



MEETING TITLE		MEETING DATE	
Trust Board Meeting In Public		24/11/2015	
TITLE of PAPER	Trust Executive Group Report & Integrated Performance Report (IPR)	PAPER REF	5.3
STRATEGIC OBJECTIVE	All		
PURPOSE OF THE PAPER	To give the Board assurance on the activity of the Trust Executive Group (TEG) from 30 September 2015 to 16 November 2015, and the opportunity for TEG to highlight the key variances / movements contained within the October Integrated Performance Report (IPR).		
For Approval	<input type="checkbox"/>	For Assurance	<input checked="" type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input checked="" type="checkbox"/>
AUTHOR / LEAD	Rod Barnes, Chief Executive	ACCOUNTABLE DIRECTOR	Rod Barnes, Chief Executive
DISCUSSED AT / INFORMED BY – include date(s) as appropriate (free text – i.e. please provide an audit trail of the development(s)/proposal(s) subject of this paper):			
Key performance indicators discussed at TEG, TMG and the Operational Delivery Team meetings			
PREVIOUSLY AGREED AT:	Committee/Group:	Date:	
RECOMMENDATION	That the Board agrees it has sufficient assurance on the activities of the Executive Team and Trust Executive Group during this period. That the Board notes and discusses the variances contained within the October 2015 IPR report, highlighted in the Executive Directors reports.		
RISK ASSESSMENT			Yes No

Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Equality and Diversity Implications <i>If 'Yes' – please attach to the back of this paper</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE		
Care Quality Commission Choose a DOMAIN	All	
Monitor Quality Governance Framework Choose a DOMAIN	All	

Report from the Trust Executive Group (TEG)

1. Purpose

To give the Board assurance on the activity of the Trust Executive Group (TEG) from 30 September 2015 to 16 November 2015, and the opportunity for TEG to highlight the key variances / movements contained within the October Integrated Performance Report (IPR).

2. External Environment

- 2.1 Jim Mackey, Chief Executive of Northumbria Healthcare NHS Foundation Trust took up post as Chief Executive of NHS Improvement on 1 November with John Wilderspin (formerly of NHS England) taking up the post of Integration Director. They will oversee the integration the NHS Trust Development Authority (NHS TDA) and Monitor, the existing regulatory bodies for NHS Trusts and Foundation Trusts.
- 2.2 On 23 October Andrew Jones MP, Under Secretary of State for Transport gave a key note address at a conference on Total Transport at the National Railway Museum, York. The aim of the conference was to stress how, by working together CCGs, Ambulance Trusts, Local Authorities and community transport providers can collectively deliver smarter more cost effective health transport. YAS attended the conference with one of our new PTS ambulance vehicles at the invitation of East Riding Council and will look to develop more partnership working as part of the new PTS supplier framework contracts.
- 2.3 The NHS TDA and Monitor released a Quarter One 2015/16 financial statement on 9 October. This identifies that the NHS Trust sector ended the first quarter of the year £485 million in deficit against an initial planned deficit of £412 million, whilst the Foundation Trust sector ended the first quarter of the year £445 million in deficit. All but two of the ten Ambulance Services in England are identified as in deficit.
- 2.4 NHS England, Public Health England, the Fire and Rescue Service, Age UK and the Local Government Association have signed a new 'Consensus' to tackle health and social problems and reduce winter pressures. The document sets out how the organisations can work together at a local level to reduce health risks from falls and isolation and improve care for patients with long term conditions by undertaking more 'Safe and Well' checks. YAS is working with local Age UK and Fire and Rescue Services to support this initiative.
- 2.5 At the end of September NHS England published its Commissioning Standards for Integrated Urgent Care which underline the role of NHS 111 services as the single point of entry to integrated urgent care services. The guidance identifies the importance enhanced clinical

roles such as pharmacists and mental health professionals within 111 citing the pharmacy team established by YAS as an example of good practice.

3. Business Planning & Delivery

- 3.1 The Trust has making good progress against 2015/16 Operating Plan Strategic Objectives with October seeing a significant improvement in delivery of Red 1 and Red 2 response time standards which has continued into November.
- 3.2 As part of our plan to improve cardiac survival rates across Yorkshire, YAS led the highly successful Restart a Heart event on 16 October. Eighty eight schools took part with over 20,000 school pupils being trained in CPR. The event received a large amount of media coverage including ITV Calendar News, Sky News (Breakfast) and BBC national news. Events were well supported by local MPs, staff from local NHS organisations and third sector organisations including St John and the British Heart Foundation.
- 3.3 On 22 October the Trust and other members of the West Yorkshire Urgent and Emergency Care Network hosted a visit by the NHS England Vanguard Team led by Russell Emeny Director of Emergency Care Intensive Support Team (ECIST) to review progress on developing the West Yorkshire Urgent and Emergency Care Vanguard Value Proposition. This document identifies the key workstreams, investment and benefits to be derived from the Vanguard. YAS is focusing on three core areas of work including development of the Care Coordination Hub for 111 and 999, Urgent Care Practitioner development (including rotational posts in GP surgeries) and new Care Pathway development for services such as falls and mental health. The NHS England team were extremely positive about the strength and scale of the submission and confirmed additional funding would be made available to support member organisations take forward the next stages of development.
- 3.4 On 23 October the Executive Team met with Chief Officers from the 20 CCGs in Yorkshire that commission A&E services to present our service strategy and receive an update on Commissioners progress developing a longer term Commissioning Strategy for YAS. Jo Webster Chief Officer of Wakefield CCG confirmed CCGs and YAS are aligned in our strategic thinking and that CCGs are keen to see YAS succeed in its application for foundation trust status. Commissioners have agreed to form a Strategic Board to take forward strategic commissioning plans for A&E, PTS and NHS 111.

