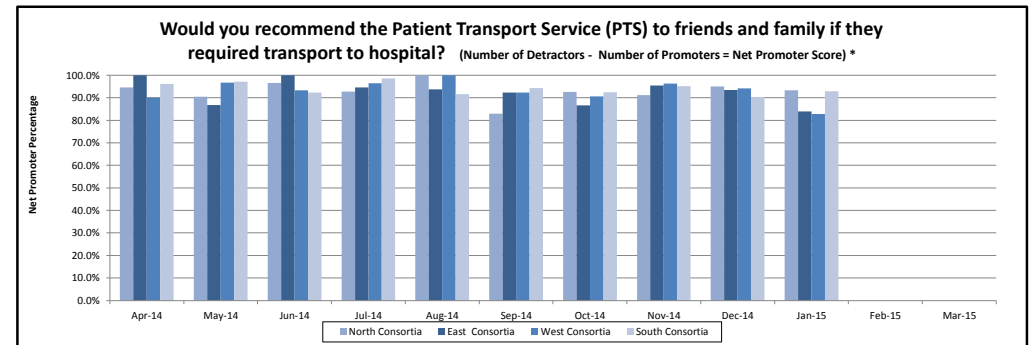
	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
North Consortia	100.0%	97.6%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		
East Consortia	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	93.8%	100.0%	97.0%	100.0%		
West Yorkshire Consortia	100.0%	100.0%	97.7%	100.0%	100.0%	100.0%	96.8%	98.8%	100.0%	100.0%		
South Consortia	98.0%	100.0%	98.1%	100.0%	100.0%	100.0%	100.0%	100.0%	98.4%	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%	91.9%	88.4%		
East Consortia	87.5%	81.6%	92.9%	88.6%	100.0%	73.7%	75.0%	91.3%	74.2%	70.0%		
West Consortia	87.3%	85.0%	93.0%	92.5%	100.0%	89.3%	84.8%	85.4%	85.1%	71.4%		
South Consortia	92.2%	95.5%	94.2%	94.3%	90.9%	88.6%	97.5%	86.7%	88.5%	92.6%		



	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%	97.5%	97.8%		
East Consortia	100.0%	97.2%	96.6%	100.0%	100.0%	97.4%	93.8%	95.7%	97.0%	96.6%		
West Consortia	100.0%	100.0%	97.8%	98.8%	100.0%	98.7%	100.0%	100.0%	98.5%	96.9%		
South Consortia	98.0%	100.0%	94.1%	100.0%	95.8%	100.0%	97.5%	98.0%	96.7%	100.0%		



\* 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	94.6%	90.5%	96.6%	92.7%	100.0%	82.9%	92.6%	91.1%	95.0%	93.3%		
East Consortia	100.0%	86.8%	100.0%	94.6%	93.8%	92.3%	86.7%	95.5%	93.5%	83.9%		
West Consortia	90.0%	96.8%	93.3%	96.4%	100.0%	92.3%	90.6%	96.3%	94.2%	82.8%		
South Consortia	96.1%	97.1%	92.3%	98.6%	91.7%	94.3%	92.5%	95.1%	90.3%	92.9%		

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

Registration Regulations & Outcomes

YTD RAG	GREEN
MTD RAG	GREEN

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	40	59	
Number of cases due this month and responded to in time	22	21	25	28	21	16	30	17	6	6	46	
Number of cases due this month and responded to out of time	2	7	5	1	2	7	5	7	4	27	11	
Number of out of time (prior to this month) cases responded to this month	3	1	0	0	0	0	1	0	0	16	6	
Number of out of time cases still open	1	0	0	0	0	1	0	3	15	11	7	
Number of internal reviews open	4	9	4	2	1	1	0	0	1	1	3	
Number of internal reviews closed this month	0	2	7	3	1	1	2	0	1	1	4	
Information Commissioner (IC) Referrals	0	0	0	1	1	0	0	0	0	0	0	
Outcome of IC referral - Upheld	0	0	0	0	0	0	0	0	0	0	0	
Outcome of IC referral - not upheld	0	0	0	0	0	1	0	1	0	0	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	56	618	96%	98%
Police requests	105	1373		
Witness Statements / Police Interviews	25	348		
	This Month	Year to Date		
Coroner Requests	24	341		

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%	81%	81%	

Comments

**Legal Services**

A large backlog built up in December 2014 due to the sickness of both the temporary administrator and responsible manager. During January 2015 significant progress has been made with recovering the backlog and a total for 49 responses were sent out during the month.

**Freedom of Information (FOI) Requests**

In February there were 59 requests due to be responded to. This is at least 15 more in one month than we have ever received before. The increase was substantially due to the campaign by Unite the Union as well as the focused media attention on emergency services. The number of requests received has since decreased.

- Themes from the January requests were:
- handover times at A&E
  - costs of private/third-sector ambulance resources
  - cost of settling legal claims.

Out of the 11 requests due in February and responded out of time, 8 of them were only one day late.



# 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	10/10	Sickness / Absence	<p>There was a slight improvement in absence compared to the previous month with February absence at 6.57%, still some way above the Trust's 5% target.</p> <p>Highest levels of absence were in the Ancillary Division (10.34%) NHS 111 (7.66%) and A&amp;E Operations (6.73%) .</p> <p>In respect of both NHS111 and A&amp;E Operations, this represents a significant improvement compared to previous months.</p> <p>Work continues with individual Associate Directors to bring about further improvement.</p>	All Directors & Managers	Ongoing	RED
AMBER	4.1	09/10	PDR's	<p>A revised PDR management system has been put in place which provides managers with information on the number of due PDRs for completion. As a result, further incremental improvement can be noted with the completion rate now at 72.34%.</p> <p>The Clinical and Finance and Performance Directorates show the highest levels of non-compliance.</p> <p>Work to address quality concerns is on -going.</p>	All Directors & Managers	Ongoing	AMBER

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

There was a slight improvement in absence compared to the previous month with February absence at 6.57%, still some way above the Trust's 5% target.

Highest levels of absence were in the Ancillary Division (10.34%) NHS 111 (7.66%) and A&E Operations (6.73%) .

In respect of both NHS111 and A&E Operations, this represents a significant improvement compared to previous months.

Work continues with individual Associate Directors to bring about further improvement.

A revised PDR management system has been put in place which provides managers with information on the number of due PDRs for completion. As a result, further incremental improvement can be noted with the completion rate now at 72.34%.

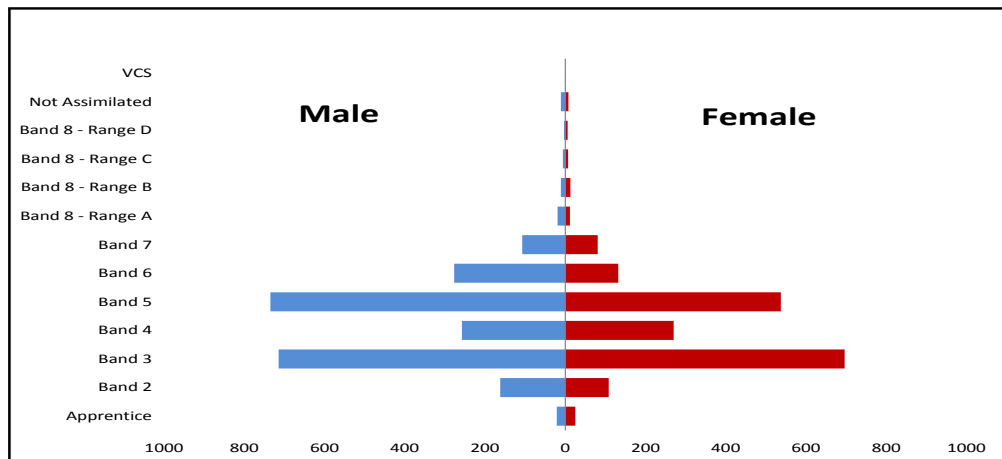
The Clinical and Finance and Performance Directorates show the highest levels of non-compliance.

Work to address quality concerns is on -going.



February 2015 - YORKSHIRE AMBULANCE SERVICE SCORECARD - DATA UP TO 28 February 2015									
Indicator	Current Data - Feb-15		Previous Data – Jan 15		Target	Performance vs target	Trend	Yearly Comparison	
	Measure	Period	Measure	Period				Measure	Period
Total FTE in Post	4220.01	Feb-15	4227.30	Jan-15	4306			4112.40	Feb-14
Equality & Diversity	5.11% fte	Feb-15	5.06% fte	Jan-15	14.20%			5.06% fte	Feb-14
	5.40% hcount		5.37% hcount					5.11% hcount	
Sickness Absence	6.57%	Feb-15	7.09%	Jan-15	5.00%			6.50%	Feb-14
	6.57%	Mar 14 Feb-15	6.50%	Feb 14 Jan 15				5.86%	Mar 13 Feb-14
Turnover	10.31% fte	Feb-15	10.12% fte	Jan-15	7.76% Amb Trust Aver			8.71% fte	Feb-14
	11.63% hcount		11.44% hcount					10.43% hcount	
Stability	90.42% fte	Feb-15	90.78% fte	Jan-15	92.22 Amb Trust Aver			92.25 fte	Feb-14
	91.52% hcount		91.77% hcount					92.81 hcount	
Current PDRs	72.34%	Feb-15	70%	Jan-15	75%			73.63%	Feb-14
Stat & Mand Workbook	90.72% (combined)	Feb-15	89.40% (combined)	Jan-15	85%			90% (combined)	Feb-14
	89.76%	Feb-15	88.30%	Jan-15				46.03% (2013-15)	
Overtime	£836,387.60	Feb-15	£1,034,018.47	Jan-15				£785,938.15	Feb-14
	£11,508,805.13	Mar 14 Feb-15	£11,458,355.68	Feb 14 Jan 15				£8,954,273.92	Mar 13 Feb-14

Staff in Post by Pay Band

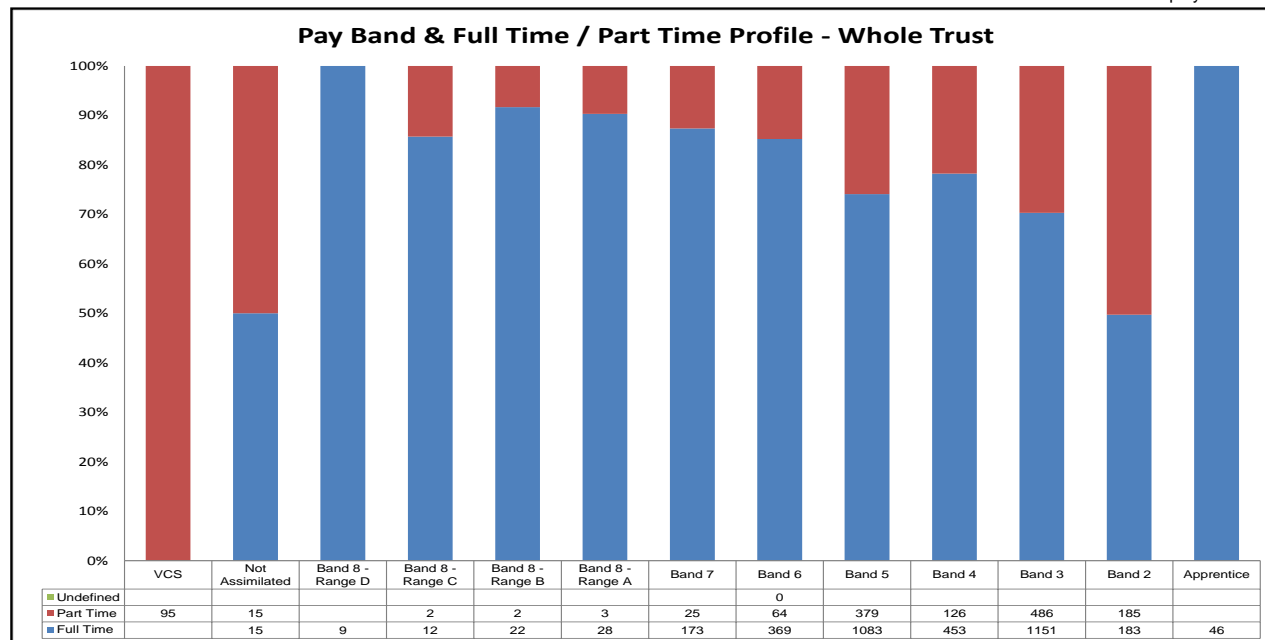


The graph opposite and the table and graph below shows all staff on 28 February 2015.

