



# Integrated Performance Report

## July 2019

The following report outlines performance, quality, workforce and finance as identified by nominated leads in each area. All these areas link to the quality of care for patients provided by the Yorkshire Ambulance Service across three main service lines (999, PTS and IUC).



**Improvement  
Model Ambulance**

Single Oversight  
Framework Score

2

Inspected and rated

Good





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# EXECUTIVE OVERVIEW

# One Team, Best Care

## Our purpose is

to save lives and ensure everyone in our communities receives the right care, whenever and wherever they need it



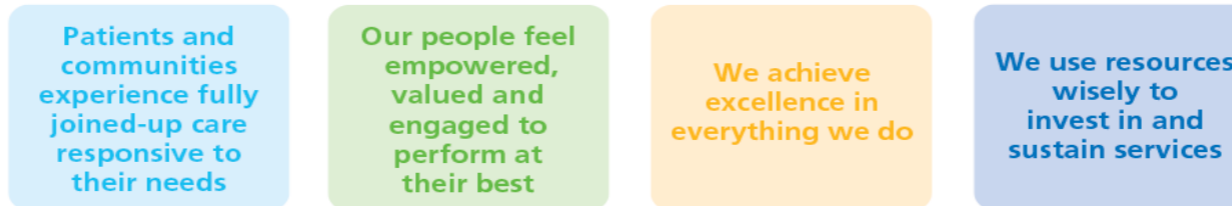
with our core values embedded in all we do



## Our Vision

By 2023 we will be trusted as the best urgent and emergency care provider, with the best people and partnerships, delivering the best outcomes for patients

## Our Ambition for 2023 is that



Delivery is directly supported by a range of enabling strategies





Patients and communities experience fully joined-up care responsive to their needs

Our people feel empowered, valued and engaged to perform at their best

### Our Ambitions for 2023

We achieve excellence in everything we do

We use resources wisely to invest in and sustain services

### Our Key Priorities

- 1 Deliver the best possible response for each patient, first time.
- 2 Attract, develop and retain a highly skilled, engaged and diverse workforce.
- 3 Equip our people with the best tools, technology and environment to support excellent outcomes.
- 4 Embed an ethos of continuous improvement and innovation, that has the voice of patients, communities and our people at its heart.
- 5 Be a respected and influential system partner, nationally, regionally and at place.
- 6 Create a safe and high performing organisation based on openness, ownership and accountability.
- 7 Generate resources to support patient care and the delivery of our long-term plans, by being as efficient as we can be and maximising opportunities for new funding.
- 8 Develop public and community engagement to promote YAS as a community partner; supporting education, employment and community safety.



The Service Transformation programme will help to deliver the Trusts strategic Plans and ensure that internal plans are aligned to external system pressures.

### Service Delivery & Integrated Workforce **Green**

- ARP performance better than agreed trajectory against all standards with two national standards not achieved for Category 2 mean & Category 4 90th
- Recruitment plan for 19/20 presented to programme board with now only a minor shortfall of nine predicted for year end
- Hear and Treat behind plan at 6.7%, a new trajectory has been developed with a year end target of 8% to be achieved.
- The IUC SDIP has now been agreed and is on track at the end of Q1 with further quarterly reports being presented at programme board

### Place Based Care **Amber**

- Urgent treatment centre gap analysis complete and workstreams now in development to improve utilisation where appropriate
- Care home falls project in Sheffield has been extended with additional funding made available to expand the pilot
- Gap analysis of mental health pathways completed with plans being developed to address gaps and track the impact of improvements for patients

### Infrastructure **Amber**

- Engagement sessions for identification of future Hub and AVP sites have been carried out across the CBU's throughout July and August. This will then be fed back to the programme board
- Pilots agreed for AVP style packs for non AVP stations which will run from York station and Meds management central distribution pilot from Manor Mill
- Single warehouse business case will be presented to programme board in September with a view to progress through gate process for sign off by the end of September
- EPR is now nearing 500,000 completed records with comms planned to celebrate the milestone

### Capacity & Capability **Amber**

- Work on an options appraisal for future training requirements of the trust is underway
- Accountability Framework programme plan now in development with workstream leads now developing the individual projects
- Options paper on reporting software solutions in development and will be presented to programme board in September
- Work is underway to review options for an engagement tool that will support the employee voice network

The Service Transformation programme will help to deliver the Trusts strategic Plans and ensure that internal plans are aligned to external system pressures.

### **External System Pressures**

- Humber, Coast & Vale STP are developing five year plans and priorities, working towards the next phase for gaining ICS status. YAS continue to engage to support these plans and shape the priorities.
- Maddy Ruff has recently been appointed as Programme Director for the York and Scarborough Hospital Review; YAS have initiated dialogue to ensure full and ongoing engagement in this programme.
- The new South Yorkshire Stroke pathways commence with HASU services at Rotherham Hospital ceasing from 1st July and the acute stroke service at Barnsley Hospital ceasing from 1st October 2019. Briefings and new pathways have been shared with teams and services within YAS.
- Plans for changes to acute medicine provision at the Friarage Hospital and its impact on YAS have been modelled with new operational response developed.
- Local ICSs have developed their operational plans, with a focus on reducing inequalities, prevention and digital interoperability and infrastructure.
- YAS working with providers and commissioners across the patch to identify local Urgent Treatment Centres and to develop and agree appropriate pathways into them.

Service Line	Indicator ID	Exception Commentary
Integrated Urgent Care	001	The demand for Integrated Urgent Care (IUC) year to date is at 0.1% above the contract ceiling levels, primarily as a result of excess dental demand. As a result of the excess demand there is a need to increase staffing, however due to lead times to recruit staff currently this demand is being managed on the reliance of voluntary overtime which has resulted in a reduction of performance for calls answered and call back within 1 hour. Additional recruitment and training has now been put in place to increase capacity with a training course brought forward from September to August to assist. July performance was also impacted as a result of a national AdastrA failure on 27 July 2019 which affected several services and is being managed as an SI.
A+E Operations	Chart 7 Category 2 mean.	Additional activity and demand in July impacted on Category 2 (CAT2) for the month. Disappointingly there were several days where the CAT2 mean (average) was well below national standard however the volatility of the hot weather days and particular challenging Mondays saw overall performance compromised. The final achievements are still in line with the Trust Trajectory agreed within the business plan.
A+E Operations	Chart 10 Category 4 90th%	Category 4 (CAT4) 90th percentile has consistently seen challenges due to the volume of calls in this Category. A CAT4 deep dive was delivered in Divisional Management Board and the findings identified several areas to revisit in regards to our response to these patients. Actions have been identified and instigated. Early signs are that this will improve whilst acknowledging that this will remain an area of occasional pressure.
A+E Operations	Emergency Operations Centre chart 6 - Sickness	Emergency Operations Centre (EOC) sickness performance continues to prove challenging to address. All staff are within process and regular reviews are taking place with the HR Business partners to focus on areas identified. Musculo skeletal problems and Anxiety, stress and depression from the main bulk of sickness reasons. It is hoped that the Wakefield refurbishment and the new equipment including chairs will assist in addressing the environmental issues which will see significant improvement.
A+E Operations	Turnaround Time	July saw the highest level of lost hospital hours for some time and were higher than experienced through the Winter period. Work continues with the National and Regional NHSE/I team and through the A+E delivery boards locally to address the issues of hospital handover. In addition some increases of Crew clear have been noted and the Operational teams are looking at ways of improving this element which seems to occur at those sites who are traditionally very good performers at Handover.
A+E Operations	PDR.	PDR compliance has slipped through the summer period. It has been identified that hierarchies within the system have prevented completion of some recording processes and a reduction in compliance. However all Operational areas teams have been asked for improvement trajectories to bring back into line.



# Patients & Communities

July 2019

Indicator ID	Key Operational Standard Description	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Jul-19				
														Target / Forecast	Actual	Actual v Target/Fcast		
001	Integrated Urgent Care	Calls Offered	130,494	128,520	133,906	138,142	165,897	148,466	129,920	141,675	142,409	141,721	131,686	136,129				
		Call Answered	129,528	127,130	131,175	135,115	163,747	144,696	126,380	139,115	131,822	130,711	120,255	121,263	119,244	121,263	▲	
		Calls Answered within 60 Seconds	95.4%	92.9%	85.0%	82.9%	90.2%	81.6%	79.0%	86.1%	91.8%	90.9%	88.7%	84.1%	90%	84.1%	▼	
		Core Clinical Advice									30.7%	31.3%	31.5%	33.4%	30%	33.4%	▲	
		Clinician Called Back within 1 Hour									64.1%	59.2%	59.4%	59.6%	60%	59.6%	▼	
		Direct Bookings									46.2%	46.8%	47.1%	44.7%	30%	44.7%	▲	
		Bookings into UTC									52.0%	53.7%	54.4%	53.9%	50%	53.9%	▲	
		Bookings into IUC Treatment Centres									59.1%	60.1%	60.8%	60.3%	95%	60.3%	▼	
		ED Validations									62.9%	61.9%	57.4%	63.0%	50%	63.0%	▲	
		Ambulance Validations									97.8%	97.9%	98.0%	98.6%	95%	98.6%	▲	
002	EOC	Telephony - 999 Calls Answered	56,326	56,488	58,113	57,470	61,815	59,777	54,546	57,868	58,202	59,471	58,166	63,132		63,132		
		Telephony - 999 Calls Answered within 5 Seconds	96.7%	97.1%	96.8%	97.9%	98.3%	97.8%	97.5%	98.1%	95.5%	97.5%	96.5%	94.5%	95%	94.5%	▼	
003	A&E Operations	All Activity (H&T + STR + STC)	64,625	63,879	66,831	67,123	71,884	71,254	63,897	69,455	68,236	69,359	67,360	71,887		71,887		
		Hear & Treat (H&T)	6.6%	6.4%	6.5%	6.3%	6.8%	6.7%	7.4%	6.5%	6.6%	6.8%	6.8%	6.7%		6.7%		
		See, Treat & Refer (STR)	23.7%	23.2%	22.7%	22.9%	23.5%	22.9%	22.7%	23.4%	23.6%	23.5%	24.1%	24.2%		24.2%		
		See, Treat & Convey (STC)	69.8%	70.4%	70.8%	70.8%	69.7%	70.4%	69.8%	70.1%	69.8%	69.7%	69.1%	69.2%		69.2%		
		999 Responses (STR + STC)	60,376	59,766	62,511	62,886	67,002	66,467	59,153	64,936	63,713	64,675	62,776	67,106	65,341	67,106	▲	
		Category 1	Mean	00:07:03	00:07:18	00:07:10	00:07:02	00:07:03	00:06:59	00:07:03	00:06:44	00:06:58	00:06:49	00:06:48	00:06:54	00:07:00	00:06:54	▼
			90th Percentile	00:12:05	00:12:28	00:12:23	00:12:13	00:12:15	00:12:08	00:12:05	00:11:28	00:12:06	00:11:56	00:11:56	00:12:11	00:15:00	00:12:11	▼
		Category 2	Mean	00:19:26	00:20:19	00:19:58	00:20:29	00:21:03	00:19:49	00:20:02	00:17:40	00:19:40	00:18:38	00:18:46	00:18:17	00:18:00	00:18:17	▲
			90th Percentile	00:39:47	00:42:11	00:41:37	00:42:36	00:44:17	00:41:16	00:41:50	00:35:35	00:40:29	00:38:09	00:38:16	00:37:26	00:40:00	00:37:26	▼
		Category 3	90th Percentile	01:46:42	01:57:25	01:57:34	01:58:25	02:15:22	01:58:10	01:53:11	01:29:42	01:49:54	01:42:58	01:49:22	01:42:47	02:00:00	01:42:47	▼
Category 4	90th Percentile	02:45:48	03:51:53	03:46:58	03:44:04	03:38:33	03:52:38	03:25:18	03:00:09	03:36:53	03:51:12	04:33:48	04:01:23	03:00:00	04:01:23	▲		
Average Turnaround Time	00:32:57	00:33:51	00:32:51	00:33:24	00:34:15	00:34:56	00:35:39	00:33:59	00:35:05	00:34:42	00:35:34	00:36:40	00:30:00	00:36:40	▲			
Average Job Cycle Time (Responses)	01:55:48	01:58:30	01:56:45	01:59:03	01:59:01	01:57:42	01:58:01	01:52:42	01:58:14	01:57:13	01:57:06	01:57:19		01:57:19				
004	PTS	Journeys	79,012	74,017	83,380	79,827	68,270	80,652	72,158	75,569	73,830	77,516	73,526	82,095	83,724	82,095	▼	
		Patient Journeys < 120 Minutes	99.1%	99.5%	99.4%	99.5%	99.4%	99.5%	99.5%	99.4%	99.4%	99.3%	99.4%	99.3%	90.0%	99.3%	▲	
		Patients Arrive at Appointment on Time	89.3%	87.3%	88.1%	88.9%	87.3%	88.6%	89.4%	90.1%	90.7%	88.5%	88.9%	90.9%	90.0%	90.9%	▲	
		% Pre Planned - Picked Up in 90 Minutes	88.8%	88.0%	88.2%	90.0%	87.2%	89.3%	89.5%	89.6%	90.2%	87.3%	88.5%	89.3%	90.4%	89.3%	▼	
		% Short Notice - Picked Up in 120 Minutes	83.0%	78.1%	78.9%	79.1%	73.7%	76.0%	78.0%	76.0%	78.8%	76.0%	76.7%	77.7%	88.8%	77.7%	▼	
		Calls Answered within 180 Seconds	93.5%	93.9%	95.5%	96.3%	94.3%	93.8%	87.2%	90.7%	92.9%	89.2%	89.4%	96.3%	90.0%	96.3%	▲	
		GP1 (See PTS Section For Description)	70.6%	70.5%	51.0%	59.3%	57.6%	64.4%	54.8%	70.9%	57.4%	64.9%	42.0%	62.9%	85.0%	62.9%	▼	
		GP2 (See PTS Section For Description)	94.3%	82.4%	90.7%	84.0%	82.0%	86.4%	92.5%	91.7%	94.2%	90.8%	84.9%	86.7%	95.0%	86.7%	▼	
GP3 (See PTS Section For Description)	94.2%	93.5%	94.3%	90.3%	92.5%	95.2%	91.5%	95.0%	95.7%	95.5%	87.8%	92.4%	98.0%	92.4%	▼			

Indicator ID	Key Operational Standard Description	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Jul-19			
														Target / Forecast	Actual	Actual v Target/Fcast	
005	Workforce	Total FTE in Post	4,534	4,577	4,651	4,668	4,646	4,655	4,663	4,669	4,668	4,656	4,681	4,675		<b>4,675</b>	
		BME %	4.7%	4.7%	4.8%	4.8%	4.9%	5.0%	4.9%	4.9%	4.9%	5.0%	5.0%	5.0%	11.1%	<b>5.0%</b>	▼
006	Recruitment	New Starters (FTE)	78.4	82.5	103.7	58.4	15.4	62.5	46.6	38.9	55.6	18.6	67.5	49.6		<b>49.6</b>	
007	Turnover	YAS (Rolling 12 Month Periods)	10.2%	10.0%	9.6%	9.7%	9.8%	10.0%	9.9%	10.1%	10.2%	10.4%	10.7%	10.5%		<b>10.5%</b>	
008	PDR / Staff Appraisals	YAS	81.7%	79.3%	74.0%	80.7%	79.7%	80.1%	78.3%	77.0%	76.1%	70.8%	68.2%	71.7%	90.0%	<b>71.7%</b>	▼
		A&E Operations	92.8%	82.7%	77.8%	83.1%	82.8%	83.6%	82.4%	80.6%	78.2%	71.2%	69.5%	72.2%	90.0%	<b>72.2%</b>	▼
		EOC	88.6%	73.5%	70.1%	77.0%	77.0%	74.2%	71.8%	70.9%	72.5%	69.0%	66.8%	63.8%	90.0%	<b>63.8%</b>	▼
		Integrated Urgent Care	87.9%	67.7%	63.1%	77.6%	72.9%	70.4%	65.0%	63.5%	64.5%	62.1%	55.4%	75.6%	90.0%	<b>75.6%</b>	▼
		PTS	96.6%	88.9%	82.7%	86.9%	85.6%	86.8%	87.3%	86.3%	84.8%	80.6%	73.7%	78.3%	90.0%	<b>78.3%</b>	▼
009	Training: Stat & Mand (Substantive Employees)	YAS	92.8%	92.4%	91.8%	91.9%	93.4%	95.7%	96.3%	97.3%	97.9%	97.9%	98.3%	98.2%	90.0%	<b>98.2%</b>	▲
		A&E Operations	84.6%	93.1%	92.6%	93.2%	95.0%	96.9%	97.4%	97.9%	97.0%	98.2%	98.7%	98.6%	90.0%	<b>98.6%</b>	▲
		EOC	74.6%	89.7%	89.9%	91.4%	91.7%	94.5%	94.8%	97.0%	95.6%	96.8%	97.5%	97.2%	90.0%	<b>97.2%</b>	▲
		Integrated Urgent Care	71.9%	82.6%	81.7%	87.5%	89.4%	92.2%	92.8%	96.0%	97.4%	98.6%	98.6%	98.6%	90.0%	<b>98.6%</b>	▲
		PTS	91.6%	96.4%	95.6%	95.1%	96.1%	98.5%	98.3%	99.1%	98.3%	99.3%	99.7%	99.6%	90.0%	<b>99.6%</b>	▲
010	Health & Wellbeing	Total Sickness Rate	5.3%	5.1%	5.7%	6.2%	6.8%	7.2%	6.7%	6.3%	6.2%	6.1%	6.0%	5.9%	4.3%	<b>5.9%</b>	▲
		Long Term Sickness Rate	3.5%	3.4%	3.6%	4.0%	4.8%	4.6%	4.0%	4.2%	3.9%	3.9%	3.8%	3.6%		3.6%	
		Short Term Sickness Rate	1.8%	1.6%	2.0%	2.2%	2.0%	2.6%	2.6%	2.1%	2.3%	2.3%	2.2%	2.3%		2.3%	



