



MEETING TITLE Trust Board Meeting in Public		MEETING DATE 23/05/2019	
TITLE of PAPER	Trust Executive Group Report & Integrated Performance Report (IPR)	PAPER REF	4.1
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 22 March 2019 to 13 May 2019 and the opportunity for TEG to highlight the key variances / movements contained within the April 2019 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 and TEG	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 April 2019 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

The purpose of the paper is to give the Board assurance on the activity of the Trust Executive Group (TEG) from 22 March 2019 to 13 March 2019 and the opportunity for TEG to highlight the key variances / movements contained within the April 2019 Integrated Performance Report (IPR).

2. EXTERNAL ENVIRONMENT

The European Council agreed to extend Article 50 until 31 October 2019 and thus the UK's membership of the EU continues until this date. With EU parliamentary elections taking place across the whole of the UK on Thursday 23 May and local elections in many areas on 2 May NHS Improvement published its pre-election period guidance (known as 'purdah'). During this time specific restrictions are placed on the use of public resources and the communication activities of public bodies, civil servants and local government officials. The pre-election period is designed to avoid the actions of public bodies distracting from or having influence on election campaigns.

NHS England and NHS Improvement have issued a consultation *Implementing the NHS Long Term Plan: Proposals for possible changes to legislation*. The proposal focus on removing barriers to collaboration such as removing the Competition and Markets Authority (CMA) function to review mergers involving NHS foundation trusts and NHS Improvement's competition powers and its general duty to prevent anti-competitive behaviour. Suggested changes also include revoking regulations made under section 75 of the Health and Social Care Act 2012 which place NHS commissioners and NHS providers under the scope of the Public Contracts Regulations, subject to a new best value test. This could see a reduction in the burden of tendering created by the procurement rules. Community, mental health and ambulance trusts would be particularly affected by this proposal as commissioners frequently go out to tender competitively for many of their services.

We continue to participate in Integrated Care Systems (ICS) and Service Transformation Partnerships (STPs) across the County particularly in relation to service reconfigurations, development of new care and workforce models and the adoption of digital technologies to support patient care. West Yorkshire and Harrogate WY&H ICS has been working to develop its five year strategy for submission to NHSE/I at the end of October 2019. Priorities for the ICS include improving population health through prevention and addressing inequalities, improving outcomes in priority areas such as cancer and mental health and system change and integration. These priorities will be supported by enabling plans in areas such as harnessing the power of communities, workforce, digital and innovation.

South Yorkshire and Bassetlaw (SY&B) ICS Health Executive Group (HEG) met for first time in April made up of provider Chief Executives, commissioner Accountable Officers and representation from Public Health and GP Federations. The Group discussed reframing ICS priorities to support better integration and delivery and the implications of the NHS Long Term Plan including reducing inequalities in cardiovascular disease (CVD) and respiratory disease (which

accounts for a high proportion of emergency admissions), actions to support population health management to reduce health inequalities and support prevention, digital innovation, addressing workforce challenges and new models of care. Discussions also focused on how to better engage Non-Executive Directors (NEDs) and Governors.

As part of the implementation of the SY&B Hospital Services Review hyper acute stroke services will cease at Rotherham NHS FT on 1 July 2019 and Barnsley Hospital NHS FT 1 October 2019 with services being provided at Sheffield Royal Hallamshire Hospital, Doncaster Royal Infirmary and Pinderfields Hospital

The Trust has continued to engage with the Humber Coast and Vale STP through the Partnership Leaders events, Integrated Urgent and Emergency Care, Digital and Mental Health work-streams, and through the place based discussions. Key developments relevant to YAS include the Local Health and Care Record Exemplar (LHCRE) development, the launch of stakeholder discussions relating to the future of Scarborough Hospital and a workshop to identify priorities in the mental health plan. A partnership stakeholder event sponsored by the Workforce programme board is planned for July. The timetable has been published from May to early September for engagement on the Partnership long term plan. Active discussions are ongoing in relation to progression towards ICS status.

It was announced last autumn that from April 2019 the NHS Leadership Academy became part of NHS England and NHS Improvement to bring closer alignment of accountability for leadership and talent development across the NHS. The NHS North Regional Talent Board was established in June 2018 to deliver a more systematic and coordinated approach to managing talent across the NHS northern region. The Board has overseen the development of the 'Aspire Together' programme which seeks to address immediate priorities in the pipeline to fill board level vacancies and improving board diversity. A launch event for the Aspire Together initiative will take place on 5 June 2019, at Quarry House in Leeds at which Baroness Dido Harding will be speaking.

CCGs in Bradford district and Craven have launched a consultation about a proposal to create one new CCG to replace the three existing CCGs which cover a combined population of approximately 600,000 people are:

- NHS Airedale, Wharfedale and Craven CCG
- NHS Bradford City CCG
- NHS Bradford Districts CCG

If the consultation is supported by CCG members and by NHS England, the new CCG would be created on 1 April 2020.

3. EXECUTIVE TEAM REPORTS

3.1 Chief Executive

The culmination of actions throughout last year to significantly increase the number of A&E operational staff and Double Crewed Ambulances (DCAs) supported our delivery of some of the best response times in the Country during the final quarter of 2018/19. The Trust achieved all of the Ambulance Response

Programme (ARP) national standards for the month of March with the exception of the Category 4 standard which was just narrowly exceeded.

During last year we were also able undertake significant investment and modernisation programmes in our station and emergency control room estate and infrastructure, including establishing new Ambulance Vehicle Preparation services in Leeds and Huddersfield. Our locally developed electronic patient record (ePR) solution has been rapidly implemented across almost all parts of the Trust and has been welcomed by staff and placed YAS at the forefront of the regional Local Health and Care Record Exemplar (LHACRE) programme.

These actions and investments have not impacted on our strong track record of financial delivery and we were again able to deliver a surplus over and above our financial control total for 2018/19.

We have made good progress in embedding cultural change and supporting improved employee wellbeing. A number of engagement activities have taken place to support the embedding of our new vision values and behavioural framework and to support local teams to make improvements to their working environment.

Work is also continuing to implement changes associated with the new Integrated Urgent Care contract and to secure contracts for Non-Emergency Patient Transport and to ensure these services are fully aligned to the needs of the communities we serve.

