



Integrated Performance Report

September 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**
(July 2019)

Single Oversight
Framework Score

2

Inspected and rated

Good

 **Care Quality
Commission**



1. Executive Overview
 - a. Strategy 2018 - 2023
 - b. Ambitions & Key Priorities
2. Service Transformation & System Pressures
3. Summary of Exceptions
4. Patients & Communities
5. Our People
6. Achieving Excellence
7. Resource & Sustainability
8. Service Lines
 - a. Integrated Urgent Care
 - b. Emergency Operations Centre
 - c. A&E Operations
 - d. Patient Transport Service
9. National Benchmarking



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**

- National standards achieved on all categories except category 2 mean, however performance was better than agreed trajectory.
- The first draft for an advertising campaign for clinician roles in IUC and EOC was presented to programme board with very positive feedback. The results of the latest recruitment campaign were also shared with a significant increase in applicants seen after use of mobile banner advertising.
- Further detail presented to programme board on Hear and Treat trajectory with greater clarity given on actions required to achieve 8% and timelines for delivery.

Place Based Care **Amber**

- Care homes falls project in South has been extended with additional funding with an evaluation of current progress due in November.
- North Yorkshire pendant scheme progressing with go live expected around November.
- Mental health workstreams presented to programme board in September with Project initiation documents developed for each workstream.

Infrastructure **Amber**

- Doncaster Hub on track for go live January 2020 with temporary accommodation now in place on site.
- Proposal for next steps for AVP and Hub & Spoke presented to programme board and TEG which was supported with a business case now in development.
- Single warehouse business case now complete and ready for submission through the internal gate process.
- Completed ePR's have now passed 500,000 completed records with comms planned to celebrate the milestone.

Capacity & Capability **Amber**

- Details on the training model were presented to programme board with further work required to understand the most appropriate model for YAS.
- Accountability Framework first draft programme plan developed and presented to programme board in September.
- Work is underway on gate review documentation for a performance reporting tool.



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

ICS / STP level narrative plans are nearing completion. Final drafts are being developed, for submission to NHSE / I by 15 November. YAS continue to remain engaged in the development of these strategic plans.

YAS continue to remain engaged in hospital reconfigurations across Yorkshire and the Humber, with increasing engagement into the York and Scarborough Hospital Services Review

National guidance continues to be released around the requirements for the NHS Long Term Plan. YAS have submitted final plans into our nominated ICS, West Yorkshire and Harrogate that reflect our five year financial and workforce plans and activity trajectories. This reflects feedback received from NHSE / I. Each ICS is required to submit their final plans by 15 November 2019.

Winter planning has commenced, with input from YAS into each A&E Delivery Board.

Patients & Communities

September 2019

| Indicator ID | Key Operational Standard Description | Oct-18 | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Sep-19 | | | | |
|------------------------------------|--------------------------------------|---|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-------------------|----------|-----------------------|----------|---|
| | | | | | | | | | | | | | | Target / Forecast | Actual | Actual v Target/Fcast | | |
| 001 | Integrated Urgent Care | Calls Offered | 133,906 | 138,142 | 165,897 | 148,466 | 129,920 | 141,675 | 142,409 | 141,721 | 131,686 | 136,129 | 134,814 | 126,624 | | | | |
| | | Call Answered | 131,175 | 135,115 | 163,747 | 144,696 | 126,380 | 139,115 | 131,822 | 130,711 | 120,255 | 121,263 | 121,422 | 115,557 | 119,244 | 115,557 | ▼ | |
| | | Calls Answered within 60 Seconds | 85.0% | 82.9% | 90.2% | 81.6% | 79.0% | 86.1% | 91.8% | 90.9% | 88.7% | 84.1% | 86.8% | 89.0% | 90% | 89.0% | ▼ | |
| | | Core Clinical Advice | | | | | | | 30.7% | 31.3% | 31.5% | 33.4% | 31.6% | 31.4% | 30% | 31.4% | ▲ | |
| | | Clinician Called Back within 1 Hour | | | | | | | 64.1% | 59.2% | 59.4% | 59.6% | 62.9% | 59.1% | 60% | 59.1% | ▼ | |
| | | Direct Bookings | | | | | | | 46.2% | 46.8% | 47.1% | 44.7% | 47.3% | 46.6% | 30% | 46.6% | ▲ | |
| | | Bookings into UTC | | | | | | | 52.0% | 53.7% | 54.4% | 53.9% | 52.9% | 54.7% | 50% | 54.7% | ▲ | |
| | | Bookings into IUC Treatment Centres | | | | | | | 59.1% | 60.1% | 60.8% | 60.3% | 60.4% | 61.7% | 95% | 61.7% | ▼ | |
| | | ED Validations | | | | | | | 62.9% | 61.9% | 57.4% | 63.0% | 51.6% | 53.1% | 50% | 53.1% | ▲ | |
| | | | | | | | | | | | | | | 95% | 98.7% | ▲ | | |
| 002 | EOC | Telephony - 999 Calls Answered | 58,113 | 57,470 | 61,815 | 59,777 | 54,546 | 57,868 | 58,202 | 59,471 | 58,166 | 63,132 | 60,147 | 58,919 | | 58,919 | | |
| | | Telephony - 999 Calls Answered within 5 Seconds | 96.8% | 97.9% | 98.3% | 97.8% | 97.5% | 98.1% | 95.5% | 97.5% | 96.5% | 94.5% | 94.8% | 95.2% | 95% | 95.2% | ▲ | |
| 003 | A&E Operations | All Activity (H&T + STR + STC) | 66,831 | 67,123 | 71,884 | 71,254 | 63,897 | 69,455 | 68,236 | 69,359 | 67,360 | 71,887 | 69,246 | 67,636 | | 67,636 | | |
| | | Hear & Treat (H&T) | 6.5% | 6.3% | 6.8% | 6.7% | 7.4% | 6.5% | 6.6% | 6.8% | 6.8% | 6.7% | 6.0% | 6.0% | | 6.0% | | |
| | | See, Treat & Refer (STR) | 22.7% | 22.9% | 23.5% | 22.9% | 22.7% | 23.4% | 23.6% | 23.5% | 24.1% | 24.2% | 25.1% | 24.9% | | 24.9% | | |
| | | See, Treat & Convey (STC) | 70.8% | 70.8% | 69.7% | 70.4% | 69.8% | 70.1% | 69.8% | 69.7% | 69.1% | 69.2% | 68.9% | 69.1% | | 69.1% | | |
| | | 999 Responses (STR + STC) | 62,511 | 62,886 | 67,002 | 66,467 | 59,153 | 64,936 | 63,713 | 64,675 | 62,776 | 67,106 | 65,078 | 63,554 | 65,341 | 63,554 | ▼ | |
| | | Category 1 | Mean | 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 | 00:06:50 | 00:06:58 | 00:07:00 | 00:06:58 | ▼ |
| | | | 90th Percentile | 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 | 00:11:53 | 00:12:02 | 00:15:00 | 00:12:02 | ▼ |
| | | Category 2 | Mean | 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 | 00:17:04 | 00:18:26 | 00:18:00 | 00:18:26 | ▲ |
| | | | 90th Percentile | 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 | 00:34:21 | 00:37:32 | 00:40:00 | 00:37:32 | ▼ |
| | | Category 3 | 90th Percentile | 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 | 01:26:58 | 01:33:37 | 02:00:00 | 01:33:37 | ▼ |
| Category 4 | 90th Percentile | 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 | 02:47:17 | 02:41:57 | 03:00:00 | 02:41:57 | ▼ | | |
| Average Turnaround Time | 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 | 00:35:54 | 00:35:58 | 00:30:00 | 00:35:58 | ▲ | | | |
| Average Job Cycle Time (Responses) | 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 | 01:53:54 | 01:53:41 | | 01:53:41 | | | | |
| 004 | PTS | Journeys | 83,380 | 79,827 | 68,270 | 80,652 | 72,158 | 75,569 | 73,830 | 77,516 | 73,526 | 82,095 | 73,568 | 74,545 | 79,012 | 74,545 | ▼ | |
| | | Patient Journeys < 120 Minutes | 99.4% | 99.5% | 99.4% | 99.5% | 99.5% | 99.4% | 99.4% | 99.4% | 99.3% | 99.4% | 99.3% | 99.2% | 99.2% | 90.0% | 99.2% | ▲ |
| | | Patients Arrive at Appointment on Time | 88.1% | 88.9% | 87.3% | 88.6% | 89.4% | 90.1% | 90.7% | 88.5% | 88.9% | 90.9% | 91.1% | 89.9% | 90.0% | 89.9% | ▼ | |
| | | % Pre Planned - Picked Up in 90 Minutes | 88.2% | 90.0% | 87.2% | 89.3% | 89.5% | 89.6% | 90.2% | 87.3% | 88.5% | 89.3% | 89.3% | 89.6% | 90.4% | 89.6% | ▼ | |
| | | % Short Notice - Picked Up in 120 Minutes | 78.9% | 79.1% | 73.7% | 76.0% | 78.0% | 76.0% | 78.8% | 76.0% | 76.7% | 77.7% | 78.8% | 77.4% | 88.8% | 77.4% | ▼ | |
| | | Calls Answered within 180 Seconds | 95.5% | 96.3% | 94.3% | 93.8% | 87.2% | 90.7% | 92.9% | 89.2% | 89.4% | 96.3% | 90.4% | 86.8% | 90.0% | 86.8% | ▼ | |

| Indicator ID | Key Operational Standard Description | Jun-18 | Jul-18 | Aug-18 | Sep-18 | Oct-18 | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 |
|--------------|--------------------------------------|-------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 005 | ACQI | % Received STEMI Bundle | | 80.00% | | | 58.10% | | | 55.90% | | | 53.10% |
| | | % Received Stroke Diagnostic Bundle | | | 98.70% | | | 95.30% | | | 96.10% | | 93.40% |
| | | % Received Sepsis Care Bundle | 70.20% | | | 31.50% | | | 51.90% | | | 53.40% | |

Please Note: ACQI Care Bundle Data for STEMI, Stroke and Sepsis are submitted quarterly on a rotational basis.