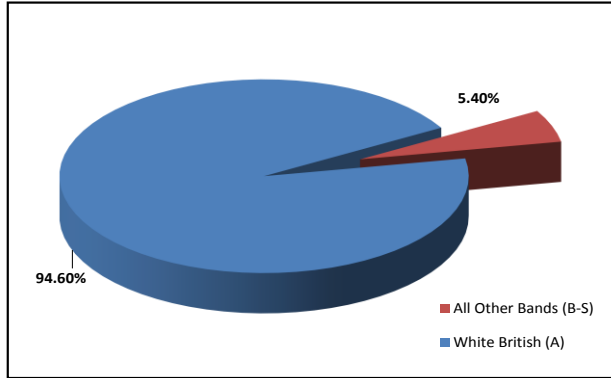
AFC Pay Band	HC	F.T.E	HC%	FTE%
Apprentice	46	46.00	0.93%	1.09%
Band 1	95	0.00	1.93%	0.00%
Band 2	368	270.53	7.47%	6.41%
Band 3	1637	1411.03	33.23%	33.44%
Band 4	579	527.86	11.75%	12.51%
Band 5	1462	1272.19	29.68%	30.15%
Band 6	433	409.03	8.79%	9.69%
Band 7	198	188.44	4.02%	4.47%
Band 8 - Range A	31	30.41	0.63%	0.72%
Band 8 - Range B	24	23.53	0.49%	0.56%
Band 8 - Range C	14	13.20	0.28%	0.31%
Band 8 - Range D	9	9.00	0.18%	0.21%
Not Assimilated	30	18.79	0.61%	0.45%
<b>Grand Total</b>	<b>4926</b>	<b>4220.01</b>	<b>100.0%</b>	<b>100%</b>

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.



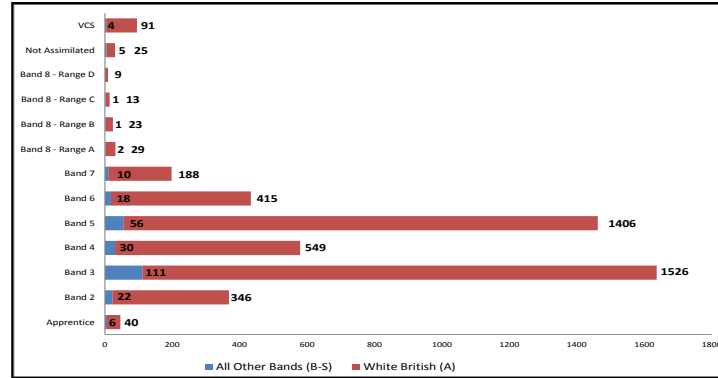
Ethnicity Profile



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	4660	4004.57	94.60%	94.89%
B White - Irish	19	15.95	0.39%	0.38%
C White - Any other White Background	37	33.74	0.75%	0.80%
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	6	4.98	0.12%	0.12%
H Asian or Asian British - Indian	25	20.46	0.51%	0.48%
J Asian or Asian British - Pakistani	94	69.81	1.91%	1.65%
K Asian or Asian British Bangladeshi	5	2.43	0.10%	0.06%
L Asian or Asian British	4	2.53	0.08%	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	8.92	0.20%	0.21%
P Black or Black British	4	3.40	0.08%	0.08%
R Chinese	4	3.60	0.08%	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			0.00%	0.00%
<b>Grand Total</b>	<b>4926</b>	<b>4220.02</b>	<b>100%</b>	<b>100%</b>

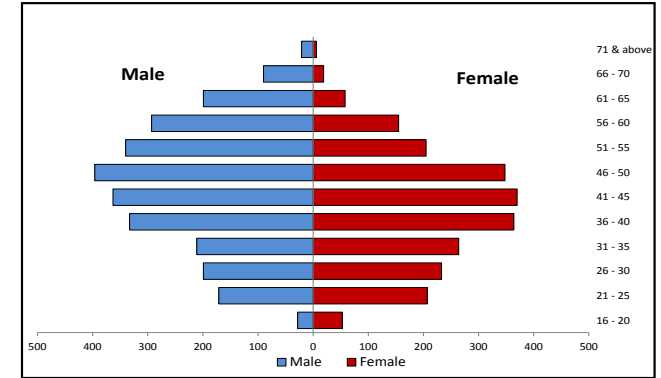
Ethnicity Profile by Pay Band



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	40	46	13.04%
Band 1	22	346	368	5.98%
Band 2	111	1526	1637	6.78%
Band 3	30	549	579	5.18%
Band 4	56	56	112	100.00%
Band 5	18	415	433	4.16%
Band 6	10	188	198	5.05%
Band 7	2	29	31	6.45%
Band 8 - Range A	1	23	24	4.17%
Band 8 - Range B	1	13	14	7.14%
Band 8 - Range C		9	9	0.00%
Band 8 - Range D	5	25	30	16.67%
Not Assimilated	4	91	95	4.21%
<b>Grand Total</b>	<b>266</b>	<b>3254</b>	<b>3520</b>	<b>7.56%</b>

Age & Gender Profile

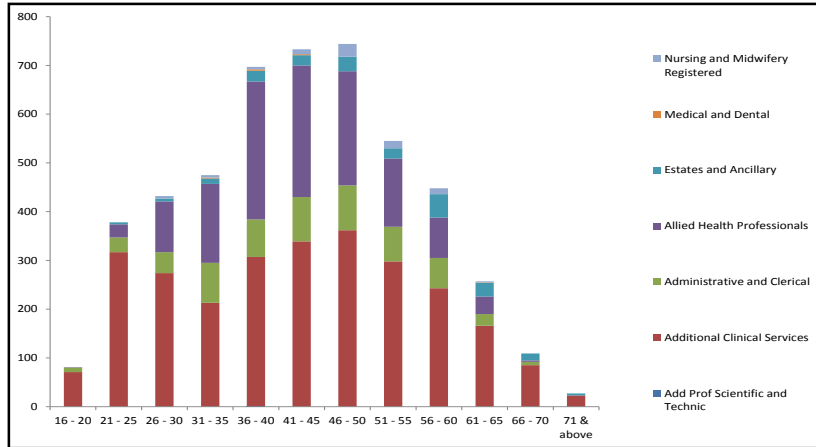


The chart above and table below show the age and gender breakdown throughout the Trust

Age Group	HC	FTE	HC %	FTE %
16 - 20	81	63.81	1.64%	1.51%
21 - 25	378	328.59	7.67%	7.79%
26 - 30	432	385.45	8.77%	9.13%
31 - 35	475	419.32	9.64%	9.94%
36 - 40	697	610.31	14.15%	14.46%
41 - 45	733	654.83	14.88%	15.52%
46 - 50	744	678.8	15.10%	16.09%
51 - 55	545	499.17	11.06%	11.83%
56 - 60	448	381.43	9.09%	9.04%
61 - 65	257	158.67	5.22%	3.76%
66 - 70	109	35.33	2.21%	0.84%
71 & above	27	4.3	0.55%	0.10%
<b>Grand Total</b>	<b>4926</b>	<b>4220.01</b>	<b>100%</b>	<b>100%</b>

Age & Gender Profile

Age Profile by Staff Group



The graph opposite shows the staff group breakdown within a 5 year age bracket using FTE.

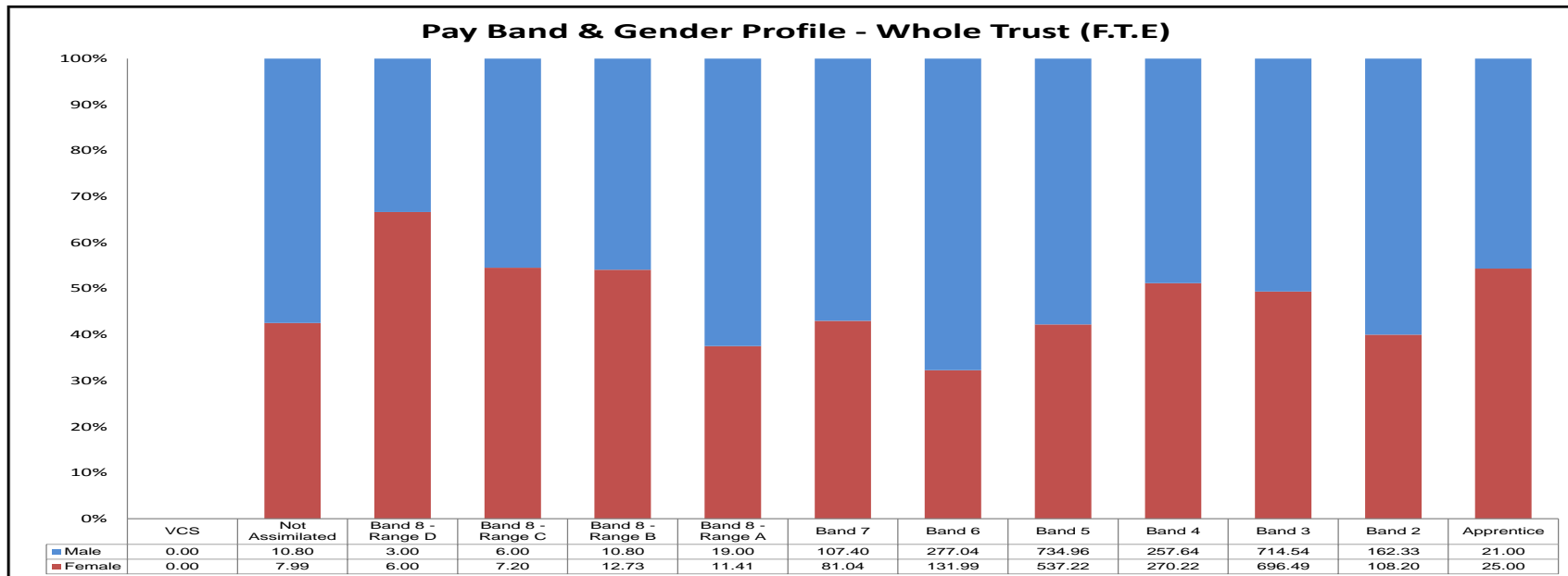
This data is tabulated below in 20 year banding per staff group.