During April, along with most other parts of the Country, we experienced significantly higher levels of 999 demand, with activity 7.8% higher than the same period in 2018; this demand impacted on response time delivery during the month. Demand has continued at more normal levels for May.

Preparations for our imminent CQC inspection are continuing and the Trust has responded to a range of supplementary information requests following the initial Pre-Inspection Request. A series of focus groups with staff and front line managers were held on 2 May with more arranged for 21 May for the CQC to engage with and receive feedback from staff.

The Executive Team continue to lead the development of the Trust's key enabling strategies, the latest of these is the Clinical Strategy which will be discussed by the Board in due course. The strategy supports the Trust's priorities and objectives clearly setting out our ambitions for specific care pathways and our clinical workforce model. The team have also held a number of meetings over the past two months to develop the Trust's two year business plan. The Trust business plan supports delivery of, and is aligned against, the eight key priorities within the Trust One Team, Best Care Strategy

On 16 April the Association of Ambulance Chief Executives (AACE) Chairs and Chief Executive Officers (CEOs) met in Warwick. Discussion focused on increasing the profile of prevention and social prescribing across the sector, development of collaborative alliances and included updates on the national Q Volunteering and Blue Light Mind programmes during which Paul Farmer CEO of Mind briefed on the significant improvements made in the sector, with more

ambulance service employees saying their organisation supports those affected by mental health issues (43% in 2019 up from 21% in 2015). It was recognised access to training remains an area requiring further focus.

Members of the YAS senior leadership team participated in an AACE Q-Volunteering Workshop on 30 April 2019 supported by NHSE and the Kingsfund. The purpose of the event was to share learning from each trust on volunteering schemes initiated with support of funding from the Department of Culture Media and Sport. Sessions included practical problem-solving on how projects can be up-scaled and sustained and steps to achieve the Investing in Volunteers (IiV) quality standard for good practice in volunteer management. Building upon the Q-Volunteering initiative YAS has established a pilot volunteer patient advocate programme to support high risk patients in two GP practices in Leeds and begun scoping work with partners from South Western Ambulance Service Foundation Trust (SWASFT), West Yorkshire Fire and Rescue, West Yorkshire Police and Leeds charity CATCH to create a 999 academy to work with young people to better understand the role of emergency services, educate them in first aid and address risks of drug abuse and knife crime.

April's Northern Ambulance Alliance (NAA) Board meeting discussed the potential changes to programme governance arrangements, the implementation of the new Civica fleet management system which is now live in NWS, YAS and NEAS, upcoming interviews for the new NAA Chief Information Officer role and implications of the recent Topol Review into the impact of Digital technology on the NHS workforce.

In support of International Nurses' Day YAS hosted a Clinical Professional Development (CPD) event at Yorkshire Sculpture Park on 9 May. The event was led by Suzy Southey YAS Lead Nurse for Urgent Care and attracted participation from a wide variety of local partners from health, policing and local government. Speakers presented on work being undertaken locally in areas such as suicide prevention, music in the care of dementia patients and street Triage services. Initial feedback from attendees has been very positive.

Staff at Doncaster Ambulance Station have now been decanted into temporary accommodation to allow contractors to begin major redevelopment work of the site. Works are expected to be completed to allow for the opening of the new Doncaster 'Hub' station in January 2020. Rod Barnes, Chief Executive and Stan Hardy, Non-Executive Director / Deputy Lord Lieutenant for West Yorkshire joined colleagues at Leeds and Huddersfield Ambulance Stations on the 18 April and 16 May respectively to formally open the new Ambulance Vehicle Preparation (AVP) facilities which prepares vehicles ready for the beginning of each shift. This work has been part of a £2.1m investment across the two sites to incorporate the AVP facilities and improvements to garage and fleet areas which has significantly transformed the stations. Work is ongoing to assess the future priorities for the wider implementation of Hub and Spoke and AVP.

The Leeds-based National Rotational Paramedic Pilot (NRPP) scheme was nominated for and subsequently won the Royal College of General Practitioners (RCGP) 'Good Neighbour' Award, which is designed to recognise excellence in collaborative practice. Andy Smith, YAS Specialist Paramedic, attended the Celebrating Excellence Awards on 27 April."

The Trust has undertaken a review of its Corporate Affairs structure to support improved internal and external communications and engagement aligned to our strategic priorities. The review concluded in mid-February and took effect from 4 March 2019. Mandy Wilcock commenced in the role of interim Associate Director of Corporate Affairs from 1 April. Her initial focus will be recruiting to a number of key roles across the new structure.

Karen Owens started in her new role as interim Director of Urgent Care and Integration on 23 April, Karen was previously the Deputy Director for Quality and Nursing at YAS and has most recently been seconded to the NHS Improvement Academy before coming back to the Trust to take on her new role.

3.2 Operations Directorate

Performance

There was a tremendous effort during 2018/19 to work towards the national Ambulance Response Programme (ARP) Standards and ensure we provided a safe, timely response of our patients. The following sections highlight the outcomes against the commissioned trajectory and the national standards.

ARP Performance v Trajectory:

During 2018/19 the Trust was commissioned to deliver against a locally agreed trajectory for ARP. Through significant changes to the YAS delivery model and supporting actions by the Trust the trajectory was achieved. The only exception was the Category 4 90th percentile target. Category 4 is our lowest acuity group and makes up around only 1% of all our demand.

2018/19	Category 1 Mean	Category 1 90th	Category 2 Mean	Category 2 90th	Category 3 90th	Category 4 90th
Trajectory	00:07:41	00:13:16	00:21:37	00:46:30	01:59:58	03:16:08
Actual	00:07:21	00:12:37	00:20:26	00:42:34	01:58:44	03:24:20
Variance	- 00:00:20	- 00:00:39	- 00:01:11	- 00:03:56	- 00:01:14	+ 00:08:12

ARP Performance v National Standards:

Although YAS was not commissioned to achieve the national ARP standards we still achieved the Category 1 90th percentile and Category 3 90th percentile standards, with the other standards narrowly missed.

The table below highlights performance against the national ARP Standards for the year end position in March 2019.

