



MEETING TITLE Trust Board Meeting in Public		MEETING DATE 30/08/2018	
TITLE of PAPER	Trust Executive Group Report & Integrated Performance Report (IPR)	PAPER REF	3.1
STRATEGIC OBJECTIVE(S)	All		
PURPOSE OF THE PAPER	The purpose of the paper is to give the Board assurance on the activity of the Trust Executive Group (TEG) from 18 May 2018 to 22 August 2018 and the opportunity for TEG to highlight the key variances / movements contained within the July 2018 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: see also guidance 3. overleaf]: Key performance indicators discussed at TEG, TMG and the Operational Delivery Team meetings.			
PREVIOUSLY AGREED AT:	Committee/Group:	Date:	
RECOMMENDATION(S)	The Board agrees it has sufficient assurance on the activities of the Executive Team and Trust Executive Group during this period. The Board notes and discusses the variances contained within the July 2018 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"/>
Equality Impact Assessment - [New] <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" 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"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Choose a DOMAIN(s)	All		
NHSI Single Oversight Framework Choose a THEME(s)	1. All		

Trust Executive Group Report

1. PURPOSE/AIM

To give the Board assurance on the activity of the Trust Executive Group (TEG) from 18 May 2018 to 22 August 2018 and the opportunity for TEG to highlight the key variances / movements contained within the July 2018 Integrated Performance Report (IPR).

2. EXTERNAL ENVIRONMENT

In May The Public Accounts Committee published its report 'Reducing Emergency Admissions'. The report identifies that nearly 1.5 million people could have avoided emergency admissions in 2016–17 if hospitals, GPs, community services and social care had worked together more effectively. The Committee calls on NHS England to improve the pace of delivery on the five-year plan to move care into the community and out of hospitals.

NHS England has announced several revisions to national Ambulance Quality Indicators (AQIs), as part of the 'Spring Review'. The changes are informed by learning since the Ambulance Response Programme (ARP) was introduced across the 10 English services in the autumn of last year. These changes included the introduction of a mean standard of one hour for Category 3 (urgent calls) and the ability to clinically reassess Category 1 (life threatening) calls based in information received during the call.

In June representatives from all of the ten English ambulance services, including YAS, attended a national event with NHS Horizons to launch NHS Horizons #ProjectA. #ProjectA aims to improve NHS ambulance services using feedback, ideas and innovations directly from ambulance staff nationwide. Staff from across the country have been invited to contribute to improvement ideas generated at the event via a new ideas channel <https://projecta.crowdcity.com>.

On 5 July services took place at Westminster Abbey and York Minster as part of national celebrations to mark the 70th anniversary of the NHS. The evening service at York Minster was hosted by Irish singer and actress Linda Nolan and attended by former Secretary of State for Health and Social Care, Jeremy Hunt. It included patient and staff testimonials and music from the Lewisham and Greenwich NHS Choir, B-Positive Choir and Hull and East Yorkshire Hospitals NHS Trust Staff Choir.

Health Education England (HEE) has published its interim report of the Topol Review 'Preparing the healthcare workforce to deliver the digital future'. The Review explores how to prepare the healthcare workforce, through education and training, to deliver the digital future. The findings highlight the importance of upskilling the current workforce, and the skills and attributes clinicians will need to retain alongside digital transformation. The Report is particularly relevant to ambulance trusts as NHS Improvement and NHS Digital are working with the sector to develop a national Digital strategy.

The Government has outlined plans to add cardiopulmonary resuscitation (CPR) and other first aid skills to the national curriculum. If the proposals are approved, health education classes will be compulsory in all schools in England from 2020. The Government's announcement is being described as a "landmark move" and follows years of campaigning by the Resuscitation Council (UK), British Heart Foundation, St John Ambulance, British Red Cross and ourselves.

Shadow Integrated Care Systems in South Yorkshire & Bassetlaw and West Yorkshire & Harrogate continue to progress new governance arrangements with local health and social care partners and national regulatory bodies. The Draft South Yorkshire Hospital Services Review has been shared with Boards and Governing bodies for feedback and we remain involved in the development of system plans for urgent and emergency care services across Yorkshire.

3. EXECUTIVE TEAM REPORTS

3.1 Chief Executive

Despite increasing activity levels we continue to perform well against national Ambulance Quality Indicators (AQIs). The latest data published by NHS England for July shows YAS had mean and 90th centile response times for Category 1 calls of 7 minutes 19 seconds and 12 mins 31 secs respectively against an England average of 7 mins 37 secs and 13 mins 15 secs. The Trust is also ahead of national averages for category 2, 3 and 4 response standards and leads the sector in Emergency Operations Centre (EOC) call response times and rate of 'hear and treat' activity.

At the beginning of June we experienced some telephony problems in our 999,111 and PTS call centres. During the incident national and local business continuity arrangements were activated and all incoming calls were reviewed. No patient harm occurred as a result of the incident and a thorough review is being undertaken to identify any lesson from the incident.

We are actively engaged in the Invitation to Participate in Dialogue (ITPD) process with commissioners for the re-procurement of NHS 111 integrated urgent care, following our success at passing the first stage Selection Questionnaire (SQ) in June. The submission of final bids is expected in mid-October with the preferred supplier being announced in December.

On 1 July 2018 the new contract for Non-Emergency Patient Transport Services for Scarborough & Ryedale & Vale of York Clinical Commissioning Group (CCG) areas went live. The contract includes the introduction of clearer criteria to ensure that journeys are only booked for patients with a medical need for NHS-funded transport. We are assisting patients not eligible for NHS-funded transport to find alternative means of getting to their appointments via local voluntary and community transport services and public transport.

In July we took delivery of the world's first hydrogen-diesel hybrid Patient Transport Service (PTS) vehicle. The vehicle has a hydrogen injection system that reduces the amount of diesel used and associated carbon emissions.