- 3.5 The new Make Ready service successfully went live at the Manor Mill facility in Leeds on 11 November, following the relocation of staff and vehicles from Gildersome Ambulance Station. The Make Ready Operatives have been introduced to assist ambulance clinicians by cleaning, refuelling and restocking vehicles. The service is expected to deliver benefits in vehicle cleaning quality, infection prevention and control and releasing clinical time for front line duties. If successful the services will be implemented across other Trust sites.
- 3.6 Three new Emergency First Responder Schemes were launched during October in partnership with South Yorkshire Fire and Rescue Service as part of the Trust on-going initiative to improve services for patients in smaller towns and villages. Around 30 reserve firefighters at Stocksbridge, Rossington and Dearne fire stations will now be responding to life-threatening emergency calls.
- 3.7 In October the Board approved proposals for changes to Director portfolios to support improved strategic delivery and better meet the challenges and opportunities inherent in the Urgent and Emergency Care Review. The Trust has subsequently received NHS TDA approval to proceed and formal consultation and recruitment will begin this month.
- 3.8 Last month saw the launch of Independant™, our subscriber 24/7 pendant alarm telecare assistance service across the Yorkshire region. The service is being operated in partnership with leading telecare sector specialist Wellbeing.

4. Executive Team Reports

4.1 Chief Executive

- The YAS Forum met on 13 October. The Forum received a presentation from the Chief Executive on the action plan to address issues raised in the Chief Inspector of Hospitals Report, an update on the Trust's financial position from the Interim Director of Finance and an update on actions of the Staff Forum and Membership Sub-Group.
- Our Head of Education and Standards Bryan Ward was presented with the prestigious Queen's Ambulance Service Medal (QAM) at Buckingham Palace in October. The QAM honours a very small, select group of ambulance personnel who have shown exceptional devotion to duty, outstanding ability, merit and conduct in their roles within NHS

ambulance services. Bryan, a paramedic with 36 years' service, received the QAM for his "services to ambulance training and education".

- Our Emergency First Responder scheme with Humber Fire and Rescue in the East Riding has been shortlisted for one of Fire Magazine's Excellence in Fire and Emergency Awards 2015 under the Innovation of the Year category. The awards ceremony will be held on 4 December at One Great George Street, Westminster, London.
- YAS has also been shortlisted in two categories of the Yorkshire Evening Post Best of Health Awards 2015. The nominations are for Gareth Ross, a York paramedic who works with the national Ebola Team and Community First Responder Sean Ridley in the Emergency Worker of the Year category. The Restart a Heart team has been shortlisted in the Team of the Year category for the second year running. The winners will be announced at an awards lunch at The Queens Hotel in Leeds on 7 December 2015.
- YAS will be opening a Drop-in Centre from 23-29 November 2015 at a vacant shop in The Ridings Shopping Centre in Wakefield. Promotional events will include free first aid training, a showcase of YAS vehicles, appearances by ParaTed, displays focusing on working and volunteering for YAS, safety in and around the home and information about when people should call 999 and 111.
- The Chief Executive undertook a number internal and external engagements during October and November including visits to Seacroft ambulance station and the NHS 111 Call Centre in Wath upon Dearne to harness staff views, a visit to the Emergency Services Training Centre at Easingwold and attendance at the Yorkshire Air Ambulance Charity Annual General Meeting and Award Ceremony and presenting to the Yorkshire and Humber Healthcare Financial Management Association on the role of ambulance services.

4.2 Operations Directorate

A&E Transformation programme

- A&E Transformation programme established end September with regular team meetings on Monday and Thursdays now in place.

- The key focus of the programme team during October was to:-
 - Develop the Business Case for the Programme;
 - Finalise the Programme Initiation Document (PID) and programme plan;
 - Establish the workstreams and the detailed plans;

- The first Programme Board meeting held on 21 October where the PID and Programme Plan were shared and subsequently baselined at end of October.

- Workstreams have drafted their detailed plans and established the work stream resources and regular meeting structure.