Indicator ID	Key Operational Standard Description	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Jul-19			YTD				
														Plan	Actual	Plan v Actual	Plan	Actual	Plan v Actual		
017	Finance Overview	Risk Rating	1	1	1	1	1	1	1	1	1	1	1	1	1	1	◀▶	1	1	◀▶	
		EBITDA	-1,548	-1,181	-1,521	-1,279	-1,217	-1,879	-1,326	-4,504	-1,230	-2,053	-1,891	-1,861	-1,702	-1,861	-159	-6,324	-7,035	-711	
		Surplus	-559	-170	-436	-343	-247	-711	-279	-3,687	-126	-1,016	-769	-764	-566	-764	-198	-1,879	-2,675	-796	
		Capital	117	649	3,081	2,769	1,561	1,822	1,953	4,931	487	924	312	794	2,069	794	-1,275	7,505	2,517	-4,988	
		Cash	40,728	40,882	37,729	42,208	49,057	46,569	46,658	36,110	38,772	41,370	43,981	49,253	39,151	49,253	10,102	39,151	49,253	10,102	
		CIP	560	718	817	852	1,005	987	988	989	534	538	526	525	525	525	0	2,123	2,123	0	
018	CIP	A&E	315	314	331	334	325	331	331	326	232	61	-191	28	226	28	-198	924	130	-794	
		Business Development	3	-11	0	0	0	0	0	0	-	-	0	0	0	0	0	0	0	0	0
		CEO Directorate	7	-15	2	3	2	2	2	2	4	9	6	-10	7	-10	-17	26	9	-17	
		Clinical	9	8	9	9	9	8	8	9	4	-1	2	4	2	4	2	6	9	3	
		Estates	17	16	24	9	17	16	16	16	31	5	5	9	22	9	-13	104	50	-54	
		Finance	50	4	41	42	42	41	41	41	36	36	37	35	36	35	-1	144	144	0	
		Fleet	66	66	65	66	65	66	66	65	86	87	86	67	88	67	-21	346	326	-20	
		Planned & Urgent Care	30	34	64	72	80	81	81	81	82	51	66	66	81	66	-15	326	265	-61	
		Quality, Governance	5	6	6	5	6	6	6	6	2	1	2	-5	2	-5	-7	7	0	-7	
		Hub & Spoke	6	6	5	6	6	5	5	5	-	-	0	0	0	0	0	0	0	0	
		Workforce OD	50	50	62	78	79	7	78	78	57	56	57	56	56	56	0	226	226	0	
		RESERVE	2	173	208	228	374	353	353	358	0	233	456	275	5	275	270	14	964	950	
		<b>Current Position (Cumulative YTD)</b>		2,722	3,373	4,190	5,042	6,047	7,034	8,023	9,010	534	1,072	1,598	2,123	525	525	0	2,123	2,123	0
		019	Transport/Fleet	A&E	Vehicle age +7	22.0%	21.0%	20.0%	20.0%	17.0%	13.0%	11.0%	8.0%	5.7%	5.4%	6.9%	5.2%		5.2%		
Vehicle age +10	6.0%				6.0%	5.0%	5.0%	4.0%	4.0%	4.0%	4.0%	3.5%	3.3%	3.3%	3.3%		3.3%				
Availability	90.3%				88.4%	90.0%	90.5%	89.6%	90.0%	90.0%	88.7%	90.2%	90.0%	90.2%	90.0%	95%	90.0%	▼			
PTS	Vehicle age +7			32.5%	32.3%	32.0%	32.0%	32.0%	32.0%	32.0%	33.0%	33.0%	31.0%	41.4%	31.0%		31.0%				
	Vehicle age +10			25.8%	25.8%	25.6%	25.2%	25.2%	25.0%	25.0%	24.8%	24.8%	24.1%	24.1%	24.1%		24.1%				
	Availability			92.0%	93.0%	93.0%	93.0%	92.0%	91.0%	91.0%	91.0%	91.0%	91.0%	90.0%	90.0%	91.0%	95%	91.0%	▼		

**Risk Rating** - Under the "Single Oversight Framework" the overall Trust's rating for the year to date remains at 1 (1 being lowest risk, 4 being highest risk).

**EBITA** - The Trust's year to date Earnings before Interest Tax Depreciation and Amortisation (EBITDA) position at the end of July (Month 4) is £7.0m against a plan of £6.3m. A favourable variance of £0.7m.

**Surplus** - The Trust has reported a surplus at the end of July (Month 4) of £2.7m, a favourable variance of £0.8m against the plan.

**Capital** - At the end of July 2019 Capital is underspend £4.9m. ICT underspend EPR £1.3m awaiting approval from HSLI, Fleet delivery behind plan, The overall plan has reduced by £0.3m as agreed with NHS I. This is YAS's contribution to support the National Capital position resulting in a plan of £18.4m expenditure allowing for disposals of £0.4m plus the £0.8m carried over to 19/20 from last year. This will result in a charge of £17.2m against the Capital Resource Limit (CRL). The CRL was approved by NHSEI in June 2019. However it should be noted that the Trust has agreed with the West Yorkshire & Harrogate ICS a revised capital control total of £16.7m.

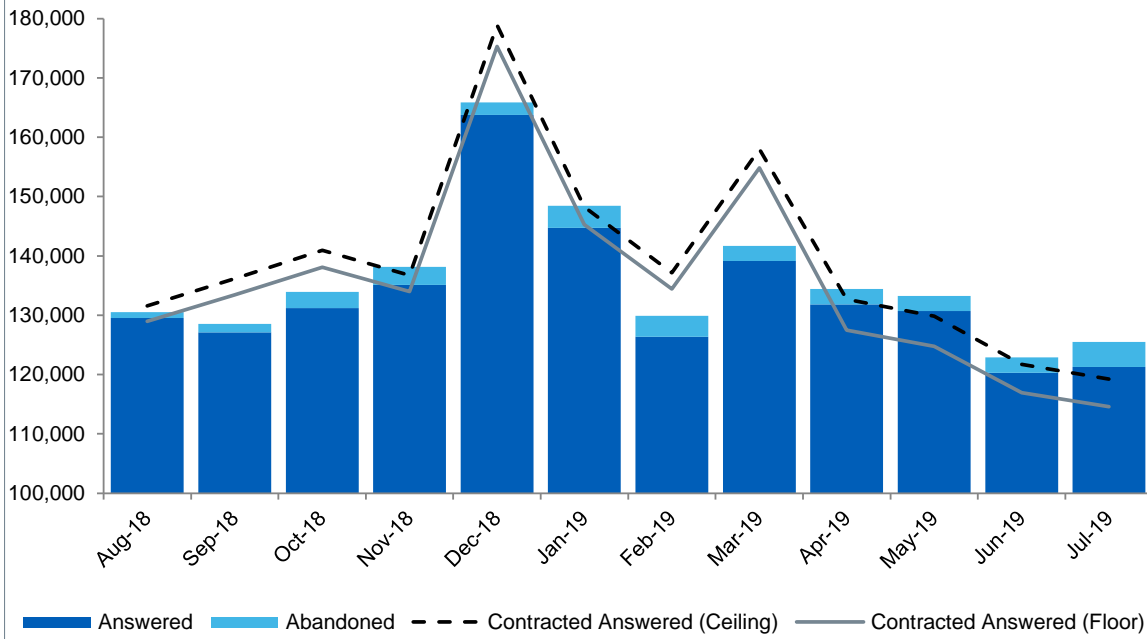
**Cash** - At the end of July 2019 the Trust's cash position was £49.3m against a plan of £39.2m, giving a positive variance of £10.1m. The increased variance largely results from continued underspends on capital and reduced debtors due to receipt of £4.18m PSF funding, received in July and relating to 2018/19.

**CIP** - The Trust has a savings target of £6.6m for 2019/20. The Trust has achieved £2.1m at month 4 which is line with plan (44% of this being non-recurrent).

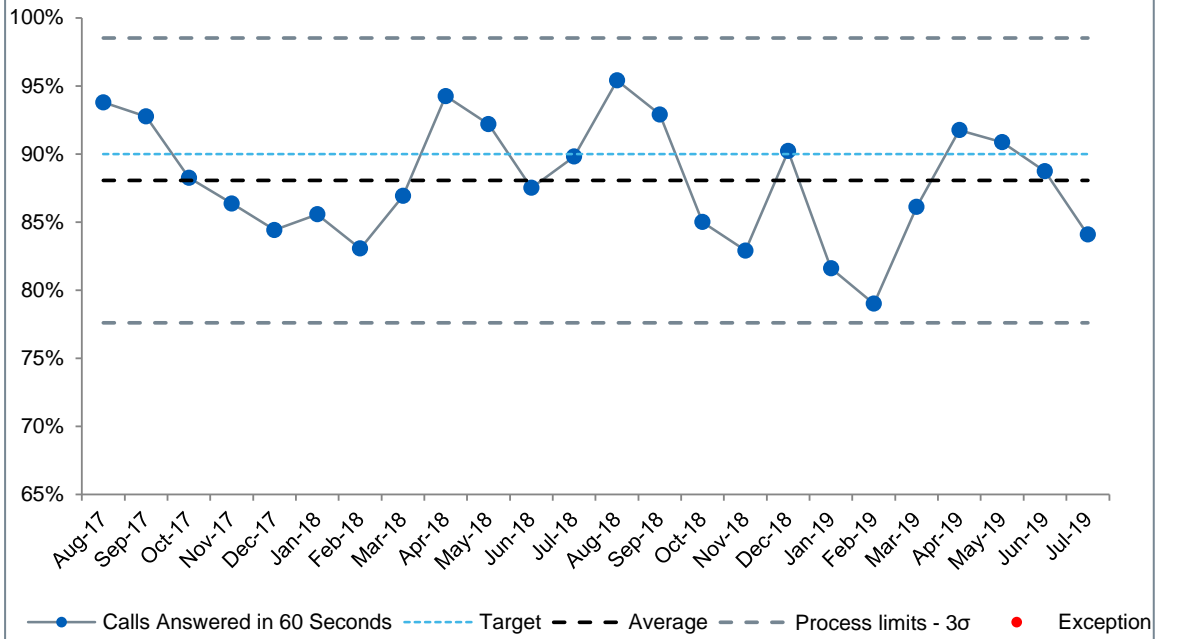


# SERVICE LINES

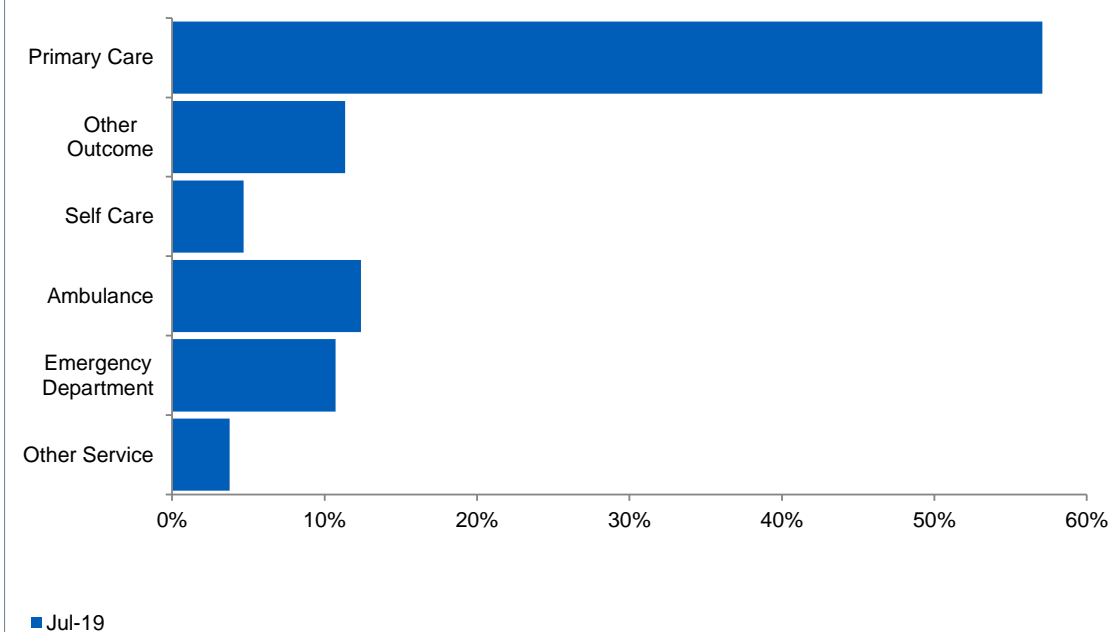
IUC Chart 1: Demand - Calls



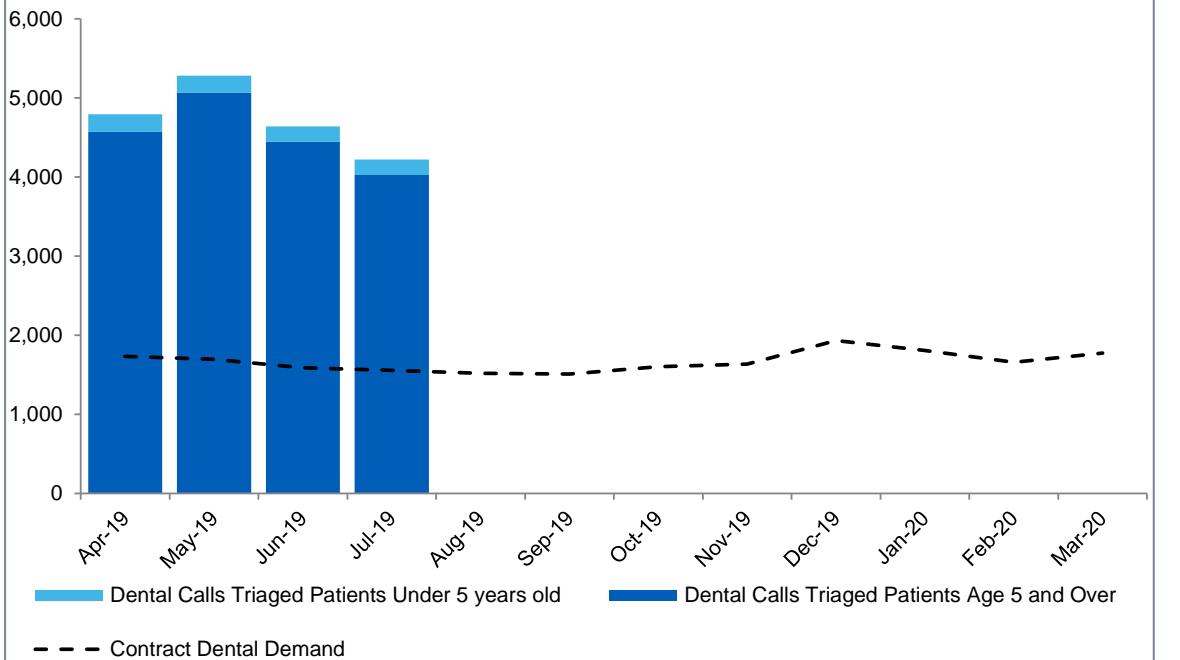
IUC Chart 2: Performance - Calls Answered in 60 Seconds