The vehicle has been developed with funding from Innovate UK, part of UK Research and Innovation, a non-departmental public body.

In a further innovative move, the Trust has joined together with a Northern Ambulance Alliance (NAA) partner to submit a joint bid for the North Lincolnshire Non-Emergency Patient Transport. Our bid was submitted in early August with the outcome of the tender expected in coming weeks.

As part of the NHS 70th birthday announcement of extra funding for the English ambulance services, the Department of Health confirmed additional capital funding of £7.6m for Yorkshire Ambulance Service. £5.6 million of funding has been provided to update and expand our fleet of emergency ambulances, allowing us to purchase 62 new ambulances this financial year. A further c£2m is available to implement an Ambulance Vehicle Preparation (AVP) service at Leeds and Huddersfield ambulance stations. The service will introduce a dedicated team of staff to maintain, clean and restock vehicles freeing clinicians, who are currently undertaking these duties, to focus on patient care.

In July and August the Trust Executive team, supported by members of Business Development and Learning & OD, hosted four Locality 'Listening' events in Barnsley, York, Wakefield and East Riding. The interactive workshops were an opportunity for staff and members of the public to hear about and provide feedback on our evolving strategic plans and to share their ideas about how we can improve services. The events were positively received by staff, who were pleased to be able to talk openly with colleagues and leaders about the Trust's future direction. The feedback received has already been presented to the Trust's senior leadership team and will help shape the Trust's corporate strategy due to be launched in October at our Annual Leadership Summit.

The Trust's electronic Patient Record (ePR) pilot, launched in South Yorkshire in November 2017, is now live across Rotherham and Sheffield. Ninety percent of YAS staff based across South Yorkshire have now received training on the new application and feedback from staff and hospital sites taking part in the initial pilot to date has been overwhelmingly positive. Following the Board's approval of the ePR Business Case in July plans are being progressed for the next stages of the roll-out in West Yorkshire and Hull and East Riding.

The Department for Digital, Culture Media & Sport have confirmed approval of our Phase 2 Q-Volunteering grant proposal. The £50,000 funding will support the Trust to develop its long-term vision to improve outcomes for patients by increased volunteer involvement and improved links with voluntary organisations embedded within our local communities. Dr Phil Foster is working with the Trust in a part time capacity to lead on the initiative. As part of the work YAS will host a full-day event entitled *Transforming YAS's role in communities through volunteering* on 11 September in Leeds. The day will draw on the experiences of other ambulance services and existing third sector initiatives.

As part of our formal collaboration with West Yorkshire Police and West Yorkshire Fire and Rescue, the three services are creating a team of 15 volunteers to work with schools in West Yorkshire. The volunteers will provide advice on community safety, careers and appropriate use of services.

The three services have also signed a Memorandum of Understanding for driver training to share the services of some instructors and training facilities.

The Trust has recently launched its new public website. The new website is designed to be more accessible on all devices including mobile phones and tablets and has improved translation, dyslexia and visibility functionality.

In July we conducted interviews for the post of Director of Operations and I am pleased to confirm that Nick Smith has been offered and accepted the role. Nick, a native of Yorkshire, is currently Deputy Director of NEPT at the Welsh Ambulance Service. He has previously held senior roles in the technology sector and undertaken the roles of Director of Operations at Cumbria Ambulance Service and Assistant Director of Operations for West Yorkshire Metropolitan Ambulance Service. Nick is expected to take up his new role in mid-November. Ian Ferguson who worked for the Trust for a period last Autumn has returned to undertake the role on an interim basis ahead of Nick's arrival.

Dr David Macklin is currently on secondment to the Association of Ambulance Chief Executives (AACE) supporting a number of projects including the national roll-out of the Ambulance Response Programme (ARP). Dave will be leaving the Trust at the end of September having worked at YAS since 2009. We wish him well and thank him for his hard work, dedication and commitment.

Tim Gilpin has been appointed to fill the Non-Executive position vacated by Erfana Mahmood, following the completion of her second term of office in May. Tim has been an Associate Non-Executive Director since January 2017.

We are extremely pleased to congratulate our former Deputy Director of Operations Ian Walton for being one of only two recipients of the Queens Ambulance Service Medal (QAM) in the Queen's Birthday Honours List. The medal honours a select group of ambulance personnel who have shown exceptional devotion to duty, outstanding ability, merit and conduct during their careers. Ian retired last year following a 39-year ambulance career in the Yorkshire region, where aside from holding several senior positions, he successfully oversaw the ambulance service response to a number of high-profile events and incidents including le Tour de France (in Yorkshire), the December 2015 floods and the Great Heck train disaster in 2001.

3.2 Operations Directorate

Performance

Although year on year demand has increased by 5.4% comparing July 2017 to July 2018 with calls increasing by 11.5% (including duplicate calls) the Trust continues to perform extremely well in terms of call answering when compared to other Trusts. In July YAS had the lowest mean call answering time in the country at 3 seconds.

Against the national standards Category 1 mean performance has improved year to date from June by 11 seconds. The 90th Percentile measure is also significantly under target and has improved by 18 seconds.

The Trust's performance for Category 2 and 3 is the best of all the AMPDS Trusts and Hear and Treat is the second highest rate in the country.

As part of the Ambulance Response Programme (ARP) delivery programme YAS, as agreed by Commissioners, put forward a performance trajectory. In July the Trust exceeded performance against the trajectory for all categories, apart from Category 4 which was missed by 3 seconds.

Operational Plan 2018/19

Following approval of the Directorate's annual Operational Plan by the Trust Executive Group, progress in the key schemes is as follows:

Fleet - This project supports the Ambulance Response Programme (ARP) which is fundamentally about sending the right resource, first time to the patient. Capital investment for additional double crewed ambulances (DCAs) is required and a proportion of rapid response vehicles (RRVs) de-commissioned.