Our People

September 2019

| Indicator ID | Key Operational Standard Description | Oct-18 | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Sep-19 | | | |
|--------------|---|--------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------------------|--------|-----------------------|------|
| | | | | | | | | | | | | | | Target / Forecast | Actual | Actual v Target/Fcast | |
| 006 | Workforce | Total FTE in Post | 4,651 | 4,668 | 4,646 | 4,655 | 4,663 | 4,669 | 4,668 | 4,656 | 4,681 | 4,675 | 4,690 | 4,727 | | | |
| | | BME % | 4.8% | 4.8% | 4.9% | 5.0% | 4.9% | 4.9% | 4.9% | 4.9% | 5.0% | 5.0% | 5.0% | 5.0% | 5.1% | 11.1% | 5.1% |
| 007 | Recruitment | New Starters (FTE) | 103.7 | 58.4 | 15.4 | 62.5 | 46.6 | 38.9 | 55.6 | 18.6 | 67.5 | 49.6 | 56.6 | 92.9 | | 92.9 | |
| 008 | Turnover (FTE) | YAS (Rolling 12 Month Periods) | 9.0% | 9.2% | 9.1% | 9.2% | 9.2% | 9.3% | 9.4% | 9.6% | 9.9% | 9.9% | 10.0% | 9.9% | | 9.9% | |
| 009 | PDR / Staff Appraisals | YAS | 74.0% | 80.7% | 79.7% | 80.1% | 78.3% | 77.0% | 76.1% | 70.8% | 67.9% | 71.7% | 74.6% | 76.6% | 90.0% | 76.6% | ▼ |
| | | A&E Operations | 77.8% | 83.1% | 82.8% | 83.6% | 82.4% | 80.6% | 78.2% | 71.2% | 69.1% | 72.2% | 76.2% | 77.9% | 90.0% | 77.9% | ▼ |
| | | EOC | 70.1% | 77.0% | 77.0% | 74.2% | 71.8% | 70.9% | 72.5% | 69.0% | 66.8% | 63.8% | 60.6% | 61.1% | 90.0% | 61.1% | ▼ |
| | | Integrated Urgent Care | 63.1% | 77.6% | 72.9% | 70.4% | 65.0% | 63.5% | 64.5% | 62.1% | 55.1% | 75.6% | 76.1% | 70.9% | 90.0% | 70.9% | ▼ |
| | | PTS | 82.7% | 86.9% | 85.6% | 86.8% | 87.3% | 86.3% | 84.8% | 80.6% | 73.2% | 78.3% | 83.0% | 90.9% | 90.0% | 90.9% | ▲ |
| 010 | Training: Stat & Mand (Substantive Employees) | YAS | 91.8% | 91.9% | 93.4% | 95.7% | 96.3% | 97.3% | 97.9% | 97.9% | 98.3% | 98.2% | 98.3% | 98.9% | 90.0% | 98.9% | ▲ |
| | | A&E Operations | 92.6% | 93.2% | 95.0% | 96.9% | 97.4% | 97.9% | 97.0% | 98.2% | 98.7% | 98.6% | 98.9% | 99.0% | 90.0% | 99.0% | ▲ |
| | | EOC | 89.9% | 91.4% | 91.7% | 94.5% | 94.8% | 97.0% | 95.6% | 96.8% | 97.5% | 97.2% | 98.5% | 97.7% | 90.0% | 97.7% | ▲ |
| | | Integrated Urgent Care | 81.7% | 87.5% | 89.4% | 92.2% | 92.8% | 96.0% | 97.4% | 98.6% | 98.6% | 98.6% | 98.7% | 98.5% | 90.0% | 98.5% | ▲ |
| | | PTS | 95.6% | 95.1% | 96.1% | 98.5% | 98.3% | 99.1% | 98.3% | 99.3% | 99.7% | 99.6% | 99.5% | 99.7% | 90.0% | 99.7% | ▲ |
| 011 | Health & Wellbeing | Total Sickness Rate | 5.7% | 6.2% | 6.8% | 7.2% | 6.7% | 6.3% | 6.2% | 6.1% | 6.0% | 5.9% | 6.2% | 6.0% | 4.4% | 6.0% | ▲ |
| | | Long Term Sickness Rate | 3.6% | 4.0% | 4.8% | 4.6% | 4.0% | 4.2% | 3.9% | 3.9% | 3.8% | 3.6% | 3.9% | 3.8% | | 3.8% | |
| | | Short Term Sickness Rate | 2.0% | 2.2% | 2.0% | 2.6% | 2.6% | 2.1% | 2.3% | 2.3% | 2.2% | 2.3% | 2.3% | 2.3% | | 2.3% | |

| Indicator ID | Key Operational Standard Description | Oct-18 | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 | Jun-19 | Jul-19 | Aug-19 | Sep-19 | Sep-19 | | | YTD | | | | |
|--------------|--------------------------------------|--|-----------------|---------------|--------|--------|---------------|--------|--------|---------------|--------|--------|---------------|--------|--------|---------------|--------|--------|---------------|--------|---|
| | | Plan | Actual | Plan v Actual | Plan | Actual | Plan v Actual | Plan | Actual | Plan v Actual | Plan | Actual | Plan v Actual | Plan | Actual | Plan v Actual | Plan | Actual | Plan v Actual | | |
| 018 | Finance Overview | Risk Rating | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | ◀ | 1 | 1 | ◀ | |
| | | EBITDA | -1,521 | -1,279 | -1,217 | -1,879 | -1,326 | -4,504 | -1,230 | -2,053 | -1,891 | -1,861 | -1,831 | -1,683 | -1,577 | -1,683 | -106 | -9,616 | -10,549 | -932 | |
| | | Surplus | -436 | -343 | -247 | -711 | -279 | -3,687 | -126 | -1,016 | -769 | -764 | -545 | -605 | -455 | -605 | -150 | -2,926 | -3,826 | -900 | |
| | | Capital | 3,081 | 2,769 | 1,561 | 1,822 | 1,953 | 4,931 | 487 | 924 | 312 | 794 | 1,685 | 379 | 1,525 | 379 | -1,146 | 11,106 | 4,581 | -6,525 | |
| | | Cash | 37,729 | 42,208 | 49,057 | 46,569 | 46,658 | 36,110 | 38,772 | 41,370 | 43,981 | 49,253 | 52,397 | 52,816 | 40,099 | 52,816 | 12,717 | 40,099 | 52,816 | 12,717 | |
| | | CIP | 817 | 852 | 1,005 | 987 | 988 | 989 | 534 | 538 | 526 | 525 | 528 | 560 | 560 | 560 | 0 | 3,208 | 3,208 | 0 | |
| 019 | CIP | A&E | 331 | 334 | 325 | 331 | 331 | 326 | 232 | 61 | -191 | 28 | 28 | 28 | 227 | 28 | -199 | 1,377 | 186 | -1,191 | |
| | | Business Development | 0 | 0 | 0 | 0 | 0 | 0 | - | - | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | CEO Directorate | 2 | 3 | 2 | 2 | 2 | 2 | 4 | 9 | 6 | -10 | 2 | 2 | 6 | 2 | -4 | 39 | 14 | -25 | |
| | | Clinical | 9 | 9 | 9 | 8 | 8 | 9 | 4 | -1 | 2 | 4 | 2 | 2 | 2 | 2 | 0 | 10 | 13 | 3 | |
| | | Estates | 24 | 9 | 17 | 16 | 16 | 16 | 31 | 5 | 5 | 9 | 5 | 19 | 22 | 19 | -3 | 149 | 71 | -78 | |
| | | Finance | 41 | 42 | 42 | 41 | 41 | 41 | 36 | 36 | 37 | 35 | 36 | 36 | 36 | 36 | 0 | 217 | 217 | 0 | |
| | | Fleet | 65 | 66 | 65 | 66 | 66 | 65 | 86 | 87 | 86 | 67 | 87 | 123 | 123 | 123 | 0 | 557 | 537 | -20 | |
| | | Planned & Urgent Care | 64 | 72 | 80 | 81 | 81 | 81 | 82 | 51 | 66 | 66 | 66 | 66 | 81 | 66 | -15 | 488 | 397 | -91 | |
| | | Quality, Governance | 6 | 5 | 6 | 6 | 6 | 6 | 2 | 1 | 2 | -5 | 0 | 0 | 2 | 0 | -2 | 10 | 0 | -10 | |
| | | Hub & Spoke | 5 | 6 | 6 | 5 | 5 | 5 | - | - | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | | Workforce OD | 62 | 78 | 79 | 7 | 78 | 78 | 57 | 56 | 57 | 56 | 58 | 57 | 57 | 57 | 0 | 339 | 339 | 0 | |
| | | RESERVE | 208 | 228 | 374 | 353 | 353 | 358 | 0 | 233 | 456 | 275 | 244 | 227 | 4 | 227 | 223 | 22 | 1,433 | 1,411 | |
| | | Current Position (Cumulative YTD) | | 4,190 | 5,042 | 6,047 | 7,034 | 8,023 | 9,010 | 534 | 1,072 | 1,598 | 2,123 | 528 | 560 | 560 | 560 | 0 | 3,208 | 3,208 | 0 |
| 020 | Transport/Fleet | A&E | Vehicle age +7 | 20.0% | 20.0% | 17.0% | 13.0% | 11.0% | 8.0% | 5.7% | 5.4% | 6.9% | 5.2% | 5.2% | 3.2% | | 3.2% | | | | |
| | | | Vehicle age +10 | 5.0% | 5.0% | 4.0% | 4.0% | 4.0% | 4.0% | 3.5% | 3.3% | 3.3% | 3.3% | 3.3% | 0.0% | | 0.0% | | | | |
| | | | Availability | 90.0% | 90.5% | 89.6% | 90.0% | 90.0% | 88.7% | 90.2% | 90.0% | 90.2% | 90.0% | 90.0% | 90.2% | 95% | 90.2% | ▼ | | | |
| | | PTS | Vehicle age +7 | 32.0% | 32.0% | 32.0% | 32.0% | 32.0% | 33.0% | 33.0% | 31.0% | 41.4% | 31.0% | 31.0% | 16.7% | | 16.7% | | | | |
| | | | Vehicle age +10 | 25.6% | 25.2% | 25.2% | 25.0% | 25.0% | 24.8% | 24.8% | 24.1% | 24.1% | 24.1% | 24.0% | | 24.0% | | | | | |
| | | | Availability | 93.0% | 93.0% | 92.0% | 91.0% | 91.0% | 91.0% | 91.0% | 90.0% | 90.0% | 91.0% | 91.0% | 92.0% | 95% | 92.0% | ▼ | | | |

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).

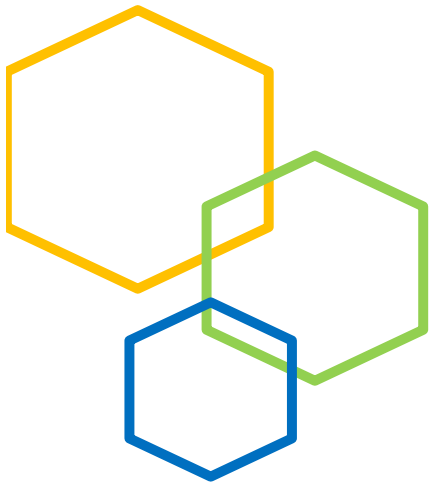
EBITDA - The Trust's year to date Earnings before Interest Tax Depreciation and Amortisation (EBITDA) position at the end of September (Month 6) is £10.5m against a plan of £9.6m. A favourable variance of £0.9m.

Surplus - The Trust has reported a surplus at the end of September (Month 6) of £3.8m, a favourable variance of £0.9m against the plan.

Capital - At the end of September 2019 Capital is underspend £6.5m. ICT underspend £0.8m delayed approval from HSLI, Fleet delivery behind plan as a result of bringing forward schemes into 18/19 to mitigate underspends in that year. Doncaster Hub & Spoke scheme is on plan assurance has been given that it is on track to deliver in line with the timetable submitted as part of the STP. 19/20 Capital plan of £18.4m expenditure allowing for disposals of £0.3m plus the £0.8m carried over to 19/20 from last year. This will result in a charge of £18.3m against the Capital Resource Limit (CRL). The CRL was approved by NHSEI in June 2019.

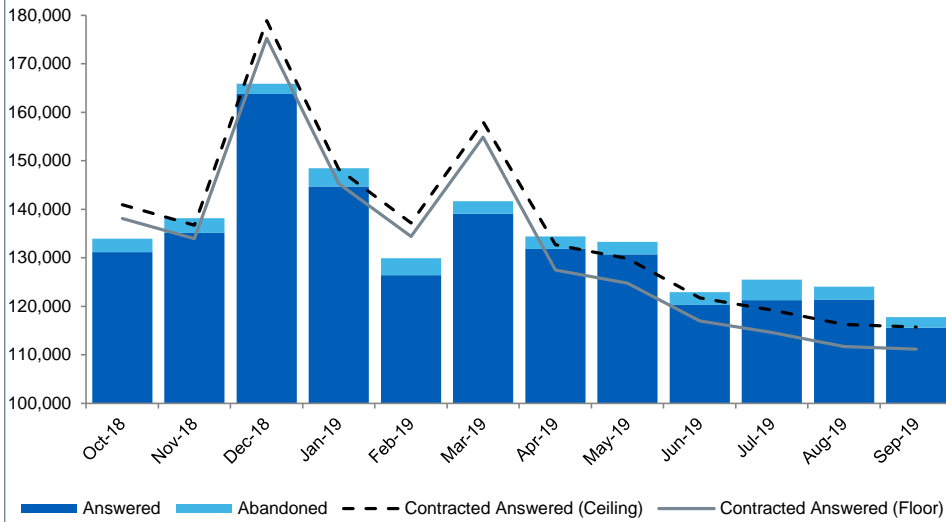
Cash - At the end of September 2019 the Trust's cash position was £52.8m against a plan of £40.1m, a favourable variance of £12.7m. As last month, the variance largely results from continued underspends on capital (£6.5m) and receivables being better than plan (£6.5m).