2018/19	Category 1 Mean	Category 1 90th	Category 2 Mean	Category 2 90th	Category 3 90th	Category 4 90th
National Target	00:07:00	00:15:00	00:18:00	00:40:00	02:00:00	03:00:00
Actual	00:07:21	00:12:37	00:20:26	00:42:34	01:58:44	03:24:20
Variance	+ 00:00:21	- 00:02:23	+ 00:02:26	+ 00:02:34	- 00:01:16	+ 00:24:20

March 2019 ARP Performance vs National Standard

The trajectory agreed with commissioners for the final month of 2018/19 was to deliver the national response times for each standard. YAS had planned to achieve this by profiling hours across the year with the aim of increasing

operational hours towards March 2019. As can be seen below we were proud to significantly over-achieve for each standard, missing out on the Category 4 90th standard by only 9 seconds.

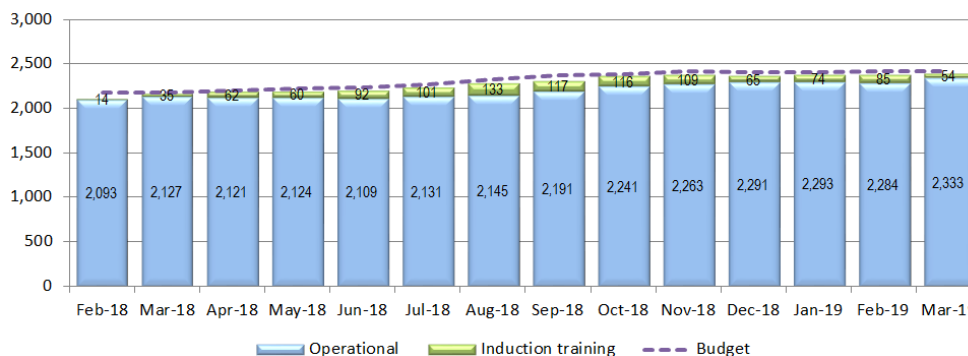
ARP 3	Mean Target	Mean Actual	90th Target	90th Actual
Category1	00:07:00	00:06:44	00:15:00	00:11:28
Category2	00:18:00	00:17:40	00:40:00	00:35:35
Category3			02:00:00	01:29:42
Category4			03:00:00	03:00:09

It is also pleasing that this performance was achieved against a 7% increase in demand on the month of March 2018.

Use of operational hours

The Carter Review recommended that ambulances services should ‘review staff hours worked to ensure a balance between contracted and actual hours with plans to manage this’. This has been a focus for YAS during 2018/19 and has been a key consideration during resource planning for ARP. At the start of each year the Capacity Planning and Scheduling Team forecast the total number of hours that will be needed per month based upon expected demand, the budget and the performance standard expected. From this the recruitment needs are identified and overtime used to fine tune the profile or fill funded roles whilst staff are recruited.

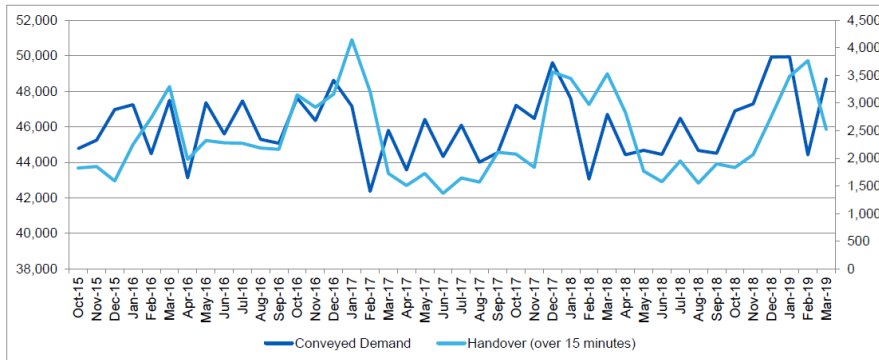
This has been very successful within YAS. As can be seen in the graph below the gap between budget and staff in post is negligible which means that YAS are able to target overtime flexibly rather than to fill significant recruitment gaps.



Delayed Hospital Handovers

Lost hours at hospital due to delayed patient handovers in March was 1241 hours lower than February 2019, a decrease of 32.9%. However February was one of the worst on record for YAS with the March 2019 figure significantly higher than most months last year.

Targeted work has been taking place at a local and regional level with the NHS emergency care intensive support team (ECIST) and NHS England to reduce handover delays but more work is needed with the support of commissioners. YAS participates in national calls where two Yorkshire hospitals are in the top seven of handover delays in England.



EOC Performance

Performance within our Emergency Operations Centre (EOC) during 2018/19 was also excellent. The YAS 999 call answer time has been the quickest in the country consistently during the last 8 months. In March 2019 over 95% of 999 calls were answered within 5 seconds.

Our Hear & Treat (H&T) rates have also been one of the highest in the country throughout 2018/19 but have recently plateaued at around 6.5%. There is a constraint around the amount of H&T possible when performance is extremely high as calls do not wait for response. However further plans are in place to increase rates through 2019/20.

During the coming months YAS will be working with AACE and NHS England to implement new guidance around managing HCP (Health Care Professional) and IFT (Inter Faculty Transport). A separate paper will be brought to Board once timescales and the scope is better understood.

Emergency Preparedness Resilience Response (EPRR)

A full review of the EPRR Training Programme was carried out during 2018 resulting in an updated Commander Framework and approved business case for commander training.

Commander Training

Two Command & Control Educators have been appointed (April 2019) are tasked with the delivery of the National Ambulance Resilience Unit (NARU) approved command courses to all front line A&E / EOC staff. These courses will commence in June 2019.

HART

The Hazardous Area Response Team (HART) team have improved its flexibility over the last six months to ensure that our HART capability has continued to meet the required NARU contract standards. The recruitment and training of four new HART operative’s has enabled the unit to maintain excellent compliance levels.

AIT/SORT

We have front line staff who have volunteered to train as AIT (Ambulance Intervention Team) and SORT (Special Operations Response Team) members. This has increased our response capability in the event of an Marauding Terrorist Attack or Chemical, biological, radiological and nuclear defence type incident.