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	271.08	975.85	954.43	34.63	2235.99
Administrative and Clerical	31.50	265.17	246.24	4.37	547.28
Allied Health Professionals	16.00	707.89	479.32	3.00	1206.21
Estates and Ancillary	3.00	49.68	106.27	10.71	169.66
Medical and Dental		2.40		0.80	3.20
Nursing and Midwifery Registered		16.02	39.91	1.00	56.93
<b>Grand Total</b>	<b>321.58</b>	<b>2017.74</b>	<b>1826.17</b>	<b>54.51</b>	<b>4220.00</b>

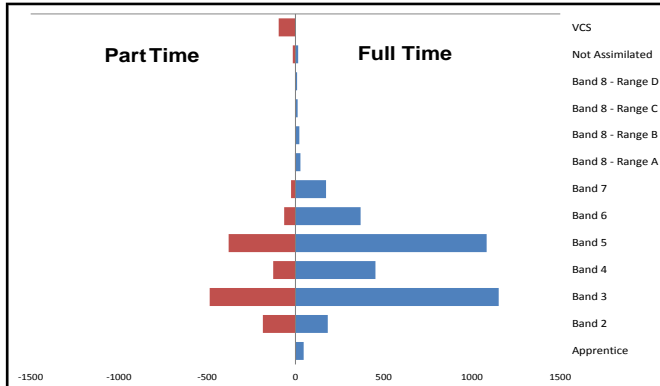
Gender 100% Profile by Pay Band

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

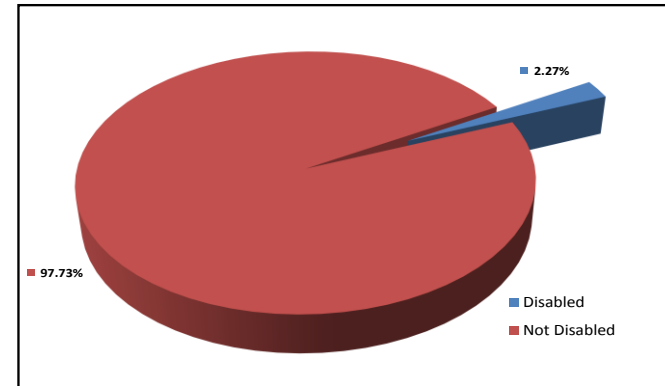
Gender	Employee Category	HC	FTE	FTE %
Female		2822.00	1895.50	100%
	Full time	1389.00	1389.00	73.28%
	Part Time	893.00	506.50	26.72%
Male		2644.00	2324.51	100%
	Full Time	2155.00	2155.00	92.71%
	Part time	489.00	169.51	7.29%

AFC Pay Band	Female	Male	Grand Total
Apprentice	25	21	46
Band 1	11	84	95
Band 2	165	203	368
Band 3	848	789	1637
Band 4	304	275	579
Band 5	645	817	1462
Band 6	148	285	433
Band 7	87	111	198
Band 8 - Range A	12	19	31
Band 8 - Range B	13	11	24
Band 8 - Range C	8	6	14
Band 8 - Range D	6	3	9
Not Assimilated	10	20	30
<b>Grand Total</b>	<b>2282</b>	<b>2644</b>	<b>4926</b>

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	46		46
Band 1		95	95
Band 2	183	185	368
Band 3	1151	486	1637
Band 4	453	126	579
Band 5	1083	379	1462
Band 6	369	64	433
Band 7	173	25	198
Band 8 - Range A	28	3	31
Band 8 - Range B	22	2	24
Band 8 - Range C	12	2	14
Band 8 - Range D	9		9
Not Assimilated	15	15	30
<b>Grand Total</b>	<b>3544</b>	<b>1382</b>	<b>4926</b>

Disability Profile



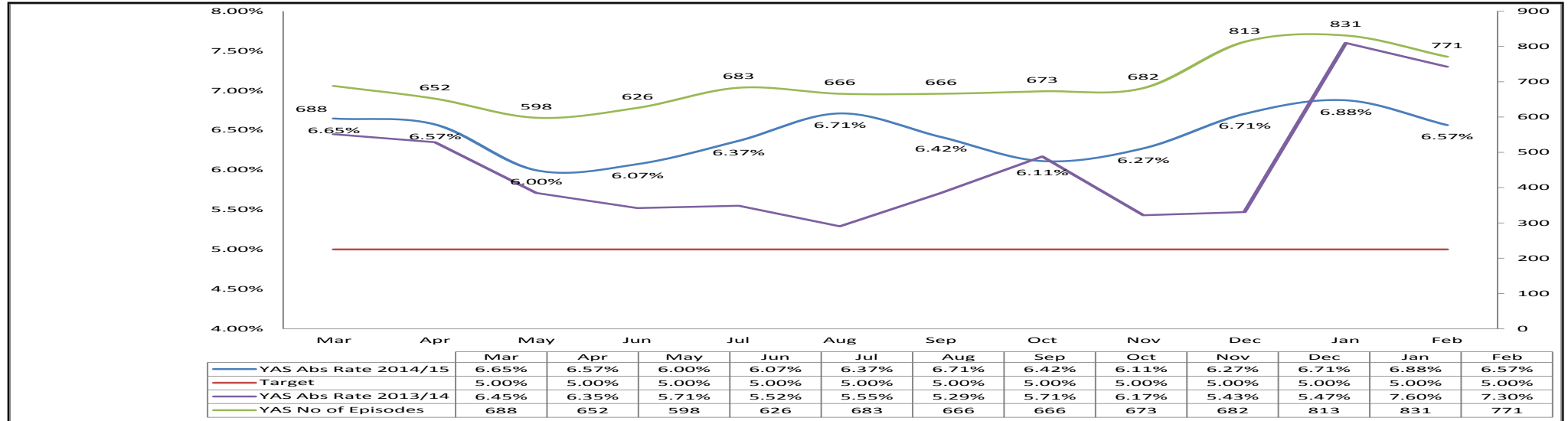
The pie chart above shows the disability profile by headcount of all staff, while the table below shows disability profile by headcount and FTE.

Disability	Head Count	FTE	Headcount %	FTE %
Disabled	112	102.94	2.27%	2.44%
Not Disabled	4814	4117.07	97.73%	97.56%
<b>Grand Total</b>	<b>4926</b>	<b>4220.01</b>	<b>100%</b>	<b>100%</b>

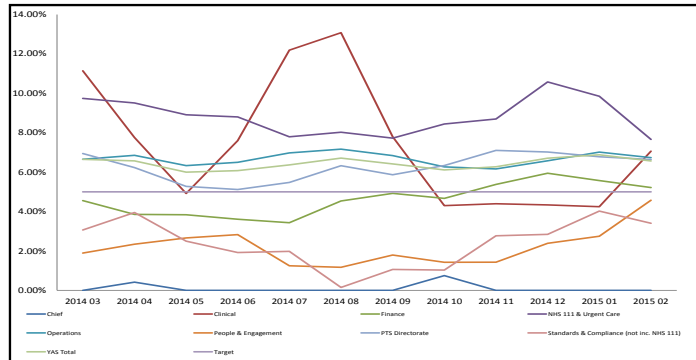
Sickness Absence

EWI

Sickness Absence Rates – 12 month trend analysis



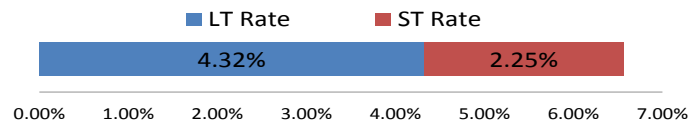
Sickness Absence Rates – Directorate 12 month trend



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 03	0.00%	11.14%	4.55%	9.74%	6.65%	1.89%	3.07%	6.65%	5.00%
2014 04	0.42%	7.76%	3.85%	9.51%	6.85%	2.34%	3.95%	6.57%	5.00%
2014 05	0.00%	4.92%	3.83%	8.91%	6.33%	2.66%	2.49%	6.00%	5.00%
2014 06	0.00%	7.60%	3.61%	8.80%	6.50%	2.83%	1.92%	6.07%	5.00%
2014 07	0.00%	12.19%	3.43%	7.79%	6.97%	1.25%	1.98%	6.37%	5.00%
2014 08	0.00%	13.07%	4.54%	8.03%	7.16%	1.17%	0.15%	6.71%	5.00%
2014 09	0.00%	7.80%	4.92%	7.72%	6.84%	1.79%	1.06%	6.42%	5.00%
2014 10	0.75%	4.30%	4.67%	8.44%	6.27%	1.43%	1.03%	6.11%	5.00%
2014 11	0.00%	4.39%	5.38%	8.70%	6.16%	1.43%	2.77%	6.27%	5.00%
2014 12	0.00%	4.34%	5.95%	10.58%	6.57%	2.39%	2.84%	6.71%	5.00%
2015 01	0.00%	4.25%	5.57%	9.85%	7.02%	2.75%	4.02%	6.88%	5.00%
2015 02	0.00%	7.06%	5.22%	7.66%	6.73%	4.57%	3.40%	6.57%	5.00%

LT / ST Sickness Absence Trust Total



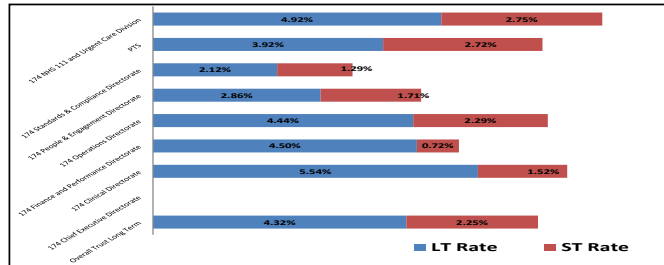
The graph opposite shows January 2015 Long Term & Short Term sickness absence rate for the whole trust.

The trust sickness rate for January is 6.57% which consists of 4.32% long term (28 days or more) and 2.25% short term.

Sickness Absence EWI

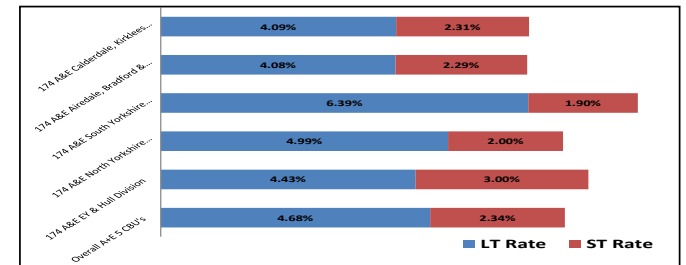
2015 02	Absence (FTE)	Available (FTE)	% Absence rate (FTE)	Calendar Days Absent	No of Episodes
174 Chief Executive Directorate	0	470.4	0.00%	0	0
174 Clinical Directorate	102	1444.11	0.07%	100	6
174 Finance and Performance Directorate	431.39	8,266.96	0.05%	493	26
174 Operations Directorate	5,058.46	75,132.22	0.07%	5459	411
174 PTS Directorate	1,343.89	20,235.47	0.07%	1473	121
174 People & Engagement Directorate	125.4	2,742.73	0.05%	131	8
174 Standards & Compliance Directorate	45	1,322.32	0.03%	45	3
174 NHS111 and Urgent Care	634.2	8,276.93	0.08%	853	80
174 Yorkshire Ambulance Service Trust	7,740.33	117,891.14	6.57%	8,554.00	654.00

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.

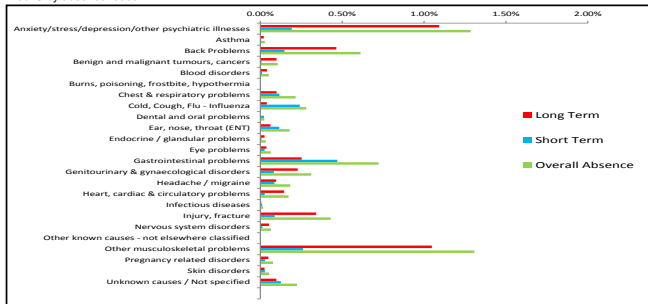
LT/ST Sickness Absence Analysis by Operations CBU



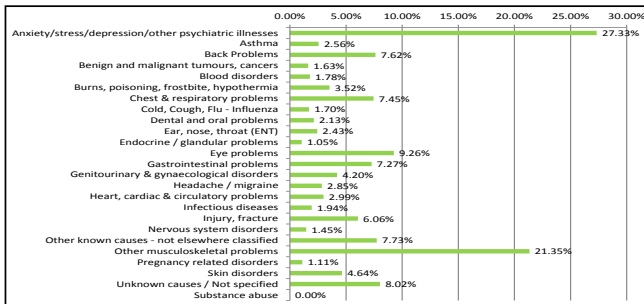
The graph above shows our LT/ST Sickness Absence Analysis for our 5 A+E CBU areas

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

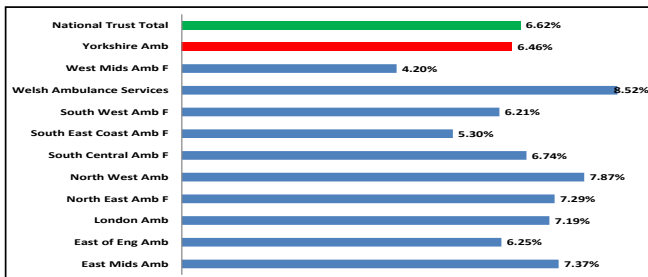
The graph below shows the split of Long and Short Term sickness absence rates for all Directorates for the period Mar14 – Feb15 by absence reason.



The table below shows the absence reason as a percentage of 100 for February 2015. We can see that the bulk of absence is in the areas of Stress, Musculo skeletal, Back and Gastro.



Benchmarking Information – November 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 November 2014 is 6.62% 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 6.46%.

**Occupational Health - Key Performance Indicators (KPI)**

Please note the information for this section is for January 2015 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 January 2015.

This indicates where we currently sit for the following; Employment Health Screenings (100%), Management Referral Appointment Lead Time (92%) and Report Return Lead Time (94%).