IUC Chart 3: Outcomes



IUC Chart 4: Demand - Dental





### IUC Tbl1: IUC KPI's

IUC KPI's (Target)	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Core Clinical Advice (30%)	30.7%	31.4%	31.5%	33.4%								
Clinician Called Back within 1 Hour (60%)	64.1%	59.2%	59.4%	59.6%								
Direct Bookings * (30%)	46.2%	46.8%	47.1%	44.7%								
Bookings into UTC * (50%)	52.0%	53.7%	54.4%	53.9%								
Bookings into IUC Treatment Centres * (95%)	59.1%	60.2%	60.8%	60.3%								
ED Validations (50%)	61.8%	60.9%	57.4%	63.0%								
Ambulance Validations (95%)	97.8%	97.9%	98.0%	98.6%								

\* U&EC whole system measures - national KPI for IUC treatment centres is a new measure and currently under monitoring with NHS England to be reviewed

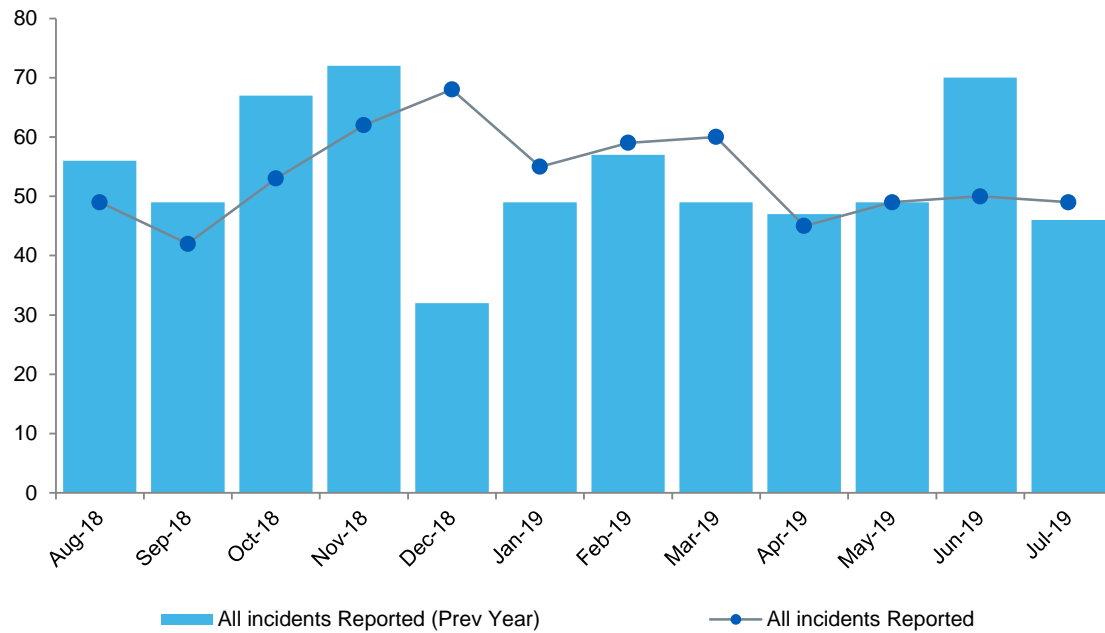
#### Performance Commentary:

Demand for IUC service continued to be high during July, with demand 5.8% above contract floor levels and 1.7% above ceiling. The reasons for the growth in demand appeared to be twofold: the continued excess dental callers and an underlying increase in IUC demand associated with the hot weather experience in the early part of July.

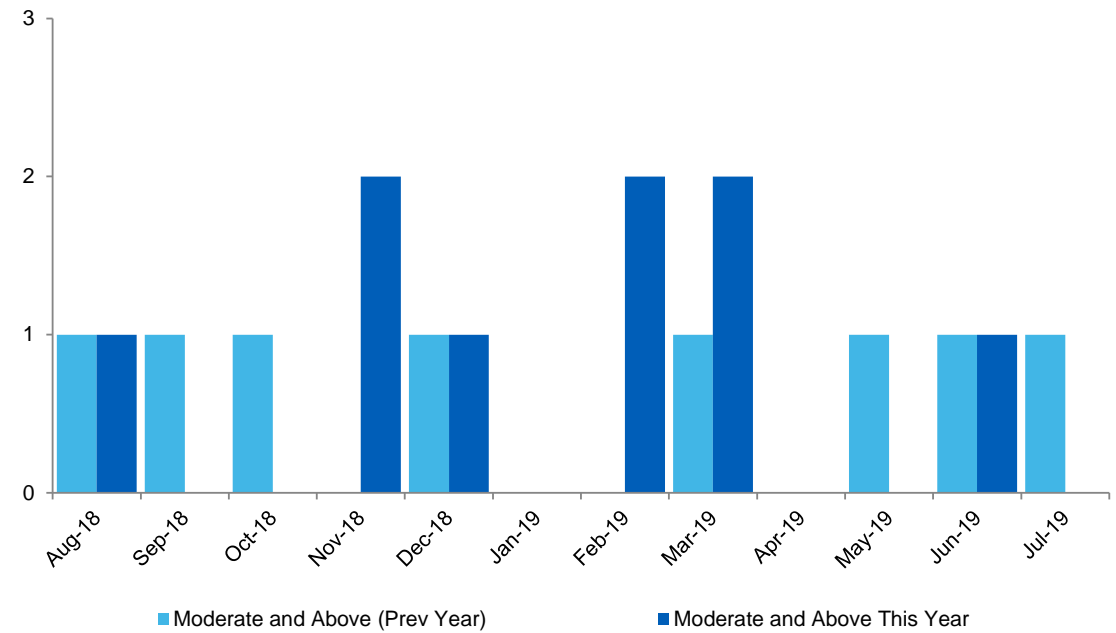
On Saturday 27 July there was a national IT failure within the datacentre that hosts the Aadastra software which affected several IUC and Out of Hours providers. The outage lasted for 5 hours and manual business continuity arrangements were put in place. Whilst the period of outage was contained to 5 hours the recovery process was seen across the weekend and into the early part of the following week. This directly impacted on service access and clinical call back performance times during this weekend and the final month to date figures. This issue is being managed as a serious incident.

Winter recruitment is fully in place within IUC, adjusted for additional staffing for the excess dental demand. Further work is being modelled from the information from NHS England on the marketing campaign to share with commissioners on the likely impact for this winter. This may result in additional actions required for winter demand and capacity management.

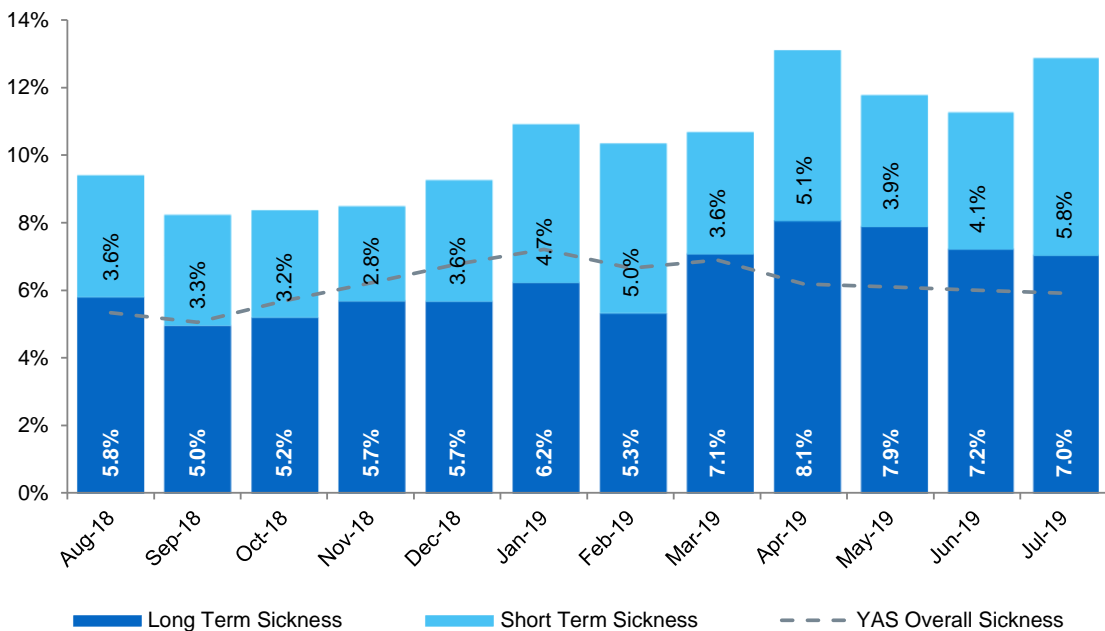
IUC Chart 5: Quality - Reported Incidents



IUC Chart 6: Quality - Reported Incidents - Moderate & Above



IUC Chart 7: Workforce - Sickness



### Quality Commentary:

During July there were two serious incidents reported, the national adastra IT failure on 27 July and a dental incident associated with delay in care as a result of no appointment availability. These are both part of a multi agency review and investigation to understand the learning.

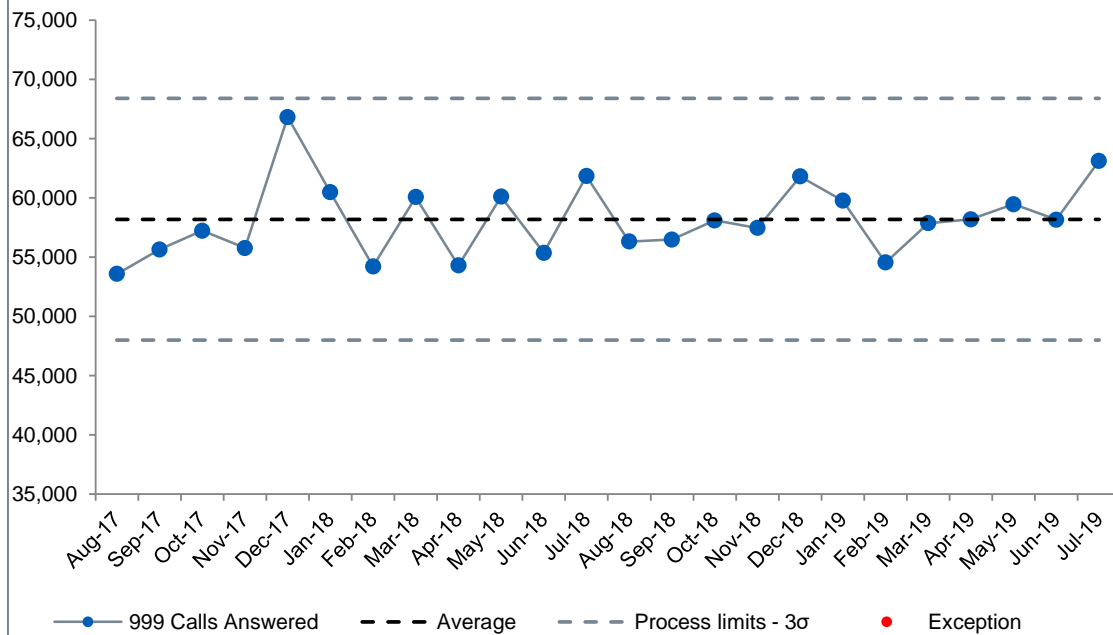
### Workforce Commentary:

For the month of July a full review of the absence has been completed within the IUC service and the team are actively working with the Trust on the improvement plan , focused at reducing absence by 1% for the Trust.

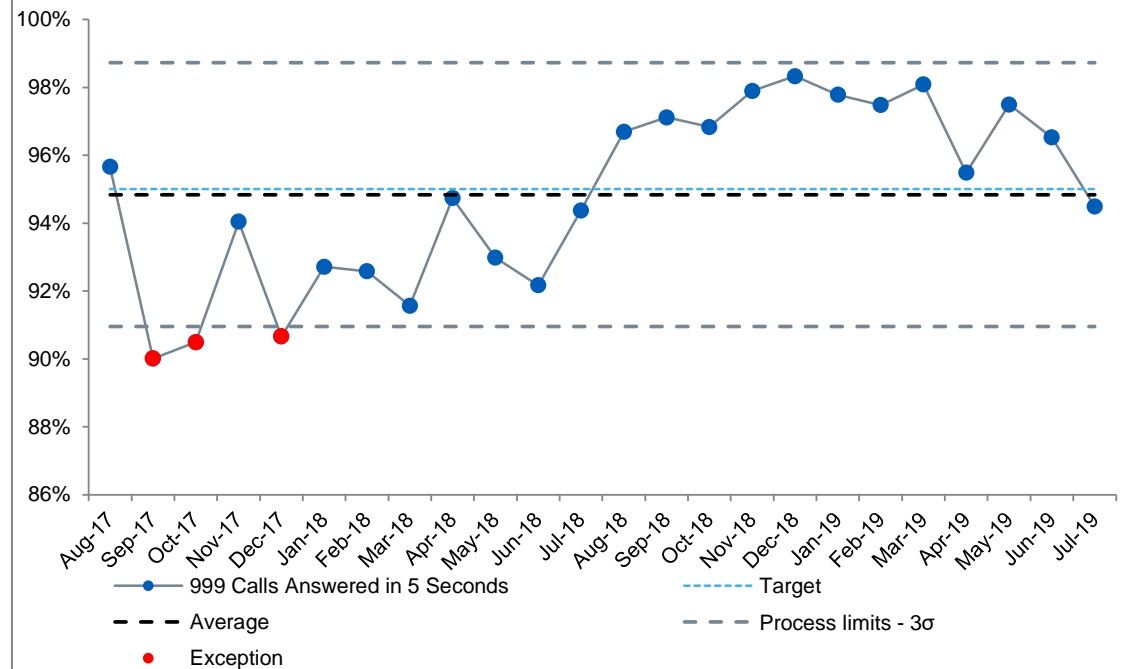
A review of PDR information for IUC was undertaken in July as a result of the low recorded figures in June (55%) and as a result of this review the reporting has improved to 75.6%. Learning from the review included training on the ESR recording, some data quality issues and ESR hierarchy . Actions have been put in place to reduce these issues in future.