- The key elements progressed include:-
 - Programme - Demand sensitivity analysis completed by ORH;
 - WS1 - recruitment & training options identified for business case, workforce tracker specified and now in development;
 - WS2 - best practice visits set up with private sector, rota criteria starting to be developed, vehicle requirement analysis underway;
 - WS3 - external policy review completed, abstraction analysis completed, capacity planning structure designed, operational management structure drafted & being developed following TEG feedback;
 - WS4 - business plan and finance models developed, being refined based on feedback;
 - WS5: annual leave analysis, rota / resource analysis and challenge to 'break the rotas' being worked on.

- The main target for the coming month is the sign off of the business case with the Trust Board and then securing the resources for the programme in particular communication and analytical resources.

Clinical Training

- Clinical training to enhance the clinical skill level of operational staff continues with conversion courses for ECAs to Emergency Medical Technician 1 (Band 4) and Emergency Medical Technician II (Band 5). EMT II will all be placed on a paramedic programme in the near future in order to create our own paramedic pipeline. This clinical training creates a short term abstraction challenge but is a key part of our longer term workforce strategy.

Ambulance Response Programme

- On the 22nd of October the Trust joined the second phase of the national Ambulance Response Programme (ARP). The programme aims to identify the most serious life threatening emergencies as early as possible in the call cycle to enable the dispatchers to allocate a vehicle to these incidents quickly. All other incidents not identified as serious life threatening the dispatchers are given more time to make a more informed decision on what vehicle to send.
- Since the Trust went live we have seen some positive signs in some of key objectives we hoped to achieve. We are now making fewer allocations, over 50% of the time crews know exactly what they are responding to when allocated to an incident, this has risen from under 15% prior to ARP and the amount of time we are standing vehicles down has also reduced particularly in Green incidents.
- The Operations team continue to monitor the impact of the programme on our core business using the Lightfoot tool and a specific ARP viewer has been designed to aid us with this.
- Overall the involvement in the national programme has been positive. We have received positive comments from both operational and EOC staff, no incidents of harm identified in relation to the programme and there has not been a reduction in our performance standards.

Resilience

- YAS is taking a leading role in the planning and preparation for this year's South Yorkshire Gold Symposium which is due to take place on 12 November. This brings together multi-agency partners from all over the region and beyond sharing base practice and joint learning relating to various resilience related issues. The symposium also provides great opportunities for YAS managers to network with other blue light services personnel.
- In September YAS hosted the National Response and Recovery Working Group, that reports to the Emergency Preparedness and Resilience Group which in turn advises ACCE on resilience matters.
- Resilience and other areas of YAS including the CEO participated in the WY Urgent and Emergency Care Network Development and Winter Co-ordination Event aimed at sharing information and plans for winter as well as other urgent care development areas.

- YAS has produced its Winter Concept of operations as the overarching strategic guidance for this coming winter, supported by the YAs winter Tactical and operational plan that included the local areas and the supporting YAS departments. A briefing paper on the winter plan will go to TMG in November.
- A detailed review of the HART service provision is ongoing. This is based on the outcomes of the CQC visit in January, the Resilience and Capability Survey received in August and the 34 standards detailed in the HART Service Specification. This review includes the current team configuration, vehicle deployment, training competences against the HART Service Specification architecture, risk assessments and standard operating procedures.

Business Continuity

- The Top Management Review of the YAS Business Continuity Policy and Strategic Objectives took place in October. The YAS Seven business critical functions and the Strategic Objectives were unchanged.
- Consultancy with SWYFT has commenced with design of Exec level exercise and BC presentation.
- Secured consultancy for additional Debrief training with Wakefield council.
- Consultancy with HEY and CHFT ongoing.
- Review of A&E ops BC plans and all station BC plans Has commenced, meeting with all Locality Managers to set the strategy. Assistant BC manager and BC Officer are drafting all plans and supporting Cs's over the next three months to get these updated.

Resilience Education

- 1 x Bronze Refresher Course;
- 1 x Tactical / Operational JESIP Course;
- BC ISO22301 Course x2;
- ECA Session x1;
- Major incident & Triage CPD Session x1.

IPR Section 2 (A&E Performance)

	September	October
Red1	70.07%	74.65%
Red2	70.41%	72.45%
Combined	70.39%	72.60%

IPR Narrative

- Performance remained off trajectory in September due to a number of factors, the key factors continue to be:-
 - reduced deployed hours due to vacancies and the shortage of paramedics;
 - total abstraction primarily annual leave, sickness and training;
 - an increase in red demand during last three weeks in September some days up to 15% higher activity than forecast;
 - Private providers under delivered by 8 unit hours per day. However, overtime uptake remained above forecast mitigating some but not all of the shortfall problems.

- Abstractions remain under review on a monthly basis although as we move towards winter months the training abstraction reduces in preparation for winter pressures.

- Paramedic vacancies continue to be a significant challenge to achieving performance. Mitigating action includes additional recruitment targeted at qualified technicians.