In Quarter 1, an additional 27 DCA vehicles became operational. Six are currently loaned to the YAS Academy to assist with the required emergency driver training but will be returned to front line operations in September when the 6 vehicles specifically ordered for YAS Academy are expected to be delivered. The next batch of 40 new DCAs is currently being converted with 20 due to arrive by the end of September and 20 by the end of October.

EOC Redesign - A full month of testing of the new model is scheduled to take place from 4 September (24/7) with the results of this further testing expected to be presented to the Executive Team towards the end of October.

Skill Mix Review - Emergency Care Assistant (ECA) recruitment continues, working closely with Recruitment and the YAS Academy to ensure Operations achieve the end of year staffing profiles as agreed within the operational plan.

Hear and Treat – This service, within the Emergency Operations Centre (EOC), supports clinical decision-making for the control room and front line staff, which in turn improves patient experience and See, Treat & Refer. Due to the service's success and being a national leader, additional investment has been secured to recruit additional Clinical Advisors into the EOC. Recruitment has started to increase provision and enhance the level of service offered.

Lower Acuity Transport (LAT) - This scheme involves increasing current provision to allow appropriate and timely response for Category 3 and 4 patients. Recruitment to the LAT roles continues in line with the workforce recruitment plan. Discussions on the potential "Phase 2" of LAT with Patient Transport Service and Urgent Care Directorate have recently commenced.

Job Cycle - This project involves analysing full job cycle time, including wheels mobile, unavailability and time on scene. An initial set of data has been presented to the Operational Divisional Management Board and proposals for the next phase are currently under development, in conjunction with the Clinical Directorate.

EPRR - Compliance against the Core Standards and the National Ambulance Resilience Unit (NARU) audit are ongoing with being improvements being made in line with the Trust submission in October 2018.

The **Commander Framework** has been reviewed and updated in line with NARU specification. This is being presented to Trust Senior Management team for approval and commitment to delivery.

ISO22301 is the International Standard for Business Continuity (BC) which specifies requirements for setting up and managing an effective Business Continuity Management System (BCMS). Since 2014 the BC team has implemented a five year plan to work towards certification to ISO22301 for all departments that directly support the prioritised activities of the organisation (known as the 'YAS-7'). The achievement of certification for A&E Ops in June 2018 was the culmination of the five year plan. YAS is the only Ambulance Service in the UK to hold certification to ISO22301.

Efficiency Programme

The Directorate is working towards delivering the efficiency schemes outlined in the operating plan. The outcome and benefit will be monitored through the Divisional Management Board. A risk of full delivery against two of the schemes has been highlighted and mitigations are being worked up to try to reduce the impact. One of the mitigations to manage the shortfall will be addressed by the introduction of an 'Efficiencies Cell' that will work jointly with the EOC / Regional Operations Centre (ROC) to ensure maximum output of available operational resource hours and assist in delivering some of the efficiency schemes around workforce. This will be staffed by operational managers and EOC managers supported by the ROC team.

Scheduling

The GRS Mobile App was launched in late July. GRS is the resource management system and the mobile app enables staff to view their rotas, book annual leave and volunteer for overtime remotely from their mobile phones.

A working group set up via Ops' Joint Steering Group (JSG) to progress the trial of removing "relief" from core rotas at York Ambulance Station is underway. This is a key piece of work to support staff welfare and work/life balance as rotas will be known in advance of 4 weeks which is currently the practice.

Workforce

Accident and Emergency - Frontline FTE (as of 6 August 2018)

	Budget	Actual	Variance
Clinician	1222	1214	-8
Clinical Support	985	984	-1
LAT	64	34	-30
Total	2271	2232	-39

- Budget varies month on month (Excludes Clinical Supervisors)
- Bradford University Students showing initially as Emergency Medical Technician 1 (EMT) pending conversion dates to EMT2.
- Paramedic : EMT 2 ratio = 76:24
- EMT 1 : Emergency Care Assistant (ECA) ratio = 36:64
- ECA course fulfilment compromised by on-going situation with candidates acquiring C1 in time to start a course and also impact of satisfactory checks being completed in time

EOC (as of 30 July 2018)

	Budget	Actual	Variance
EMD	134	133	-1
Dispatcher	127	119	-8
Senior Clinical Advisor (Nurse & Paramedic)	29	30	1

- Agreed budget to recruit an additional 30 Senior Clinical Advisors during the financial year

Special Operations

- Hazardous Area Response Team (HART) staffing: 46 funded establishment, 43 in post rotas are being filled from current establishment
- Air Ambulance staffing: 15 staff required. 15 in post

Integrated Performance Report (IPR) Exceptions (as at July 2018)

Total demand is 11.5% above forecast - an increase of 11.57% vs July 2017.
Hear and Treat is 35.4% above forecast - an increase of 35.4% vs July 2017.
See, Treat & Refer is 10.3% above forecast - an increase of 10.3% vs July '17.

The graph below highlights the ARP Standards in July:

ARP 3	Mean	90th Percentile	Mean Target	90th Target
Category1	00:07:19	00:12:31	00:07:00	00:15:00
Category2	00:20:29	00:42:40	00:18:00	00:40:00
Category3		02:07:31		02:00:00
Category4		03:12:55		03:00:00

Note: Trust is currently monitored against local performance trajectory

Category 1 mean performance was 7 minutes 19 seconds against the 7 minute target with the 90th percentile at 12:31 against the 15:00 target. This represents the best level of performance since October 2017.

Turnaround times were 1.7% higher than June and 3.0% higher than July 2017.

Frontline PDR rates are 84.2% against a target of 90%, an increase of 1.9% vs June. EOC PDR compliance stood at 71.4% in July.

Frontline sickness stands at 4.7% which is a slight fall on last month and below the Trust average of 5.1%. EOC is at 5.2% in July.