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
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%
December	61	61	0	100%	77	73	4	95%	75	2	97%
January	119	119	0	100%	116	113	3	97%	105	11	91%

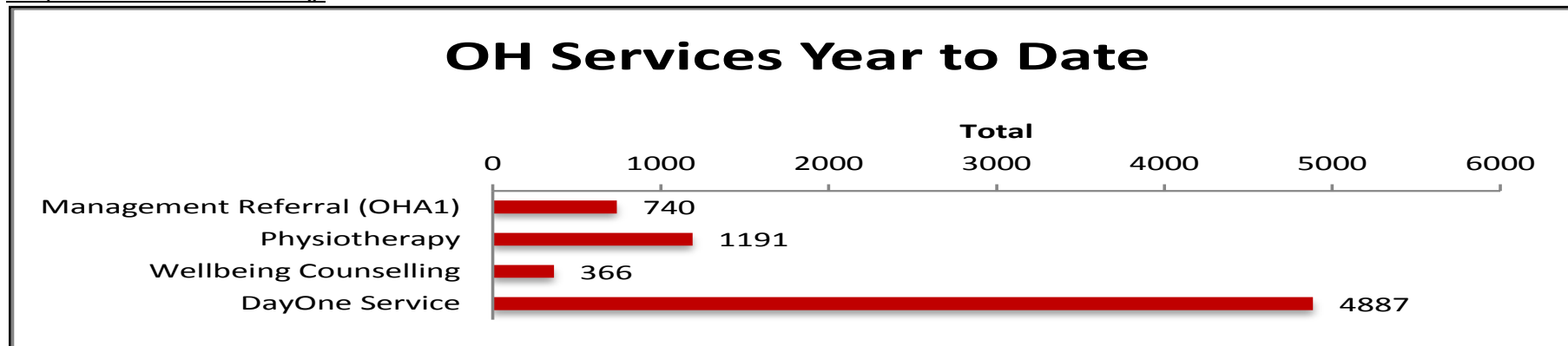
**Occupational Health - DNA and Cancelled OH Service Appts**

Jan-15	Cancelled With Charge	Did Not Attend (DNA)	Grand Total	Month
No Of Staff	9	31	40	January
No Of Staff	7	30	37	December
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

The table opposite indicates the volume of staff that has either 'Cancelled' or 'Did Not Attend' their OH appointment date in January 2015. 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 4887 staff members who used the day one service within the financial year to date (2014/2015).

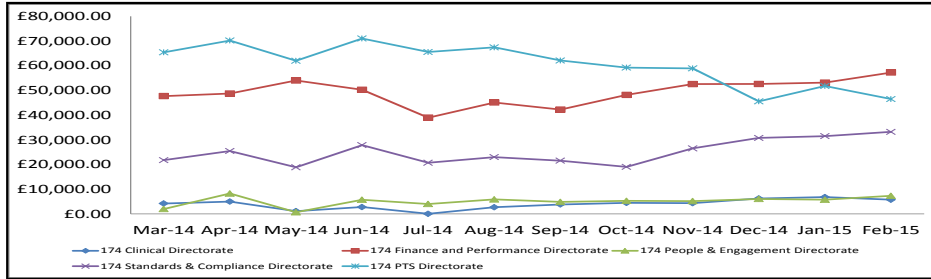
**Occupational Health - Core Service Usage**





Overtime, Vacancies & Turnover

Gross Overtime Costs by Directorate (exc Operations)



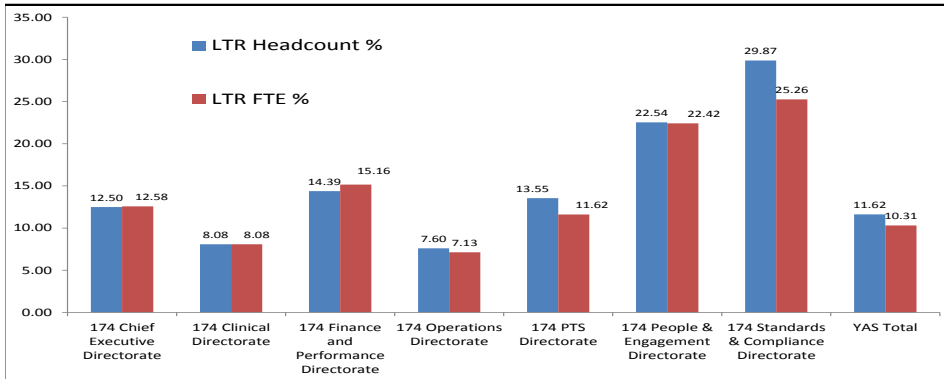
This chart above shows the YAS gross overtime costs across a 12 month period from Feb14 – Jan15 for all directorate excluding Operations.

The table below indicates the budgeted establishment and actual staff in post for the end of Jan 2015. The worked column indicates staff hours actually worked vs the budget.

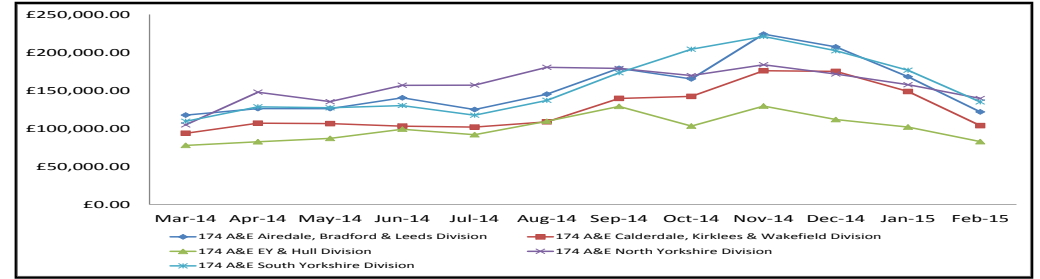
As you may see below there is a current discrepancy with the directorate figures for Budget vs Worked which is currently being investigated by Finance and MI.

Directorate	Budget	Staff in Post	Staff in Post	Worked	Worked
	WTE	WTE	Headcount	WTE	Hours
Chief Executive	15.80	11.58	17.00	16.80	1,757.64
Clinical	63.99	62.08	60.00	51.98	8,409.23
Finance & Performance	358.96	335.86	347.00	297.58	51,062.39
Operations	2,780.53	2,868.84	2,957.00	2,687.71	475,710.87
People and Engagement	772.01	749.46	115.00	98.73	16,442.32
Standards and Compliance	345.25	356.78	474.00	348.09	123,653.98
PTS	114.07	106.48	956.00	719.12	57,412.87
<b>Total</b>	<b>4,450.61</b>	<b>4,491.08</b>	<b>4,926</b>	<b>4,220.01</b>	<b>734,449.30</b>

Turnover by Directorate



Gross Overtime Costs Operations



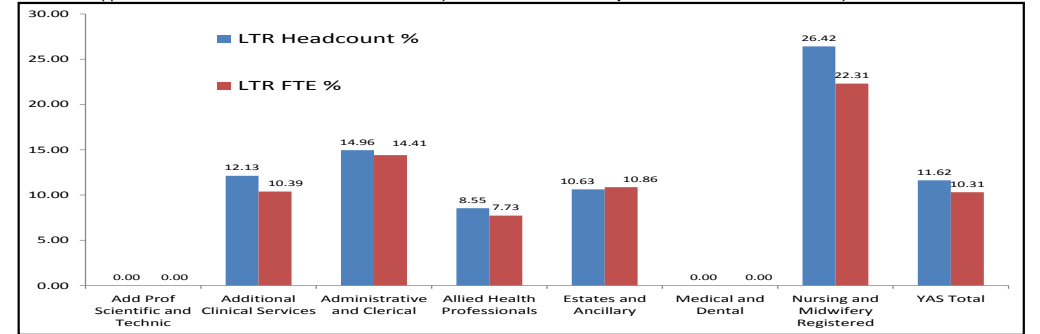
The table below shows the gross cost for overtime from ESR for the month of February 2015 across all directorates.

The chart above show the YAS gross overtime costs across a 12 month period from Mar14 – feb15 for all the major operations divisions.

Directorate	Feb-15
174 Clinical Directorate	£5,767.13
174 Finance and Performance (Not inc. PTS)	£57,228.85
174 Operations Directorate	£686,354.50
174 People & Engagement Directorate	£7,314.04
174 Standards & Compliance (Not inc. NHS 111)	£33,237.38
174 PTS Directorate	£46,485.70
<b>Grand Total</b>	<b>£836,387.60</b>

Turnover by Staff Group

This charts opposite and below shows the turnover rate for the period Feb 14 to Jan 15 by both Directorate and Staff Group.



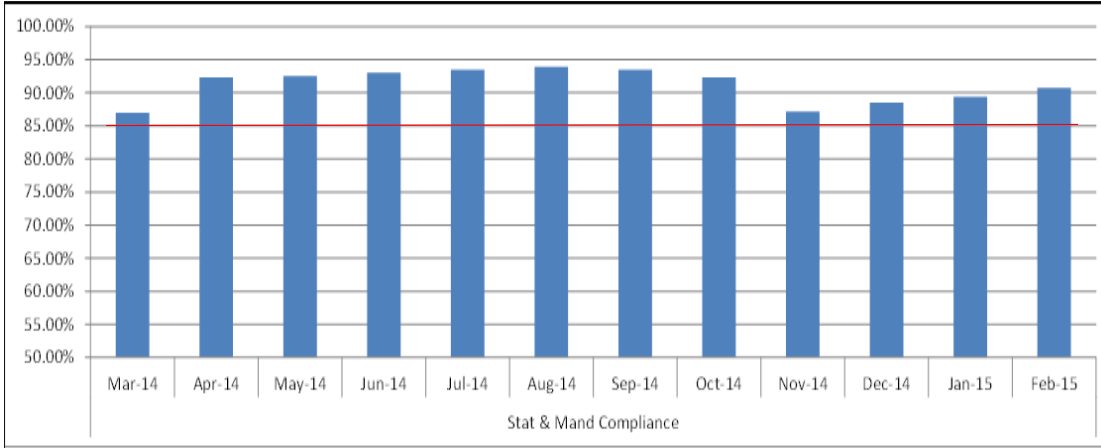
Paramedics and ECPs sit within our Allied Health Professionals. ECAs and Technicians are shown under the staff group Additional Clinical Services

Learning and Development

EWI

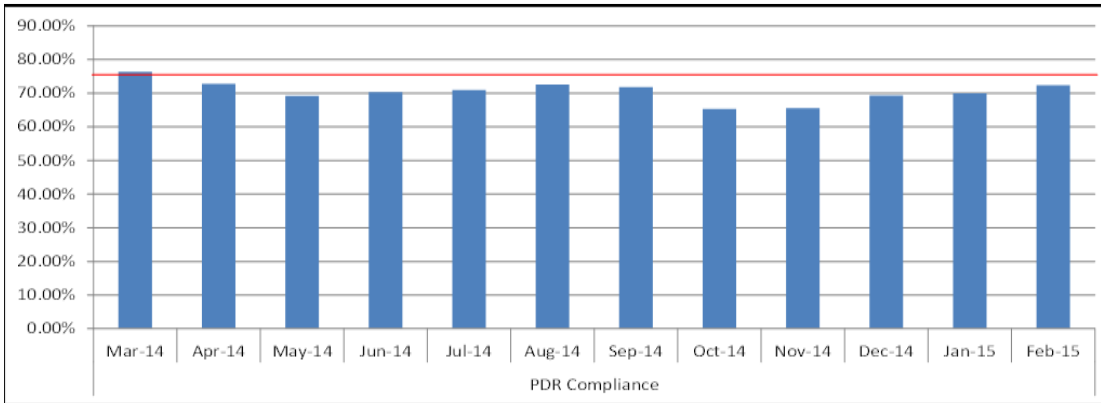
Statutory & Mandatory Training Workbook Combined

The red line across the chart illustrates the trust Stat & Mand Training Workbook compliance target which is currently set at 85%.