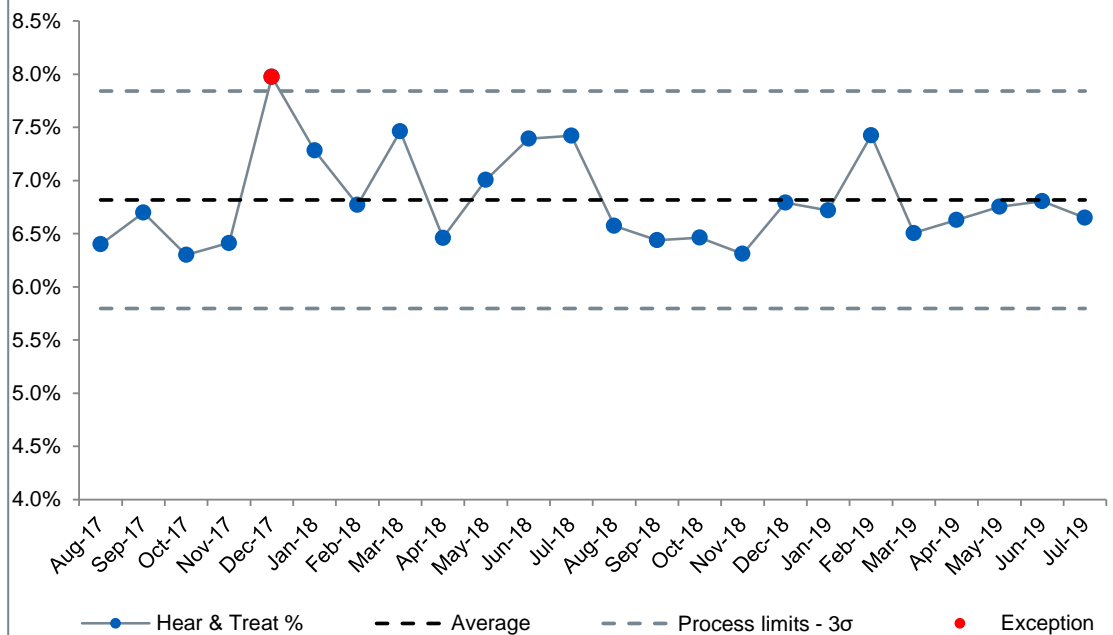
EOC Chart 1: Demand - 999 Calls Answered



EOC Chart 2: Performance - 999 Calls Answered in 5 Seconds



EOC Chart 3: Performance - % Hear & Treat



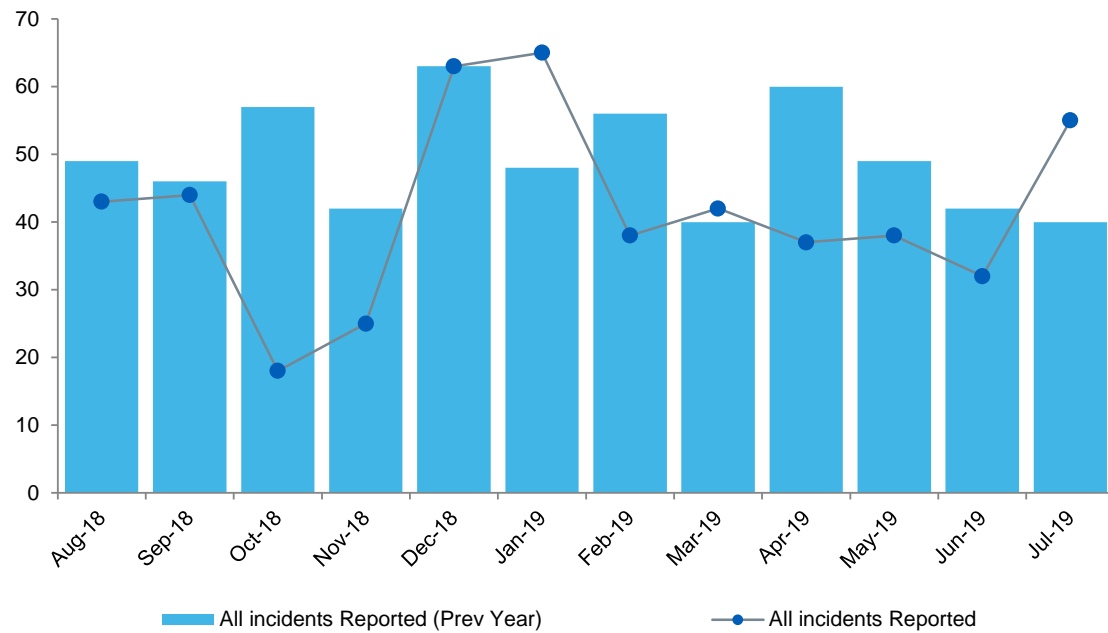
### Performance Commentary:

July saw the highest call volumes received since December 2017. Demand was consistently above forecast throughout the month on occasion as high as 25.9% above and the EOC dealt with this admirably through the hot weather period and given the challenges of the Wakefield refurbishment.

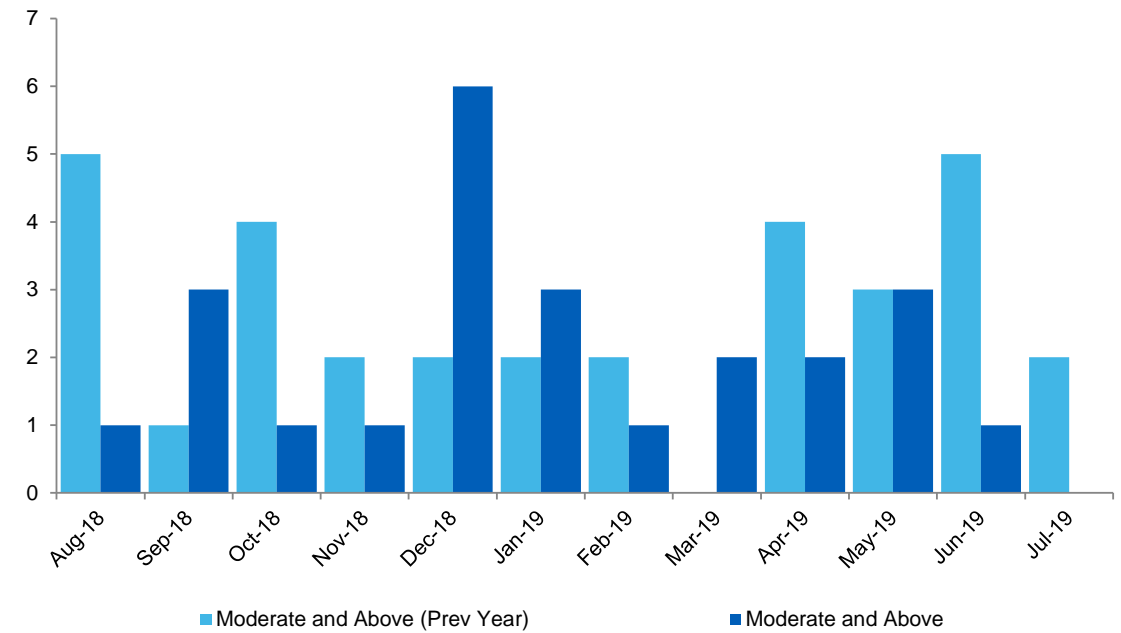
This increased demand had a significant impact upon the 5 second in 95% answer performance. The AQI stds now measure mean call answer performance and 95th percentile. This was maintained at 1 second for both stds but in the final week of significant pressure it rose to 5 seconds 95th%.

Hear and Treat performance continues to be stable and discussions are ongoing around how the CAT3 volumes can be reviewed more effectively as part of the Hear and Treat process.

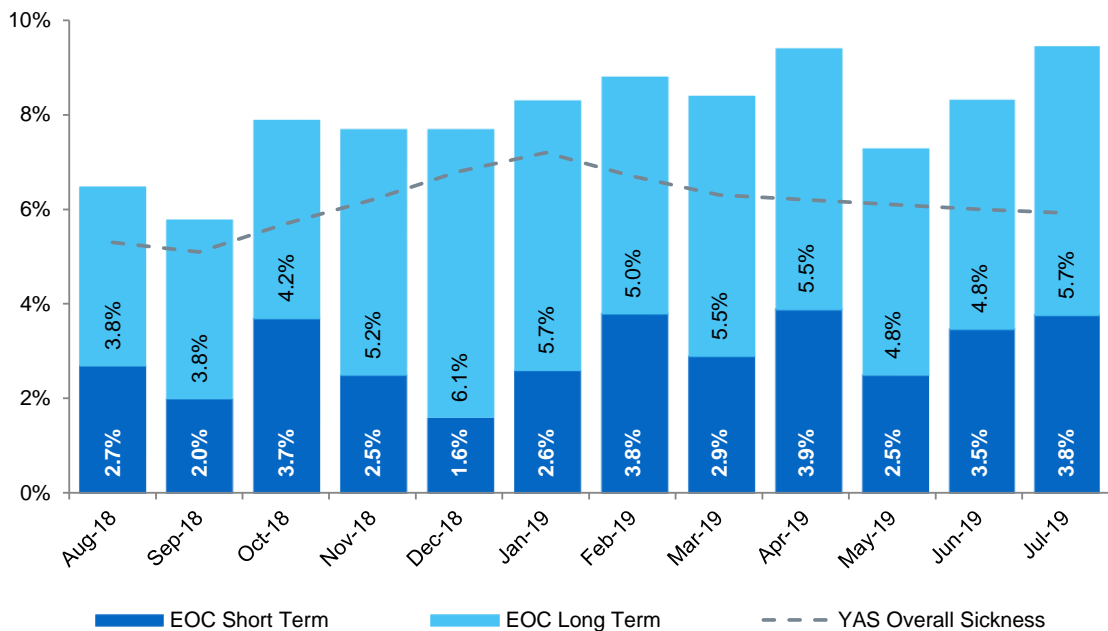
EOC Chart 4: Quality - Reported Incidents



EOC Chart 5: Quality - Reported Incidents - Moderate & Above



EOC Chart 6: Workforce - Sickness



### Quality Commentary:

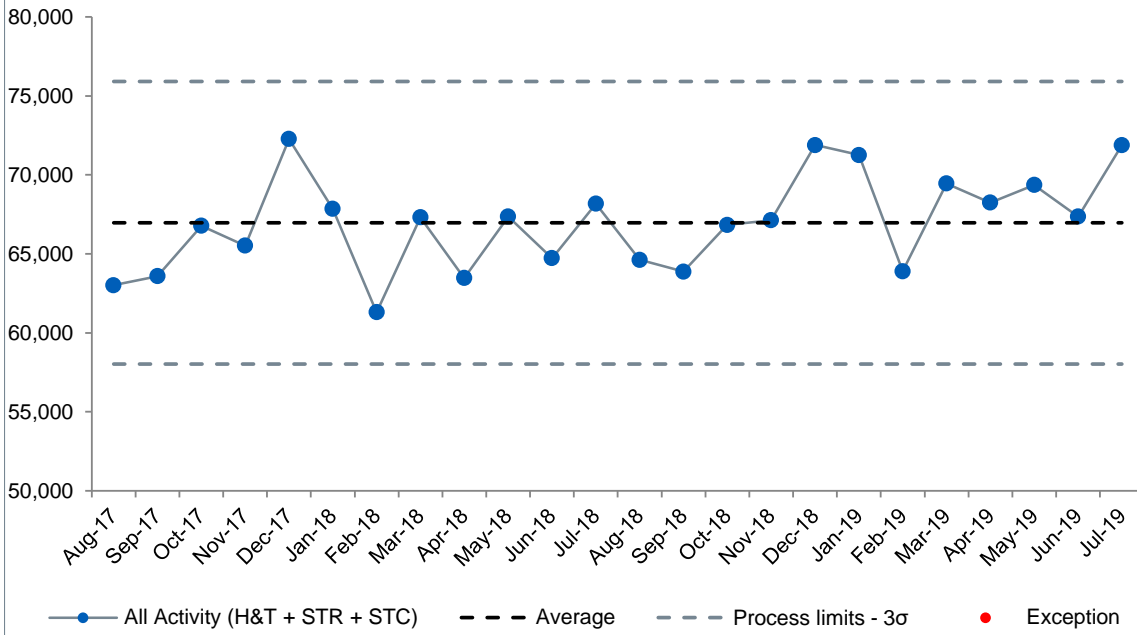
In line with the significant increase in call demand in July, and the call answer pressure that resulted, reported incidents saw an increase in July over previous months. However those rated moderate and above reduced over the previous year. EOC tends to see incidents around delays in response. In line with the overall improvement in timed responses this is a likely correlation.

### Workforce Commentary:

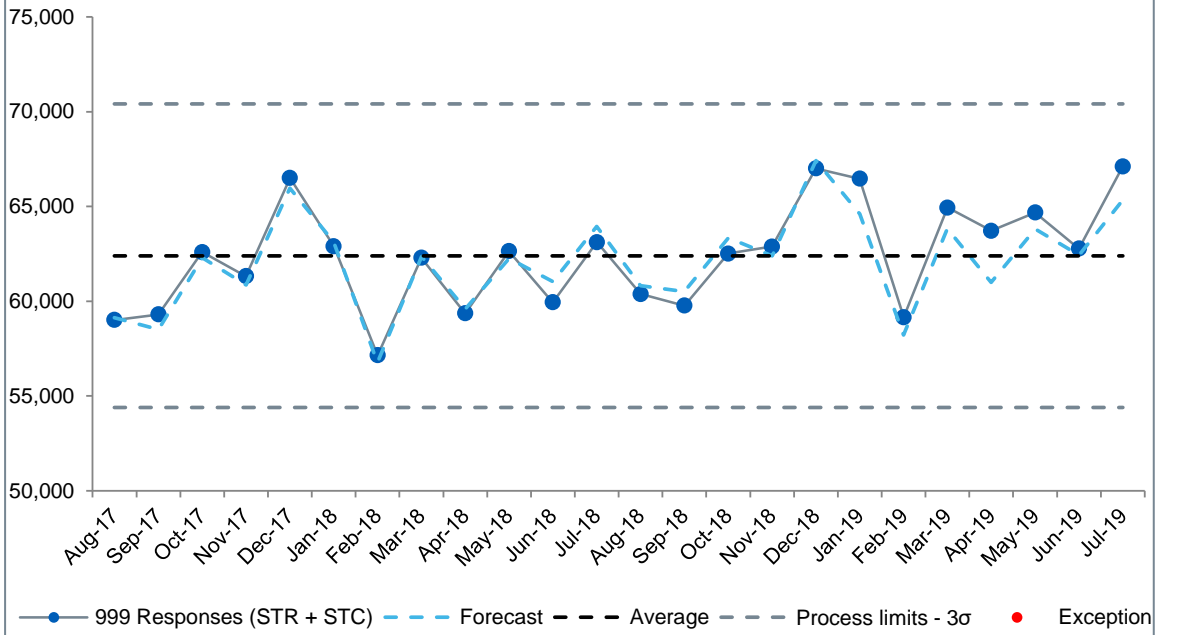
Sickness absence rose again in July with higher incidents of short term absence. The management teams are dealing with these absences in line with process.

Themes of musculo skeletal problems and Stress, anxiety and depression feature as the issues needing to be resolved. It is hoped the refurbished rooms will support improvements in staff experience and comfort at work.

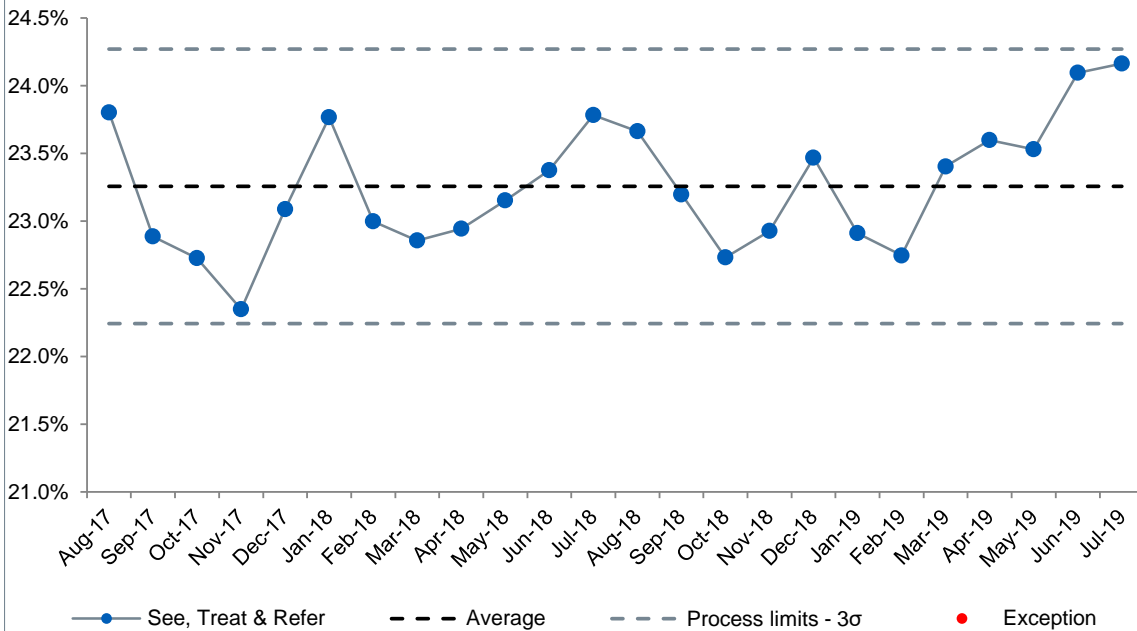
**A&E Chart 1: Demand - All Activity (H&T + STR + STC)**