3.3 Urgent Care and Integration Directorate

Patient Transport Service (PTS)

PTS contracts in North, East & West Yorkshire have seen increased activity in July compared to the previous month and the same month last year. As a consequence there has been a slight reduction in performance against core Key Performance Indicators (KPIs).

KPIs 1 and 2 continue to achieve above target, however KPIs 3 and 4 continue to underperform. KPI 4, which relates to urgent on day discharge, is particularly challenging, in the context of increased demand for short notice discharge transport.

Discussions continue with commissioners and acute providers to develop more proactive and effective discharge planning, reducing reliance on short notice transport.

The South Yorkshire contract (mobilised September 2017) has seen increased activity in July and increasing complexity of patients requiring transport. This has led to a significant increase in demand for escorts and two person crews impacting on capacity and efficiency. KPIs continue to be delivered.

In July the new Vale of York and Scarborough Ryedale Clinical Commissioning Group (CCG) contract began including a revised process to ensure eligibility criteria are applied consistently. In partnership with commissioners, the new contract launch included extensive communication with patients, healthcare professionals and engagement with hospital staff.

Preparatory discussions have taken place with other CCGs in the North & East Yorkshire area with a view to extending the use of refreshed eligibility questions to other areas.

PTS are actively supporting healthcare systems to plan for winter pressures by supporting improved patient flow. This has, to date, included support for non-emergency intra-facility transfers at Sheffield Teaching Hospitals and Mid Yorkshire Trust as well as a proposal to extend PTS discharge capacity across all acute hospitals in West Yorkshire this winter.

NHS 111 Performance & Integrated Urgent Care (IUC) Standards

Year to date NHS111 are tracking at expected levels of demand (once adjusted for the number of Easter days in the current financial year) but experiencing no growth. Factors influencing demand include seasonal variation, national events (such as the Royal Wedding and World Cup) and other factors including opportunities for promotion of NHS111 service in some areas.

Performance for calls answered was strong and year to date is 91% against a national target of 95%, in line with last year and the contract. Clinical call back performance has also improved since the winter months to 85% in 2 hours for July.

Clinical advice in July was 44.2% against a target of 50%, with work underway to increase this further by including local clinical advice services for extended hours and additional dental triage.

Direct booking performance is at 30.8% in July (based on the previously published standards) across all Sustainability Transformation Partnerships (STPs) and meetings have taken place as part of the service development improvement plans to enable further booking with Out of Hours and extended hours schemes across the year. NHS111 on line demand is relatively stable at 2,000 completed on line journeys per week with about 80 clinical call backs.

The latest version of NHS Pathways (version 15) was successfully implemented in July 2018 and the first Schwartz round took place for three staff members sharing stories associated with 'the patient I will never forget'.

A wider cultural review continues to progress in NHS 111 with an action plan to be finalised in Sept 2018.

Sickness levels and clinical recruitment and retention remain the key workforce challenges in NHS111. Work continues with the operational team to understand the reasons for this and support improvement.

Integrated Urgent Care (IUC) Development

IUC tender Stage 2 was submitted on 1 August 2018, following a dialogue day with commissioners on 18 July 2018. The next stage will commence in September (14 September to 17 October deadline). The dental procurement for the clinical assessment and booking service has commenced with a request for information phase issued on 8 August.

YAS has been supported to continue a second year of the Health Education England (HEE) sponsored National Rotational Paramedic Pilot with new rotational schemes now live in Leeds and Hull. Discussions continue with Sheffield CCG about opportunities for this winter and with Hambleton, Richmondshire and Whitby CCG in respect of the long term urgent care model for the CCG footprint.

In addition to the above, the Urgent Care & Integration Team have continued to support place based health & social care systems to plan for winter and are supporting a number of initiatives to improve urgent care pathways and patient flow. These are being compiled as a single work programme through the Place Based Programme Board.

Integrated Performance Report (IPR) Exceptions

Clinical performance for Y&H NHS 111 service is measured against a locally commissioned target of call backs in 2 hours rather than the national target of 10 minutes/warm transfer. 2018/19 contracted to deliver 2017/18 outturn of 82.5%. Year to date position as at 16 August 2018 performance is 83.7% call back in 2 hours, (2016/2017 outturn 79.7%). This improvement is also against a backdrop of increased clinical demand for April-July 2018 up 3.5% when compared to last year.

3.4 Clinical Directorate

Clinical Development

The business case for the replacement of Laryngeal Mask Airways (LMAs) with a newer generation of supraglottic airway device for the advanced management of patients' airways during resuscitation has been approved. iGel airways will be introduced as stocks of LMAs reduce.

Air-driven nebulisers, to improve the management of patients with Chronic Obstructive Pulmonary Disease (COPD) in line with the British Thoracic Society guidelines on the use of supplemental oxygen, have been introduced to all frontline A&E vehicles. This development should contribute to the reduction in length of stay in hospital for this group of patients and, in some instances, completely avoid hospital attendance.

The latest generation Cor Pulse monitor-defibrillators have been introduced to all Rapid Response Vehicles and new Dual Crewed Ambulances. Delivery of familiarisation sessions have taken place with Clinical Supervisors as a component of their development days, for cascade to frontline A&E staff.

The electronic patient record (ePR) developed in-house continues to be rolled out successfully, with Leeds going live on 21 August. The roll out is planned for Hull in September, Mid Yorkshire in October and Calderdale/Huddersfield in November. The ePR is well received by ambulance and acute trust clinicians and provides an opportunity for greater data linkage to improve patient care.

Work is ongoing in Bradford/Sheffield to strengthen relationships with mental health provider partners and explore new ways of joint working to improve equity of access to emergency care for patients in mental health crisis. Sarah Stead, Head of Clinical Pathways, has been working with Bradford Community Health Foundation Trust's First Response service to establish seamless mental health crisis triage and emergency response. Dr Steven Dykes, Deputy Medical Director, was a key member of the Sheffield Inter Emergency Services Mental Health Crisis Care Conference, planning new pathways of care.