Refresher training for AIT/SORT staff is carried out throughout the year and currently meets compliance in term of number of staff required per day. Although not confirmed officially it is likely that the Trust will need to significantly increase its AIT/SORT capacity over the next 12 months which will require an innovative approach to achieve compliance.

Initial Operational Response (IOR)

The Trust is required to ensure that all front line A&E / EOC staff undertake Initial Operational Response (IOR) training. The training involves a learning portal demonstrating the actions to be taken during a Chemical, biological, radiological and nuclear defence incident. In December 2018 we recognised that our compliance was below that expected and a programme of work was put in place to increase compliance. Since March 2019 our compliance has been 95.8% against a national standard of 95%.

Easter 2019

A significant amount of planning was put in place for Easter 2019 which ran from the 19th April until the 22nd April. Although busy the Trust maintained safe levels of service for both 999 and 111.

Tour de Yorkshire

The Trust invested significant time in planning for the Tour de Yorkshire held during early May and successfully provided appropriate operational and command cover to support the event. The event gave Yorkshire a worldwide profile and allowed our teams to celebrate YAS through public engagement and close working with tri-service partners. Preparations are now continuing for the World Cycle Championships being held in Yorkshire between the 22nd and the 29th September 2019.

Integrated Performance Report (as at March 2019) Exceptions:

Total Calls

Activity in March increased 6.7% against the previous month in line with trajectory, even though we show this significant increase the Trust still managed to achieve call answer time targets.

Hear & Treat

March saw a 4.8% reduction in activity against previous month, 10% lower than March the previous year and significantly below trajectory. Targeted work is taking place with EOC to understand the reasons for the reduction.

See, Treat & Refer

March activity show an improvement in see, treat and refer at 12.0% higher than the previous month, above the projected position for March and 7% higher than March the previous year.

See, Treat & Convey

Increase of 3.8% in the amount of See, Treat & Convey carried out versus March last year demonstrating an increase in demand and acuity which is expected during the winter months.

PDR rates

Frontline PDR compliance is currently at 80.7% against stretch target of 90%. This is a slight reduction of 1.7% against February's performance. This was expected as the operational management team maximised additional hours for March. Focus is now on 2019/20 for compliance and quality in line with the response to the staff survey results.

3.3 Integrated Urgent Care (IUC) April 2019

General Update

The new IUC service went live on 1 April 2019 with the key changes introduced as noted below:

- Increase in clinical advice & direct booking
- Clinical validation for emergency dept. (ED) dispositions
- Working with the new dental clinical assessment & booking (CABS) provider
- Managing dental calls for under-five's only
- Electronic care/referral advice
- Additional patient pathways maximising local clinical advice services (CAS)

Other elements of contract delivery will happen over the life of the contract as part of a co-created Service Development & Improvement Plan (SDIP) with Commissioners supporting local STP priorities.

To coincide with this change the new service line annual business plan was published along with role objectives for all key roles within IUC.

April Performance

All the contractual performance targets were achieved through April

- 91.8% call answer in 60 seconds (target 90%)
- 30.6% clinical advice (target 30%)
- 64.2% call back in 1 hour (target >60%)
- 97.8% 999 validations (target >95%)
- 64.2% ED validations (target >50%)
- 46.2% IUC bookings overall (target >30%)

Calls answered for the month were 131,822, 0.6% below contract ceiling, predominately caused by taking dental calls 3598 above contracted levels.

There has been a service change for people with dental problems. This contract was tendered separately as a new dedicated regional dental clinical assessment & booking service (CABS) for dental patients aged five years and over. This is provided by Local Care Direct along with two new treatment providers, Night Dental and Taptonville House.

As these are new services, there are some mobilisation issues which are resulting in additional calls to IUC and additional cases from Online into the clinical queue for dental toxic ingestions. These issues are being addressed with commissioners of the new dental service NHS England.

IUC Developments

As part of the changes from NHS 111 to the new IUC service, the profile of patient demand has changed with the removal of the dental calls. As a result of this and based on staff feedback, a rota review is underway. This is being supported by external experts so that we can, where possible, balance the needs of our staff and the service. This process will take place in spring/summer with new rotas for implementation prior to the winter. Staff engagement is central to this through a staff rota survey, which has had 211 responses and face to face focus groups with 110 staff involved, to gather information on their ideas for the design of the new rotas.

As part of the IUC contract the details of the CQUIN and SDIP will be developed during quarter one for the IUC service with commissioners. NECS (North of England Commissioning Support) have been commissioned to collate 'system' data for IUC and the NHS England Aggregated Data Collection which generate the national IUC Key Performance Indicators. YAS are working with NECS to progress this, which will support with system intelligence to help improve patient pathways and outcomes.

Patient Transport Services (PTS)

- **Activity Levels**

PTS journeys are slightly down compared to previous years; although the unplanned journeys, mobility type, out of hours and weekend journeys are increasing.

Activity reviews have been formally escalated and negotiations are either underway or agreement reached for the recently procured contracts for South Yorkshire Consortia, East Riding CCG and VOY and S&R CCG's. All of these contracts had assumed activity levels for the on-day higher mobility types which are significantly lower than YAS actuals since going live; requiring the highest specification vehicles and double crews.

- **Performance**

Key Performance Indicators have seen improvements in West Yorkshire with February, and March performance exceeding targets (KPI's 1, 2 & 3) to the highest levels reported YTD.

North, East & Scarborough - Since January 2019 all journey are now auto-planned in and out. Approximately 20%-25% of journeys are manually planned prior to the auto plan being run. This allows for patients with special needs and distance journeys to be planned ahead. Feedback so far from the staff is that it is working well and has resulted in KPI 1 & 2 remaining stable and KPI 3 moving to green in Jan, Feb & March 2019. KPI 4 still requires improvement but we have seen a slight increase in achievement across the 3 areas.

West activity planning will be automated in and out full day from July, with South following in August 2019.

- **Eligibility**

There are no exceptions to report. Quarterly reviews with CCG's have been undertaken York (March 2019). East Riding has progressed through their first Quality Committee.

South Yorkshire project is progressing, Alistair Mew (NHS Sheffield CCG) is to sponsor the work.

- **PTS staff engagement and development**

PTS Listening events have been held at Hull Royal Infirmary and Bramley Ambulance Station. In addition, PTS senior managers are continuing to undertake "back2thefloor" days with crews and control/reservations staff.