CIP - The Trust has a savings target of £6.6m for 2019/20. The Trust has achieved £3.2m at month 6 which is in line with plan (44% of this being non-recurrent).

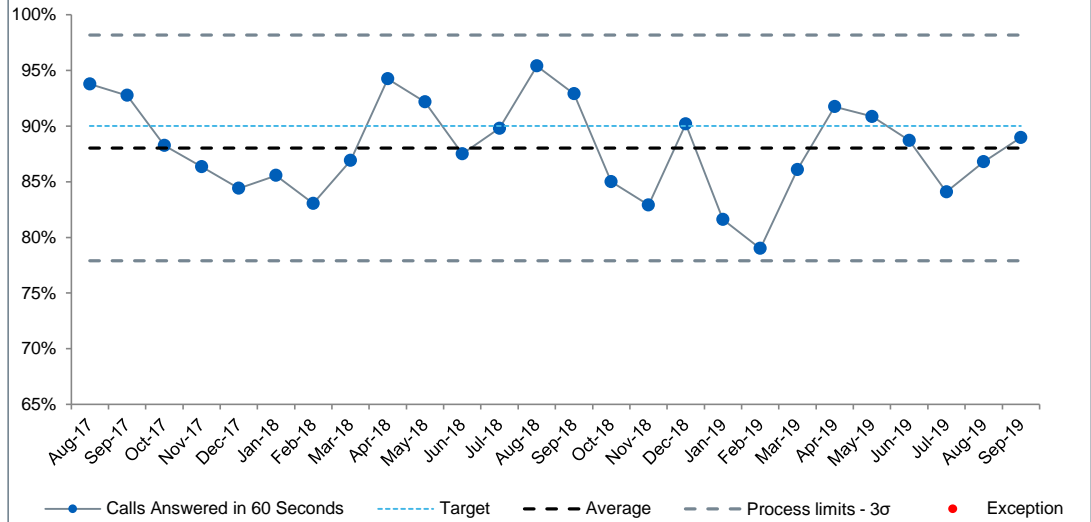


SERVICE LINES

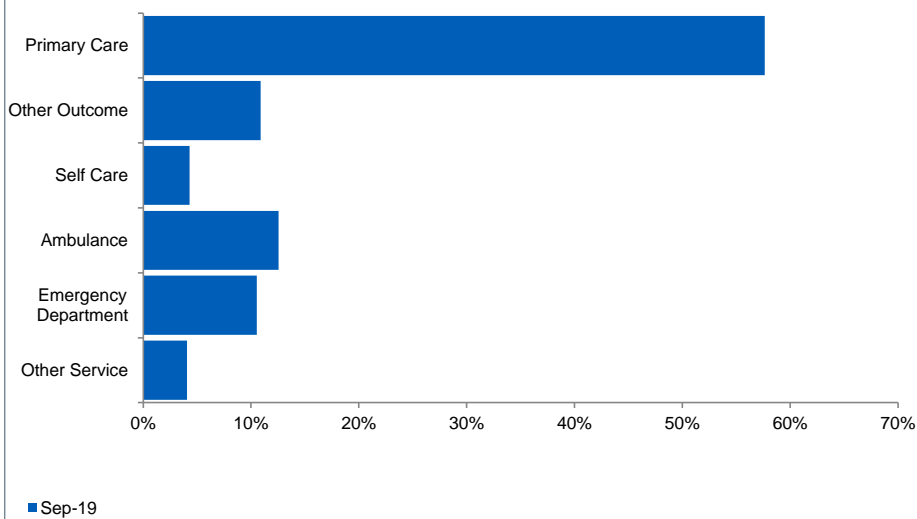
IUC Chart 1: Demand - Calls



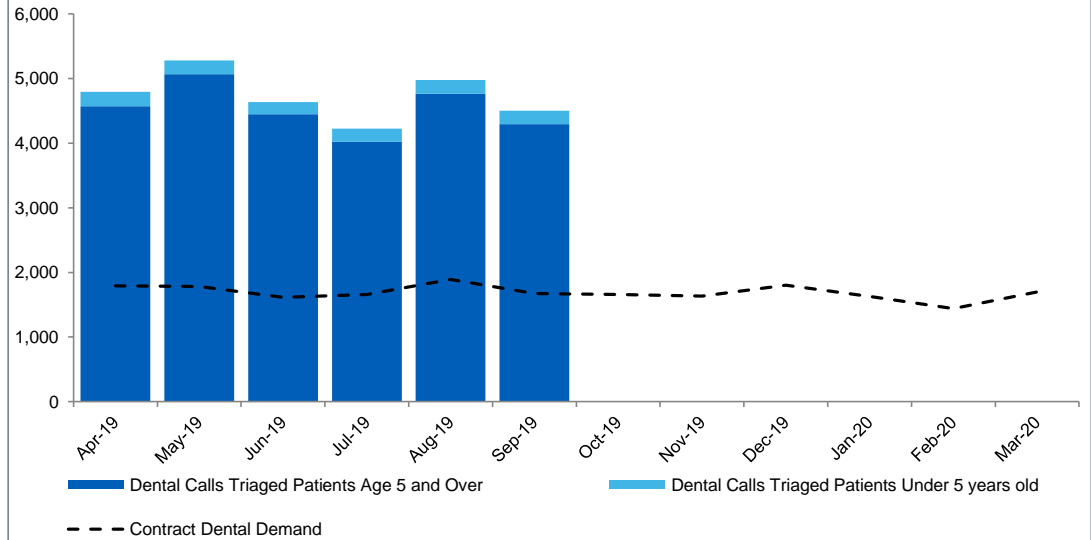
IUC Chart 2: Performance - Calls Answered in 60 Seconds



IUC Chart 3: Outcomes



IUC Chart 4: Demand - Dental





Integrated Urgent Care

September 2019

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 | YTD |
|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------|
| Calls Answered in 60 (90%) | 91.8% | 90.9% | 88.7% | 84.1% | 86.8% | 89.0% | | | | | | | 88.6% |
| Core Clinical Advice (30%) | 30.7% | 31.4% | 31.5% | 33.4% | 31.6% | 31.4% | | | | | | | 31.6% |
| Clinician Called Back within 1 Hour (60%) | 64.1% | 59.2% | 59.4% | 59.6% | 62.9% | 59.1% | | | | | | | 60.8% |
| Direct Bookings * (30%) | 46.2% | 46.8% | 47.1% | 44.7% | 47.3% | 46.7% | | | | | | | 46.5% |
| Bookings into UTC * (50%) | 52.0% | 53.7% | 54.4% | 53.9% | 52.9% | 54.7% | | | | | | | 53.4% |
| Bookings into IUC Treatment Centres * (95%) | 59.1% | 60.2% | 60.8% | 60.3% | 60.4% | 61.7% | | | | | | | 60.1% |
| ED Validations (50%) | 61.8% | 60.9% | 57.4% | 63.0% | 51.6% | 53.1% | | | | | | | 58.1% |
| Ambulance Validations (95%) | 97.8% | 97.9% | 98.0% | 98.6% | 98.9% | 98.7% | | | | | | | 98.3% |

* 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

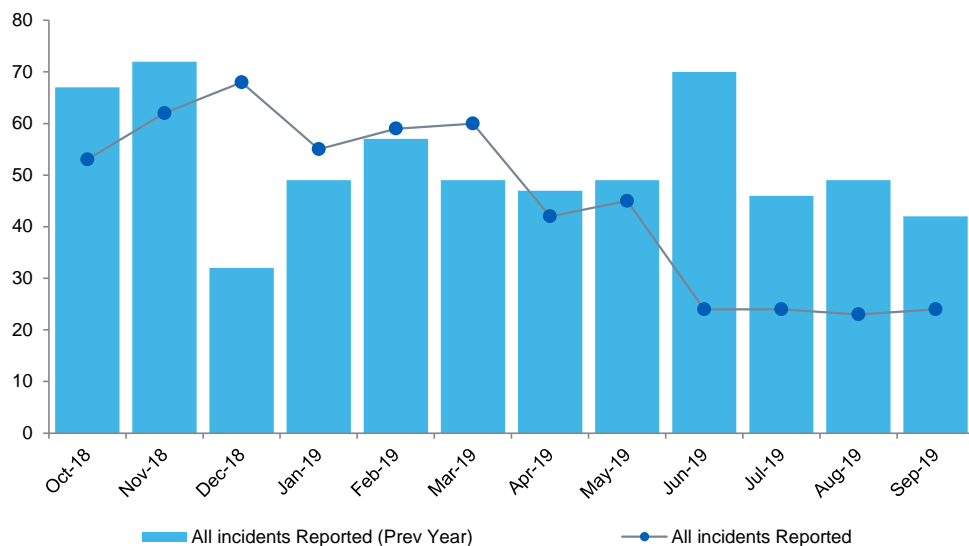
Performance Commentary:

115,557 calls were answered in September; just 0.1% below contract ceiling, as previously noted this is predominately associated with excess dental demand. Call answer target improved for September, just short of the target at 89% against a 90% target. Year to date all other performance targets remain on track and above target levels for the period April to September 2019.

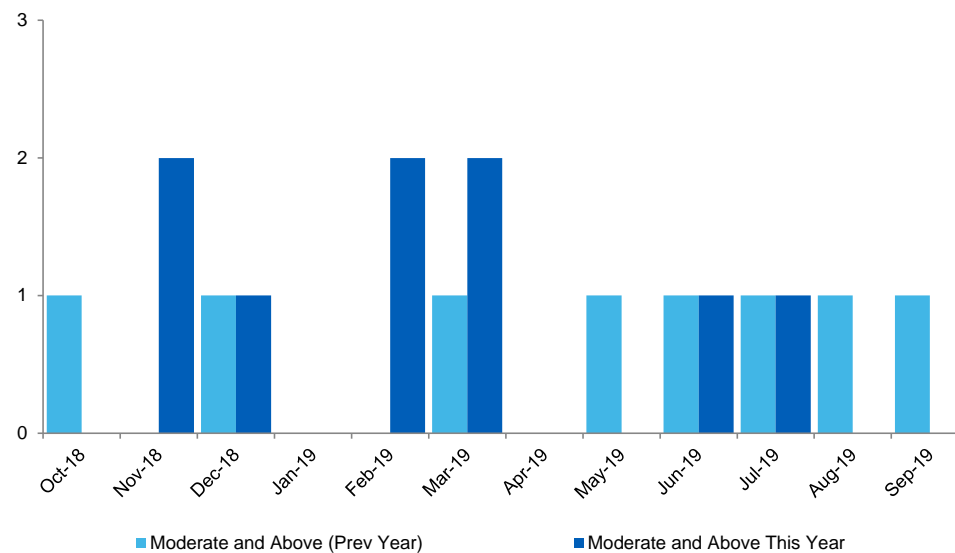
One of the challenges associated with performance, as call demand increases over winter, is the ability to maintain sufficient capacity levels. To support this the version 18 NHS Pathways mandatory training (full one day) taking place in October and November is being promoted for overtime to minimise staffing extractions.