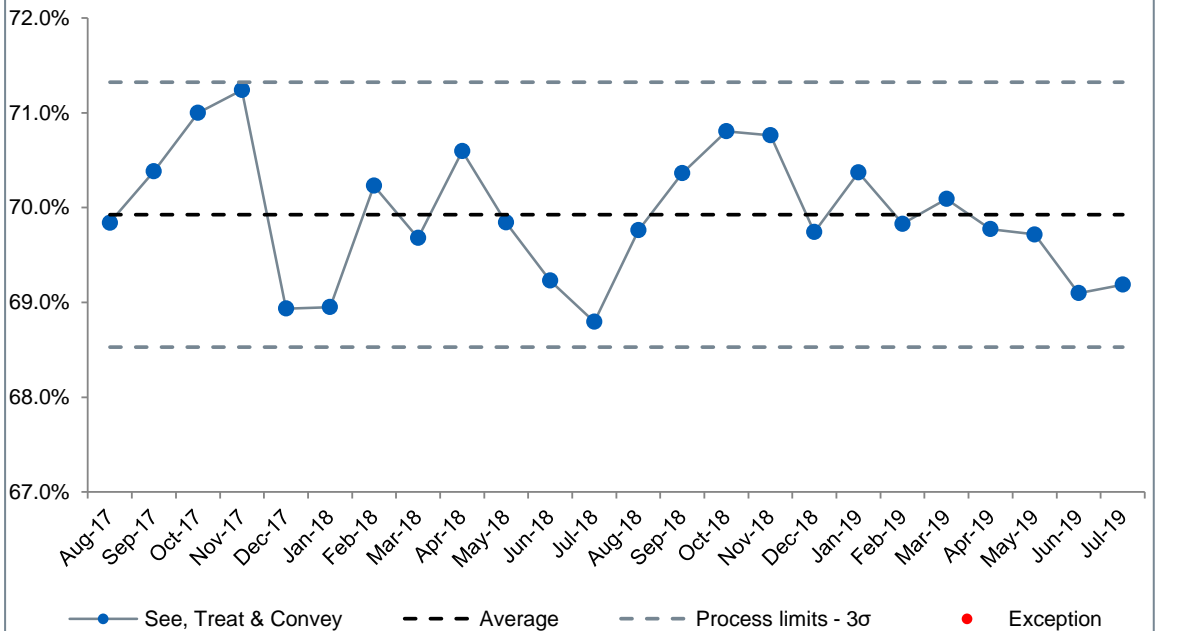
**A&E Chart 2: Demand - 999 Responses (STR + STC)**



**A&E Chart 3: Demand - See, Treat & Refer %**

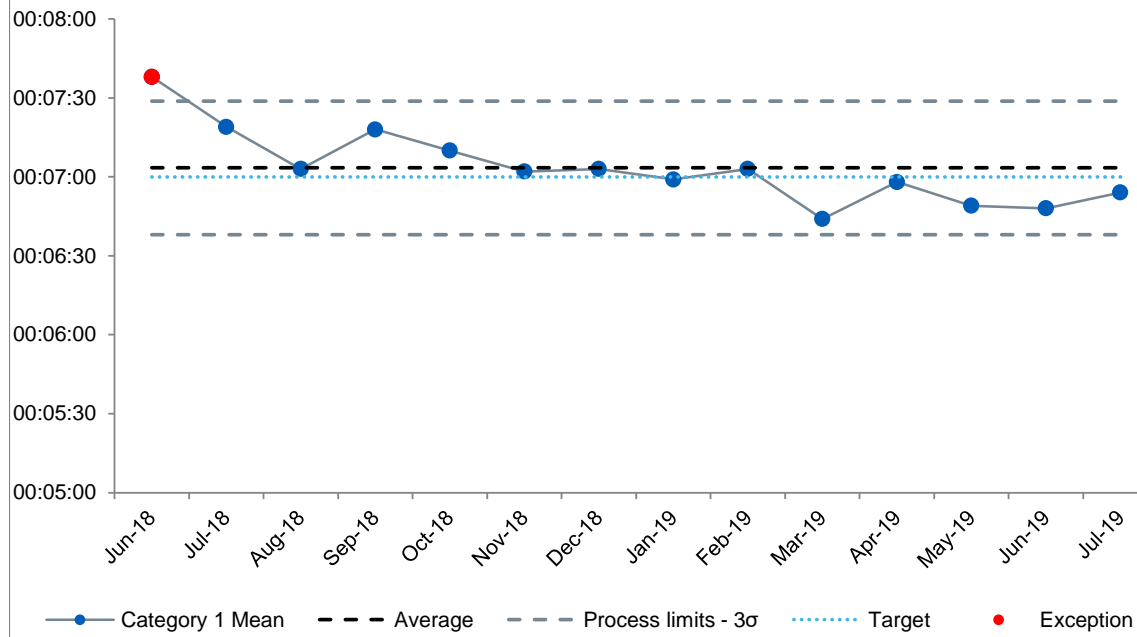


**A&E Chart 4: Demand - See, Treat & Convey %**



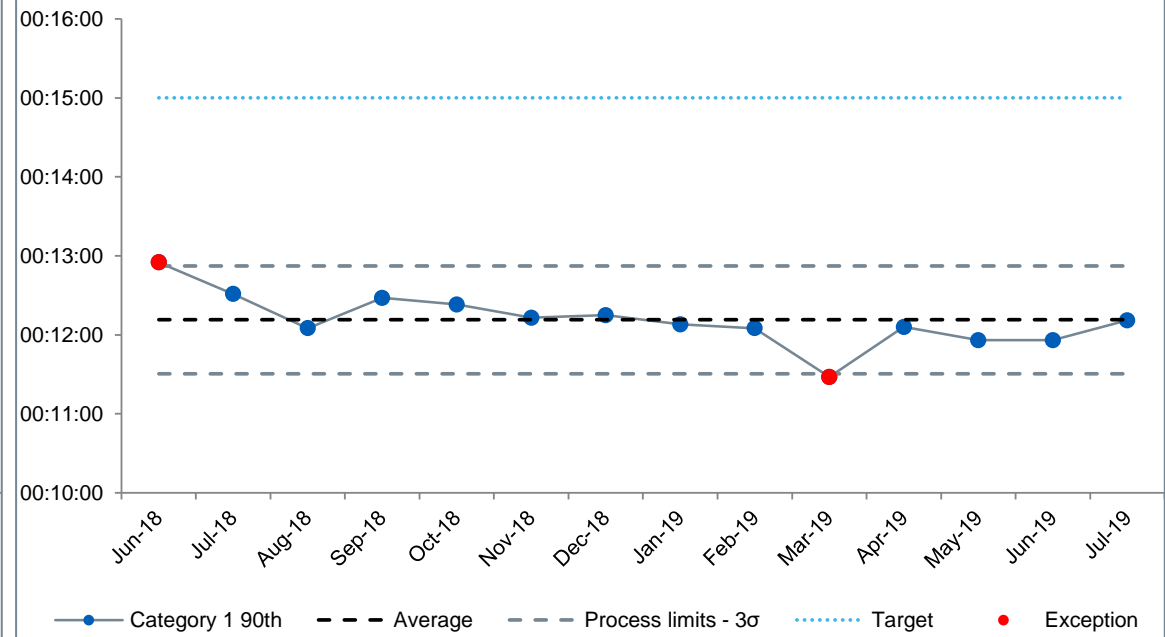
A&E Chart 5: Performance - Category 1 Mean

Year to Date **00:06:52**



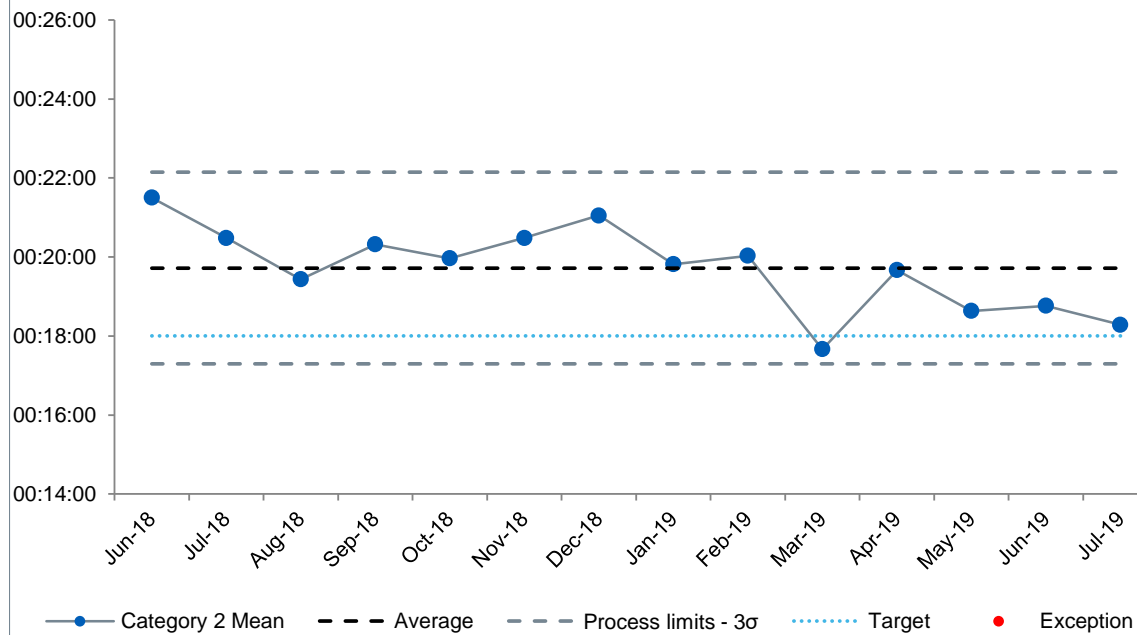
A&E Chart 6: Performance - Category 1 90th Percentile

Year to Date **00:12:02**



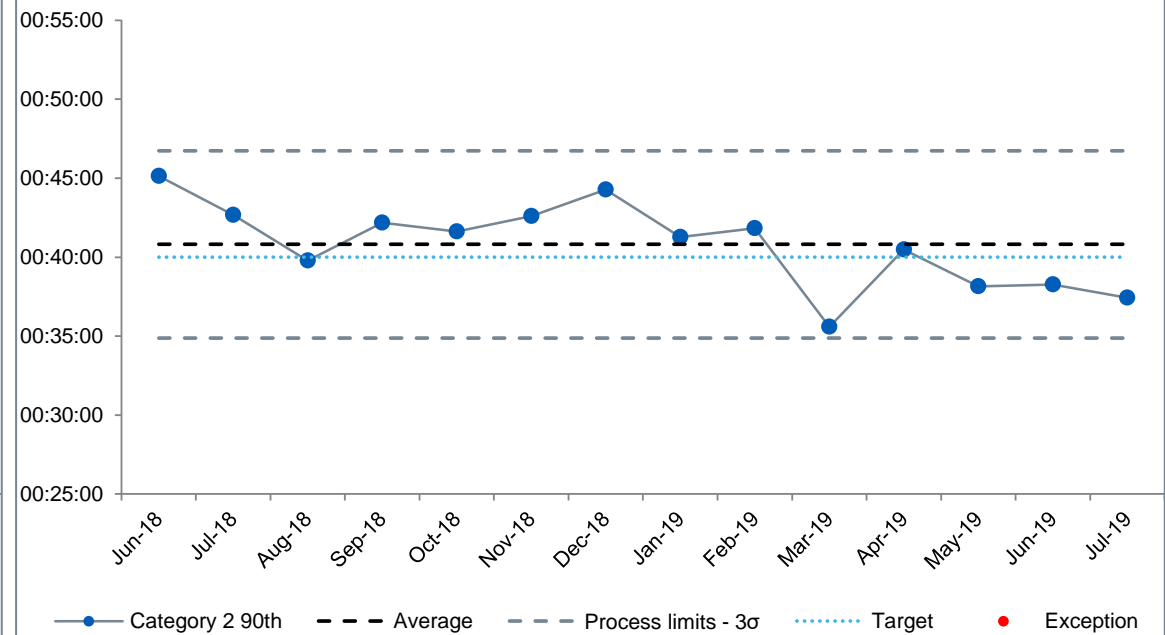
A&E Chart 7: Performance - Category 2 Mean

Year to Date **00:18:50**



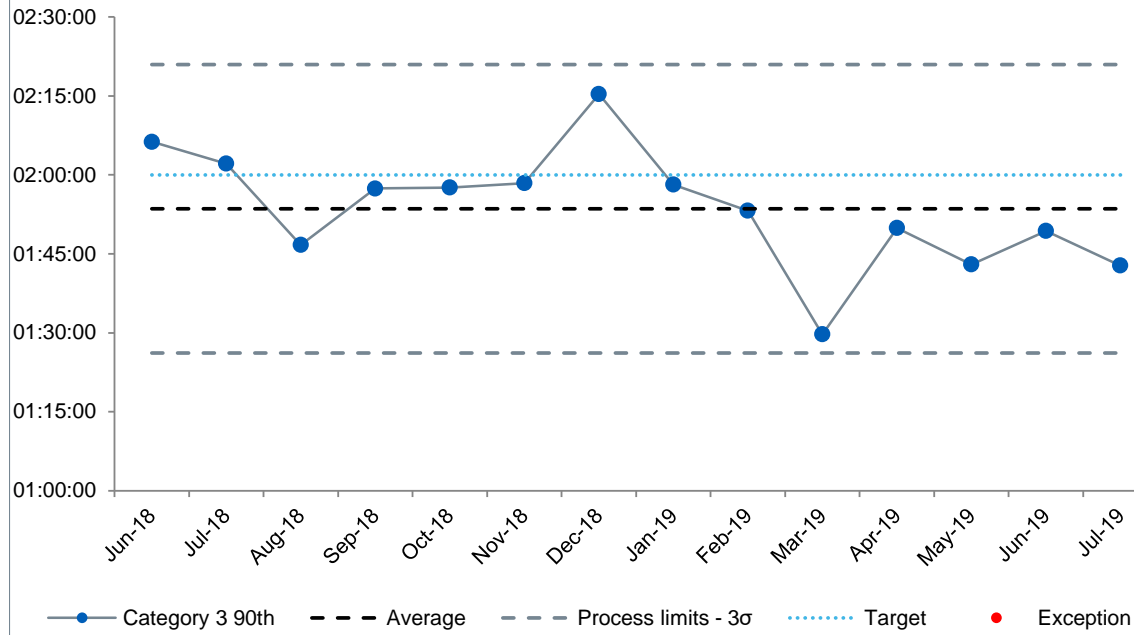
A&E Chart 8: Performance - Category 2 90th Percentile

Year to Date **00:38:36**



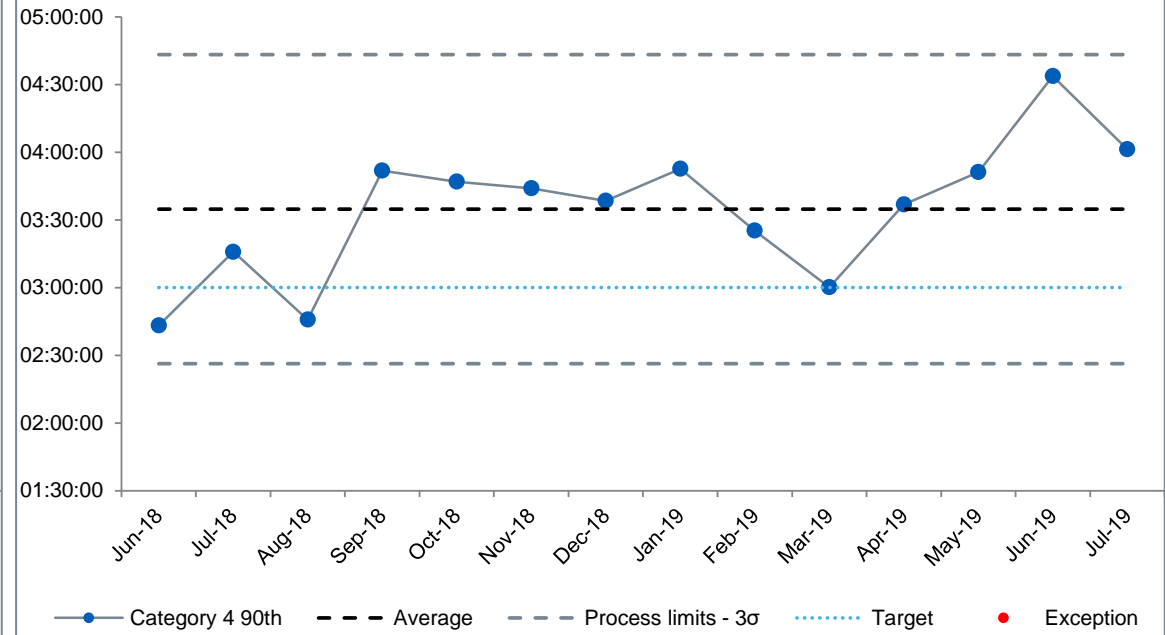
A&E Chart 9: Performance - Category 3 90th Percentile