PDR Compliance from Feb 2014 to Jan 2015

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

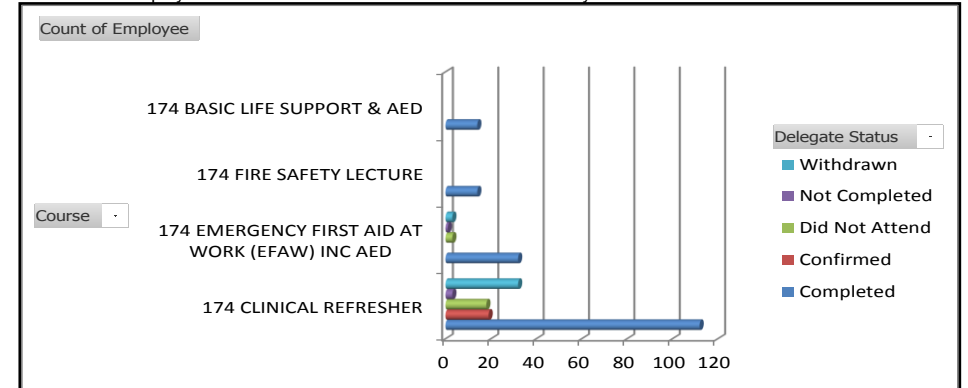


Staff Appraisals

Directorates	Compliant	Overdue	No PDR Recorded
174 Chief Executive Directorate	88.89%	0.00%	11.11%
174 Clinical Directorate	64.81%	31.48%	3.70%
174 Finance and Performance Directorate	61.01%	30.19%	8.81%
174 Operations Directorate	69.48%	24.57%	5.95%
174 People & Engagement Directorate	76.24%	19.80%	3.96%
174 PTS Directorate	79.55%	14.44%	6.02%
174 Standards & Compliance Directorate	87.06%	8.21%	4.73%
<b>Grand Total</b>	<b>72.34%</b>	<b>21.67%</b>	<b>5.99%</b>

This month 3162 assignments of the possible 4371 (72.34%) have an in-date PDR recorded in ESR for the current appraisal period.

The table above shows 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 November 2014 and 28 February 2015.





# Section 5

## Finance



	Reference
<b>EBITDA</b>	
<ul style="list-style-type: none"> <li>The Trust's Earnings before Interest Tax Depreciation and Amortisation (EBITDA), for the year to date, is £12.714m (5.8%).</li> </ul>	5.4
<ul style="list-style-type: none"> <li>This is £1.3m behind the YTD plan of £14.042m (6.6%).</li> </ul>	5.4
<b>SURPLUS</b>	
<ul style="list-style-type: none"> <li>The Trust has reported a surplus as at the end of February 2015 of £2.903m against a budgeted surplus of £2.747m. This is prior to the application of penalties associated with A &amp; E under performance against Red 1 and 2 targets.</li> <li>Penalties to date total £3.562m and if applied would amend the position to a deficit of £0.659m, an adverse variance against plan of £3.406m.</li> </ul>	5.4
<ul style="list-style-type: none"> <li>The forecast surplus for the year is £2.922m, which is only slightly ahead of 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 £0.965m.</li> </ul>	5.4
<b>CASH</b>	
<ul style="list-style-type: none"> <li>The Trust had cash and cash equivalents of £22.518m at 28th February 2015 against a plan of £17.710m.</li> </ul>	5.8 / 5.11
<b>NHS TDA ACCOUNTABILITY FRAMEWORK</b>	
<ul style="list-style-type: none"> <li>Overall the Trust has achieved a Green rating.</li> </ul>	5.2
<b>MONITOR CONTINUITY OF SERVICE</b>	
<ul style="list-style-type: none"> <li>Overall the Trust has achieved a rating of 4.</li> </ul>	5.2
<b>CIP DELIVERY</b>	
<ul style="list-style-type: none"> <li>The Trust has a savings target of £10.351m for 2014/15 and identified schemes totalling £10.351m.</li> <li>103% delivery of the CIP target was achieved in Month 11 against plan and 93% of this was achieved through recurrent schemes. This creates an favourable variance against plan of £304k. Reserve schemes have achieved £1,434k of the savings made year to date. Forecast CIP delivery is £10,729 which is 104% of plan.</li> </ul>	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 £000s	Actual / Forecast £000s	Variance £000s	RAG Rating
<b>NHS Financial Performance</b>				
1a) Forecast Outturn, Compared to Plan	2,913	2,922	9	GREEN
1b) Year to Date, Actual compared to Plan	2,677	2,903	226	GREEN
<b>Financial Efficiency</b>				
2a) Actual Efficiency for Year to Date compared to Plan	9,643	9,947	304	AMBER
- Recurrent Efficiencies Year to Date compared to Plan	9,643	9,009	(634)	
2b) Forecast Outturn Efficiency compared to Plan	10,351	10,729	378	AMBER
- Recurrent Efficiencies for Forecast Outturn compared to Plan	10,351	9,759	(592)	
<b>Underlying Revenue Position</b>				
3) Forecast Outturn Underlying Revenue Position compared to Plan	2,913	2,922	9	GREEN
<b>Cash and Capital</b>				
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
<b>Trust Overall RAG Rating</b>				GREEN

Financial Criteria	Metric	Year to January 15	Rating	Weight	Weighted score	Actual statistic	Comments	Calculation
Continuity of Service	Liquidity Ratio (days)	Actual year to date	4	50%	2	23.6	Achieving a rating of 4	Cash for liquidity purposes divided by Operating expenses
	Capital Servicing capacity (times)	Actual year to date	4	50%	2	4.79	Achieving a rating of 4	Revenue available for debt service divided by capital service costs
	Continuity of Service				4			

**EXECUTIVE SUMMARY****Month 11 - YTD**

Overall at the end of Month 11 we are reporting a surplus of £2,903k against a planned surplus of £2,747k. The positive variance is due to overtrade income in A&E, increased activity in 111 and depreciation savings where the capital programmes have slipped. This is also due to the phasing of the original TDA plan.

We are presenting a YTD EBITDA of £12.714m (5.8%) which is behind the plan of £14.042m (6.6%) 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 £1,060k 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. The financial value of this CQUIN is weighted to Q4 in line with the contract.

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 £3.562m, and if applied would amend the position to a deficit of £0.659m, an adverse variance against plan of £3.406m.

This surplus position includes adverse performance within PTS of £3.072m YTD, mainly driven by slippage in CIP achievement and dependencies on third party support. This is offset 111 where demand is higher than expected causing a positive financial variance of £541k and Capital Charges are underspend of £1,458k due to slippage in the capital programme.

**Month 11 - 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 £3.3m in PTS and an overspend of £0.6m within A&E due to costs of £3.4m associated with the A&E Performance Improvement Plan (PIP).
- 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 £0.965m. The application of penalties is currently in discussion with commissioners.

Yorkshire Ambulance Service - Director's Commentary	February 2015
<p><b>A&amp;E - YTD £0.1m favourable and Full Year Forecast £0.6m adverse</b></p> <p><b>Income :</b></p> <ul style="list-style-type: none"> <li>A&amp;E activity is 3.5% cumulatively above contract for year to date with a value of £3.7m.</li> <li>The A&amp;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 11 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.</li> </ul> <p><b>Pay :</b></p> <ul style="list-style-type: none"> <li>YTD Pay is £24k over budget and is forecast to come in at £474k over budget for the full year. This is due to costs associated with increased demand, winter resilience plans and the A&amp;E Performance Improvement Plan (PIP). We also expect significant expense in month 12 with a focus on improving performance through Spring Into Action and increased overtime.</li> </ul> <p><b>Non-Pay :</b></p> <ul style="list-style-type: none"> <li>YTD Non-Pay is £2,553k 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 £2,973k above budget.</li> </ul>	
<p><b>PTS - YTD £3.1m adverse and Full Year Forecast £3.3m adverse</b></p> <p><b>Income :</b></p> <ul style="list-style-type: none"> <li>PTS YTD income is over-achieving by £325k at Month 11 which includes: £82k credit notes raised to PTS South CCGs in respect of 2013/14 Q4 under activity and under achievement of CQUINs/QIF; ECR income is £61k above budget; additional income of £241k for the Calderdale &amp; Huddersfield extension to the unscheduled care discharge service and £82k winter pressures funding from Wakefield CCG.</li> </ul> <p><b>Pay :</b></p> <ul style="list-style-type: none"> <li>Pay expenditure YTD is under budget by £159k due to PTS carrying 54.26 WTE vacancies relating to the delay in filling new rota lines post West rota reviews and a number of staff transferring to A&amp;E. For the full year we are expecting to be underspent by £161k due to an anticipated 5% vacancy level.</li> </ul> <p><b>Non-Pay :</b></p> <ul style="list-style-type: none"> <li>Non-Pay YTD is overspent by £3.6m with the forecast for the year showing an expected overspend of £3.9m. Driving this position is the dependency on taxis and private providers c£1m, 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 c£0.4m. This was planned to catch up in the later months of the year, although this is now expected to deliver in 15/16. The new Renal rotas have required some adjustment and bedding in time, but these should now be delivering a service in a more efficient and cost effective manner going forwards.</li> </ul>	
<p><b>111 - YTD £0.541m favourable and Full Year Forecast £0.294m favourable</b></p> <p><b>Income :</b></p> <ul style="list-style-type: none"> <li>111 income is over achieving by £1.8m, which is mainly driven by £855k additional income relating to increased call volumes to Mth 11, and an additional £250k of YTD income relating to the 111 York SPA Pilot; Non Recurrent system resilience funding amounts to £587k.</li> </ul> <p><b>Pay :</b></p> <ul style="list-style-type: none"> <li>Due to the higher call demand 111 pay expenditure year to date is overspent against budget by £1,012k. 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 £1,202k, but this will be offset by an increase in income for the full year.</li> </ul> <p><b>Non Pay:</b></p> <ul style="list-style-type: none"> <li>Reporting an overspend of £269k and we are forecasting to an adverse position of £241K by the end of the year. This is due to the costs of supporting winter pressures activities, however this will be wholly offset by additional income.</li> </ul>	
<p><b>EOC - YTD is favourable to budget by £9k but the Full Year Forecast being slightly over budget by 12k.</b></p> <p><b>Pay :</b> YTD Pay spend is over budget by £95k but offset by underspends in income and non pay making the overall position £9k positive. This is due to overtime and higher than planned agency staff as part of the A&amp;E PIP (10 WTE).</p> <p><b>Finance Directorate -</b> YTD is £1.37m favourable to budget, Full Year Forecast is £0.3m favourable.</p> <p><b>Fleet: YTD £233k adverse, Full Year forecast £437k over budget</b></p> <ul style="list-style-type: none"> <li>Pay is expected to be underspent by £126k for the full year due to carrying vacancies within the Cleaning team offset by some agency staff required to backfill leavers within Fleet management. Non-Pay is forecast to overspend by £366k by year end which is driven by overspends in vehicle maintenance of £2.8m offset by anticipated savings in fuel of £1.5m 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 and forecast position.</li> </ul> <p><b>Finance Cost Centre: YTD £141k favourable and full year forecast to be £146k favourable</b></p> <ul style="list-style-type: none"> <li>Pay is currently £80k underspent, and is expected to be underspent by £84k by year end due to vacancies. Non-pay is forecast to be £42k underspent by year end mostly due to reduction of external consultancy costs and reclaimed VAT from 13/14.</li> </ul> <p><b>Procurement: YTD £249k adverse and full year forecast to be £351k adverse</b></p> <ul style="list-style-type: none"> <li>Medical &amp; surgical Equipment is currently over the budget by £223k and expected to be £276k overspent by year end, Staff uniforms are also expected to be over spent by £97k.</li> </ul> <p><b>Capital Charges: YTD £1,448k favourable and Full Year Forecast £1,352k favourable</b></p> <ul style="list-style-type: none"> <li>The Capital Charges £1,448k 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 £1,227k on depreciation, and £145k underspend on dividends paid for the year.</li> </ul>	
<p><b>Other movements:</b></p> <p><b>IM&amp;T :</b> Forecast to be underspent by £379k, including a £94k rebate from Vodafone relating to the new mobile phone contract savings.</p> <p><b>Finance -</b> Claims and Other Payments is YTD £323k adverse and £968k adverse forecast based on a detailed review of claims/losses projected to year end and the discount rate, applied at year end.</p>	