Y&H IUC continues to perform above national average levels for other NHS 111/IUC on key performance indicators as noted in the national benchmarking

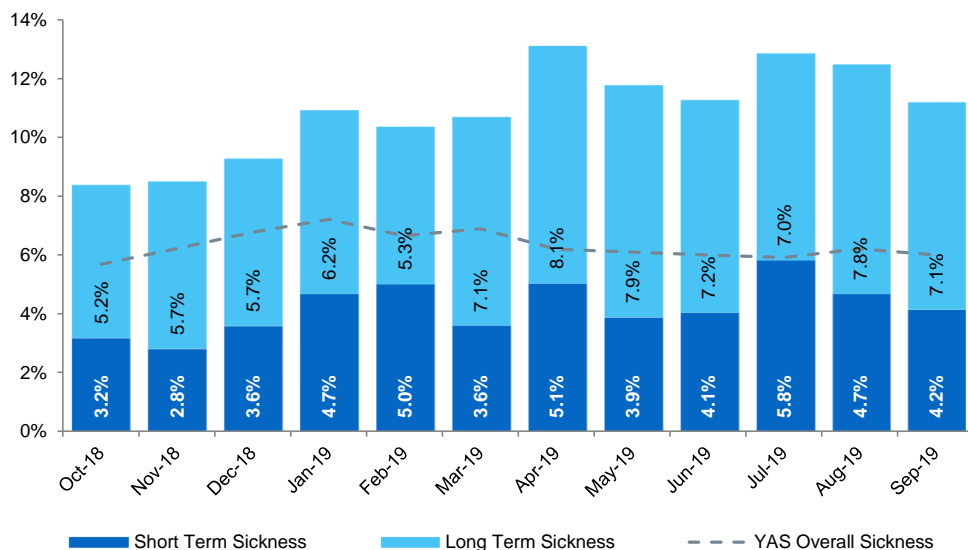
IUC Chart 5: Quality - Reported Incidents



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



IUC Chart 7: Workforce - Sickness



Quality Commentary:

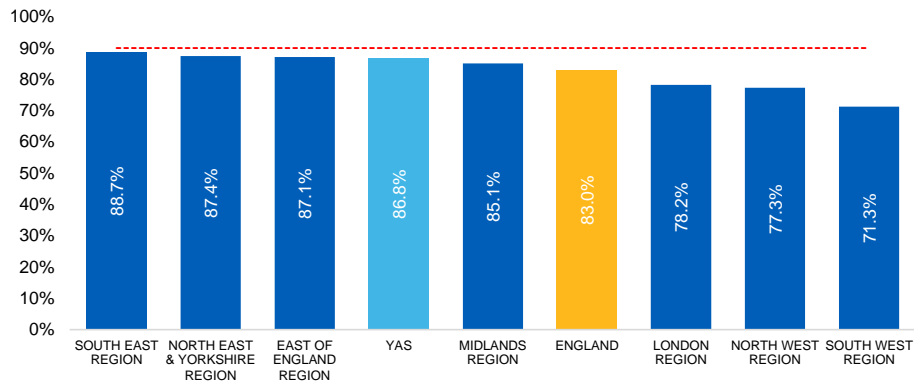
Themes and trends from the reported incidents will form part of the IUC training planned during Autumn which also includes the new NHS Pathways version 18.

Workforce Commentary:

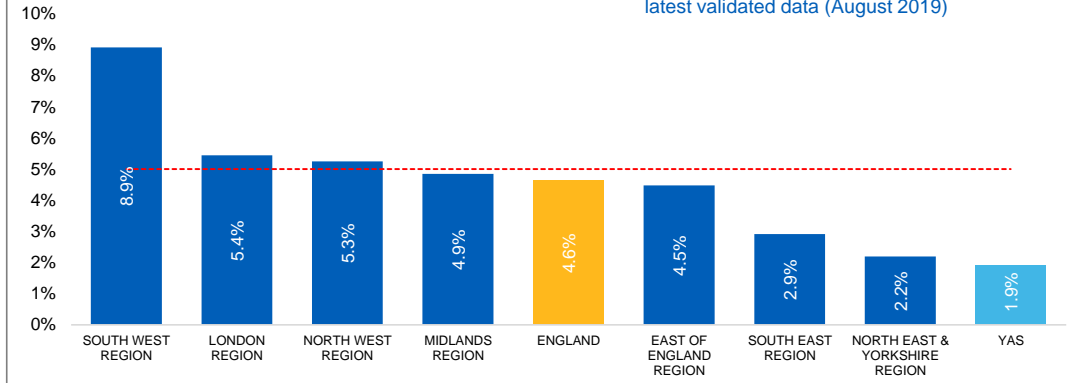
An absence management project has been established to support with staff health & wellbeing and maintaining attendance in work. This includes the introduction of staff welfare officers during the winter months to provide continuity of care for staff who are not in work and establish appropriate return to work arrangements.

Ongoing is our winter recruitment with 72 more Health Advisors targeted to be in the service before Christmas and a course already planned for early January to assist with the remaining part of winter. In relation to clinical staff the final details of a full marketing campaign for the clinical recruitment project are being developed with an external marketing company, this will launch at the end of October/ early November. The work has identified the employer value proposition (EVP) and brand for the campaign following work with clinical staff that work both within the 999/111 call centres managing patients over the telephone. The aim of the project is to create a new attraction strategy for the Trust.

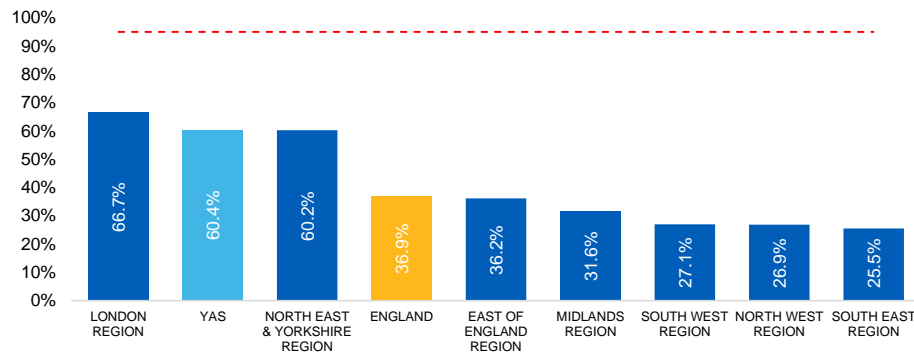
IUC Chart 8: Calls Answered in 60 seconds (90%)



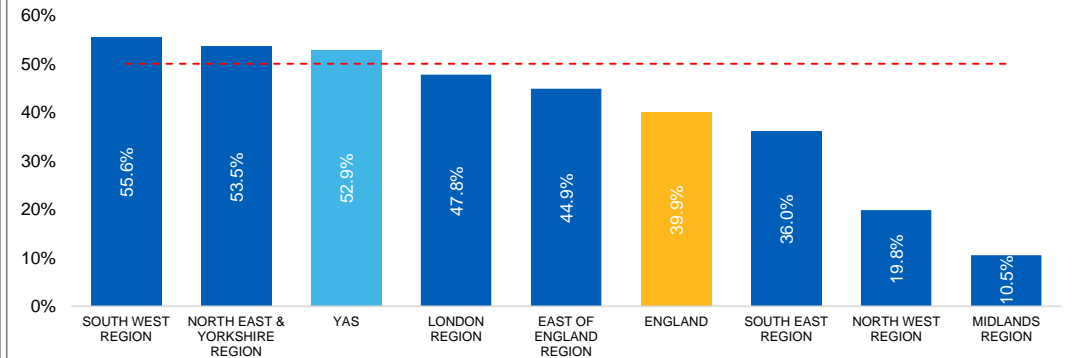
IUC Chart 9: Calls Abandoned (5%)



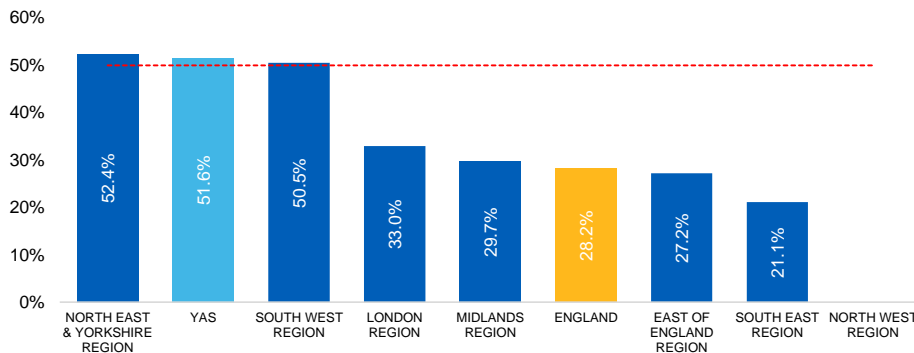
IUC Chart 10: Bookings into IUC Treatment Centres (95%)



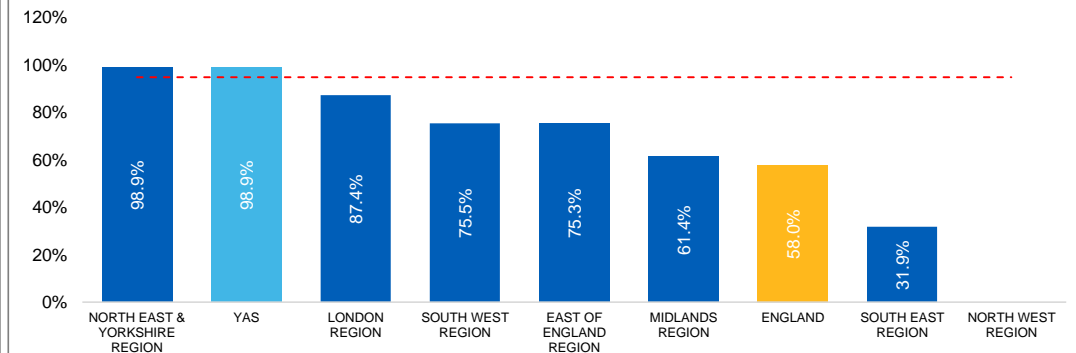
IUC Chart 11: Bookings into UTC (50%)



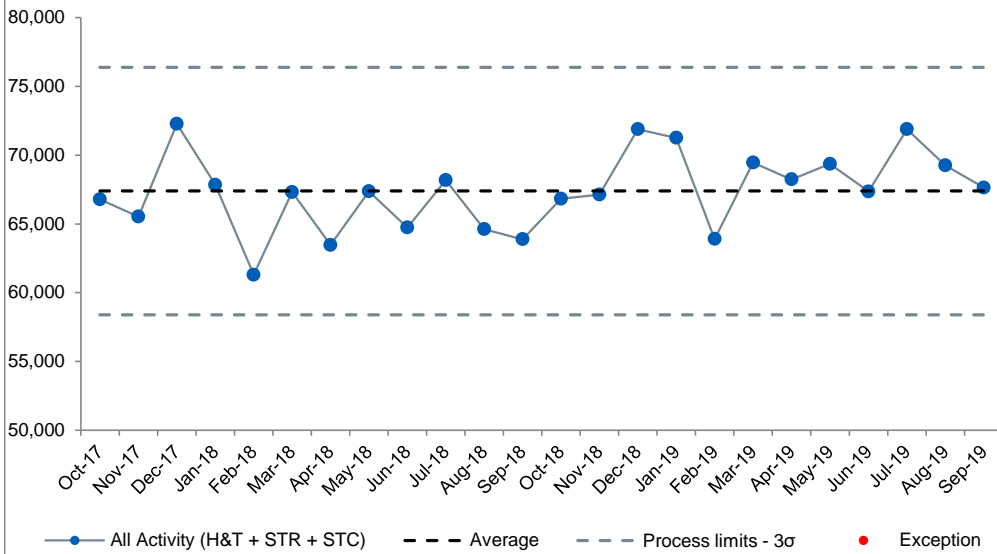
IUC Chart 12: ED Validations (50%)