Year to Date **01:46:08**

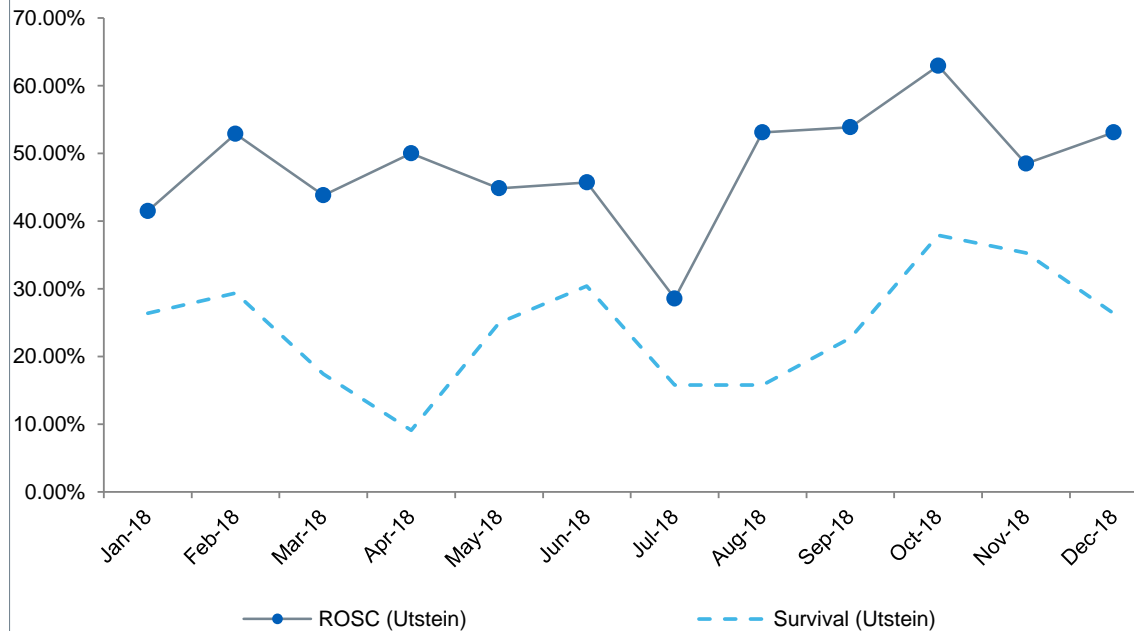


A&E Chart 10: Performance - Category 4 90th Percentile

Year to Date **03:52:00**



A&E Chart 11: Performance - ROSC (Utstein) & Survival (Utstein)



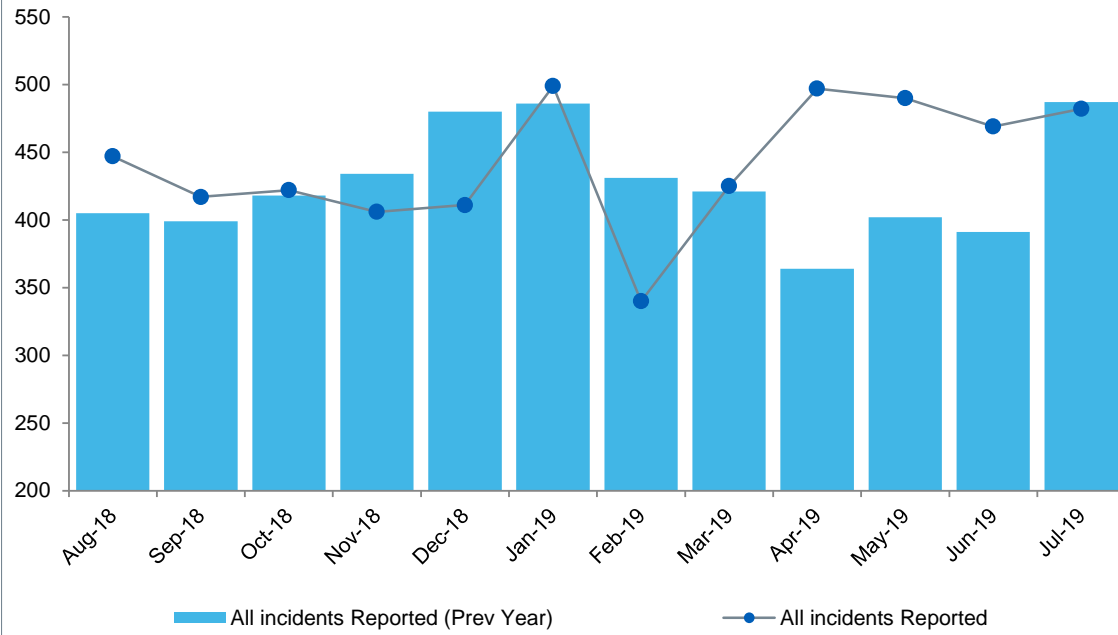
## Performance Commentary:

Despite the significant increase in calls received incident responses saw an increase above forecast by 2.3%. However certain days through the hot weather, at the end of the month, saw particularly demanding days of over 10% above forecasted incidents.

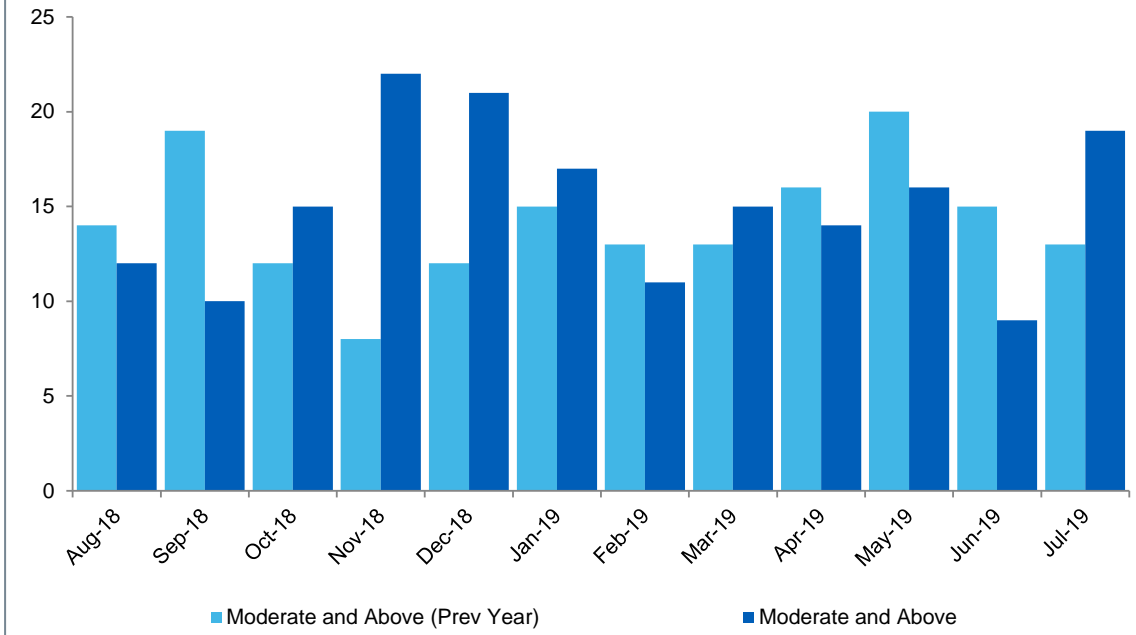
Despite this demand increase, performance achieved was still in line with the agreed trajectories. CAT 2 mean and Cat4 90th% still feature as the pressure performance areas. Improvement in South Yorkshire continues in line with recruitment trajectories and initiatives to support the IFT/HCP workload.

Interestingly July saw an increase in see, treat and refer patients with a subsequent reduction in those conveyed to hospital. However the hospital turnaround performance continued to have an impact on available operational hours.

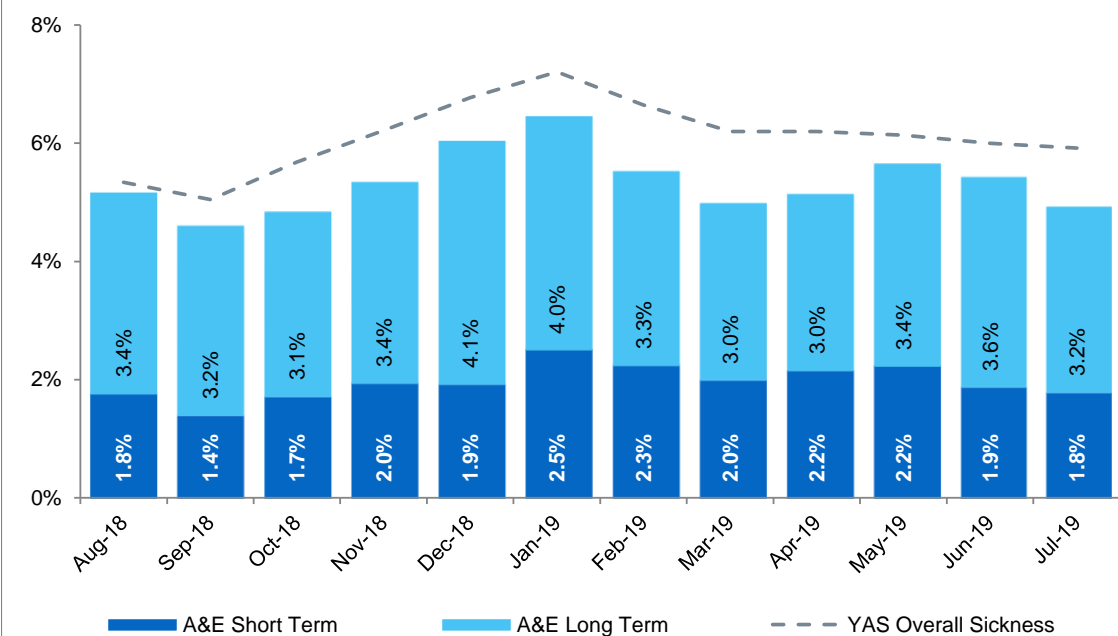
**A&E Cht12: Quality - Reported Incidents**



**A&E Cht13: Quality - Reported Incidents - Moderate & Above**



**A&E Cht14: Workforce - Sickness**



**Quality Commentary:**

Reported incidents were static for the month of July however there was an upturn in the moderate and above in line with the increased level of activity. Several instances of poor patient experience have been noted and this resulted in focus on moving and handling errors and areas for improvement.

**Workforce Commentary:**

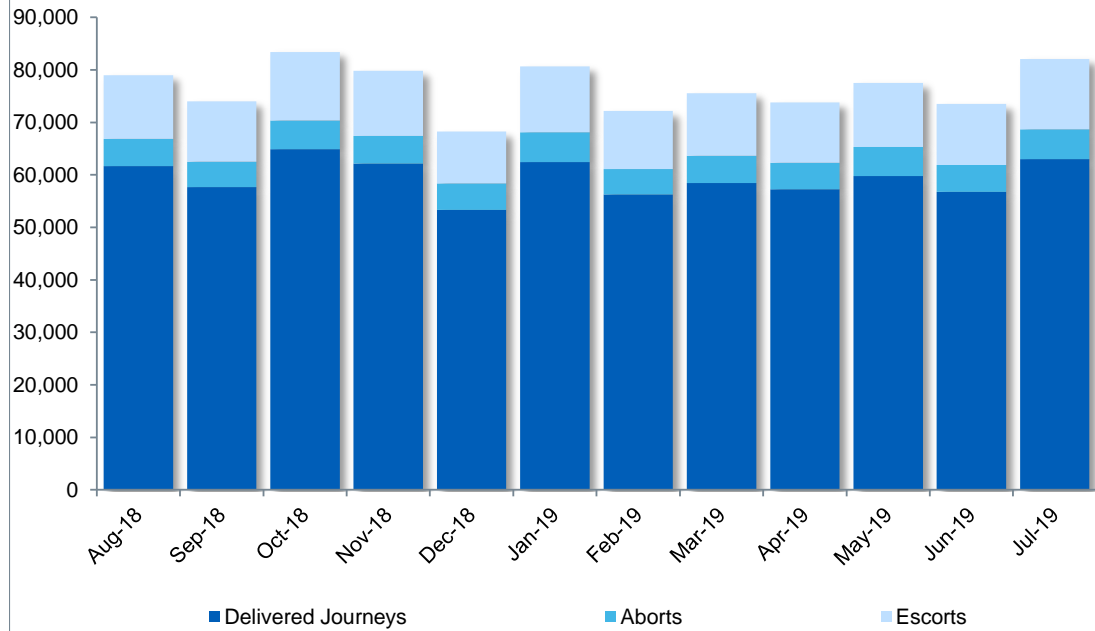
Sickness absence management has been a key focus in Operational areas and the continued improvement remains positive. 5% for the Operational A+E area is a positive position and still performs under the trust average.

PDR compliance has seen some challenges through the summer months and Operational teams have been tasked with improvements to address the backlog.