Following extensive engagement with NHS England Emergency Preparedness Resilience and Response (EPRR) and acute trusts, work has completed on the development of a mass casualty dispersal framework for the region, based on individual patient clinical need and receiving centre capacity. This was tested in July at the LiveX exercise run jointly by York Hospitals NHS Foundation Trust and NHS England at the Royal Army Medical Corps training facilities at Queen Elizabeth Barracks in Strensall, near York.

Research

The MATTS study (developing and testing a new Major Trauma Triage tool) has confirmed funding from the National Institute for Health Research - Health Technology Assessment program, and is planned to start in November 2018. Mark Millins, Associate Director for Paramedic Practice, and Cathryn James, Clinical Manager – Pathways, are co-applicants and have been involved in developing the study.

The BREATHE study has received a 'letter of intent to fund' from the National Institute for Health Research—Research for Patient Benefit program. Responses to queries were submitted on 09 August, with an intended launch on 1 April 2019. Jane Shewan, Head of Research, and Andrew Hodge, Consultant Paramedic – Urgent Care are co-applicants. YAS will 'host' the study and manage the £250k funding over a two-year period.

One of our paramedics has been awarded a research internship from the National Institute of Health Research. The scheme provides a range of both taught and academically supervised interventions that both engage and expose the intern to the clinical academic research environment and also provide them with the practical skills to undertake a research project supported by an expert clinical academic supervisor.

Integrated Performance Report (IPR) exceptions

None to report.

3.5 Quality, Governance and Performance Assurance

General Update

Quality Improvement (QI) – Work is progressing to support implementation of the QI approach agreed in Board in 2017. The initial cohort of eight QI Fellows continue through their training programme with support from the Improvement Academy. The Fellows are working on projects related to their usual work place as well as actively supporting the sharing of QI knowledge with colleagues and running roadshows for staff.

The Bright Ideas scheme is continuing with an increase in the new ideas being submitted and supported as a result of the feedback to staff on successes. On a national level, YAS is actively engaged with #ProjectA, led by NHS Horizons. This project is pulling together ideas from front line staff across all ambulance services, to drive improvement in quality on a national scale.

Critical Friends Network (CFN) – The service users in the CFN are actively involved in supporting Trust developments via regular engagement meetings and specific project work. The CFN is an integral part of the Trust's Quality Improvement strategy.

Care Quality Commission (CQC) – A follow up inspection was anticipated early in 2018, but a specific timeline for the follow up inspection has not yet been confirmed. This reflects the risk based approach now being taken by the CQC and positive outcome of the previous inspection. In the meantime engagement with the local CQC team has continued at a high level over recent months. An internal mock inspection was completed during May 2018 involving 29 'inspectors' from YAS, a partner ambulance Trust and service users via the Trust's the Critical Friends Network. The results of the exercise were positive, with issues for further action fed back to the relevant teams and Trust Management Group.

Service Transformation – The revised arrangements for oversight of the major change programmes supporting delivery of the Trust strategy are now in operation. This is operating via four programme boards with Executive leadership, focused on Service Delivery and Integrated Workforce, Place Based Care, Infrastructure and Capacity and Capability.

Freedom to Speak Up – The Trust has completed a self-assessment against the recently published national guidance for Boards. In addition, a focused Freedom to Speak Up vision and strategy has been developed for launch in October 2018. This is aligned to the wider strategy for staff engagement, with a specific emphasis on creating a consistently open culture across the Trust, in which staff feedback is valued and used effectively to support improvement in care and services.

Integrated Performance Report (IPR) Exceptions

Incidents – The number of patient and staff related incidents reported remains strong, although lower than the equivalent period last year. The number of moderate and above harm incidents has risen slightly over the last quarter but remains low overall and within the previous range.

Complaints – Response times for all Trust complaints and concerns against timescales agreed with the complainant remains high. There is no significant change to the rate of complaints received.

Safeguarding Training - Compliance for Level 1 child and adult training is 95.6%, against the 85% target. Safeguarding Level 2 compliance has risen over the last quarter following the introduction of the new combined Adult and Child Level 2 e-learning product. Uptake of the new training product is progressing well. (At present a combined compliance figure cannot be provided for technical reasons, so completion of the old and new products is reported separately in the IPR.) Safeguarding child referrals have risen over the last quarter, reflecting the introduction of the new training product. Feedback from Social Services on the quality of YAS referrals has been very positive, reflecting a number of refinements to the process introduced during 2018.

Deep Clean - Compliance remains positive through the strong management focus and effective teamwork between Fleet and Operations teams.

Legal Requests – Information Governance training has improved slightly over the last quarter to 78.2% completion, with a continued emphasis on this area through the Trust Management Group.

3.6 Workforce & Organisational Development (OD)

People Strategy 2018 - 2021

The Trust's People Strategy is currently in development and will act as an enabling strategy for YAS' overall Strategy. A number of stakeholder events have taken place with staff across YAS as part of the Listening Events and feedback is being used to shape the final strategy.

The strategy will be finalised in line with the Trust strategy during autumn 2018 and the current draft will be presented to Board in August.

Integrated Performance Report (IPR) for the Workforce Directorate

The department's sickness absence for June 2018 was 3.27% which was below the Trust threshold of 5%. Compliance for statutory and mandatory training for June 2018 is at 87.3%, which is above the Trust target of 85%.

The department's compliance for the completion of PDRs at June 2018 is at 80%; which is below the 90% Trust target but has increased significantly from 55.4% in January 2018. Significant work has been undertaken to ensure compliance in this area and progress with addressing compliance continues.