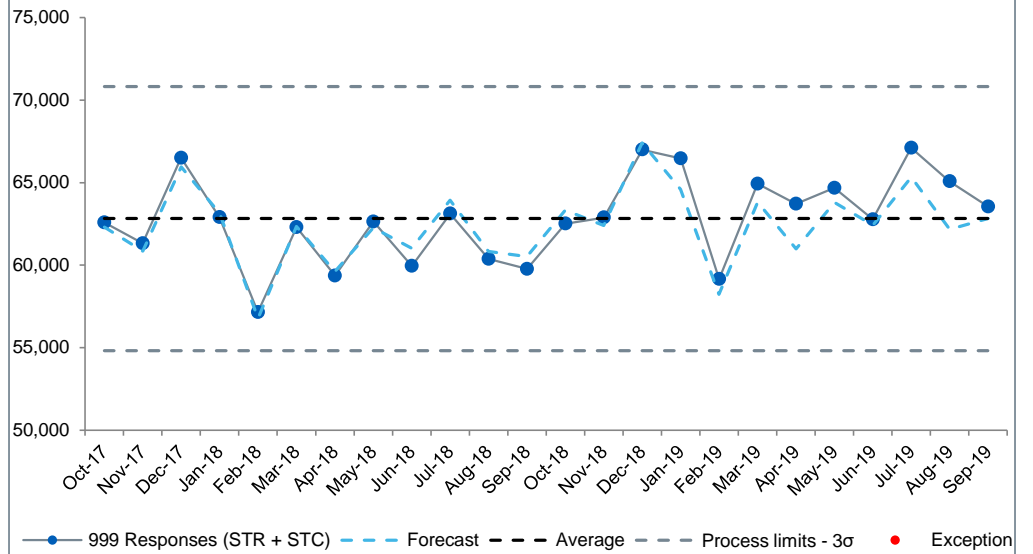
IUC Chart 13: Ambulance Validations (95%)



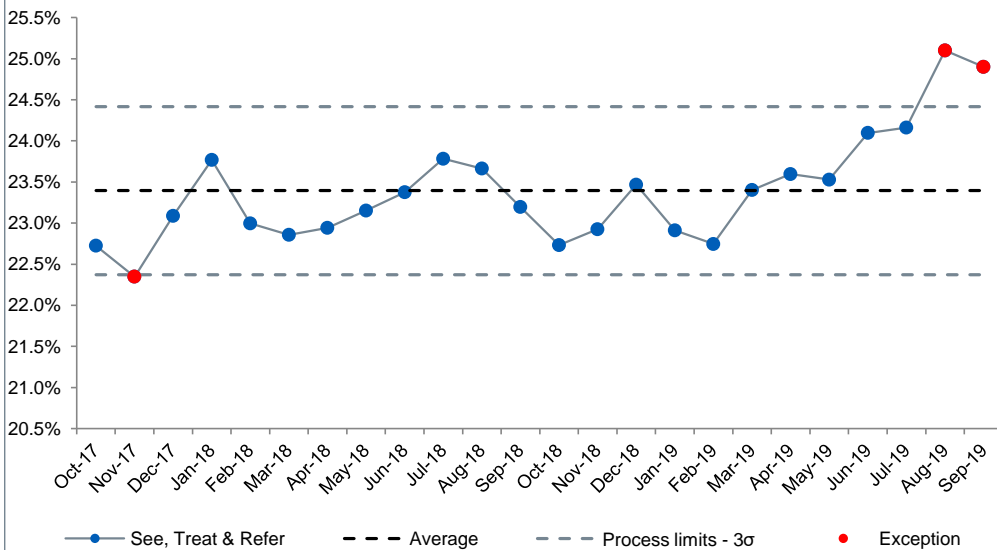
A&E Chart 1: Demand - All Activity (H&T + STR + STC)



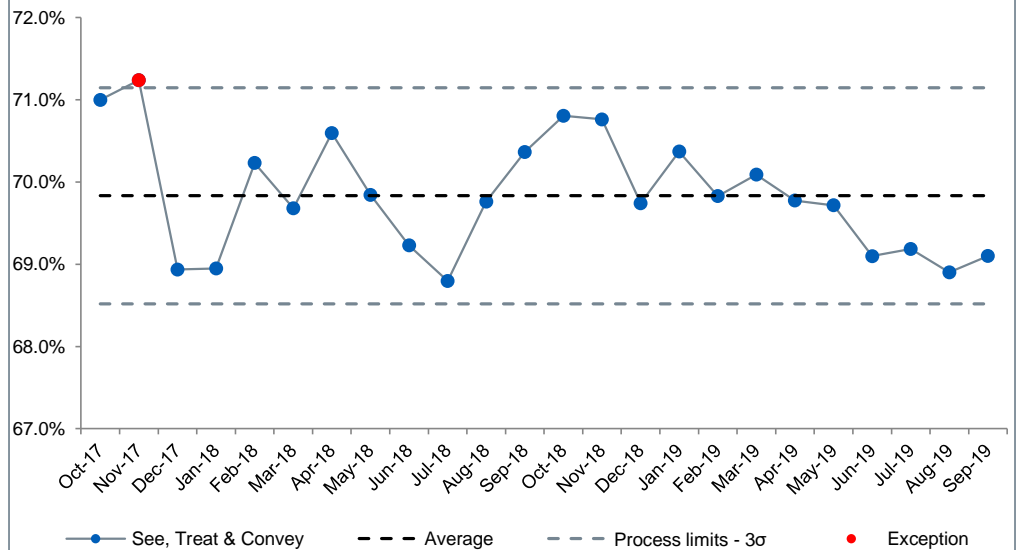
A&E Chart 2: Demand - 999 Responses (STR + STC)



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

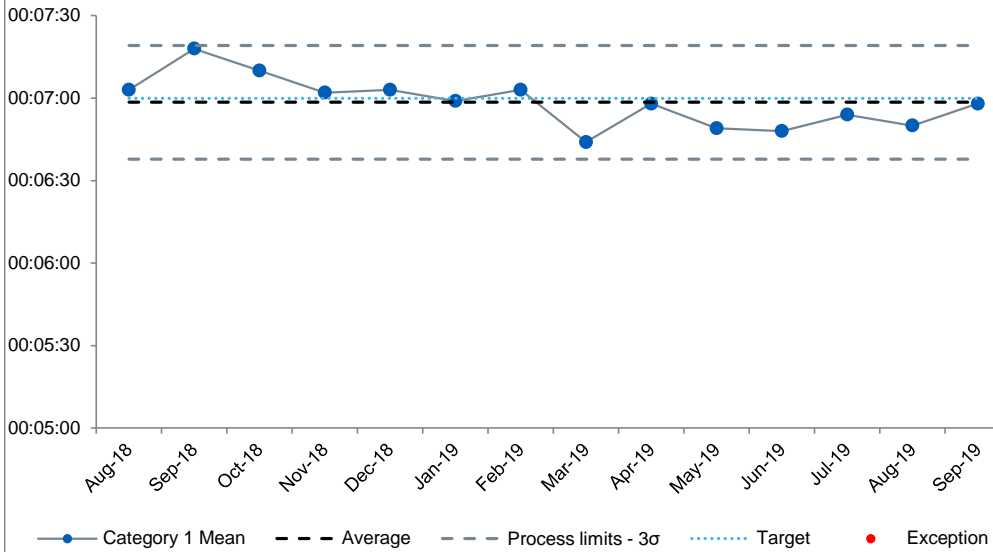


A&E Chart 4: Demand - See, Treat & Convey %



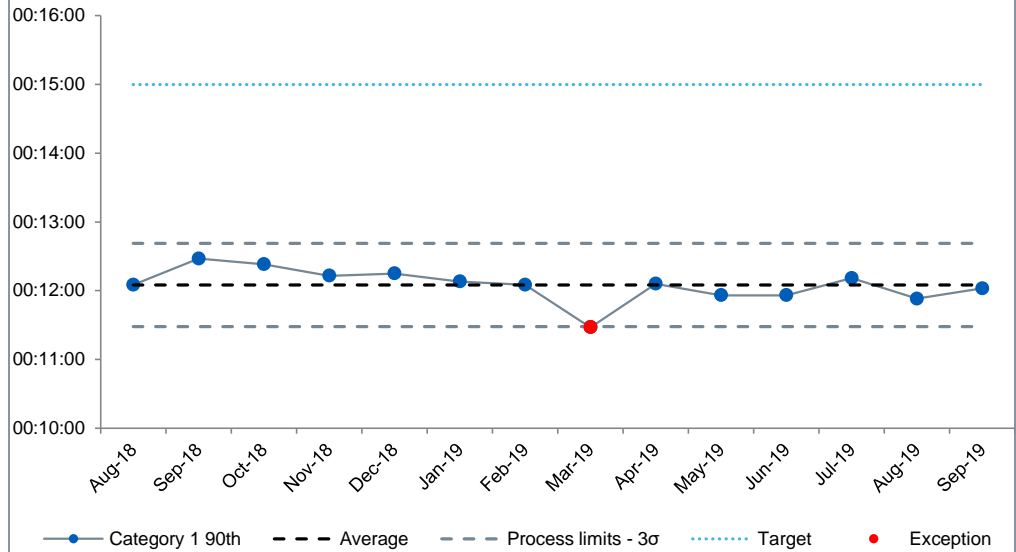
A&E Chart 5: Performance - Category 1 Mean

Year to Date **00:06:53**



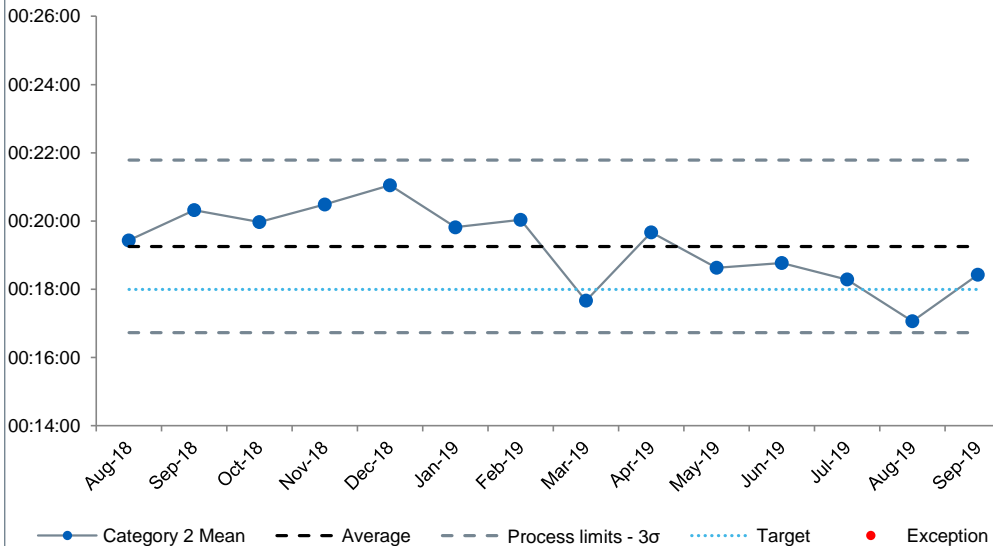
A&E Chart 6: Performance - Category 1 90th Percentile

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



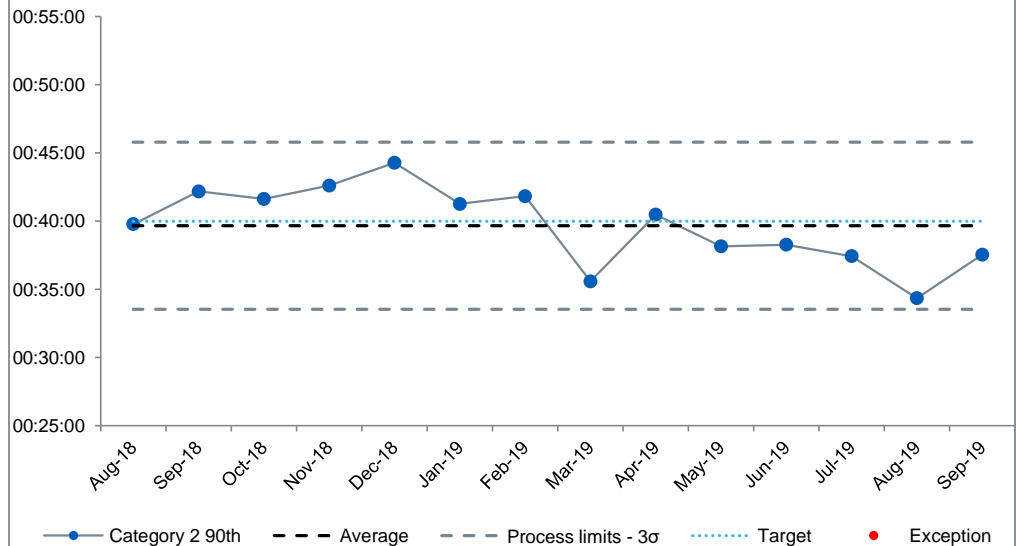
A&E Chart 7: Performance - Category 2 Mean