Yorkshire Ambulance Service - Statement of Comprehensive Income

February 2015

	Current Month			Year to Date			Full Year		
	Budget £000	Actual £000	Variance £000	Budget £000	Actual £000	Variance £000	Budget £000	Forecast £000	Variance £000
Accident & Emergency	13,100	13,610	-511	152,367	155,320	-2,953	167,139	170,404	-3,265
Patient Transport Service	2,238	2,461	-222	24,563	24,888	-325	26,801	27,213	-411
111	2,411	2,789	-378	26,521	28,343	-1,822	28,932	30,670	-1,738
Other Income	1,100	1,221	-121	9,496	9,765	-269	10,585	11,400	-815
<b>Operating Income</b>	<b>18,849</b>	<b>20,080</b>	<b>-1,231</b>	<b>212,947</b>	<b>218,315</b>	<b>-5,368</b>	<b>233,457</b>	<b>239,686</b>	<b>-6,229</b>
Pay Expenditure & reserves	-13,265	-13,948	683	-146,427	-147,464	1,038	-159,569	-161,048	1,480
Non-Pay expenditure & reserves	-3,670	-5,268	1,598	-52,478	-58,136	5,659	-58,678	-64,797	6,119
<b>Operating Expenditure</b>	<b>-16,935</b>	<b>-19,216</b>	<b>2,281</b>	<b>-198,904</b>	<b>-205,601</b>	<b>6,696</b>	<b>-218,247</b>	<b>-225,845</b>	<b>7,598</b>
<b>EBITDA</b>	<b>1,914</b>	<b>864</b>	<b>1,050</b>	<b>14,042</b>	<b>12,714</b>	<b>1,328</b>	<b>15,211</b>	<b>13,842</b>	<b>1,369</b>
<b>EBITDA %</b>	<b>10.2%</b>	<b>4.3%</b>		<b>6.6%</b>	<b>5.8%</b>		<b>6.5%</b>	<b>5.8%</b>	
Depreciation	-775	-705	-70	-9,171	-7,826	-1,345	-9,918	-8,691	-1,228
Interest payable & finance costs	0	0	0	-204	-205	1	-280	-281	1
Interest receivable	3	7	-5	29	56	-27	32	59	-27
Profit on fixed asset disposal	42	-30	72	131	111	20	138	118	20
Dividends, interest and other	-189	-177	-12	-2,080	-1,947	-133	-2,269	-2,124	-145
<b>Retained Surplus</b>	<b>995</b>	<b>-41</b>	<b>1,035</b>	<b>2,747</b>	<b>2,903</b>	<b>-156</b>	<b>2,913</b>	<b>2,922</b>	<b>-9</b>
I&E Surplus %	5.3%	-0.2%		1.3%	1.3%		1.2%	1.2%	



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

A&E CONTRACT - Responses	Quarter 1					Quarter 2					Quarter 3					January 2015					February 2015					YTD					
	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	4,987	4,997	10	0.2%	2	1,678	1,716	38	2.3%	6	1,582	1,460	-119	-7.5%	-23	17,878	18,355	477	2.7%	81	
NHS Barnsley CCG	8,315	8,446	131	1.6%	19	8,365	8,484	119	1.4%	17	8,748	8,969	221	2.5%	32	2,959	3,097	138	4.7%	19	2,598	2,629	39	1.5%	4	30,985	31,625	640	2.1%	95	
NHS Bradford City CCG	4,243	4,311	68	1.6%	10	4,166	4,351	185	4.4%	26	4,327	4,686	359	8.3%	51	1,382	1,483	101	7.3%	13	1,311	1,303	0	0.0%	-2	15,429	16,134	705	4.6%	96	
NHS Bradford Districts CCG	11,145	11,439	294	2.6%	51	11,050	11,089	39	0.4%	7	11,736	12,385	649	5.5%	114	3,869	3,884	15	0.4%	-6	3,511	3,375	-115	-3.3%	-23	41,311	42,172	861	2.1%	143	
NHS Calderdale CCG	7,606	7,541	-65	-0.9%	-11	7,415	7,047	-368	-5.0%	-65	7,669	7,839	170	2.2%	30	2,544	2,640	96	3.8%	17	2,266	2,370	115	5.1%	22	27,500	27,437	-63	-0.2%	-7	
NHS Doncaster CCG	11,273	11,634	361	3.2%	48	11,481	11,672	191	1.7%	25	11,927	12,096	169	1.4%	22	3,967	3,806	-161	-4.1%	-23	3,511	3,563	71	2.0%	9	42,159	42,771	612	1.5%	85	
NHS East Riding of Yorkshire CCG	9,909	10,316	407	4.1%	76	10,322	10,474	152	1.5%	28	10,594	10,918	324	3.1%	61	3,362	3,649	287	8.5%	53	3,121	3,117	0	0.0%	0	37,308	38,474	1,166	3.1%	218	
NHS Greater Huddersfield CCG	7,795	7,566	-229	-2.9%	-42	7,681	7,616	-65	-0.8%	-12	7,718	8,208	490	6.3%	89	2,550	2,618	68	2.7%	8	2,389	2,250	-129	-5.4%	-25	28,133	28,258	125	0.4%	25	
NHS Hambleton, Richmondshire and Whitby CCG	4,062	4,911	849	20.9%	185	4,610	4,902	292	6.3%	64	4,545	4,943	398	8.8%	87	1,561	1,624	63	4.0%	15	1,434	1,493	69	4.8%	19	16,212	17,873	1,661	10.2%	362	
NHS Harrogate and Rural District CCG	4,066	4,775	709	17.4%	158	4,563	4,678	115	2.5%	26	4,713	5,031	318	6.7%	71	1,508	1,649	141	9.4%	26	1,457	1,489	34	2.3%	5	16,307	17,622	1,315	8.1%	288	
NHS Hull CCG	11,257	11,353	96	0.9%	14	11,469	11,313	-155	-1.4%	-23	12,154	12,057	-97	-0.8%	-15	3,779	3,860	81	2.1%	11	3,596	3,394	-187	-5.2%	-27	42,254	41,977	-277	-0.7%	-50	
NHS Leeds North CCG	6,250	6,621	371	5.9%	63	6,404	6,437	33	0.5%	6	6,632	6,981	349	5.3%	59	2,293	2,357	64	2.8%	7	1,965	1,965	15	0.8%	2	23,544	24,361	817	3.5%	132	
NHS Leeds South and East CCG	11,168	11,763	595	5.3%	96	11,406	11,454	48	0.4%	8	11,872	12,744	872	7.3%	141	3,979	3,811	-168	-4.2%	-30	3,571	3,583	21	0.6%	3	41,996	43,355	1,359	3.2%	210	
NHS Leeds West CCG	10,355	10,140	-215	-2.1%	-35	10,295	9,866	-429	-4.2%	-70	10,554	11,008	454	4.3%	74	3,516	3,450	-66	-1.9%	-14	3,171	3,077	-85	-2.7%	-15	37,891	37,541	-350	-0.9%	-57	
NHS North Kirklees CCG	5,794	5,833	39	0.7%	7	5,792	5,886	94	1.6%	17	6,156	6,632	476	7.7%	89	1,933	2,003	70	3.6%	14	1,830	1,846	18	1.0%	1	21,505	22,200	695	3.2%	129	
NHS Rotherham CCG	8,806	8,906	100	1.1%	13	8,939	9,053	114	1.3%	15	8,809	10,005	1,196	13.6%	160	3,062	3,179	117	3.8%	11	2,694	2,906	227	8.4%	31	32,310	34,049	1,739	5.4%	225	
NHS Scarborough and Ryedale CCG	4,039	4,557	518	12.8%	101	4,483	4,614	131	2.9%	25	4,301	4,542	241	5.6%	47	1,340	1,425	85	6.3%	13	1,277	1,332	55	4.3%	11	15,440	16,470	1,030	6.7%	199	
NHS Sheffield CCG	17,436	18,801	1,365	7.8%	202	17,841	18,692	851	4.8%	126	18,426	20,584	2,158	11.7%	320	5,963	6,410	447	7.5%	56	5,458	5,727	290	5.3%	37	65,124	70,214	5,090	7.8%	759	
NHS Vale of York CCG	9,357	10,686	1,329	14.2%	275	10,199	10,673	474	4.6%	98	10,768	11,284	516	4.8%	107	3,406	3,579	173	5.1%	32	3,331	3,277	-34	-1.0%	-6	37,061	39,499	2,438	6.6%	496	
NHS Wakefield CCG	12,200	12,698	498	4.1%	85	12,472	12,855	383	3.1%	65	12,616	13,640	1,024	8.1%	174	4,312	4,355	43	1.0%	5	3,990	3,779	-190	-4.8%	-30	45,590	47,327	1,737	3.8%	286	
<b>SUB TOTAL (CONTRACTED)</b>	<b>169,879</b>	<b>177,447</b>	<b>7,568</b>	<b>4.5%</b>	<b>1,377</b>	<b>173,780</b>	<b>176,188</b>	<b>2,408</b>	<b>1.4%</b>	<b>420</b>	<b>179,252</b>	<b>189,549</b>	<b>10,297</b>	<b>5.7%</b>	<b>1,715</b>	<b>58,963</b>	<b>60,595</b>	<b>1,632</b>	<b>2.8%</b>	<b>233</b>	<b>54,063</b>	<b>53,935</b>	<b>95</b>	<b>0.2%</b>	<b>-8</b>	<b>635,937</b>	<b>657,714</b>	<b>21,777</b>	<b>3.4%</b>	<b>3,714</b>	
ECP		2,450					2,366					2,346					893					795									
NHS Cumbria CCG	134	181	47			122	149	27			131	152	21			41	65	11			39	78	39			467	625	158			
OOA/UNKNOWN		371					596					734					175					172						2,048			
<b>GRAND TOTAL*</b>	<b>169,879</b>	<b>180,449</b>	<b>7,615</b>	<b>4.5%</b>	<b>1,426</b>	<b>173,902</b>	<b>179,299</b>	<b>2,435</b>	<b>1.40%</b>	<b>420</b>	<b>179,383</b>	<b>192,781</b>	<b>10,318</b>	<b>5.75%</b>	<b>1,715</b>	<b>59,004</b>	<b>61,728</b>	<b>1,643</b>	<b>2.78%</b>	<b>233</b>	<b>54,102</b>	<b>54,980</b>	<b>134</b>	<b>0.25%</b>	<b>-8</b>	<b>636,404</b>	<b>669,237</b>	<b>21,935</b>	<b>3.45%</b>	<b>3,714</b>	