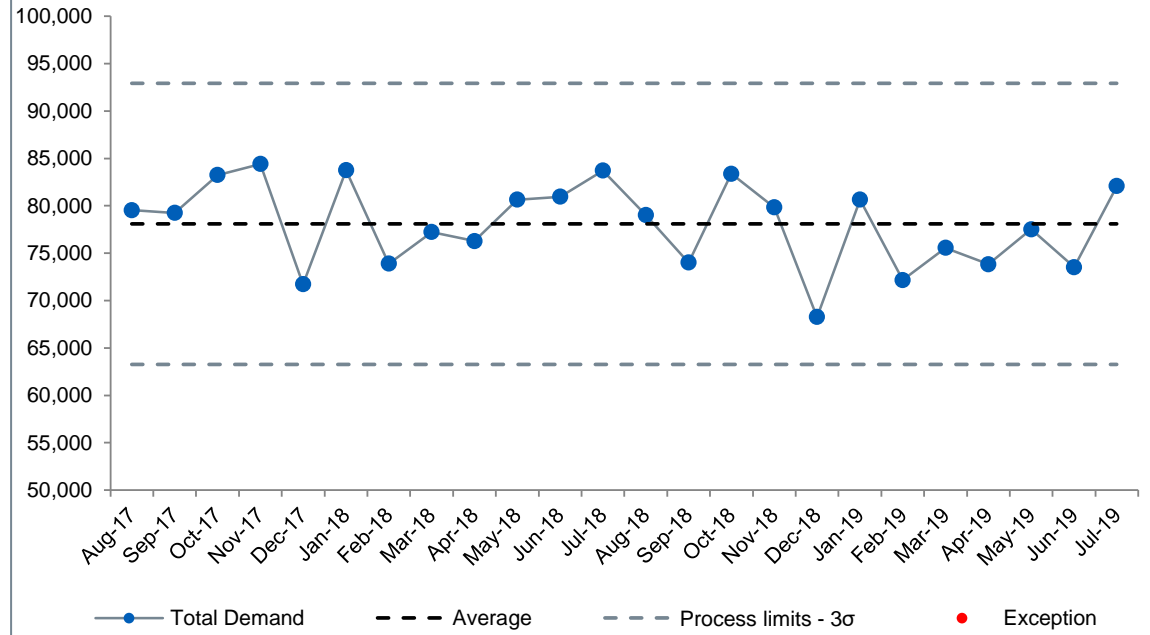
# Patient Transport Service

July 2019

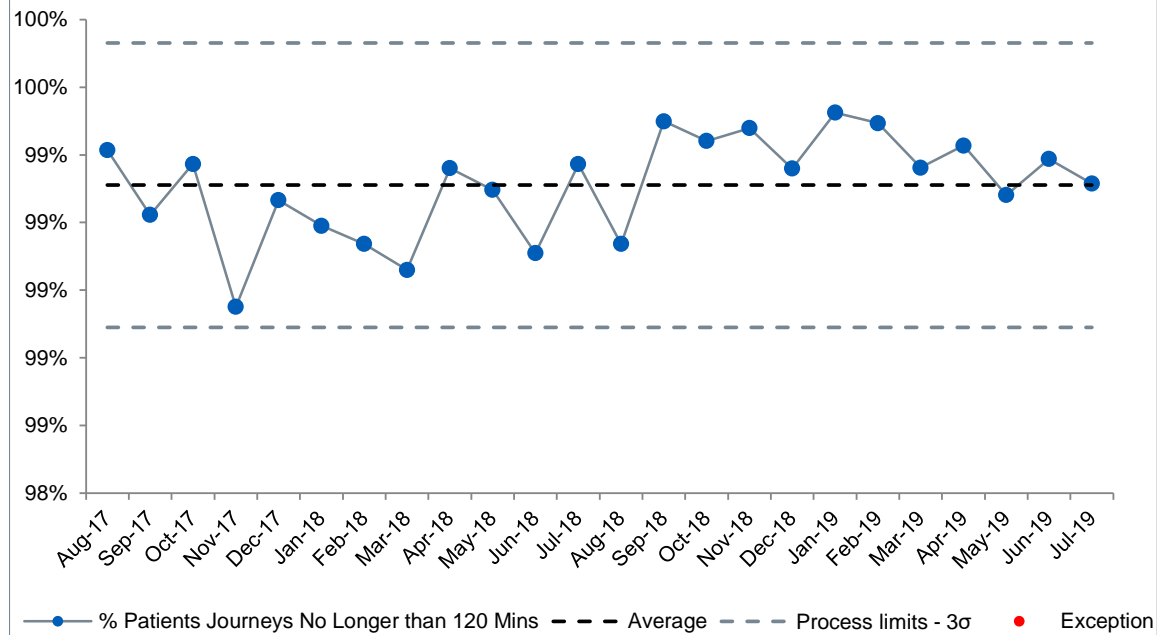
PTS Chart 1: Demand - Journeys



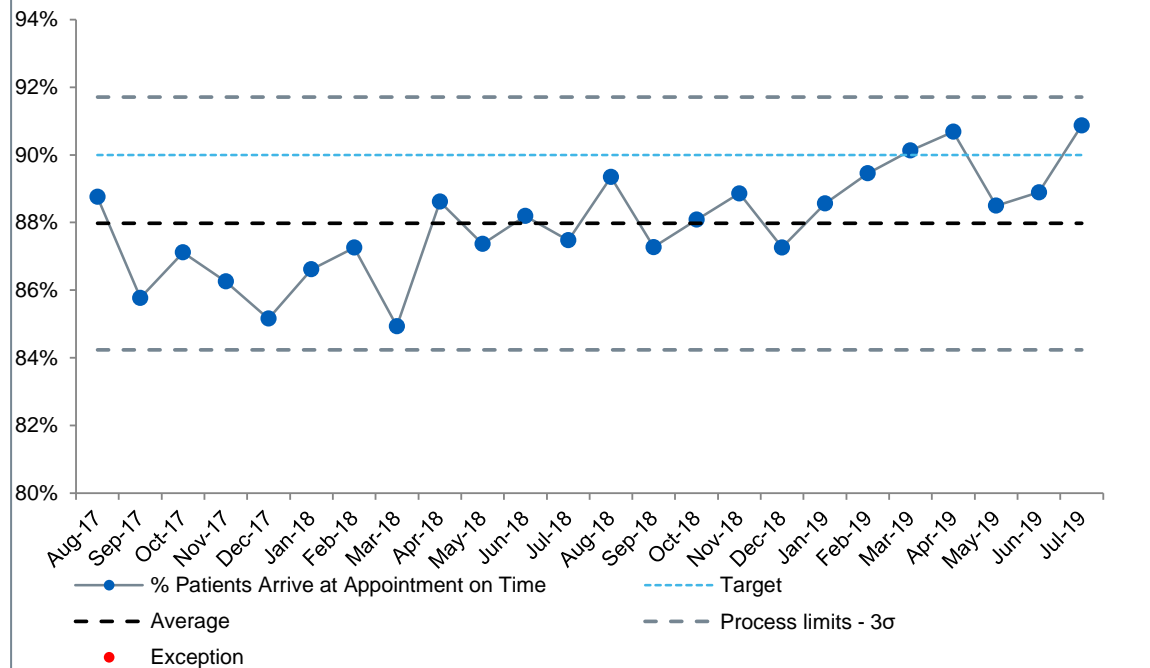
PTS Chart 2: Demand - Total Demand



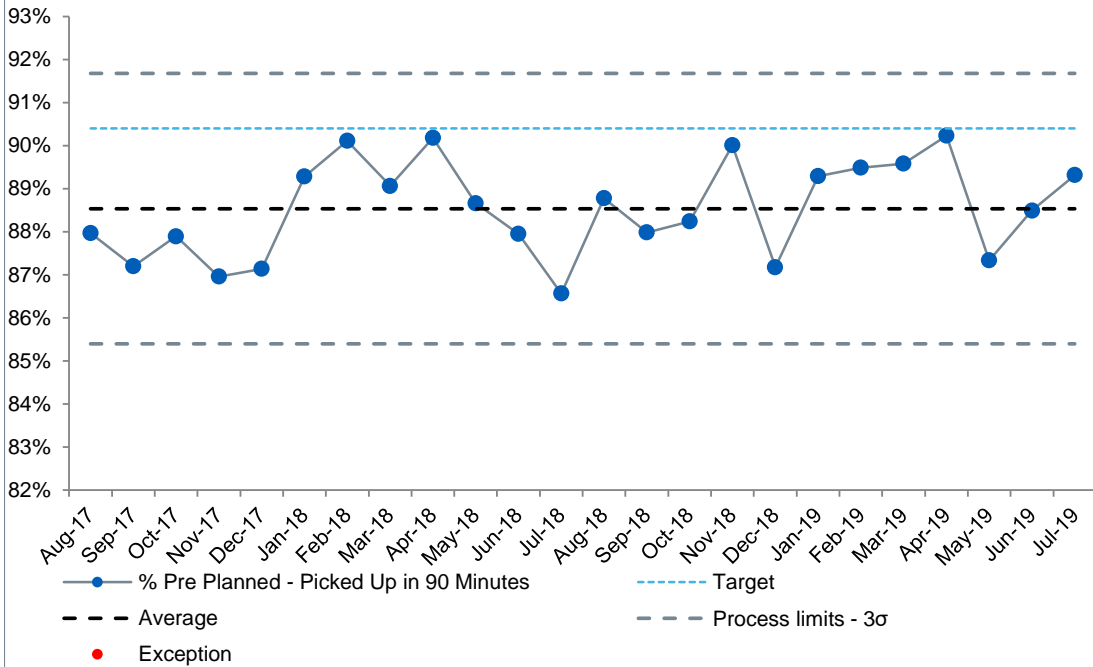
PTS Chart 3: % Patients Journeys to be no longer than 120 Minutes



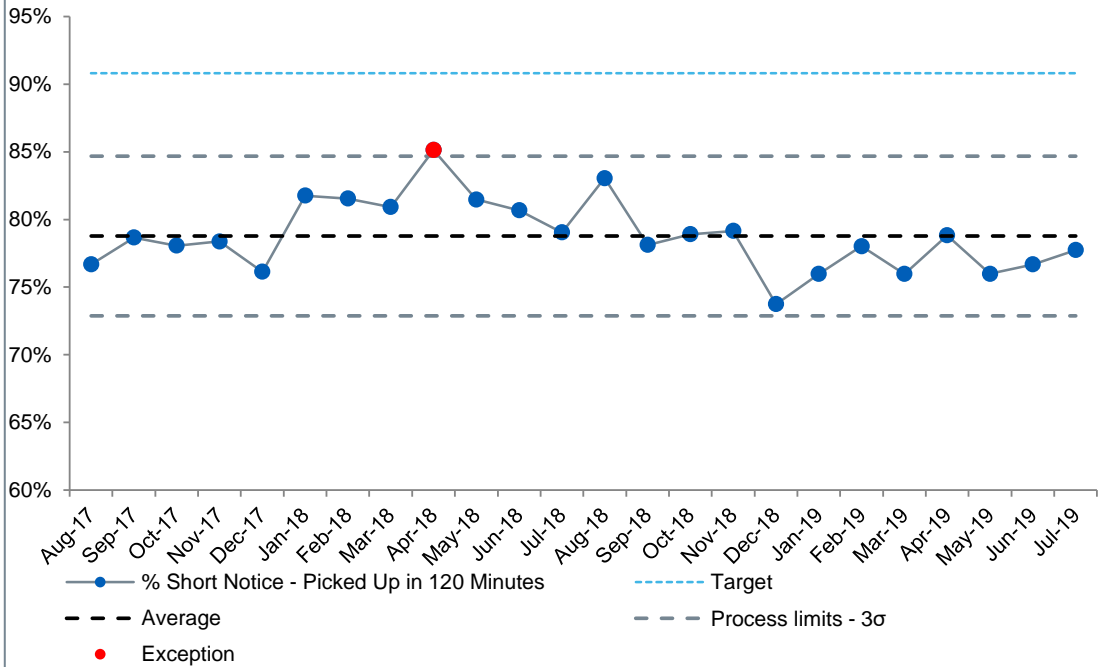
PTS Chart 4: % Patients Arrive at Appointment on Time



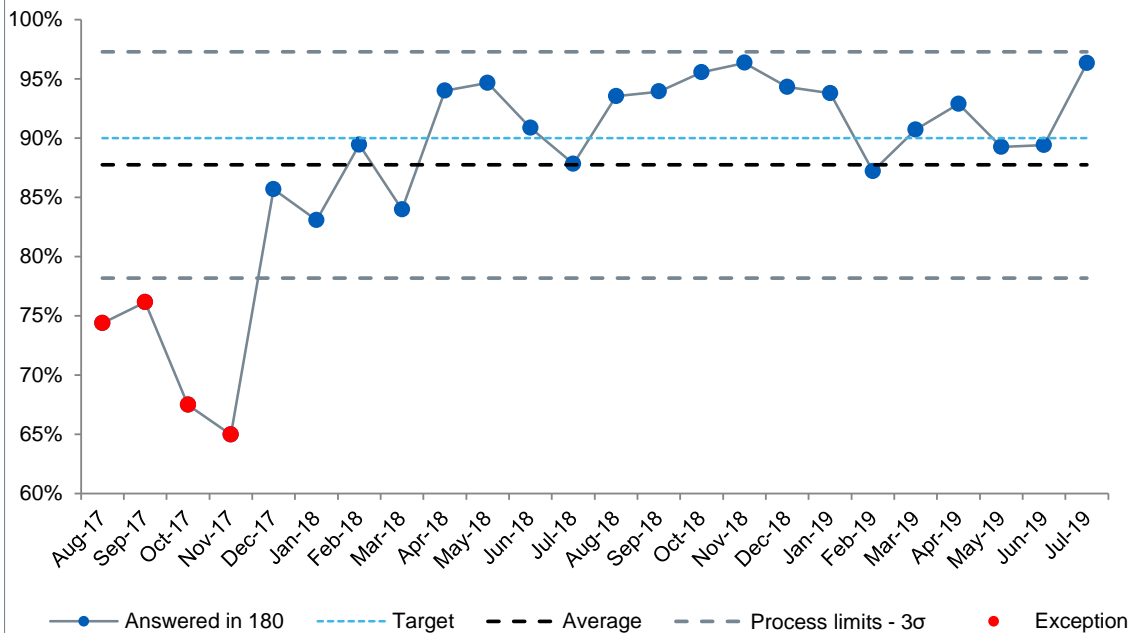
**PTS Chart 5: Performance - % Pre Planned - Picked Up in 90 Minutes**



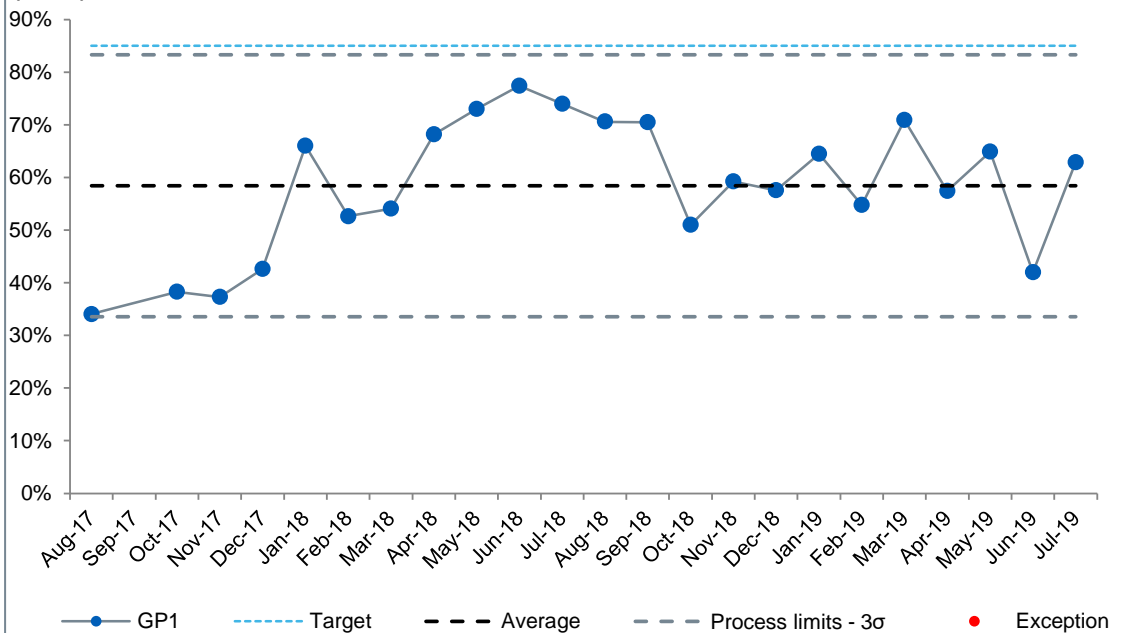
**PTS Chart 6: Performance - % Short Notice - Picked Up in 120 Mins**