Year to Date **00:18:29**



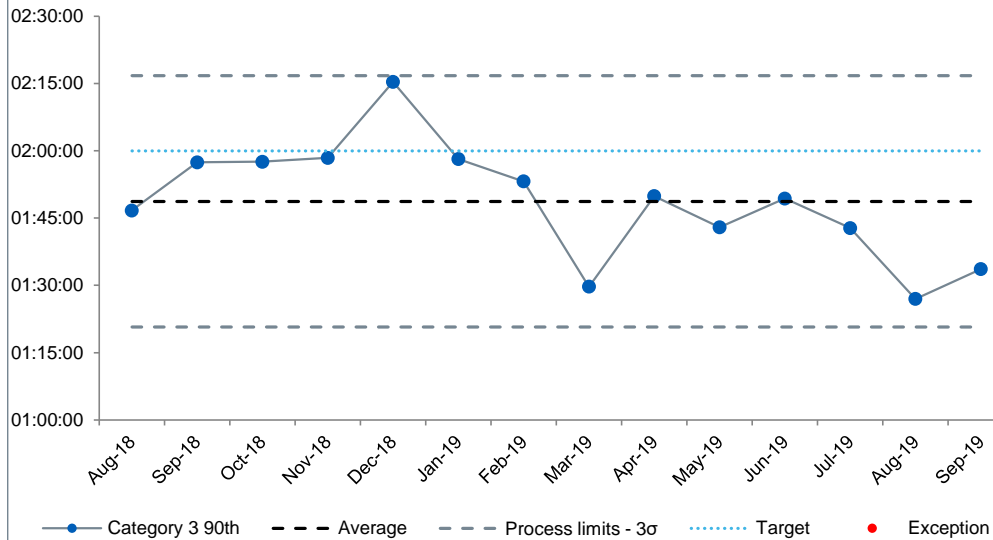
A&E Chart 8: Performance - Category 2 90th Percentile

Year to Date **00:37:48**



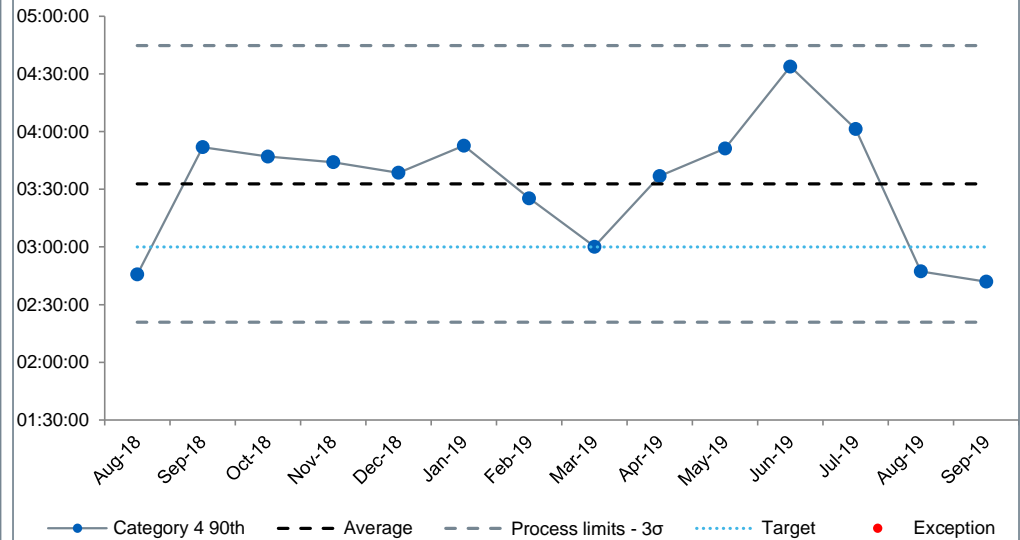
A&E Chart 9: Performance - Category 3 90th Percentile

Year to Date **01:41:14**

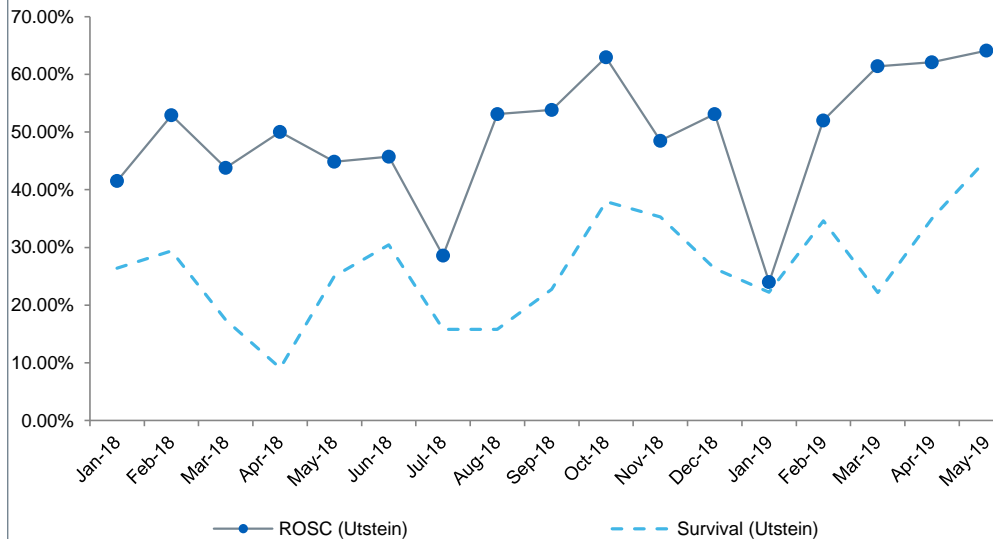


A&E Chart 10: Performance - Category 4 90th Percentile

Year to Date **03:34:06**



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



Performance Commentary:

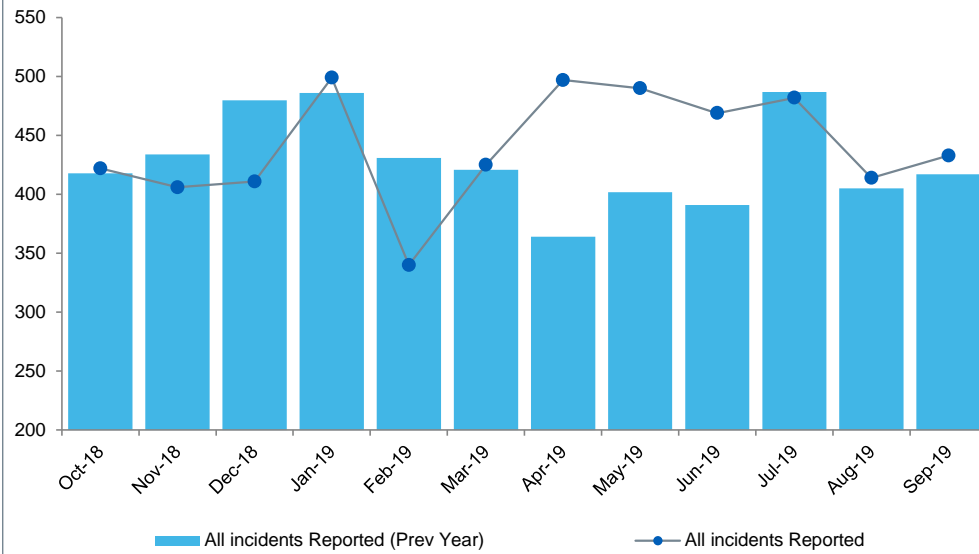
Current demand increases above forecast fell to 1.2% above forecast levels. Performance achieved was still in line with the agreed trajectories. CAT 2 mean and CAT4 90th% still feature as the pressure performance areas. The CAT4 improvement was continued from August and the actions taken to support would appear to be being effective as national standards were again achieved.

September saw a continued improvement in See, Treat and Refer patients with a subsequent reduction in those conveyed to hospital.

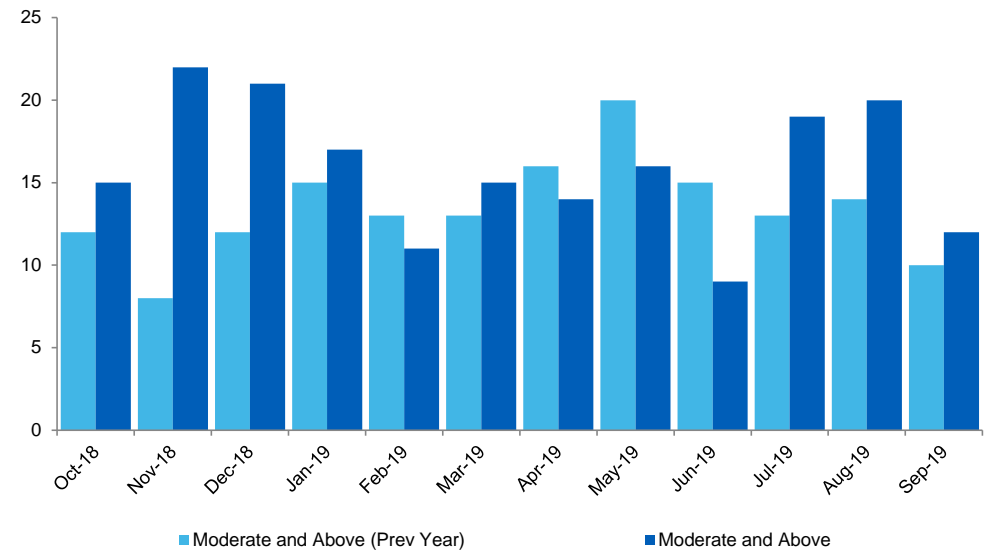
Hospital turnaround performance continued to significantly impact on available operational hours. Hospital Handover performance worsened to an average position of 16:55 mins against the national std of 15. Work with acute hospitals and systems to improve processes continues with greater regional involvement from NHSI.

Performance within this patient group demonstrates significant amounts of fluctuation month on month which is attributed to the smaller number of patients being referred to. May saw a continuation of improvement in these measures.