**Yorkshire Ambulance Service - Income and Expenditure Forecast**

**February 2015**

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 £
<b>Income</b>				<b>18,849,193</b>	<b>20,080,361</b>	<b>-1,231,168</b>	<b>212,946,683</b>	<b>218,315,003</b>	<b>-5,368,320</b>	<b>233,457,368</b>	<b>239,686,456</b>
<b>Pay</b>											
A&E Operations	-2,268.00	-2,370.00	101.76	-7,631,166	-7,563,576	-67,590	-85,023,626	-85,047,619	23,993	-92,677,802	-93,152,383
PTS Operations	-772.00	-749.00	-22.55	-1,424,300	-1,419,104	-5,196	-15,667,300	-15,508,551	-158,749	-17,091,632	-16,930,527
Resilience	-128.00	-117.00	-10.94	-430,169	-406,142	-24,027	-4,736,415	-4,750,349	13,934	-5,166,578	-5,194,509
EOC	-385.00	-382.00	-2.51	-1,098,291	-1,103,880	5,589	-12,138,396	-12,233,652	95,256	-13,236,692	-13,357,982
Finance	-70.00	-59.00	-11.12	-218,211	-170,747	-47,464	-2,406,272	-2,018,603	-387,669	-2,624,515	-2,208,550
Estates	-43.00	-39.00	-3.75	-98,888	-127,117	28,229	-1,087,768	-1,276,757	188,989	-1,186,661	-1,400,840
Fleet	-187.00	-178.00	-8.57	-417,228	-419,199	1,971	-4,616,301	-4,488,176	-128,125	-5,033,531	-4,907,216
IM&T	-40.00	-40.00	0.37	-125,260	-138,223	12,963	-1,377,860	-1,372,744	-5,116	-1,503,133	-1,496,442
Procurement	-19.00	-19.00	-0.03	-38,229	-38,781	552	-435,039	-446,789	11,750	-476,175	-500,216
Standards & Compliance	-47.00	-52.00	4.98	-161,956	-133,173	-28,783	-1,713,232	-1,723,101	9,869	-1,872,997	-1,894,871
111	-298.00	-305.00	6.55	-813,144	-1,046,651	233,507	-9,341,362	-10,353,106	1,011,744	-10,164,061	-11,366,581
People & Engagement	-114.00	-106.00	-7.59	-366,559	-343,691	-22,868	-3,624,581	-3,484,461	-140,120	-3,991,142	-3,833,164
Clinical Directorate	-64.00	-62.00	-1.91	-291,496	-23,700	-267,796	-2,026,087	-1,735,340	-290,747	-2,315,868	-2,063,892
Chief Executive	-17.00	-13.00	-4.22	-93,401	-114,006	20,605	-1,025,866	-1,025,120	-746	-1,119,281	-1,129,691
Reserves	0.00	0.00	0.00	-56,307	-900,000	843,693	-1,206,478	-1,999,860	793,382	-1,108,648	-1,611,535
<b>Total Pay</b>	<b>-4,450.61</b>	<b>-4,491.08</b>	<b>40.47</b>	<b>-13,264,605</b>	<b>-13,947,990</b>	<b>683,385</b>	<b>-146,426,583</b>	<b>-147,464,228</b>	<b>1,037,645</b>	<b>-159,568,716</b>	<b>-161,048,398</b>
<b>Non Pay</b>											
A&E Operations				-114,479	-444,695	330,216	-1,476,265	-4,029,229	2,552,964	-1,602,436	-4,574,943
PTS Operations				53,010	-316,519	369,528	442,929	-3,112,514	3,555,443	502,509	-3,399,166
Resilience				-136,698	-243,260	106,562	-1,146,717	-1,506,025	359,307	-1,223,144	-1,625,121
EOC				-15,971	-10,977	-4,994	-175,681	-124,025	-51,656	-191,642	-134,372
Finance				-1,017,252	-940,557	-76,695	-12,271,856	-11,201,076	-1,070,780	-13,335,717	-13,035,931
Estates				-408,767	-405,999	-2,768	-4,496,426	-4,338,949	-157,477	-4,905,223	-4,750,048
Fleet				-1,550,034	-1,657,657	107,623	-17,563,242	-17,739,997	176,755	-19,178,578	-19,544,921
IM&T				-343,325	-283,380	-59,945	-3,776,575	-3,592,923	-183,652	-4,119,895	-3,917,357
Procurement				-240,639	-213,313	-27,326	-2,780,794	-3,041,212	260,418	-3,021,422	-3,372,345
Standards & Compliance				-135,748	-187,274	51,526	-1,213,322	-1,694,625	481,303	-1,318,832	-1,853,213
111				-1,409,712	-1,724,174	314,462	-15,506,832	-15,775,789	268,957	-16,916,537	-17,157,529
People & Engagement				-136,638	-202,476	65,838	-1,603,250	-1,747,992	144,742	-1,739,849	-1,965,492
Clinical Directorate				-60,343	224,123	-284,466	-370,140	-48,006	-322,134	-430,488	-84,401
Chief Executive				-24,192	-41,565	17,373	-266,108	-261,874	-4,234	-290,310	-303,468
Reserves				950,789	274,839	675,951	-1,568,705	266,754	-1,835,459	-3,203,887	2,663
<b>Total Non Pay</b>				<b>-4,589,999</b>	<b>-6,172,883</b>	<b>1,582,884</b>	<b>-63,772,984</b>	<b>-67,947,480</b>	<b>4,174,496</b>	<b>-70,975,451</b>	<b>-75,715,644</b>
<b>Total Expenditure</b>	<b>-4,450.61</b>	<b>-4,491.08</b>	<b>40.47</b>	<b>-17,854,604</b>	<b>-20,120,873</b>	<b>2,266,269</b>	<b>-210,199,567</b>	<b>-215,411,708</b>	<b>5,212,141</b>	<b>-230,544,167</b>	<b>-236,764,042</b>
<b>Surplus/(Deficit)</b>				<b>994,589</b>	<b>-40,512</b>	<b>1,035,101</b>	<b>2,747,116</b>	<b>2,903,295</b>	<b>-156,179</b>	<b>2,913,201</b>	<b>2,922,413</b>

NB total non-pay includes depreciation, dividends and impairments

**CIP DELIVERY**

- 103% delivery of the CIP target was achieved in Month 11 against plan and 93% of this was achieved through recurrent schemes. This creates an favourable variance against plan of £304k. Reserve schemes have achieved £1,434k of the savings made year to date. Forecast CIP delivery is £10,729 which is 104% of plan.
- In A&E there is a £440k 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 (£293k). Other A&E CIPs which are under achieving against plan include value for money and clinical hub schemes (£707K). 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 (£455k). 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
<b>Planned savings</b>					
Accident & Emergency	5,612	5,332	4,772	(559)	5,096
Patient Transport Service	2,279	2,065	1,072	(992)	1,208
Special Operations	309	281	175	(106)	194
Standards and Compliance	173	158	506	348	541
Finance	89	81	226	145	263
Clinical Directorate	54	50	50	0	54
Trust wide	1,836	1,677	1,712	35	1,899
Recurrent Planned Savings	10,351	9,643	8,271	(1,372)	8,981
Non-recurrent Planned Savings	0	0	242	242	275
<b>Sub Total</b>	<b>10,351</b>	<b>9,643</b>	<b>8,513</b>	<b>(1,130)</b>	<b>9,256</b>
<b>Reserve Schemes</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>
111 additional CIP			351	351	382
Reduce spend on Private Providers			352	352	352
Fleet Insurance Rebate			650	650	650
Other			81	81	89
Recurrent Reserve Schemes			738	738	778
Non-recurrent Reserve Schemes			695	695	695
<b>Sub total</b>			<b>1,434</b>	<b>1,434</b>	<b>1,473</b>
<b>Total</b>	<b>10,351</b>	<b>9,643</b>	<b>9,947</b>	<b>304</b>	<b>10,729</b>

**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	3,211	3,651	440
Increase use of clinical hub (triage)	B Holdaway	1,257	1,143	530	-613
Voluntary Car Scheme	J Halliwell	874	808	472	-336
Remove missed meal break payments and AVP	P Mudd	689	634	341	-293
PTS Unallocated	J Halliwell	610	546	-	-546
<b>Total</b>		<b>6,721</b>	<b>6,341</b>	<b>4,994</b>	<b>-1,348</b>

**SUMMARY**

Land, Buildings, Equipment and Intangibles are underspent compared to the Plan due to the slippage in the Capital Programme. Most notable is the delay in awarding the A&E vehicle contract (£4.1m), Hub & Spoke being behind Plan (£1.6m) and ECS Slippage (£2m)

The increased variance is caused by the Plan anticipating a decrease in Stocks, Trade & Other Receivables but in reality there has been an increase due to increased NHS invoicing in preparation for year end.

Cash is higher than anticipated largely as a result of slippage on the capital programme, offset slightly by capital receipts not received as planned.

Actual creditors increased in the month by around £2.2m due, in the main, to capital creditors which include £1.8m relating to A&E Vehicles. The plan anticipated a monthly decrease in creditors of around £6m

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 been approved in principle with draw downs in both 14/15 and 15/16, as a result no repayments will be required until 2015/16.

**CAPITAL SUMMARY**

The Electronic Patient Reporting Form (EPRF) project has commenced, the orders have been raised and the full expenditure on equipment will be incurred prior to year end.

The Hub & Spoke project will be progressed to Outline Business Case in 15/16 which will require approval by F&I and the Trust Board. The project team costs for 15/16 have been incorporated into the 2015/16 Capital Plan.

The Programme figures for Estates, IT, Fleet, Plant & Machinery and Medical Equipment have been taken from the individual strategies agreed by the Board. A number of schemes identified in the 2015/16 plan have been brought forward to utilise slippage in the plan. These include a number of Estate schemes and the MDT ICT scheme.

The A&E vehicles will be purchased prior to year end along with the PTS ex leased vehicles.

The HART replacement vehicle programme will be undertaken in 2015/16 due to delays in the national specification and the subsequent procurement process.

The actual net book value of asset disposals has exceeded the annual plan due to the write off of 2 Mercedes Sprinter with a net book value of £73k & £35k.

**Statement of Financial Position**

	Plan at 31/01/2015 £000	Actual at 31/01/2015 £000	Variance £000
Land, Buildings and equipment	83,822	77,963	-5,859
Trade and other receivables (>1 yr)	877	775	-102
<b>Non-Current assets</b>	<b>84,699</b>	<b>78,738</b>	<b>-5,961</b>
Stocks, Trade and other receivables (<1 yr)	9,358	12,852	3,494
Cash and cash equivalents	17,710	22,518	4,808
<b>Current assets</b>	<b>27,068</b>	<b>35,370</b>	<b>8,302</b>
Creditors (< 1yr)	-13,786	-18,617	-4,831
Provisions & Deferred Income(<1 yr)	-2,663	-2,402	261
<b>Current Liabilities</b>	<b>-16,449</b>	<b>-21,019</b>	<b>-4,570</b>
Provisions (>1 yr)	-8,960	-8,512	448
Borrowings	-7,650	-5,670	1,980
<b>Non-Current Liabilities</b>	<b>-16,610</b>	<b>-14,182</b>	<b>2,428</b>
<b>Net Assets</b>	<b>78,708</b>	<b>78,907</b>	<b>199</b>
Public Dividend Capital	78,594	78,594	0
Revaluation Reserve	5,238	5,093	-145
Donation Reserve	0	0	0
Income & Expenditure Reserve	-5,124	2,677	7,801
<b>Total Taxpayer's Equity</b>	<b>78,708</b>	<b>86,364</b>	<b>7,656</b>

**Capital Programme**

	Baseline Programme £000	Revised 14/15 Programme £000	Year to Date Plan £000	Spend to 31/01/2015 £000	Committed at 31/01/2015 £000	(Under)/ Over plan 31/01/2015 £000	Forecast Outturn 14/15 £000
<b>Major Schemes</b>							
HART	100	100	100	77	0	-23	77
ECS	2,200	745	745	679	65	-1	745
Hub & spoke	2,400	600	600	361	21	-218	410
<b>Minor Schemes</b>							
Estates	735	773	609	406	224	21	979
IM&T	1,600	1,567	1,604	529	811	-264	1,987
Vehicles A&E	4,658	4,990	4,755	2,414	2,352	11	5,296
Vehicles PTS	1,290	1,090	1,090	517	0	-573	517
Vehicles HART	167	167	167	0	0	-167	0
Medical equipment	1,134	1,109	1,014	441	716	143	1,220
Total planned expenditure	14,284	11,141	10,684	5,424	4,189	-1,071	11,231
NBV of Disposals	1,737	94	0	184	0		184
CRL (Including External Funds)	12,547	11,047	10,684	5,240			11,047
Total planned resources	14,284	11,141					11,231
Rating						⊗ ⊗	

## Yorkshire Ambulance Service - Debtors and Payments

February 2015

### DEBT SUMMARY

NHS Debt has increased by £2.4m: £662k relates to unpaid February contract invoices (largely North Kirklees CCG); £633k UCP schemes; £437k ECS monies; £400k Urgent Care Winter Resilience funding and £100k Frequent callers. Issues with CCG Accounts Payable provider (SBS) has resulted in the need to send copy invoices in a number of instances. £800k of these debts has been paid early March. NHS Debt over 90 days has reduced due to resolution of several old invoices. Non NHS Debt has seen an increase due to a number of Private & Events invoices and a higher incidence of salary overpayment invoices raised in month. Work is ongoing to reduce debts ahead of year end.

£000	Oct-14	Nov-14	Dec-14	Jan-15
<b>Non NHS debt</b>	298	276	265	332
Of which >90 days overdue	142	143	149	152
<b>NHS debt</b>	1,103	1,115	658	3,107
Of which >90 days overdue	467	199	204	191
<b>Total debt</b>	<b>1,401</b>	<b>1,391</b>	<b>923</b>	<b>3,439</b>
Of which >90 days overdue	609	342	353	343
Provision to cover this debt	583	342	353	343

### PAYMENTS

The Trust has paid 2,110 invoices in February 2015 of which 1,981 were paid within 30 days of receipt giving an overall Better Payment Practice Code (BPPC) position of 95.09% year to date. In value terms, the Trust has achieved an overall 95.74% 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 has worked hard to deliver achievement of this target throughout the year and continues to work with all departments in order to maintain delivery in future months.