PTS leaders are scheduled to attend the next module of the Leadership In Action Programme and PTS are trialling a tablet loan scheme to increase engagement and assist with Statutory and Mandatory training compliance.

Following positive pilot work at Wakefield Ambulance Station, the rollout of personal issue smartphones commenced in April; this will include access to ESR self-service, YAS e-mail, Pulse and other app's.

Urgent Care & Integration

The Urgent Care and Integration team continues to broaden its engagement with place based health and social care systems and is currently aligning locality priorities to YAS's transformation programmes.

The team has held a trust wide Falls workshop and subsequently developed a Falls programme based on three agreed themes; the patient, the organisation and the system. The falls programme is aligned to the national initiatives of Project A, the Ambulance Improvement Programme and the learning from the Welsh Ambulance Service.

The team also led a clinical workshop on Frailty with the aim of determining YAS's approach to frail patients. The initial outputs from the workshop are that the key frailty syndromes of falls and medicines optimisation should be the areas for development.

A strategic and co-ordinated response from YAS in respect of the system service reconfiguration agenda remains a high priority. The planned service changes in regard to hyper acute stroke in West Yorkshire and Harrogate have come into effect following modelling and joint working with colleagues in Leeds, Harrogate and York. We are monitoring the impact of these changes. In addition we have been working with colleagues in Hambleton, Richmond and Whitby to support the operational service changes made at the Friarage Hospital.

3.4 Clinical Directorate

The clinical pathways team conducted a Pathways Roadshow resulting in engagement with over 250 members of staff, reinforcing the presentation by Sarah Stead, on alternative pathways of care at the College of Paramedics best practice day. Recent developments include access to community services

through the Sheffield single point of access, and a new referral pathway to the Mental Health Crisis Café in Huddersfield.

The latest infographic in the “10-10-10” series, to raise awareness of on-scene time, has been released. The management of ST elevation Myocardial Infarction (heart attack) joins infographics on stroke and trauma. Together these have been viewed more than 90,000 times on Twitter to date. The next in the series, on obstetric emergencies, is in development. Mark Millins, Associate Director for Paramedic Practice, presented the “10-10-10” initiative at the Life Connections in Harrogate.

The Public Health Plan has been reviewed to align with the NHS Long Term Plan and YAS Clinical Strategy. Links are being established with ICS prevention work streams including population health management, suicide prevention, social prescribing and cardiovascular disease. Ruth Crabtree, YAS Public Health lead, has taken on the role of Chair of the ACE national public health leads group.

Richard Pilberry presented the results of the SATIATED study (Soiled Airway Tracheal Intubation And The Effectiveness of Decontamination) at the EMS 2019 conference in Madrid. 164 YAS paramedics took part in this study.

Dr David Hickson, Chair of YAS BASICS, has stood down as he is relocating to Scotland. David has provided over 30 years of voluntary assistance to the ambulance services in Yorkshire, and has been instrumental in developing the scheme to its current position.

IPR exceptions

At the time of publication of this report there are no exceptions to report.

3.5 Quality, Governance and Performance Assurance Directorate General Update

Quality Improvement – The 10 new QI Fellows have now completed their induction. The initial group of Fellows are continuing their involvement in supporting Quality Improvement and engaging other staff in their areas of work, and in the delivery of training and mentorship. A celebration event for the first cohort of Fellows is being held on 28 June 2019.

The Trust continues to engage actively with the national #ProjectA initiative and the related collaborative improvement developments. Earlier this month representatives from the Trust participated in the launch event for the national ambulance QI network event in Edinburgh.

Process improvement methodology is being deployed in initiatives across a number of departments and change programmes. The Trust’s first Rapid Process Improvement Workshop using Virginia Mason methodology has been completed, with a focus on streamlining elements of Trust process for new starters. Further RPIW exercises are scheduled during the year.

Dates are currently being finalised for the NHSI Leadership for Improvement sessions for Board members.

Patient safety – Work has commenced across the Quality and Clinical Directorates to support implementation of the new Trust Zero Avoidable Harm plan. The procurement of an updated risk management system has now been completed. Implementation over the next few months will enable the delivery of a number of benefits including improved incident reporting functions and feedback to managers and staff.

Patient Experience - Work is continuing to engage patients and carers through the Trust Critical Friends Network (CFN) and members are being actively involved in a number of improvement projects.

The Trust is currently in the process of running a pilot Always Event (AE) within the PTS service. This follows some collaborative work during Q3 with the CFN and members of staff, and a review of intelligence from complaints, incidents and patient survey responses. The pilot AE has been identified as;

“The patient will always be briefed on the travel itinerary before they commence their journey”.

During the national Experience of Care week the Patient Relations team and Quality Improvement Fellows worked together to focus on compliments to staff from patients and carers. This has helped to identify areas where the process can be streamlined and all compliments are now being processed and monitored on the same timeframe as complaints.

Staff Safety - There is a national focus on provision of training to mitigate the risks of violence and aggression and YAS Local Security Management Specialist (LSMS) is involved in with the National Ambulance Security Group (NASG) in the development of these standards including training in ‘restraint’ or ‘safer holding techniques’.

The Trust Risk Team continue to strengthen our internal governance arrangements and support for staff who are victims of violence and aggression and deployment of sanctions for perpetrators of violence in aggression has significantly increased.

A support booklet for staff who are victims of violence and aggression, and a checklist for their managers were launched in April and a new Security Alerts portal is now live, with active engagement with other agencies to inform the content.

A survey is being conducted of staff who have recently reported violence and aggression, to evaluate the support provided by the Trust and further potential improvements.

Freedom to Speak Up – The Trust’s first Freedom to Speak Up Guardian, Jock Crawford completes his term of office this year after a very successful 3 year period, which was extended from the initial 2 year secondment. The new Freedom to Speak Up Guardian Luzani Moyo is now in post and has completed his initial induction and detailed handover from Jock.

Care Quality Commission (CQC) – The Trust has now returned the Routine Pre-Inspection Information Request and subsequent requests for information. Focus groups with staff are being held by CQC during May and the planned, unannounced inspection is anticipated very soon. The dates for the Well Led inspection have been confirmed as 26-28 June 2019 and an interview schedule has been arranged in line with CQC requirements.