Staff Engagement

National Staff Survey 2018 - The National NHS Staff Survey will be live between October and December 2018 and preparations are underway to ensure all eligible staff are given the opportunity to share their views. The Leadership Team are working closely with other Ambulance Trusts through the NAA (Northern Ambulance Alliance) in terms of analysis and communication of results. A separate report detailing the 2017 Staff Survey headline results, and action taken to date, is the subject of a separate report to the Board.

Pulse Check (Staff Friends and Family Test) - The approach in place for collating Friends and Family Test data follows the decision, earlier this year, to canvass the views of staff in specific areas of the Trust each quarter (as oppose to carrying out a full census). Corporate staff were requested to complete the pulse check for Quarter 1. The response rate was 60%; a significant improvement from the average response rate for Staff FFT during 2016/17 which was 7%.

The question, in terms of whether staff thought that YAS was a good place to receive care, is a very positive score. However, the scores for whether staff felt YAS was a good place to work is below the benchmark.

STAFF FFT	CEX & Business Development	Finance	Quality, Governance & Performance	Workforce & OD	Yorkshire Ambulance Service
Question1: Recommend YAS for receiving care	100.0	88.1	91.7	92.6	91.9
Question 2: Recommend YAS as a place to work	46.7	62.7	57.1	60.3	61.8

Positive score of 100%	> 5% above benchmark	< 5% below benchmark	Scores in between
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Preparation is underway to canvass staff in A&E on Q2. Strategies to increase response rates include taking Pulse Check out to frontline teams - iPads will be taken to main ambulance stations and emergency departments to canvass staff directly for feedback and the 'You said, we listened' communications campaign.

Leadership Development

The Leadership in Action programme began in August with the delivery of module 1 to the Trust Management Group, which includes the Executive Team. The workshops have been positively received by delegates and well attended.

During September the next 'wave' of delegates will begin the programme (people leaders banded 8a – 8c) and the process of developing an internal team of facilitators to deliver the programme will also commence.

The first leadership and management Portfolio Governance Board will take place on 14 August 2018 and will be chaired by the Chief Executive. The second Strategic Leadership Forum took place on 15 August 2018 and invited leaders to continue their review of the Trust's draft strategy and consider in more detail the output from the recently held Locality Listening events.

Health and Wellbeing

The overall sickness absence rate for June 2018 was 5.17%, a decrease from 5.46% in May 2018 but slightly higher compared with the same period last year (5.09%). The main reasons for absence continue to be mental health / anxiety (31.22%) and musculoskeletal (combined with back problems) (29.46%). The Trust's Health & Wellbeing Plan continues to focus on mental health and musculoskeletal interventions for staff, in order to improve these areas.

To bring the Trust's sickness absence levels under the 5% threshold and NHS Improvement's 'voluntary improvement programme' which directs Trusts to reduce absence by 1%, the HR Team is undertaking a deep dive analysis of long and short term absence to highlight the main issues. A project plan has been developed to track the progress towards the 1% sickness reduction by 31 March 2020. This is being monitored via the Strategic Workforce Group.

The Health and Wellbeing Team has recently been successful in securing a mobile Health and Wellbeing unit which will support the delivery of a number of initiatives to staff across the region. A full review of the Trust Post Incident Care process has been completed and a number of recommendations will now be developed and presented to the Health and Wellbeing Steering Group.

The planning process for this year's Flu Campaign is underway and 110 peer vaccinators recruited to the campaign with a good geographical spread. An internally designed poster campaign will provide valuable communications across the organisation. The Trust will offer the Quadravalent Flu vaccine this year which provides the best protection available to combat the flu virus.

Occupational Health (OH): People Asset Management (PAM)

The PAM contract will end in March 2019. In preparation for this, the Trust has gone out to procure new OH services. The provision to be tendered includes: Core OH provision including Health Surveillance, Employee Assistance Programme (EAP) including trauma support, a Sickness Absence reporting system and Physiotherapy support including full geographical access. The new services will be in place for 1 April 2019. Meanwhile we continue to performance manage PAM against the current contract and have begun work with them on their exit plan.

Diversity and Inclusion

The revised and refreshed Equality Impact Assessment (EIA) methodology was approved by the Trust Management Group in June 2018 and implemented via the Trust's governance process. The Trust's Board and Committee cover sheet now includes a section on Equality Impact Assessments (EIAs), which will ensure all key policies and strategies with an impact on patients and workforce undergo an EIA. A range of workshops are currently being delivered.

The Trust now has 10 trained workplace mediators and the formal launch of the Trust's internal mediation service will take place over the coming weeks. The mediation service will be managed by the Diversity and Inclusion Unit which will assist in managing conflict at work.

The launch of the Trust's multi-faith/contemplation room at Headquarters is scheduled to take place on 25 September 2018. This facility is open to all staff and visitors who may want to use the room for prayer/quiet contemplation.

The Trust's Bullying and Harassment policy will be replaced with a Dignity and Respect at Work Policy which is currently in development. The new policy will have significant focus on informal conflict resolution such as directed supported action, mediation and facilitated discussions with more focus on monitoring and reporting which will help with identifying patterns and trends across the Trust.

Recruitment

The Team continue to support the delivery of the additional Emergency Care Assistant (ECA) resources following the introduction of Ambulance Response Programme (ARP). Since April 2018 over 230 ECAs have been offered roles and booked onto training courses. Weekly pipeline reports are produced to highlight candidates in the recruitment process and areas of risk. A recruitment KPI dashboard monitors performance and identifies areas for improvement.

The recruitment process review has been completed and the next stages include a focus on strengthening our employer brand by reviewing the Careers page on the website, developing guidance for applicants, using social media as a channel for recruitment and reviewing our communications with applicants.

Employee Relations

Under the Trade Union Facilities Regulations 2017, the Trust, as a public sector organisation, is legally required to report on union facility time, which is the time granted to employees to work as union officials. This information covers Trade Union representatives within the reference period 1 April 2017 to 31 March 2018. The HR Team have worked in collaboration with the Trade Unions and the Capacity Planning & Scheduling Team to provide the relevant information. TEG approved the Trust's data which has been published on the Trust website.