	Feb-15		Year to Date	
	Number	£000	Number	£000
<b>Non NHS payables</b>				
Total non NHS invoices paid in period	2,070	5,895	24,330	61,021
Total non NHS invoices paid within target	1,943	5,668	23,142	58,328
	<b>93.86%</b>	<b>96.15%</b>	<b>95.12%</b>	<b>95.59%</b>
<b>NHS Payables</b>				
Total NHS invoices paid in period	40	204	589	3,380
Total NHS invoices paid within target	38	197	554	3,330
	<b>95.00%</b>	<b>96.57%</b>	<b>94.06%</b>	<b>98.52%</b>
<b>Total Payables</b>				
Total invoices paid in period	2,110	6,099	24,919	64,401
Total invoices paid within target	1,981	5,865	23,696	61,658
	<b>93.89%</b>	<b>96.16%</b>	<b>95.09%</b>	<b>95.74%</b>

**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-Feb 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 11.

**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 11 with the use of reserve schemes is 103% achievement against plan, and forecast for year end is 104%.
A&E contractual penalties - RED 1	3,887	0	0	Red 1 and Red 2 targets were not achieved for period to January. 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 £3,562k 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	128	140	KPI non delivery has been assumed in the current financial position.
Non delivery of CQUINS - A&E	1,671	1,060	1,367	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 11. 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	3,516	3,072	3,329	This reflects the current YTD and expected full year position of PTS, which is mainly impacted by dependancy on private providers and therefore under achievement on CIP schemes.
A&E Overspend	600	0	600	This reflects the impact on A&E outturn due to the costs of the Performance Improvement Plan offset by the receipt of winter pressures funding.
Hillsborough Costs	850	600	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.
<b>GRAND TOTAL</b>	<b>12,285</b>	<b>4,860</b>	<b>5,436</b>	

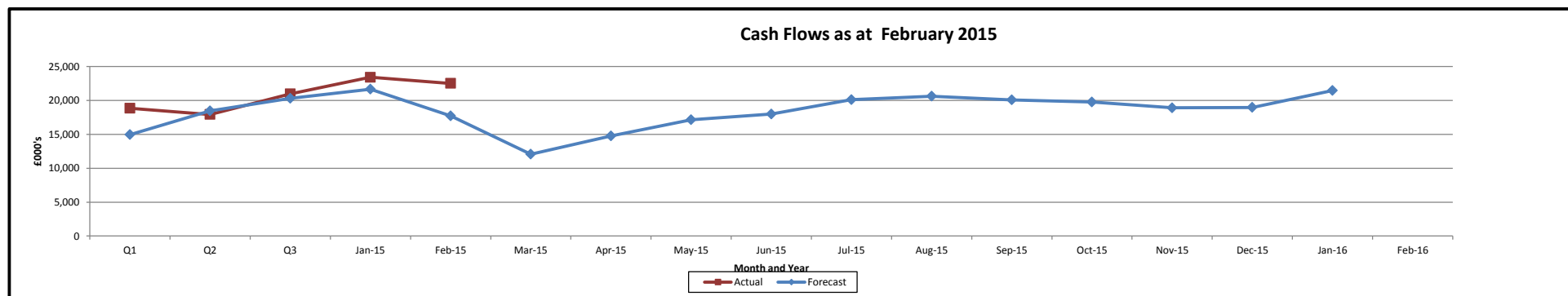
# Yorkshire Ambulance Service - Cash Flow

February 2015

## Analysis Of Actual/Plan Cash Flows

Cash Name (£000's)	Actual	Actual	Actual	Actual	Actual	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	
	Q1	Q2	Q3	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16
<b>Actual/Forecast Opening Cash Balance</b>	10,142	18,839	17,924	20,970	23,411	17,710	12,075	14,765	17,142	17,979	20,112	20,628	20,070	19,752	18,908	18,969	
<b>Cash Inflows</b>																	
Income from Activities	59,539	57,066	60,288	22,076	20,006	17,043	19,887	19,759	19,258	19,887	18,564	18,812	19,374	18,761	19,311	20,141	
Interest Receivable	11	12	21	3	7	2	2	2	3	3	3	3	3	3	3	3	3
Capital Receipts	44	64	101	46	24	101	0	0	0	0	0	0	0	0	0	1,137	
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
<b>Total Cash Inflows</b>	<b>59,594</b>	<b>57,142</b>	<b>60,410</b>	<b>22,125</b>	<b>20,037</b>	<b>17,146</b>	<b>19,889</b>	<b>19,761</b>	<b>19,261</b>	<b>19,890</b>	<b>18,567</b>	<b>18,815</b>	<b>19,377</b>	<b>18,764</b>	<b>19,314</b>	<b>21,281</b>	
<b>Cash Outflows</b>																	
Pay	35,282	38,585	40,192	13,438	13,217	12,869	12,639	12,735	12,676	12,720	12,639	12,744	12,797	12,742	12,704	12,826	
Non-pay	14,707	15,994	15,941	6,062	6,561	6,043	3,134	4,649	5,748	5,037	5,412	5,041	4,488	5,369	5,953	5,975	
Interest Payable	0	58	0	0	0	78	0	0	0	0	0	66	0	0	0	0	0
PDC Dividends	0	876	0	0	0	1,135	0	0	0	0	0	1,135	0	0	0	0	0
Capital Expenditure	908	2,377	1,231	184	1,152	2,269	1,426	0	0	0	0	0	2,410	1,497	596		
Loans	0	167	0	0	0	387	0	0	0	0	0	387	0	0	0	0	0
PDC Capital *	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total Cash Outflows</b>	<b>50,897</b>	<b>58,057</b>	<b>57,364</b>	<b>19,684</b>	<b>20,930</b>	<b>22,781</b>	<b>17,199</b>	<b>17,384</b>	<b>18,424</b>	<b>17,757</b>	<b>18,051</b>	<b>19,373</b>	<b>19,695</b>	<b>19,608</b>	<b>19,253</b>	<b>18,801</b>	
<b>Net Cash Inflow/(Outflow)</b>	<b>8,697</b>	<b>-915</b>	<b>3,046</b>	<b>2,441</b>	<b>-893</b>	<b>-5,635</b>	<b>2,690</b>	<b>2,377</b>	<b>837</b>	<b>2,133</b>	<b>516</b>	<b>-558</b>	<b>-318</b>	<b>-844</b>	<b>61</b>	<b>2,480</b>	
<b>Actual Closing Cash Balance</b>	<b>18,839</b>	<b>17,924</b>	<b>20,970</b>	<b>23,411</b>	<b>22,518</b>												
<b>Forecast Closing Cash Balance (per TDL Plan)</b>	<b>14,962</b>	<b>18,445</b>	<b>20,309</b>	<b>21,667</b>	<b>17,710</b>	<b>12,075</b>	<b>14,765</b>	<b>17,142</b>	<b>17,979</b>	<b>20,112</b>	<b>20,628</b>	<b>20,070</b>	<b>19,752</b>	<b>18,908</b>	<b>18,969</b>	<b>21,449</b>	

Actual closing cash is higher than the Plan primarily due to slippage on capital expenditure, offset slightly by capital receipts not materialising as planned.



Hospital	Qtr1				Qtr2				Qtr3				Jan-15				Feb-15				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 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 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	5	24	3516	26	4	30	3407	28	5	33	3293	0	1	1	1057	4	1	5	932	79	14	93	12205
BARNSELY DISTRICT GENERAL	E420	E300	E720	5510	E520	E400	E920	5407	E560	E500	E1,060	5892	E30	E100	E100	1901	E80	E100	E180	1645	E1,580	E1,400	E2,980	20355
BRADFORD ROYAL INFIRMARY	E360	E300	E660	9897	E520	E500	E1,020	9482	E420	E400	E820	10039	E100	E100	E200	3269	E120	E200	E320	2860	E1,520	E1,500	E3,020	35547
CALDERDALE ROYAL HOSPITAL	60	14	74	4662	54	10	64	4417	73	12	85	4959	23	3	26	3269	23	3	26	1645	233	42	275	17210
HUDDERSFIELD ROYAL INFIRMARY	E1,200	E1,400	E2,600	4602	E1,080	E1,000	E2,080	4592	E1,460	E1,200	E2,660	4607	E460	E300	E760	3496	E460	E300	E760	3075	E4,560	E4,200	E8,760	38800
HULL ROYAL INFIRMARY	26	3	29	10918	31	5	36	10746	64	5	69	10565	19	5	24	3496	E600	E400	E1,000	3075	E1,120	E1,100	E2,220	13346
DEWSBURY DISTRICT HOSPITAL	34	3	37	3623	28	6	34	3619	72	8	80	3778	23	1	24	1207	E460	E100	E560	1119	E720	E100	E820	30591
PINDERFIELDS GENERAL HOSPITAL	E880	E300	E1,180	8378	E560	E600	E1,160	8139	E1,440	E800	E2,240	8669	E88	E600	E2,360	2908	E1,020	E100	E1,120	2497	E1,020	E100	E1,120	1032
PONTEFRACT GENERAL INFIRMARY	E20	E0	E20	314	E20	E0	E20	313	E60	E100	E160	274	E0	E0	E0	76	E0	E0	E0	55	E100	E100	E200	26671
DONCASTER ROYAL INFIRMARY	43	7	50	7449	25	8	33	7395	38	4	42	7306	6	1	7	3200	11	1	12	2201	123	21	144	5336
FRIARAGE HOSPITAL	E880	E700	E1,580	1562	E500	E800	E1,300	1605	E760	E400	E1,160	1327	E120	E100	E220	447	E220	E100	E320	898	E2,460	E2,100	E4,560	26137
HARROGATE DISTRICT HOSPITAL	18	2	20	3009	22	1	23	3004	20	1	21	3177	9	0	9	1033	6	1	7	898	6	1	7	11121
LEEDS GENERAL INFIRMARY	E360	E200	E560	6998	E440	E100	E540	6999	E400	E100	E500	7635	E180	E0	E180	2329	E120	E100	E220	2176	E1,500	E500	E1,000	34898
ST JAMES UNIVERSITY HOSPITAL	21	1	22	9787	26	4	30	9186	10	1	11	9875	7	0	7	3248	7	1	8	2802	71	7	78	38047
NORTHERN GENERAL HOSPITAL	E420	E100	E520	10085	E520	E400	E920	10208	E200	E100	E300	10911	E140	E0	E140	3529	E140	E100	E240	3314	E1,420	E700	E2,120	20202
ROTHERHAM DISTRICT GENERAL HOSPITAL	E940	E1,500	E2,440	5308	E1,300	E500	E1,800	5488	E900	E300	E1,200	5855	E220	E100	E320	1826	E180	E300	E480	1725	E3,540	E2,700	E6,240	17675
SCARBOROUGH DISTRICT GENERAL HOSPITAL	19	5	24	4788	30	4	34	4962	45	3	48	4865	13	0	13	1621	8	0	8	1439	115	13	128	23238
YORK DISTRICT HOSPITAL	E380	E500	E880	6093	E600	E400	E1,000	6271	E900	E300	E1,200	6762	E260	E100	E360	2121	E160	E0	E160	1991	E2,300	E1,300	E3,600	3682
SHEFFIELD CHILDRENS HOSPITAL	111	6	117	10752	107	5	112	106126	103	9	112	110983	48	3	51	35909	35	2	37	32230	E4,740	E2,900	E10,300	392750
Grand Total Handover	E40	E100	E140	1003	E180	E0	E180	886	E80	E100	E180	1194	E20	E0	E20	326	E0	E0	E0	273	E320	E200	E520	3682
Grand Total Breaches	911	105	1016	107502	918	88	1006	106126	1040	109	1149	110983	370	29	399	35909	322	31	353	32230	3561	362	3923	392750
Grand Total Cost	£18,220	£10,500	£28,720		£18,360	£8,800	£27,160		£20,800	£10,900	£31,700		£7,400	£2,900	£10,300		£6,440	£3,100	£9,540		£71,220	£36,200	£107,420	

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'