IPR Exceptions

Safeguarding Training - Safeguarding Level 2 compliance has continued to rise 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. An assessment of level 3 training requirements has been completed in relation to the updated Inter-collegiate child and adult safeguarding guidance. Delivery has commenced as part of a 3 year plan, with a focus this year on key clinical roles in Operations, the EOC Clinical Hub, the Integrated Urgent Care service, PTS and the Clinical Directorate.

Information Governance – IG training compliance continued to rise following the increased focus and communications with staff at the start of the year.

Deep Clean – Overall compliance remains positive through the strong management focus and effective teamwork between Fleet and Operations teams. The number of breaches is now reducing after a slight rise at the start of the year, now that the new Ambulance Vehicle Preparation sites are fully bedded in.

Legal Requests – Timeliness of Freedom of Information (FOI) responses has shown a significant improvement over the last quarter and the department has now recruited to the relevant vacancies.

3.6 Workforce & Organisational Development (OD)

Trust's People Strategy 2018 - 2023

This section sets out the Directorate's progress towards the aims of the Trust's People Strategy. The five key strategic aims of the People Strategy will be used as a framework for reporting key priorities, objectives and performance measures for the Directorate. Reports are currently being developed in line with the refreshed approach to the Integrated Performance Reporting.

Culture and Leadership

Leadership Induction

The Trust piloted a Leadership Induction programme on 11 March for leaders new to the Trust or new to the role of leadership. This introduces these new leaders to the Trust's expectations of its people leaders. The programme will be further refined in preparation for further implementation.

Leadership in Action

The Leadership in Action (LIA) programme continues to be cascaded throughout the Trust and Tranche 3 of the programme began on 29 March. The internal team of facilitators are completing their training to deliver the programme to future cohorts.

As of end of April 2019, the following numbers of leaders have attended:

	Module 1	Module 2	Module 3	Module 4
Total	240	125	108	86

Annual Leadership Summit – 11 June 2019

The annual leadership event will take place at Leeds United Football Club, Elland Road Football Stadium in Leeds. The event aims to bring our leaders together to better understand the NHS Long Term Plan in conjunction with the roll-out of the Trust strategy. The event also gives leaders an opportunity to network and further explore how to live and role-model the YAS values and behaviours. The agenda including speakers is currently being finalised.

PDR (Personal Development Review) / Appraisal

The Trust's compliance for the completion of PDRs as of end April 2019 was 79.2%, against the Trust target of 90%. This is an increase from March 2019 which was 77.03%. Managers have been reminded via the Trust Management Group, of their obligations to complete their staff appraisals.

A discussion paper was presented to the Trust's Strategic Workforce Group on 25 April 2019 and members were asked to consider a series of proposed key principles for the new process. A three-year implementation plan is currently being drafted and will be presented to the next Strategic Workforce Group in July 2019 and then TMG for approval.

Recruitment, Retention and Resources

The Team continue to support the delivery of ARP with the central recruitment of additional Emergency Care Assistants (ECA); local selection events have been held during January, March and May 2019 which have resulted in the recruitment of 178 ECAs. The ECA workforce and training plan has now been exceeded with successful ECA recruits on a waiting list, which will be used to create a candidate pipeline for next year's plan.

The Trust's first Rapid Process Improvement workshop was held in March 2019. The workshop focused on the 'day-one' process whose purpose was to streamline processes across the IT and HR Departments to ensure that staff are fully functional on their first day. This has already delivered an improvement to the creation of ID badges and IT system access, prior to day one, through joint team working with other functions across the Trust. Excellent feedback has been received from new staff that have experienced the new process. This process is now part of our normal on-boarding process for all new staff.

Electronic Staff Record (ESR)

The ESR Steering Group continued with process mapping the key elements of ESR functionality and how our processes should align. The group are focusing on Statutory and Mandatory training and a project plan is being developed to transfer E-learning modules from YAS 247 to ESR. The progress of this project will be reported though the Non-Clinical PGB.

Further functionality as part of ESR Self-Service has been launched, with managers now using ESR to log staff appraisals. In addition, employees that do

not have shifts allocated through the other scheduling systems can now book annual leave through ESR rather than continuing to use a paper-based process.

Attrition

An analysis on the Trust's attrition data was presented to the Strategic Workforce Group in April 2019. The data shows the number of leavers has reduced in 2018-19 (587) compared to 2017-18 (667). Despite the decrease in the number of leavers in 2018-19, 33% of leavers leave within the first 12 months of employment and this has increased from 27% in 2017-18. The most common reason for leaving is work life balance. The area with the highest number of leavers was Call Handlers in the Urgent Care and Integration Call Centre; where a number of staff were unable to meet the NHS111 pathway capability standards. A thorough review of the exit interview process, to ensure more robust qualitative data collection, is being undertaken with the outcome to be presented to the Strategic Workforce Group in July 2019.

Employee "Voice"

National NHS Staff Survey 2018

Following the results of the 2018 National Staff Survey results, Listening Events and team meetings are taking place across all service lines and directorates to further explore findings with staff. The outputs of these discussions will be used to agree people priorities for the next 12 months.

A detailed corporate action plan was presented alongside the headline results to the Trust Board in March 2019 and is now being implemented with deliveries monitored through the Strategic Workforce Group. Activities will emphasise the voice from staff and how this has informed the initiatives as part of an ongoing '*You Said, We Are Doing*' / '*You Said, We Did*' communication campaign.

The planning process for the 2019 NHS Staff Survey has been agreed in principle and will aim to increase the Trust response rate as well as improve results.

Pulse Check Staff Survey (Staff Friends and Family Test)

The response rate for Quarter 4 (2018/19) was 16%. Staff in Patient Transport Services and NHS111 were canvassed for their views and the results are expected in late May.

This year (2019/20) A&E will be canvassed in Quarter 1, Integrated Urgent Care in Quarter 2 and Corporate Services in Quarter 4. In addition to asking the two Staff FFT questions, staff will be asked questions around dignity and respect and how staff see colleagues and leaders displaying our values and behaviours.