- Pressure in the hospital A&E departments on a regular basis is beginning to impact in some CBUs particularly South where Sheffield Teaching Hospitals have building programme ongoing impacting on access to A&E, they have introduced a new patient booking in system which will take time to embed and they are seeing increased activity and flow problems throughout the patient journey.

- Red 2 missed trajectory achieving 72.5% against a trajectory of 74.6%. Total resource hours including St John and Private providers and new entrants increased from around the third week in October and that trend has continued to present date with subsequent sustainable performance improvement. Overtime remains around 2% above the forecast and risks remain as to how long we can sustain that level of commitment from staff.

4.3 Clinical Directorate

Urgent and Emergency Care

- Progress with the West Yorkshire Urgent & Emergency Care Network Vanguard programme continues with the Value Proposition due for submission to NHS England by the end of November. In addition, YAS is engaging with the NHS England Emergency Care Improvement Programme (ECIP) which is providing support for System Resilience Groups (SRGs) whose acute trust Emergency Departments are failing to deliver the four-hour target. In Yorkshire & Humber these are York & Scarborough, Hull, and Mid Yorkshire (Wakefield).
- There are concerns over the number of Urgent Care Practitioners (UCPs) choosing to leave YAS for posts in primary care which has impacted on the ability to deliver performance indicators for the Sheffield scheme. In addition, development posts for paramedics in Primary Care, sponsored by Health Education England Yorkshire & Humber, have been advertised across the region putting a further strain on YAS clinical workforce numbers. This has, in part, been mitigated by offering secondment opportunities for some of these posts so that YAS clinicians are not permanently lost from the workforce. NHS Wakefield terminated the contract for UCP provision in Wakefield at the beginning of November; the five UCPs affected have been temporarily redeployed to support the Sheffield scheme.

Research & Development

- YAS has achieved 643% of this year's recruitment target for studies in the National Institute for Health Research (NIHR) portfolio. Recruitment to the AIRWAYS-2 trial remains on track with 411 patients recruited to date and participation in the RIGHT-2 trial, studying the use of GTN patches in cases of acute stroke, has now been agreed. A second Research Paramedic, part-funded by the Clinical Research Network Yorkshire & Humber, has been appointed to support this trial.

Clinical Development

- The Associate Director for Paramedic Practice has hosted three Continuing Professional Development (CPD) days with attendance of more than 100 members of staff in total. Resuscitation Team Leaders have been trained in advanced skills such as DC cardioversion and external transcutaneous pacing to assist in improving survival in the peri-arrest period.

IPR

- No new exceptions to report.

4.4 Standards and Compliance Directorate

General update

- YAS/CCG Quality event - The Executive Director of Standards and Compliance and Executive Medical Director and senior members of their teams, together with the lead commissioning CCG for YAS, led a very positive joint quality workshop event on 13 November. The event included presentations on the YAS clinical quality strategy and key clinical outcomes, together with a discussion about potential CQUINS for inclusion in the 2016/17 A&E contract.
- Information security - On 12 November YAS hosted a thematic review visit by Care Quality Commission, focused on information security. YAS was one of 50 organisations selected from across the healthcare sector nationally selected to take part in the exercise. A national report from the exercise is anticipated in January 2016.
- Care Quality Commission – Implementation of the action plan arising from the CQC inspection conducted in January 2015 is continuing to progress well, with weekly monitoring by the Trust Executive Group.
- Freedom to Speak Up – The working group, with representatives from both the Staff Forum and Unions, is making good progress and recommendations for the implementation of the nationally recommended Freedom to Speak Up Guardian role will be made to the Trust Executive Group in December.
- Nursing in YAS – The new Nursing and Midwifery Council revalidation requirements were launched as planned in October 2015. New software has been purchased to support nurses in meeting the revalidation requirements. An outline plan for future development of the nursing profession in YAS has been agreed in TEG.
- Hillsborough – The Trust has continued to contribute actively to the inquest process and to plan for the key stages ahead.

IPR

- NHS 111 – calls remain above contracted for October (4.5% - 5,181 calls) and up month on month (11.3% - 12,352). For calls answered in 60 seconds the performance remains below 90% for the second month in succession however an additional 3,929 calls were answered within threshold when compared to the same month last year. Cumulative YTD is now 92.9% (95% target). NHS 111 referrals to 999 have increased in absolute terms (288) month on month however the referral rate has dropped 0.6% to 7.7% a reduction of 9.3%. Additional recruitment is progressing for winter in line with contract funding, and a capacity review has been requested with commissioners to consider the implications of the current activity above the funded level of the contract.
- Complaints and concerns - the improved performance in response times for complaints and concerns against timescales agreed with the complainant has been maintained in October.
- Safeguarding training compliance remains high, at 92% compliance with level 1 requirements and 82.7% compliance with level 2.
- Infection Prevention and Control – hand hygiene and cleanliness audits, including spot checks by the Head of safety/IPC Nurse have shown positive improvements over the last 2 months. The Trust is actively promoting compliance with bare below the elbows policy and the Trust has ordered fob watches for all staff delivering direct patient care to support this, with an expected delivery date in December 2015. Vehicle deep cleaning processes have also improved, supported by increased staffing levels for cleaning staff and weekly monitoring led by the Director of Infection Prevention and Control.
- Incidents – the rate of incidents and near misses reported by staff has risen slightly this month. The level of harm arising from reported incidents remains within the previous low range. A monthly feedback bulletin is being circulated to staff, to provide feedback on Trust learning from incidents and complaints.