The 2018 Agenda for Change Pay Award was agreed in June 2018. The Trust is in the process of making necessary arrangements to pay staff in accordance with new terms and conditions. The team is working with the trade unions to implement and interpret the pay award. A full project plan has been developed.

3.7 Finance & Contracting Update

As previously reported 2018/19 contract negotiations resulted in a significant amount of commissioner investment into the Ambulance Response Programme (ARP). The ARP team is now supporting Operations to implement and deliver the additional resources outlined in the business cases which underpin that investment.

The team has also been supporting the Integrated Urgent Care (IUC) bid team in terms of the Trust's response to the IUC tender process.

Work to develop and implement a "Purchase to Pay" (P2P) system is complete with the Oracle i-Procurement software now in use. A 'No Purchase Order, No Pay' policy was adopted on the 1st August 2018, and work continues to expand use of the system in order to gain maximum benefit from the technology.

YAS' finance system is provided through "NEP", a consortium of public sector bodies. The service is moving to using Oracle Cloud, which is expected to be at the beginning of December 2018.

The team continue to monitor financial performance. We are still forecasting achievement of the agreed control total but there are a number of risks to that position. Notable Cost Improvement Plans (CIPs) are currently unlikely to achieve the planned levels of savings. Plans are being developed to mitigate this. The costs of the pay award are also likely to be a pressure in terms of the changes in payments for unsocial hours. This element of the pay award has not been funded nationally.

Procurement & Logistics

On the 2018/19 workplan there are currently 117 projects, worth a total of £37.5m (total contract value). The team have delivered 40 of these to date, with 77 projects worth £35.8m currently in-hand. The main contracts include: A&E Van Conversions; the Doncaster Hub; PTS vehicles; Ambulance Vehicle Preparation (AVP) Leeds and Huddersfield; Unified Communications; and Occupational Health.

The Associate Director has recently presented to the National Directors of Finance group regarding the potential impact of the Lord Carter report on the Procurement function. This view will be updated once the Lord Carter report is officially published.

Fleet, Estates & Facilities

It is a challenging time for the team but they are rising to the challenge. Work continues on the fleet reconfiguration under ARP with vehicles specifications being agreed and conversion now well underway; the first of the vehicles are due to be delivered to YAS during September.

The 3 new Embrace vehicles have been converted and are being shipped to the UK. The vehicles will be in service towards the end of September.

Additional training vehicles have been secured with delivery expected by the end of August which will ensure sufficient C1 category blue light vehicles for the driver training programme.

The Estates team is currently finalising the capital investment programme for 2018/19, and progressing the delivery of some specific projects. Estates is also providing significant support to the Hub and Spoke team at a critical point in the programme.

The new Head of Property and Projects, Adam Midgley, is now in post along with Ben Slater, who joins as Capital Planning Manager.

In Medical Equipment, the installation of all Corpuls defibrillators into service has been completed. Other medical devices have also been commissioned and installed into service following a number of service developments during the last financial year. These include tympanic thermometers, EZIO bone drills and Air Driven Nebulisers onto all RRV and DCA's. Furthermore, 370 AED's are currently being commissioned to be placed on all PTS vehicles.

ICT

The new website has been launched and can be accessed at www.yas.nhs.uk. A new staff home access portal has also been launched. The site was built in close collaboration with stakeholders to ensure that it meets their needs and was successfully launched on 31 July 2018. Initial feedback has been extremely complimentary.

Following a successful pilot, The Board approved the roll out of the electronic patient record (ePR) system across the Trust. In South Yorkshire, staff training has been completed with Rotherham, Northern General, Sheffield Children's and Barnsley hospitals having gone live. The next hospitals to go live will be Leeds General Infirmary and St James on 22 August. A total of 910 operational staff has been trained across the Trust with over 30,000 electronic patient records having been completed.

A new version of the Electronic Staff Record (ESR) was launched earlier this year to support individuals working in the NHS to better access their training and development, pay information and staff benefits. The portal was successfully launched through <http://my.esr.nhs.uk> in collaboration with the YAS Academy and HR department.

Following input from ICT, EOC, PTS, 111, Finance and Procurement, the business case for a new unified communications system to replace the current aging telephony switch has been discussed at the Transformation Programme Infrastructure Board. It will be working its way through the Trust governance approval process, and the next stage is it will be taken forward to the Trust Executive Group during August. This forms part of the 2018/19 capital plan.

Cyber Security: The Trust has been working with its supplier to deploy an updated version of its operating system across its entire PC estate to include Advanced Threat Protection. This is part of a wider national NHS strategy to better prepare the NHS to detect and react to cyber security threats. Work also continues as part of Cyber Security Essentials Plus accreditation to further lock down and manage our infrastructure.

The Trust has successfully renewed some of its commercial IT contracts. These include contracts with Health Education England (HEE) for the support of a number of national and regional e-learning systems including the NHS e-learning repository. In addition, we were commissioned to develop a major regional public health website www.mecclink.co.uk and have now been asked to develop it further for a national audience.

In terms of the YAS Service Desk Management System Phase1 for ICT and HR, the new Service Desk will provide enhanced support features including Mobile Apps help desk. Staff have been trained in performing user acceptance testing with go live scheduled for the end of September 2018.

The Storage Area Network (SAN) is now fully installed and server infrastructures migrated across. Staff have undertaken training led by Dell and a disaster recovery test was completed as part of the installation process.

The GRS Mobile App has been rolled-out to A&E and EOC staff. The App allows access to GRS from personal or Trust smart-phones and tablets and provides improved accessibility to staff working remotely without access to a PC. Uptake has been good and currently over 1300 staff have downloaded the App.