YAS Cultural Ambassadors and Employee Voice Network

The creation of our YAS Culture Ambassadors role and Employee Voice Network was supported at the Trust Management Group and the Joint Steering Group during April. An implementation plan is currently in development and various stakeholder groups, including the Trust's staff networks have given support. Work is now being undertaken with Corporate Communications on key messages and branding, with a view to commencing recruitment of the Cultural Ambassadors from across functions and geographies. The aim is to launch during Summer 2019. The Chairman will chair the Employee Voice Network, supported by the Director of Workforce and OD.

Employee Relations

Sickness Absence

The results, of a Trust-wide Sickness Absence 'deep dive' analysis, were presented at the Strategic Workforce Group in April 2019. The analysis highlighted the main issues within Directorates that impact on the absence of our workforce over the reporting period 1 June 2017 to 31 May 2018. This data will inform an action plan to support a 1% reduction to 4.84%, in line with our Operating Plan and to meet the NHSI expectations of our Trust by 31st March 2020.

Health and Wellbeing

Unfortunately due to system interface issues, the sickness absence figures were not available at the time of publishing. Please refer to the Trust's Integrated Performance Report.

The Trust Management Group approved the 2019/20 Health and Wellbeing Plan and associated funding in April 2019. The NHS England, NHSI and NHS Employers 'Health and Wellbeing Framework' diagnostic exercise provided valuable information to support its development. Our plan has been sent to NHS Improvement as per their expectations.

The Health and Wellbeing Plan for 2019/20 is on the Trust Board agenda to gain commitment and support for this year's activities.

Occupational Health (OH):

The new Occupational Health and Wellbeing services are now in place and delivery commenced on 1st April 2019. The team will robustly performance manage the new providers against the contracts which have clear and measurable KPIs. A dedicated contract manager has also been assigned to these contracts to ensure that providers are held to account for service delivery.

Education and Learning

Educational Governance

The Non-Clinical Portfolio Governance Board (PGB) has devised a clear timed action log to review all statutory/mandatory training programmes over the coming year to ensure the content and staffing groups meet with the latest national expectations. The Statutory/Mandatory Matrix and SOP for compliance figures has been formalised as part of this process.

Apprenticeships

The Trust continues to roll out the Ambulance Support Worker (ASW) Level 3 Apprenticeship aligned to the ECA Scope of Practice. As of mid-April 2019, a total of 128 ECA's were enrolled on the programme. The current total number of staff enrolled on an apprenticeship programme is 150. This is approximately 2.6% of our workforce against the government target of 2.3%.

External Collaboration

YAS Academy and the Clinical Directorate work closely with our University partners across the region. Recently the Trust was involved in the Revalidation process at Sheffield Hallam University for an Integrated Care Curriculum programme and with Teesside University regarding apprenticeship

standards. Further engagement has taken place at Huddersfield University in their development of a Masters Level Post Qual / Pre Registration Paramedic programme.

Band 6 Paramedic upskilling training

The bespoke training for 200 Paramedics identified with formal skill gaps to meet the Band 6 job description requirements continues to be delivered in line with national guidance. The end of March 2019 required milestone of 60% training delivered/completed was achieved within the agreed deadline. The Trust is now working towards and monitoring progress against the next NHSI milestone of achieving 80% of the training delivered/completed by 30 September 2019. Currently, as of early May 2019, the Trust has completed 62.83%.

Diversity and Inclusion

To support our targeted approach in increasing the diversity of our staff, a recruitment/career day took place on 2nd April 2019, in partnership with PATH Yorkshire, a voluntary organisation based in Leeds. A diverse audience of over 240 people attended the event. Over 20 individuals have registered their interest for the role of ECA and Call Handler roles. The Recruitment Team have provided application completion support for these individuals with a focus on providing a level playing field.

The first task and finish group, to develop the forthcoming Trust wide 'Dignity and Respect at Work' campaign, took place on 1st May chaired by Christine Brereton, Director of Workforce and OD. This will be significant area of work where we are aiming to achieve culture change in our approach in dealing with conflict at work.

Our staff equality networks were re-launched as part of the National Staff Networks Day with a celebration held on 8th May 2019. This was a great opportunity to raise the profile of all our staff equality networks and for them to showcase the work they are involved with across the Trust. The newly developed Disability Staff Network have been instrumental in developing their publicity material, this includes their terms of reference and some key information on their role and remit, including the design of their logo.

3.7 Finance & Contracting Update

Fleet, Estates & Facilities

The Ambulance Vehicle Preparation teams at Leeds, Huddersfield and Wakefield are all fully operational and continuing to develop the service offered to operations and PTS.

All vehicles required for the first phase of the improvement in the Ambulance Response Programme demand profile are now operational.

To assist the 24/7 operational maintenance of the Estate we have engaged the services of an external provider to support the upkeep and statutory compliance of our properties.

Procurement & Logistics

On the 2019/20 work plan there are currently 144 projects, worth a total of £42.4m (total contract value). The main projects that are in progress include: Patient Transport Services Lease vehicles; Patient Transport Services A&E Sub-Contractor Framework; EPR Devices / Tablets; Facilities Management Managed Service Provision; Spoke Modular Buildings; Risk Management Software and Vehicle Recovery for out of hours.

The Patient Transport Services A&E Sub-Contractor Framework (Taxis) tender documents are close to completion with supplier events successfully completed in March 2019 before the tender is published. Recently the call-off documents were fully approved for the provision of Fuel Cards arranged via the East of England NHS Collaborative Procurement Hub Framework.

Digital - Operational & Transformation

ePR Deployment. The North Yorkshire deployment has started, and is due for completion by the end June 2019. Scarborough Hospital went live on 2nd April with York Hospital going live on 30th April 2019. Over 2,400 members of Operational staff have been trained and over 430 vehicles have been fitted with Toughbook. In April 2019 YAS passed the milestone of a quarter of a million ePRs finalised since the beginning of the project.

A new version of ePR was released for live use on 17th April, which includes the facility for transfer of the electronic patient record from Rapid Response Vehicles to Double Crew Ambulance crews. The ePR Development Team have also been working with the local health care records exemplar (LHCRE) on a pilot to transfer the ambulance patient record to Hospital Trusts in a standard format, which allows for integration with other healthcare information systems.