4.5 People & Engagement Directorate

Human Resources

Recruitment:-

- Recruitment to A&E Operations to support the workforce plan continues to be a key priority and is being supported by a local radio campaign. As a result a healthy pipeline is starting to develop:-

- Paramedics - Paramedic recruitment continues with a rolling advert out for Qualified Paramedics .There was 7 Qualified Paramedics that started Induction on Monday 2nd November, due to go operational on the 9th November. There are a further 41 in the recruitment pipeline.
 - EMT's - The next course for the EMT2's will be the 4th January and we have 10 candidates earmarked for this date. There are 8 candidates earmarked for the 9th February training date and another 5 candidates for the 7th March training date. There is currently an advert out for EMT 2's for the East and West Yorkshire due to close shortly which has yielded 40 applications to date. Internal conversion courses are also continuing.
 - ECA's - Monthly recruitment events are continuing at the Lifewise Centre and a healthy supply of ECAs is developing as a result. 132 ECA candidates have been invited to the event taking place on the 21st November. We have 164 ECAS already in the recruitment pipeline. The Recruitment team are currently exploring alternative locations so that the recruitment event can be held at different parts of the county.
- A new recruitment applicant tracking system (TRAC) is due to be implemented in January 2016.

Health & Wellbeing:-

- A delivery and communications plan to support the 2015/6 flu campaign has been developed and the vaccination programme is now well underway. 18% of the workforce has now been vaccinated.
- Forty five attended the Blue Light Mind Event on 9th November. The event was organised by YAS as part of the Trust's Health & Wellbeing strategy with the aim of developing further awareness around mental health and wellbeing.

Organisational Effectiveness and Education

Statutory and Mandatory Training:-

- Whilst the compliance rate continues to be high this is being monitored due to the need to cancel Statutory and Mandatory training for A&E Operations for a period of time. A dashboard is now being used which provides a more transparent approach to monitoring this area.
- The revised workbook is completed and is being distributed throughout November.

Workforce Race Equality Scheme:-

- A more detailed report highlighting the initial action plan to the workforce Race Equality Scheme is provided to the Board. The Head of Diversity and Inclusion has now started and will be working to produce a revised set of equality objectives in line with EDS2. This will be reported to the Board.

Cultural Questionnaire - Your Voice, Our Future:-

- The survey titled 'Understanding the Quality of Your Working Life' was launched and circulated to all staff. Over 1378 questionnaires have been completed. A total of 852 surveys were returned on paper by post and a further 510 were completed online.
- The results of the statistical analysis between the workplace features, cultural dimensions and other factors have now been validated and will be summarised in the final report. The draft results of the survey have now been received and will be discussed at the Board Development session in December.

2015/16 Training Priorities:-

- The focus for the Training and Education plan so far has been within A&E Operations. The training and education plan is extensive this year to match the requirement for new starters and to upgrade for new job roles within the service. Given the scale and scope of the plan the delivery requirement has been modelled for the forthcoming years and contributes to the Transformation for A&E Operations.

Bradford University Development:-

- We have been working closely with Bradford University in the development of an additional programme for the development of paramedics. The programme will be run in partnership, with the YAS education team delivering a proportion of the programme. The placement requirements will also be provided within YAS.
- The programme will be set a BSC level which means it meets current PEEP proposal requirements. It proposes to run over four years with a sandwich year, in year three.
- This proposal is currently being discussed with an earmarked commencement of September 2016, the programme is planned to take 40 students per year, this would then give the students the ability to work on bank as EMT 1 or EMT2 which will assist with summer and winter pressures, as well as for a full year within year three.

The Training Needs Analysis:-

- A comprehensive training needs analysis has now been developed for the Trust which itemises the Statutory and Mandatory Training needs for each role and undertakes a broader review of key requirements for each Directorate.

IPR Section 4 Workforce

Sickness Absence

- Sickness absence remains above the Trust target of 5% however there has been a significant improvement compared to last year. The sickness absence rate for October 2015 stands at 5.75%. This is no change from the previous month. This compares favourably to the same period last year when it stood at 6.62%. The 12 month figure stands at 5.86% compared to the 6.49% for previous 12 months. YAS is currently ranked 5 out of 11 Ambulance Trusts nationally.