Business Intelligence

Data Analytics platform: Operational managers now have access to real time dashboards allowing for drill through into key performance areas such as demand, performance, turnaround, unavailability and meal breaks.

ePR Dashboard: Automating the EPR dashboard allowing real time access to patient information.

The team have been supporting the IUC Bid team with analysis and modelling of different aspects of the service including STP analysis and benchmarking.

PTS: Due to the proliferation of contracts in the North, the team have redesigned the consortia dashboards to reflect the new commissioning footprints.

Integrated Performance Report (IPR) Exceptions

There are no exceptions to report.

3.8 Planning & Development / Corporate Communications Directorate

Communications and Engagement

The Corporate Communications team has provided support for internal and external communications and engagement activity to highlight developments at the Trust and support priority areas of work.

Highlights of work undertaken during the past three months include:

- Filming a major three-part documentary series, A&E Live, with independent film production company Optomen. This was shown on ITV in May as part of NHS 70th anniversary celebrations. The series was watched by around three million viewers on consecutive evenings at 9pm and showcased the work of the medical emergency network in Leeds was produced in partnership with colleagues at Leeds Teaching Hospitals NHS Trust. Presenter Davina McCall spent time in YAS' Wakefield Emergency Operations Centre and with staff in Leeds, including a shift on a double-crewed ambulance and on a Red Arrest Team car.
- The 999 Rescue Squad documentary series featuring our Hazardous Area Response Team (HART) scooped a winner's award at the Royal Television Society (RTS) (Yorkshire) Awards on Friday 6 July 2018 and was a runner-up at the O2 Media Awards (Yorkshire) on Thursday 5 July 2018. The film production company Air Television was also named 'Best Production Company' at the RST (Yorkshire) Awards.
- A brand new YAS website, in partnership with the Online Team, which went live on 31 July 2018. The teams liaised with staff, including YAS' Critical Friends Network and disability group to design and create a more user-friendly website that is relevant and informative for both staff and patients.

The process of rebuilding the website, which is designed to be more accessible on all devices including mobile phones and tablets followed Government Digital Service (GDS) best practice. It has intuitive navigation and new updated content with an increased focus on our people. It also features a 'Recite.me' accessibility toolbar which can customise the content to suit users.

- The expansion of the YAS Twitter Champion scheme to gain wider representation from all areas of the Trust. Our corporate Twitter account has over 17,000 followers and also has 34 members of staff tweeting to increase public understanding of the work we do, etc. Follow our current Twitter Champions: <https://twitter.com/YorksAmbulance/lists/yas-twitter-champions>

Integrated Performance Report (IPR) Exceptions

Statutory and Mandatory Training: One member of staff is non-compliant as they are currently on maternity leave.

Personal Development Reviews (PDR): The PDRs of three members of staff have taken place, but need to be recorded.

Planning and Development

Corporate Strategy and Planning

The team have led a series of Strategy Listening events, open to staff and members of the public, across the region. The events sought views in relation to the ongoing development of Trust Strategy and Enabling Strategies. Nearly 100 people attended and learning and feedback was shared at the follow up 'Strategic Leadership Forum', aimed at YAS' top leaders. Where appropriate, the team will incorporate feedback into the Trust and Enabling Strategies.

The team is working with the Communications and Engagement team to develop a clear communications plan for the ongoing development of key messages and engagement approach for the Strategy. This will include the 'You Said, We Will / Did' messages arising from the Listening Events.

The Final narrative Operating Plan for 2018/19 was submitted to NHS Improvement (NHSI) on 30 April and covered, for assurance, in item 2.2 in this Board of Directors meeting in Public.

The high level business plan milestones and objectives have been agreed and form the basis of the Integrated Performance Report (IPR). Further detail is being developed with directorate planning leads, to ensure that quarterly milestones and trajectories are clearly articulated.

Business Development

The team continue to work with the Urgent Care and Integration Directorate to plan and prepare for anticipated tenders for Patient Transport Services (PTS) in West Yorkshire and the next stage of the Integrated Urgent Care (111) tender.

IUC

The team have supported the submission of the 'Invitation to Participate in Dialogue' stage of the tender process which followed the completion of 55 comprehensive question responses and a full dialogue day with commissioners. The Trust awaits the next stage of the process ('Invitation to Competitive Dialogue') that is anticipated to commence on 7 September.

A key element of the tender relates to the removal of the dental based activity, which is being separately tendered and commissioned. The 'Request for Information' has just been released and will provide commissioners with feedback on the commissioning envelope and specification, to support a decision around the viability of the process and the scale of the market.

North Lincolnshire Non-Emergency Patient Transport Service (PTS)

The Trust submitted a service bid with East Midlands Ambulance Service NHS Trust (EMAS) as part of an Alliance Arrangement, for Non-Emergency PTS (NEPTS) in North Lincolnshire. This exciting opportunity to work with another NHS partner to develop a joint service was led by YAS on behalf of both organisations with the response submitted on 6 August.

Further work to develop the service model and alliance arrangements is required as, regardless of the outcome of the tender, this represents a potential future model for new areas and contracts.

PTS West

The team supports the ongoing work with Commissioners and Providers to identify opportunities to minimise the potential tendering of the service.

Market Analysis

Final review of a transport market assessment programme is underway to identify opportunities for health related transport contracts within the Yorkshire region. The aim of this exercise was to:

- Establish a list of health transport related contracts in the region.
- Identify the market value of the health transport related contracts and understand our market share.
- To identify current contract end dates and therefore any potential opportunities, supporting the tender pipeline development.

The team are currently analysing the regional responses to identify potential opportunities to increase existing market share or to explore new markets.

Integrated Performance Report (IPR) Exceptions

None to report.

4 RECOMMENDATIONS

4.1 The Board agrees it has sufficient assurance on the activities of the Executive Team and Trust Executive Group during this period.

The Board notes and discusses the variances contained within the July 2018 IPR report, highlighted in the Executive Directors reports.