**PTS Chart 7: Telephony - Calls Answered within 180 Seconds**

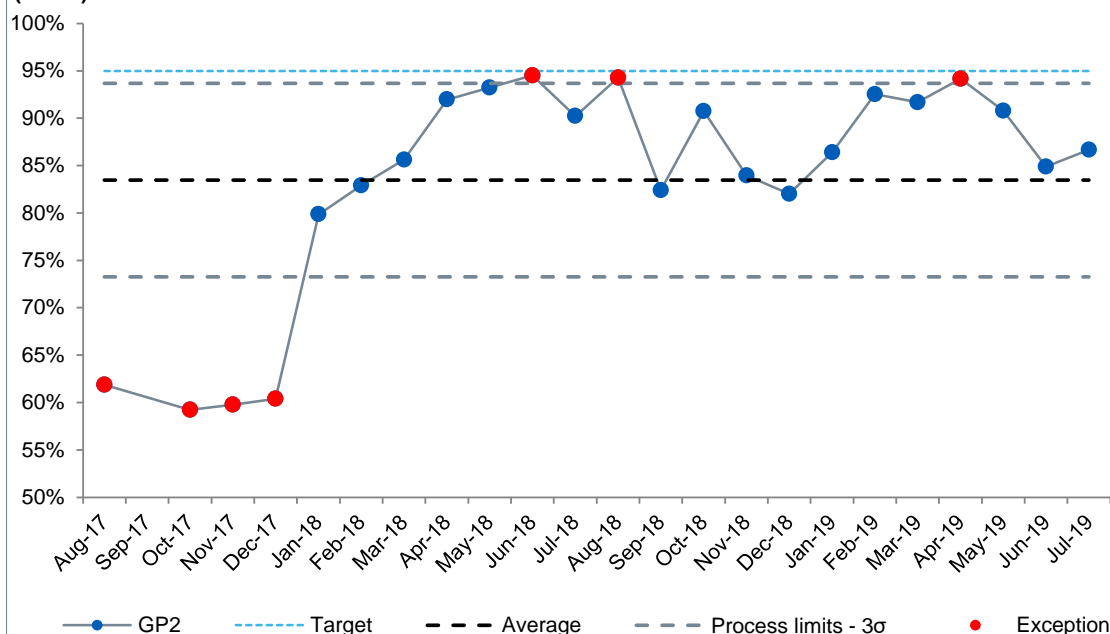


**PTS Chart 8: Performance - GP1 Patients Requested & Delivered within 90 Minutes (South)**

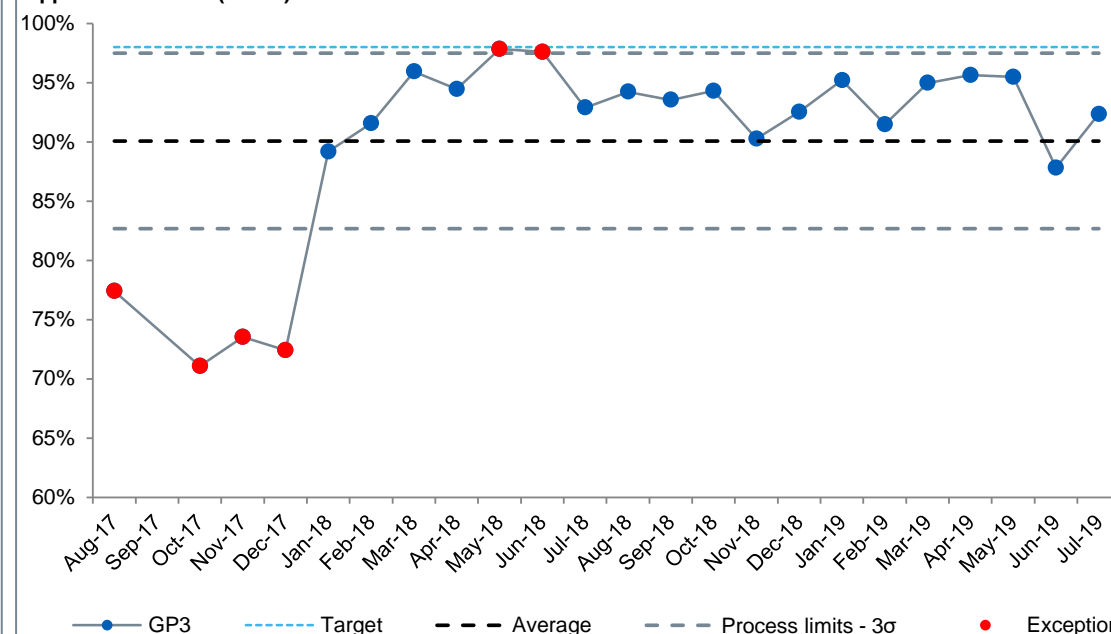




**PTS Chart 9: Performance - GP2 Patients Requested & Delivered within 120 Minutes (South)**



**PTS Chart 10: Performance - GP3 Journeys Completed no more than 30 Minutes after Appointment Time (South)**



## Performance Commentary:

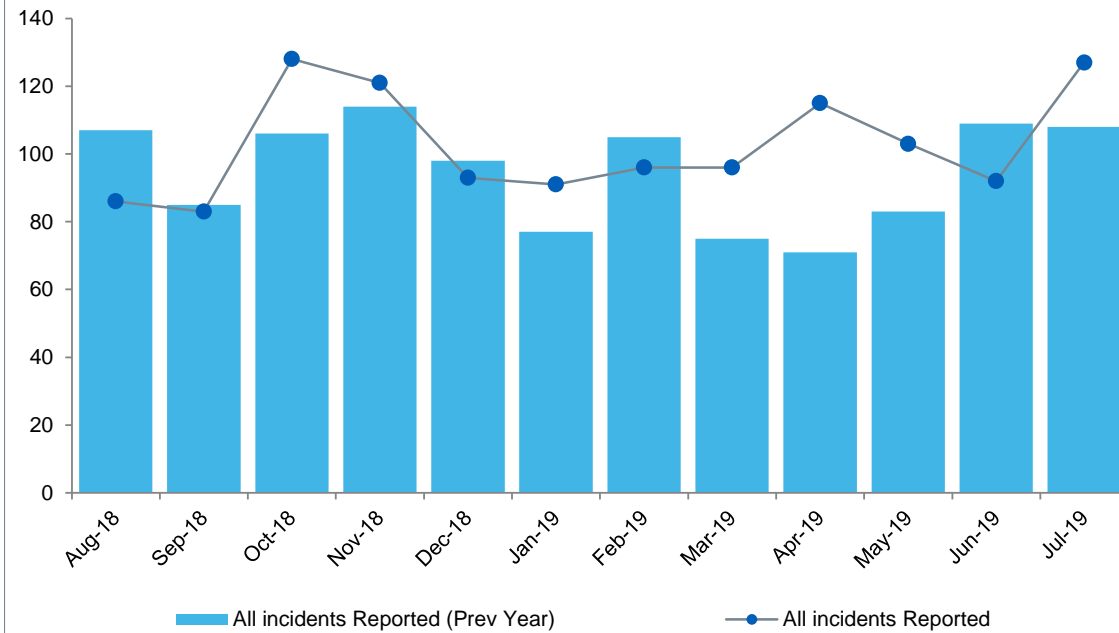
PTS July performance was well above YTD average in all PTS performance areas, with the exception of short-notice / on day bookings which was marginally below the average YTD.

PTS exceeded or met contractual KPI target with the exception of:

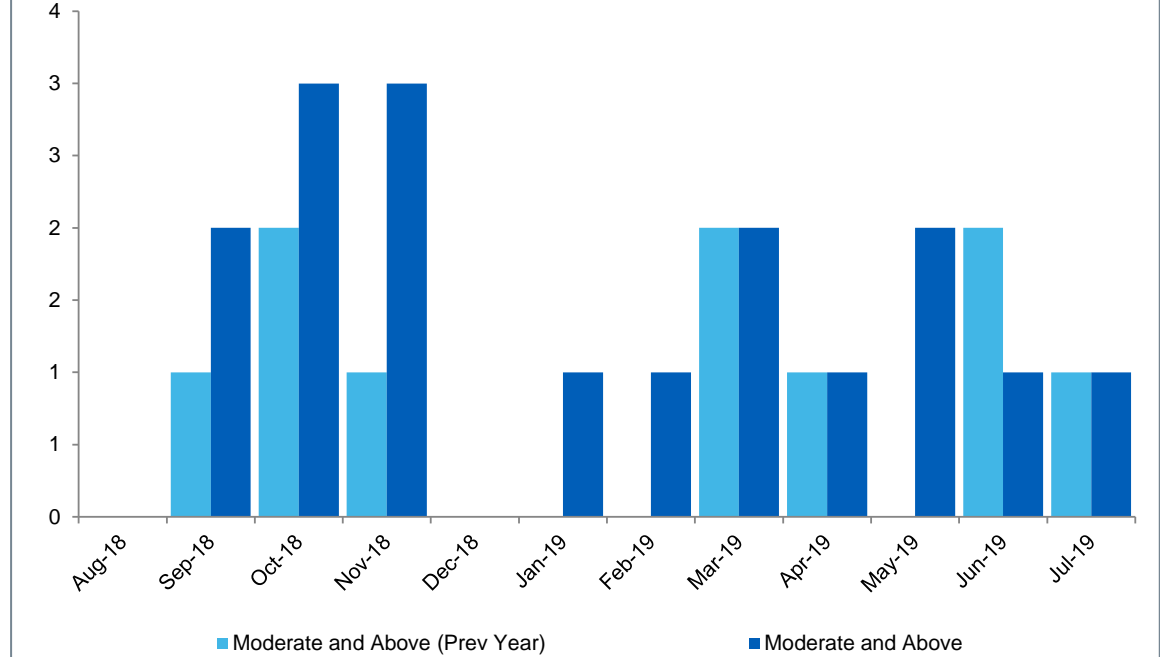
- a) Pre-planned pick up after appointment by less than a % point
- b) Short Notice "on-day" whilst improving month on month from May-June-July is still below target. This KPI target is under renegotiation and was changed in West Yorkshire to 85% in June and achieved for the first time on record. Discussions are underway with other CCG's to reach agreement on realistic targets. It should also be noted that unplanned same day performance is a direct reflection of discharge pre-planning, and varies significantly by hospital site and contract.
- c) The three GP Urgent KPI targets have not been achieved; these three graphs are for only 179 journeys for Sheffield CCG patients per month. For such a low number of journeys the % will very quickly be impacted by any on-day issues causing us not to meet target, or for example 3 tech crew jobs coming in at the same time, with us having only 1 x tech crew funded.

\*Managing Director PTS to propose removal of 1 x isolated contract reported on PTS Service Line IPR and to report this performance within the short notice performance chart 6.

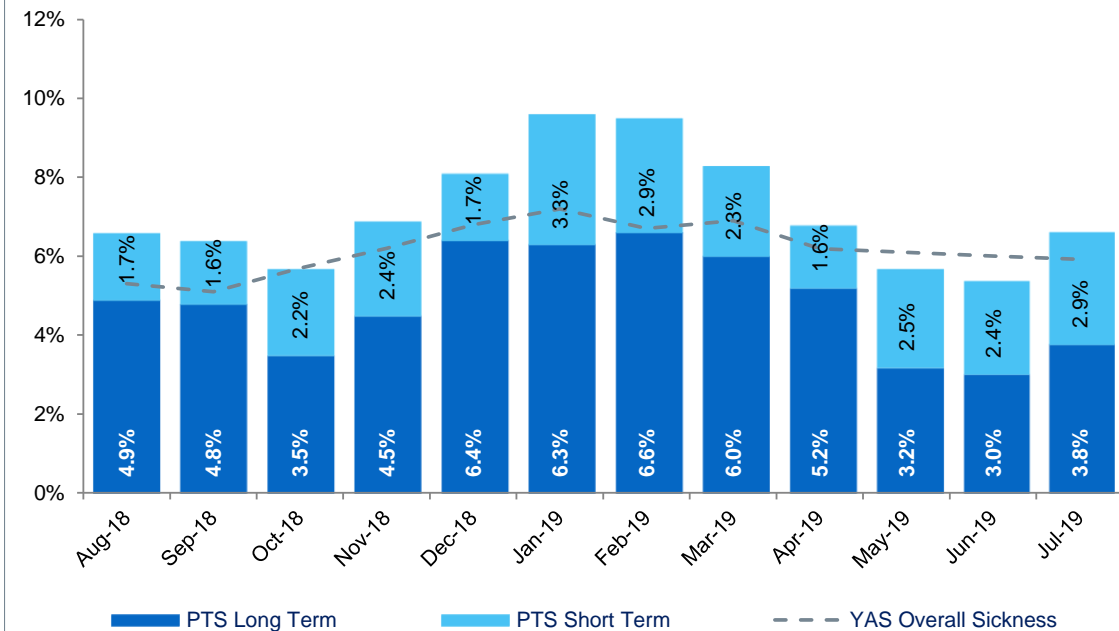
PTS Chart 11: Quality - Reported Incidents



PTS Chart 12: Quality - Reported Incidents - Moderate & Above



PTS Chart 13: Quality - Reported Incidents



### Quality Commentary:

All incidents are being managed in accordance with process, and escalation as and when required via Incident Reporting Group. There are no exceptions to report for July.

Whilst there is no month on month trend and incidents are quite stable for the rolling 12 months; a monthly increase in incidents has been noted, this is a specific increase in vehicle related incidents, moving and handling; with the greatest increase in West Yorkshire.

### Workforce Commentary:

Changes to PDR reporting have resulted in a deterioration in PDR performance; we are working with colleagues to ensure that all PDR's conducted are reported on.

There are no exceptions to report for July staff sickness.



# National Benchmarking

# Ambulance Quality Indicators

July 2019

System (July 2019)	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	Pathways	Pathways	Pathways	Pathways
<b>Total Incidents (HT+STR+STC)</b>	71,419	108,356	99,968	65,152	72,820	75,410	35,225	92,115	64,052	49,379
<b>Incident Proportions%</b>	<b>YAS</b>	<b>LOND</b>	<b>NWAS</b>	<b>EMAS</b>	<b>EEAS</b>	<b>SWAS</b>	<b>NEAS</b>	<b>WMAS</b>	<b>SECAMB</b>	<b>SCAS</b>
C1 and C2 Incidents	62.7%	66.7%	60.9%	67.2%	70.1%	60.4%	65.7%	54.3%	58.7%	53.0%
C1 Incidents	7.8%	11.6%	10.1%	9.8%	10.6%	5.9%	7.5%	6.0%	6.0%	5.8%
C2 Incidents	54.9%	55.1%	50.8%	57.4%	59.5%	54.4%	58.2%	48.3%	52.7%	47.2%
C3 Incidents	17.6%	19.5%	21.5%	18.0%	15.5%	24.7%	22.0%	34.8%	31.9%	31.5%
C4 Incidents	3.6%	2.0%	4.2%	1.0%	2.6%	2.0%	1.2%	1.5%	0.7%	1.9%
HCP 1-4 Hour Incidents	9.4%	3.1%	2.9%	4.8%	3.0%	3.4%	6.1%	5.3%	3.0%	6.1%
Hear and Treat	6.7%	7.4%	7.6%	8.9%	6.4%	6.4%	4.6%	3.8%	5.7%	7.4%
<b>Performance</b>	<b>YAS</b>	<b>LOND</b>	<b>NWAS</b>	<b>EMAS</b>	<b>EEAS</b>	<b>SWAS</b>	<b>NEAS</b>	<b>WMAS</b>	<b>SECAMB</b>	<b>SCAS</b>
C1-Mean response time (Target 00:07:00)	00:06:54	00:06:35	00:07:26	00:07:41	00:08:19	00:07:10	00:06:32	00:06:52	00:07:21	00:07:12
C1-90th centile response time (Target 00:15:00)	00:12:11	00:10:56	00:12:35	00:13:42	00:15:17	00:13:07	00:11:05	00:12:00	00:13:52	00:13:16
C2-Mean response time (Target 00:18:00)	00:18:17	00:21:01	00:23:31	00:32:41	00:30:34	00:29:26	00:30:04	00:12:58	00:20:01	00:15:49
C2-90th centile response time (Target 00:40:00)	00:37:26	00:43:43	00:50:05	01:08:05	01:03:51	01:01:43	01:02:45	00:23:44	00:38:34	00:31:33
C3-90th centile response time (Target 02:00:00)	01:42:47	02:39:56	02:49:04	04:05:25	04:54:55	03:08:54	04:14:16	01:49:47	03:33:52	01:47:21
C4-90th centile response time (Target 03:00:00)	01:41:39	03:39:33	03:17:25	02:54:36	05:08:23	03:57:31	03:05:06	03:05:42	04:41:02	02:41:57
<b>Proportion of All incidents</b>	<b>YAS</b>	<b>LOND</b>	<b>NWAS</b>	<b>EMAS</b>	<b>EEAS</b>	<b>SWAS</b>	<b>NEAS</b>	<b>WMAS</b>	<b>SECAMB</b>	<b>SCAS</b>
Incidents with transport to ED	58.4%	57.9%	58.4%	60.8%	58.0%	52.7%	58.0%	55.4%	60.5%	53.3%
Incidents with transport not to ED	8.4%	6.3%	6.2%	4.4%	2.4%	4.7%	10.6%	5.7%	1.2%	5.2%
Incidents with face to face response	26.6%	28.4%	27.9%	25.9%	33.2%	36.2%	26.8%	35.1%	32.6%	34.0%

Clinical (March 2019)	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	Pathways	Pathways	Pathways	Pathways
ROSC	37.1%	34.6%	33.0%	27.7%	35.0%	30.5%	33.9%	35.0%	33.0%	26.8%
ROSC - Utstein	61.4%	54.7%	54.3%	33.3%	60.0%	46.4%	64.0%	50.0%	50.0%	60.9%
Cardiac - Survival To Discharge	9.7%	8.7%	8.1%	6.4%	10.2%	10.7%	10.6%	10.4%	9.8%	10.7%
Cardiac - Survival To Discharge Utstein	22.2%	31.3%	43.3%	14.7%	34.1%	27.3%	36.0%	25.0%	28.1%	47.8%

Please Note: C4 data cannot be compared among trusts due to different processes within trusts when dealing with C5 incidents with a response