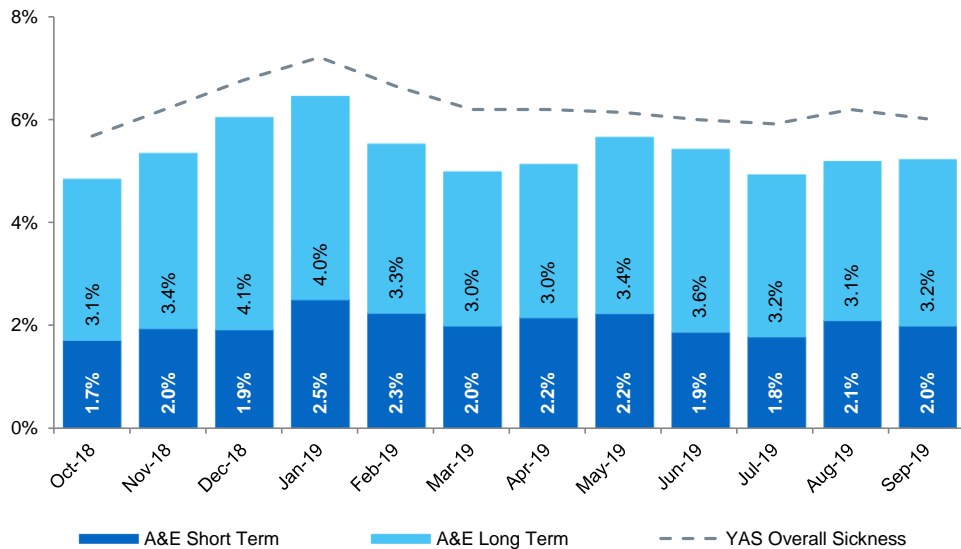
A&E Cht12: Quality - Reported Incidents



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



A&E Cht14: Workforce - Sickness



Quality Commentary:

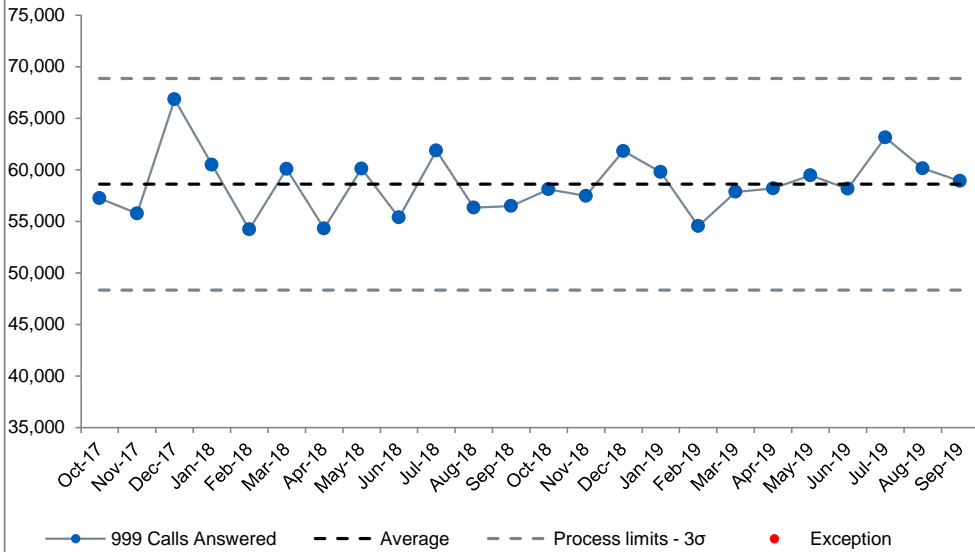
Reported incidents increased for the month of September and continues to be an increase over previous year. 433 incidents were reported (0.6% of all attended incidents.) Those rated moderate and above reduced significantly over the previous month to 12 (0.02% of all incidents)

Workforce Commentary:

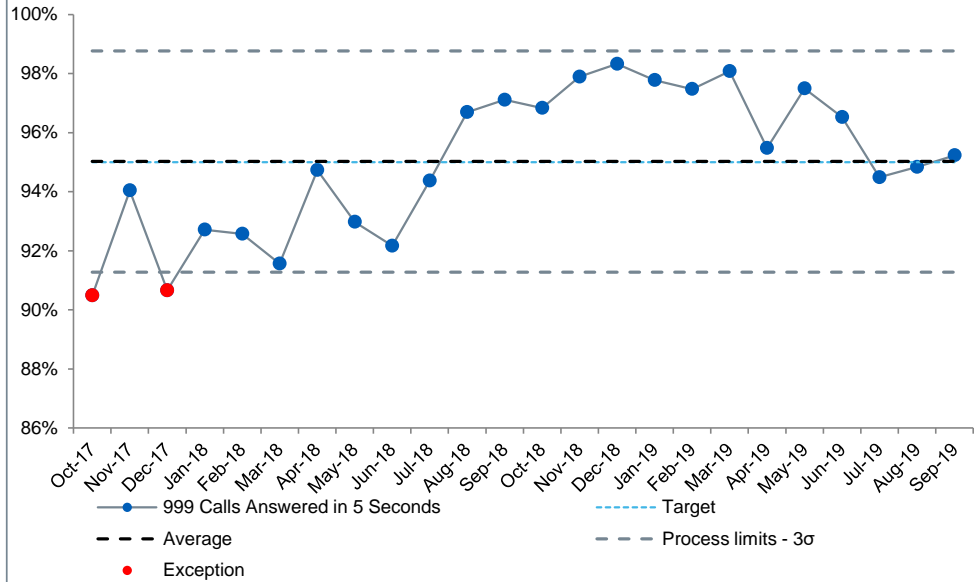
Sickness absence management has been a key focus in Operational areas and the continued levels of 5.2% are below trust average and remains positive.

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

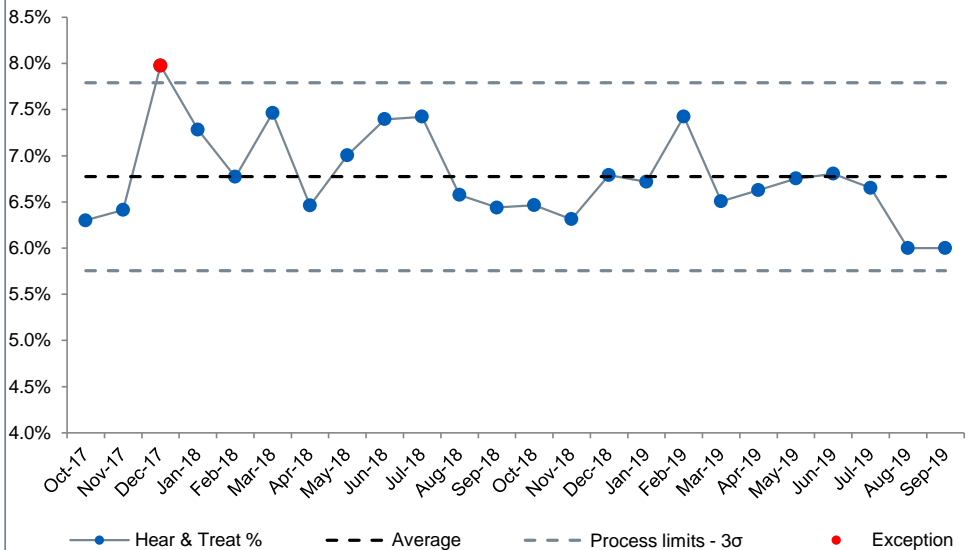
EOC Chart 1: Demand - 999 Calls Answered



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



EOC Chart 3: Performance - % Hear & Treat



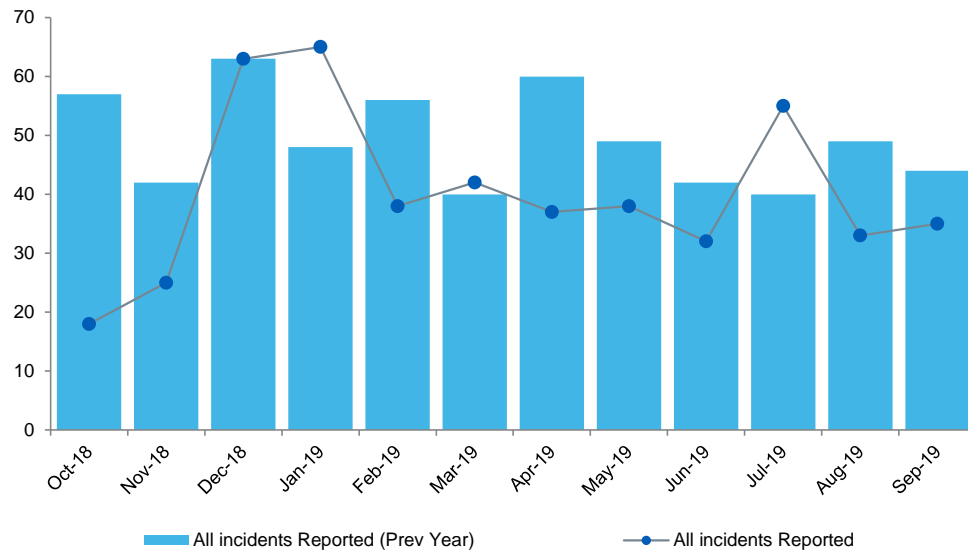
Performance Commentary:

Call volumes reduced further in September reducing to a position in line with average. In doing so Call answer standards were again delivered above the 95% in 5 seconds position.

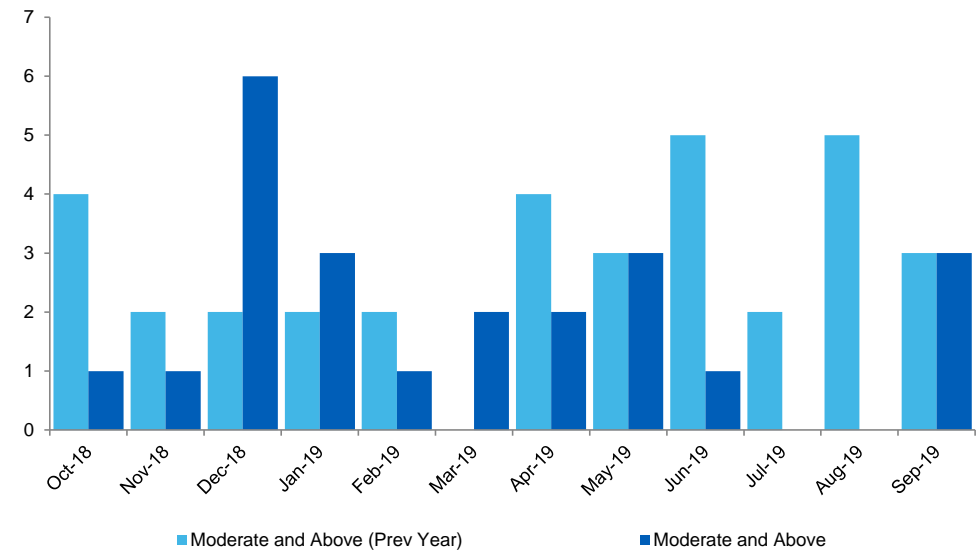
Hear and Treat performance maintained a static position of 6.7% following on from the previous months low. It continues to be a key focus area for improvement, exploring CAT3 volumes and how these can be reviewed more effectively as part of the Hear and Treat process. The effects of sustained delivery of national standards in Operations and the AQI requirements to not delay an emergency response to CAT3 patients makes this a more complex position.

September saw the completion of the Wakefield refurbishment after several months of disturbance which the EOC team dealt with admirably with minimal impact to performance. It also dealt with the control of the UCI cycling event at the end of the month.