PDRs

- Current PDR performance stands at 76.84% against a target of 80% which is a slight deterioration since last month. However compliance has improved by 12% over the last 12 months.

4.6 Finance & Performance Directorate

- The Finance team continue to support the Trust's transformation agenda including A&E workforce modelling and PTS.
- The Trust has procured a Patient Level Costing System that will support the development and the roll out of Service Line Reporting and Management. The Trust is also working with Commissioners and Monitor on a new payment mechanism/system and development of Payment by Results (PbR). This includes Finance and the Urgent Care team working collaboratively with commissioners to develop future Urgent Care Practitioner (UCP) pricing models.
- The Finance team in conjunction with the strategy team are leading on the business planning process for 2016/17 including contract negotiations which started in October.

Finance Position Update:-

	YTD Plan £'000	YTD Actual £'000	YTD Variance £'000
Income	140,471	139,382	(1,089)
Expenditure	(138,587)	(136,938)	1,649
EBITDA	8,435	8,632	197
Surplus	1,884	2,444	560
CIPs	(4,473)	(4,340)	133
Cash	16,965	30,432	13,467
Capital Investment	(9,138)	(3,152)	5,986

- The Trust as part of a national requirement submitted a revised c. £2.0m surplus financial plan to the NHS TDA in September. Against this revised plan the Trust has a cumulative surplus as at the end of (M7) October of £2.4m, a positive variance of £0.6m. The positive variance is principally due to timing of a non-recurrent insurance pool rebate with an offset made for risk of under utilisation and potential repayment of CCG investment funds. As such the forecast for the full year remains in-line with the revised plan. Although YAS does not currently anticipate further reduction or refund of performance penalties from CCGs the positive variance may also be in future reduced by adverse (<75%) performance delivery and therefore increased contract penalties up to a total of c. £3.9m.
- A&E are £(1.984)m adverse to plan driven by the failure to meet one of the CQUIN targets (Paramedic Pathfinder), ongoing subsistence payments and the use of external providers to support internal capacity shortfalls in order to maintain patient care delivery. Provision for A&E penalties of £(2.4)m have been accrued in respect of non-achievement of Red 1 and Red 2 performance targets. The PTS position is adverse to plan by £(0.213)m due to continued reliance on taxis and subcontractors.
- Earnings before Interest Tax Depreciation and Amortisation (EBITDA), for the year to date is £8.632m against a plan of £8.435m favourable by £0.197m.
- Quality & Efficiency (CIP) unaudited schemes delivered 97% against the year to date target resulting in an adverse variance of 139k.

- The Trust had cash and cash equivalents of £30.4m at 30 October 2015 against a plan of £17.0m resulting in a favourable variance of c.£13.5m. This is due to delays in the capital programme and a favourable working capital position against plan.
- Capital spend for 2015-16 at the end of October 2015 at £3.2m is £6.0m behind plan. This is due to a number of factors including a delay in the investment in A&E vehicles due to reassessment of base van type and chassis availability.

	Current Month			Year to Date			Full Year		
	Budget	Actual	Variance	Budget	Actual	Variance	Plan	Forecast	Variance
	£000	£000	£000	£000	£000	£000	£000	£000	£000
Accident & Emergency	14,968	14,933	(35)	102,398	101,822	(576)	176,937	175,937	(1,000)
Patient Transport Service	2,267	2,292	25	15,806	16,227	421	26,933	27,607	674
111	2,507	2,612	104	17,176	17,673	497	31,375	31,776	401
Other Income	400	328	(73)	5,091	3,660	(1,431)	10,734	9,106	(1,628)
Operating Income	20,143	20,164	21	140,471	139,382	(1,089)	245,980	244,426	(1,553)
Pay Expenditure & reserves	(13,659)	(13,782)	(123)	(92,956)	(92,886)	70	(161,531)	(163,197)	(1,666)
Non-Pay expenditure & reserves	(5,736)	(5,502)	235	(39,080)	(37,864)	1,216	(70,889)	(67,935)	2,953
Operating Expenditure	(19,396)	(19,283)	112	(132,036)	(130,750)	1,286	(232,419)	(231,132)	1,287
EBITDA	747	881	134	8,435	8,632	197	13,560	13,294	(266)
EBITDA %	3.7%	4.4%		6.0%	6.2%		5.5%	5.4%	
Depreciation	(810)	(769)	41	(5,137)	(4,832)	305	(9,187)	(8,974)	213
Interest payable & finance costs	0	0	0	(207)	(173)	34	(287)	(253)	34
Interest receivable	6	7	1	37	38	2	62	66	4
Profit on fixed asset disposal	12	25	14	81	102	21	138	153	15
Dividends, interest and other	(189)	(189)	0	(1,324)	(1,323)	1	(2,269)	(2,268)	1
Retained Surplus	(235)	(45)	190	1,884	2,444	560	2,017	2,017	0
I&E Surplus %	-1.2%	-0.2%		1.3%	1.8%		0.8%	0.8%	

Contracting and Business Development

PTS:-

- South, East and West PTS contracts have all signed for 2015-16. North are still debating internally on the split of the contract value, however, all aspects of the contract have been agreed between the North consortia and YAS. Both West and South consortia are undergoing a review of PTS services aiming to report at the end of 2015. The feedback from commissioners regarding PTS' transformation plans has been very positive.
- Discussions with CCGs are underway around the provision of winter pressures services. Contract negotiations for 2016/17 will commence for PTS at the end of November 2015. The service is also considering a number of tender opportunities which are being progressed through the gateway review process.