Wide Area Network (WAN) and WiFi. The WAN programme will deliver cost savings of over £0.5m during the length of the contract whilst providing a significant enhancement to our bandwidth. The programme is expected to be complete during the summer.

Corporate WiFi has been rolled out to the remaining ambulance sites with the two air ambulance stations being progressed and Embrace awaiting a network connection.

Contracts Secured. The Trust has secured ongoing contracts for 2019-2020 supporting Health Education England with website support and the development of a Technology Enhance Learning Support providing learning technology and e-learning on behalf of Health Education England (North) supporting NHS Trusts within Yorkshire and Humber, North West and North East as well as to YAS staff.

Agile Working Transformation. A printer audit has been undertaken to review future needs. The programme to roll out Video conferencing across the Trust is being implemented with 34 video-conferencing Champions identified and trained.

Finance & Contracting

The finance team have successfully submitted the draft Trust accounts for 2018/19 and are engaging with and responding to clarifications from our External Auditors.

The team continues to support two of the movement towards delivering the Ambulance Response Programme standards, support around hospital reconfiguration across the region and supporting the implementation of the new Integrated Urgent Care (IUC) solution.

Successful discussions have taken place with our commissioners regarding Patient Transport Services and ensuring the contracts respond to the changing service needs, particularly around eligibility criteria, on day and weekend discharges.

3.8 Planning & Development / Corporate Communications Directorate

Planning and Development

Corporate Strategy

The Trust Strategy One Team Best Care continues to be refined. A clear communication and engagement plan is being developed that ensures we continue to build the engagement and understanding of our strategy internally and externally. The range of briefing material and communications for managers and leaders is being expanded to enable them to confidently and consistently promote and disseminate the strategy to all our people.

The strategy has clear alignment with the NHS Long Term Plan and the Trust's clinical strategy, which has now been refreshed.

The team continue to support the development of ongoing 'locality engagement events' across Barnsley, Hull, York and Wakefield, to maintain effective engagement with staff and to continue to share key messages around the delivery of our strategy and new ways of working.

Trust Operational Plan

The National Planning Guidance was released throughout December 2018 and January 2019. Following submission of the draft plan on 12 February 2019 the final Trust Board approved Operational Plan was submitted in line with national planning requirements on 4 April 2019. The Trust's plan is aligned to System Plans and the NHS Long Term Plan. We continue to await feedback from NHSI on the final operational plan.

Business Planning

The team have carried out a range of engagement sessions with TEG and TMG to develop the Trust's two year business plan. A focus on investments and impacts has also been introduced, in conjunction with finance colleagues, to support the development of the finance plan. TEG is currently refining the deliverables within the business plan.

The format of the new business plan will support the planned development of team objectives and individual objectives aligned to delivery of the Trust business plan and the key priorities.

GATE Review and Business Case Approach

The team are developing an updated GATE review process, designed to ensure a consistent approach to assessment and approval of a range of opportunities (including service developments and pilots, tender opportunities, business cases and collaborative agreements).

Business Development

Nottinghamshire and Bassetlaw NEPTS

A number of new tenders have been advertised across Nottingham, Nottinghamshire and Bassetlaw, for NEPT services. Following discussions with East Midlands Ambulance Service, the Planning and Development team, alongside NEPTS MD, provided senior management support as part of the NAA approach in reviewing the EMAS tender response.

North Yorkshire Telecare Support Service

In 2018, the team worked up a tender response with NRS Healthcare to deliver a new response to 'concern for welfare' and non-injury falls calls utilising volunteers in the community as the initial response supported by clinicians in the Emergency Operations Centre. The contract was successfully won and the team are overseeing the implementation, assisting the Community Resilience Team constructing operating procedures and training of the initial cohort of volunteers. The current situation is achieving contract sign-off with NRS Healthcare who are the main provider of the telecare response service and launching the service within Yorkshire.

Section 106 Report

The Planning and Development team are currently reviewing the potential opportunities related to the submission of applications related to the Section 106 process. These applications have agreed definitions and criteria and are non-recurrent in nature. The team are working with other providers to understand whether the team can provide a regional service, with investment into the team to undertake this role. YAS Finance are currently investigating the scale of opportunity for certain services.

Integrated Performance Report (IPR) Exceptions

Outstanding PDRs have been scheduled to be undertaken.

Communications and Engagement

The Corporate Communications team has continued to keep staff well-informed of operational and corporate developments and highlight news and successes at the Trust to external stakeholders through a range of channels.

We launched our 2019 Restart a Heart campaign on 14 February to encourage secondary schools across the region to sign up to participate in CPR training for their pupils on Restart a Heart Day (16 October). We have a record 172 schools signed up for the event, which means we will have the opportunity to teach 40,000 pupils CPR skills on the day.

We continued to support our Right Response, First Time and #ThinkBeforeYouCall messages to help the public use NHS services appropriately for their medical need. We are also supporting the West Yorkshire and Harrogate Health and Care Partnership campaign 'Looking out for our

neighbours' which aims to try and reduce loneliness and isolation across our communities and awareness days/weeks including Experience of Care Week (22-26 April). In addition, information has been shared with staff on the lead-up to the forthcoming Dementia Action Week (20-26 May).

Significant internal promotion has been carried out to publicise the Trust's new occupational health and staff wellbeing services introduced on 1 April 2019 and the Ambulance Vehicle Preparation launches at Leeds and Huddersfield ambulance stations and the Trust's involvement with the Tour de Yorkshire event at the beginning of May.

The Trust's Staff Networks (LGBT, BME and Disability Network) have been supported with the creation of brand identities and promotional material to raise awareness amongst colleagues.

Social Media

The team has continued to grow the Trust's social media accounts and now has 19,000 followers on Twitter, 12,000 page likes on Facebook and 2,500 followers on Instagram.

IPR Exceptions

Statutory and Mandatory Training: The Corporate Communications team has one member of staff who is due to complete the refreshed Statutory and Mandatory Workbook training and one member booked on a course to complete BLS/Fire training in June 2019.

Personal Development Reviews (PDR): The Corporate Communications team has one member of staff with an outstanding PDR which is scheduled in May 2019.

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 April 2019 IPR report, highlighted in the Executive Directors' reports.