A&E:-

- A&E contract negotiations commenced in October and are in the early stages of the annual process with high level commissioning intentions received in November. Negotiations are currently focussed on CQUINs with a joint CCG and YAS quality meeting taking place in mid-November. In addition a contract negotiation strategy has been developed that will underpin our approach to contract negotiations and response to commissioner intentions.

Other:-

- Other Business Development activities include a project to offer telecare services for individuals within Yorkshire and Humberside which has now launched.
- NHS 111.
- Capacity Demand & Capacity Review requirement remains outstanding with and from Commissioners.

Fleet

- Following the successful new Fiat Demonstrator 2 week roadshow in which over 200 feedback forms were received from A&E staff and which scored a mean average of 4 out of 5. The proposal to move forward with the Fiat based vehicle in preference to the Mercedes Sprinter was endorsed by the Vehicle and Equipment Committee. Staff made further recommendations for additional modifications during the process. There are still issues with potential challenge to the procurement process and with a potential delay in obtaining the base vehicle chassis, consideration is being given to a short mini-competition tender process which will enable all staff modifications to be adopted at the same time. Many road staff commented very positively that for the first time they are pleased to have had the opportunity to see and provide input into the new vehicle before final decisions have been made.
- The Vehicle Mobile Data Terminal and Satellite Navigation upgrades are on target for completion by the end of November as planned with less than 60 remaining vehicles left to complete.

- The Trust ancillary staff have adopted and introduced vehicle consumable checks as part of their routine scheduled A&E Vehicle Deep Clean infection control process. In conjunction with the Make Ready Pilot and Vehicle Preparation Pilots that are shortly to start, this initiative provides a significant support to front line staff which will ensure that any consumables getting close to their expiry date will be removed. This has traditionally always been carried out by front line staff at some stage during each shift thus releasing front line time for the benefit of our patients.
- Patient Transport vehicles are being delivered from the converter as planned between November and February until the three batches of 47, 18 and 46 are all in service. Over 30 very old vehicles have already been removed from service and disposed via auction.
- The planned 20 replacement Rapid Response Vehicle (RRV) cars are currently in build at the converter and scheduled to be delivered during November when they will have radio and MDT fitted and put into operational service during December.
- As part of the support service vehicle replacement plan, the Procurement department will shortly take delivery of the last of their 8 replacement vehicles during November. These are now being fitted with the same Vehicle Telematics system that has been recently rolled out across the PTS fleet which will enable the Procurement team to enhance their delivery schedules to stations across Yorkshire.

Hub & Spoke Outline Business Case (OBC)

- The OBC is on schedule and Part 1 of the OBC is due to be finished on 7/12/15. The costs, benefits and risks of the three shortlisted options with the 'Do Nothing' option are being finalised in November by Mace and the Project Team. After evaluation, the Preferred Option will be selected and submitted to the Programme Board on 21/12/15 for review and approval to progress to OBC Part 2 in January. Doncaster/Bentley – Estate focussed options paper presented to H&S PB 04 Nov. Agreed to re-submit the paper focussing on the three recommended shortlisted options and understand the performance and quality implications associated with each with an overarching timeline to understand expected delivery timescale. To be tabled at Dec H&S PB.

- Make Ready – The pilot site at Manor Mill live, as scheduled, on 11th November. Gildersome station is to be closed 13 November 2015 and advertised for sale. Over the coming weeks tracking the benefits and lessons learnt being collated and reported. Currently constructing timescales, capacity and vehicle numbers to extend the use of the Make Ready system to process the A&E vehicles at Leeds Central ambulance station.
- Vehicle Preparation – Approval has been given to pilot VPS at Wakefield ambulance station using internally recruited staff. Adverts have been placed for staff via NHS Jobs and planning for the estates works to prepare the site is underway.

Estates

- The Estates Department is taking legal advice from Capsticks regarding the significant overspend c. £120k on the Springhill 2 Extension and are in negotiation with Faithfull and Gould (Nominated Contract Managers) to recover costs.
- Relocation of Gildersome to HART is complete and Gildersome Station is secured and awaiting disposal.
- HART Make Ready pilot is operational on 11/11/15.
- Wakefield Ambulance Station VPS pilot is currently at design stage, with a view to completion of minor works by 12th December, as per programme.
- Springhill EOC Emergency Generator controls upgrade completed without issue on 11/11/15: Options appraisals for strategic redevelopment of Doncaster and Bentley is received and further potential options to be considered, allied to the future Hub and Spoke programme.
- Estates Department restructure paper is complete and awaiting presentation to TEG.
- Estates Department Governance Assurance reporting review is complete with significant risk reduction and governance assurance improvement and awaiting presentation to TEG.
- Estates budgets are marginally underspent and in financial balance: Estates Annual Business Planning process is underway.

Management Information/Business Intelligence

Capacity planning and Trajectory work for A&E:-

- Revised trajectory for A&E Red1 and Red 2 performance.
- Abstraction and overtime review to station level to inform future projections and forecasts.
- Risk Analysis of 2016-17 annual leave bookings to inform rota review work streams.
- Intraday Station level staffing analysis vs ORH Rota Keys – Roster recommended changes fed to resource.
- Ongoing work on A&E FTE training and recruitment tracker.
- Worked with ORH to update demand forecasts for A&E. Workforce Plan.

A&E Reporting:-

- Introduced new reports around the Ambulance Response Programme.
- Worked with IT to adjust reporting in the Data Warehouse to take into account the new clock start times.
- Revised existing reports to look at new times.
- Started process of reviewing contract reporting with commissioners.
- New CMB dashboard being set up.

Patient Level Costing System:-

- Project started with initial scoping meetings with Prodecapo.
- Minimum data sets being created to feed the system.
- Qlickview bought and servers being set up. BI to undertake training to utilise further.

Fleet:-

- Automated Weekly Cleaning schedule report. Report in draft and to be rolled out in November.

Lightfoot (Statistical Process Control – Information, Decision, Act):-

- System continued for a further 12months.
- BI supported regular meetings focussing on A&E performance recently.

Service Redesigns:-

- Analysis and support provided for various service redesign proposals.

Clinical Hub:-

- Police triage, Hear & treat and closure rate reports set up.

EOC:-

- Dispatcher and other reports automated and made available live to staff so they can see their own performance.

GRS:-

- Another ambulance trust is help to design queries to report GRS direct from the database which will speed up reporting.

111:-

- Call audit reports set up.
- Link between 111 and CAD set but some initial tests show it's not working correctly yet.
- Call handler agent reports and clinician reports being automated and made available live to staff.

PTS:-

- Started PTS and Forecast Capacity Model.
- Telematics is installed and BI need to set reports.

Staffing:-

- Monthly sessions set up with external teams to train analysts on the wider YAS business. Recent ones have included clinical training on e-PRFs, session on CFRs, session on health and Safety and capacity management.

ICT

Telecare:-

- ICT Developed and commissioned YAS telecare scheme, Independent, alongside the commercial team.

Ambulance Response Programme (ARP):-

- Implemented and commissioned the Ambulance response programme pilot phase (go live was 21st October).

999/111 Interface:-

- This project has enabled systems to interface between 999 and 111 calls where non-emergency calls can be transferred to urgent care service (111) in a timely fashion with no detrimental impact on patient care.

Airwave Handset Replacement:-

- This project ensured continuation of front line A&E/PTS operational communications using digital radios by replacing the end of life SRH3500 Model with the latest STP9000 and associated software as part of a National Airwave replacement Program.

H&S Team Move to Unit 1B:-

- This project provided the ICT Infrastructure requirements needed to facilitate the Estates Program of relocating the Hub and Spoke Program Team and Estates to the new Unit 1 B Site.

Procurement Move to West Yorkshire Police:-

- This project provided the ICT Infrastructure requirements needed to facilitate the Co-Location Project, part of the HUB and Spoke Programme to relocate Procurement from Gildersome to the new Unit 41D Site in partnership with West Yorkshire Police.

Procurement

- The Procurement Department is improving its performance in terms of quality, timeliness, and savings for each procurement project undertaken.
- High-profile projects such as Private Providers, the PTS Framework, and various ICT procurements are being fast-tracked as required, but their prioritisation has delayed other projects such as the Vehicle Spares tender, and other lower priority projects.
- Since the sign-off of the 5-year Procurement strategy, the team is implementing the strategy as per the high-level plan.

- As appointment has been made for the Deputy Head of Procurement (Band 8A) role, with the start date likely to be January 2016. Other lower-band appointments have been made in line with the agreed resource budget.
- The relocation of the Procurement team to Unit D (the Police) is complete. Initial ICT connectivity issues have been resolved and the team is settling into its new environment. There is still some way to go until the internal supply chain function is operating more efficiently, but this will be significantly improved with the delivery of 6 new logistics vehicles in November.

5. Recommendation

- 5.1 That the Board agrees it has sufficient assurance on the activities of the Executive Team and Trust Executive Group during this period.
- 5.2 That the Board notes and discusses the variances contained within the October 2015 IPR report, highlighted in the Executive Directors reports.