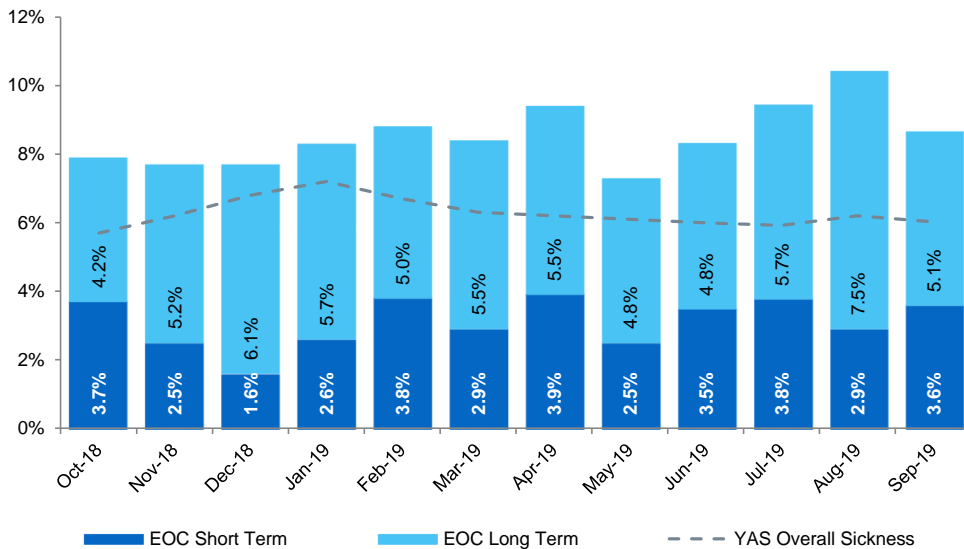
EOC Chart 4: Quality - Reported Incidents



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



EOC Chart 6: Workforce - Sickness



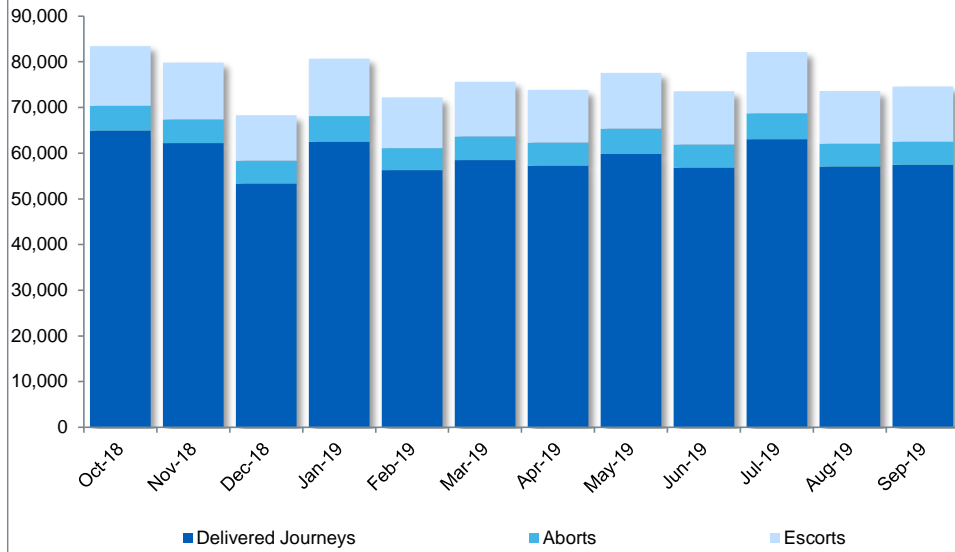
Quality Commentary:

The decrease seen in incidents is positive against a static demand position. Those rated moderate and above were static against 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.

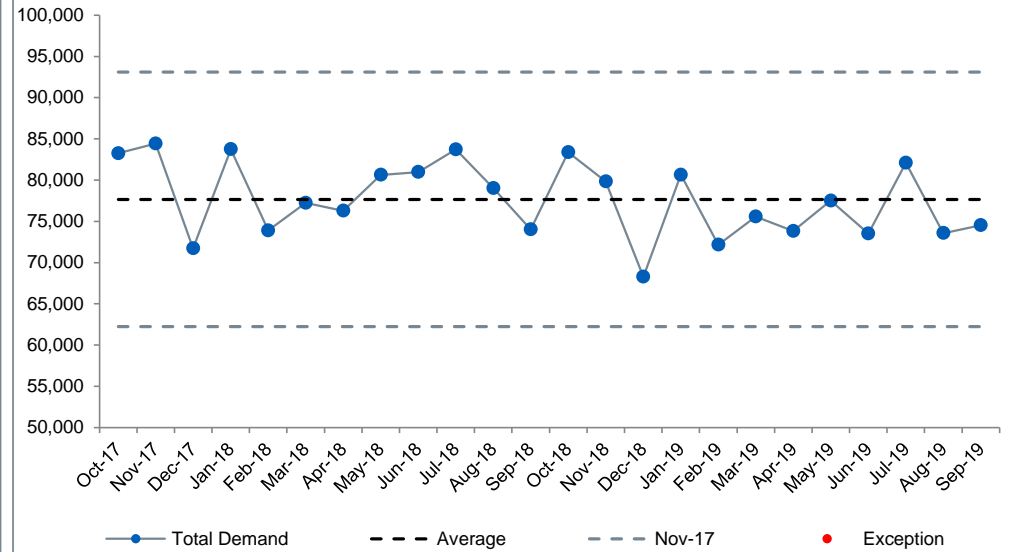
Workforce Commentary:

Sickness absence fell by 1.7% in September with a 2.4% reduction in incidents of long term absence as a result of robust managerial processes. However the significant improvement in Long Term sickness has been compromised by an increase in short term absences. Themes of musculo skeletal problems and stress, anxiety and depression feature as the issues needing to be resolved. Now the Wakefiled refurbishment is complete it is envisaged that this will support improvements in staff experience and wellbeing at work.

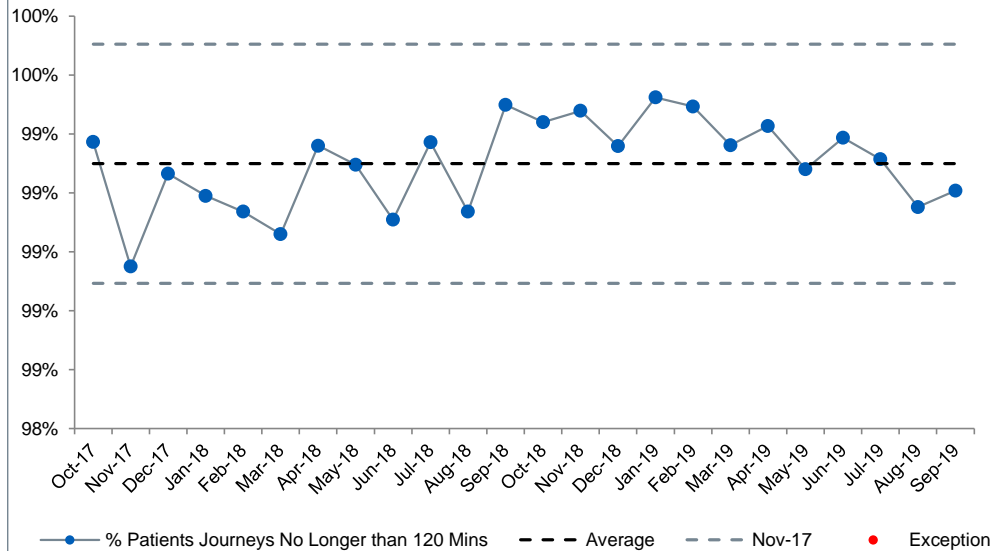
PTS Chart 1: Demand - Journeys



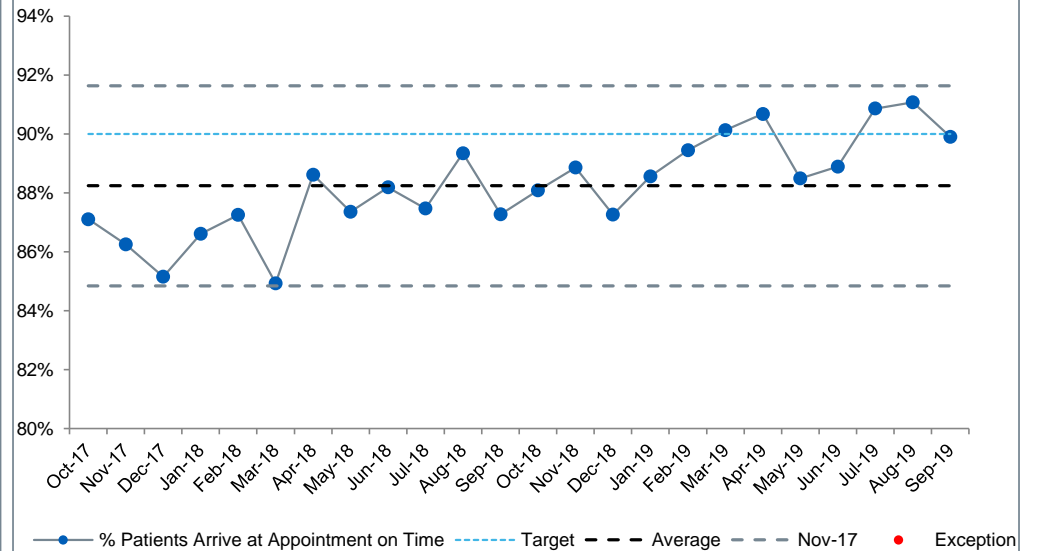
PTS Chart 2: Demand - Total Demand



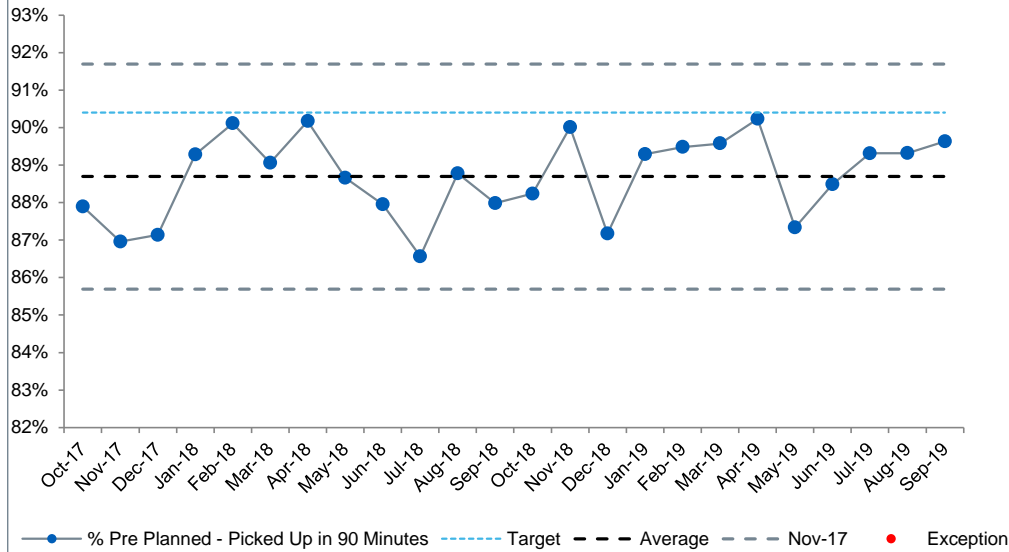
PTS Chart 3: % Patients Journeys to be no longer than 120 Minutes



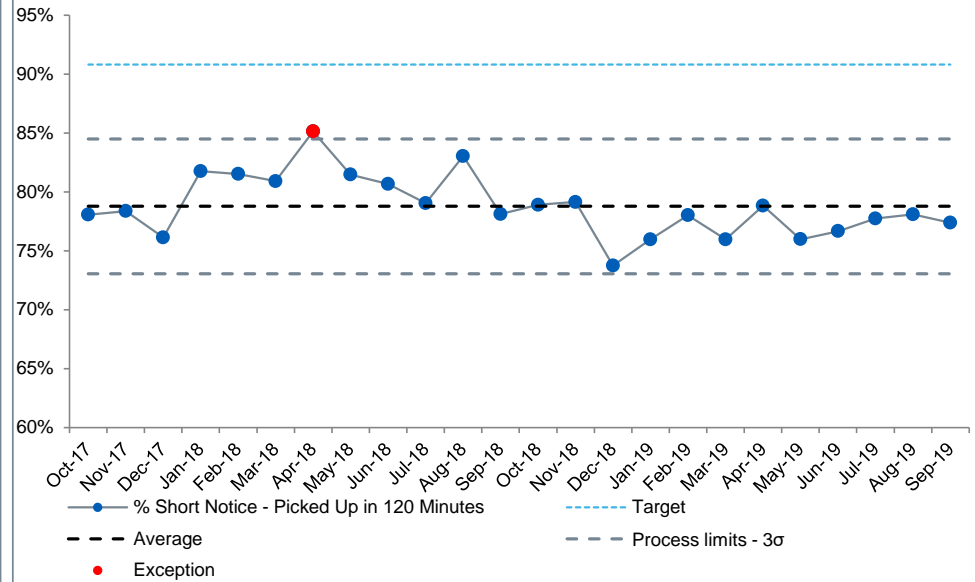
PTS Chart 4: % Patients Arrive at Appointment on Time



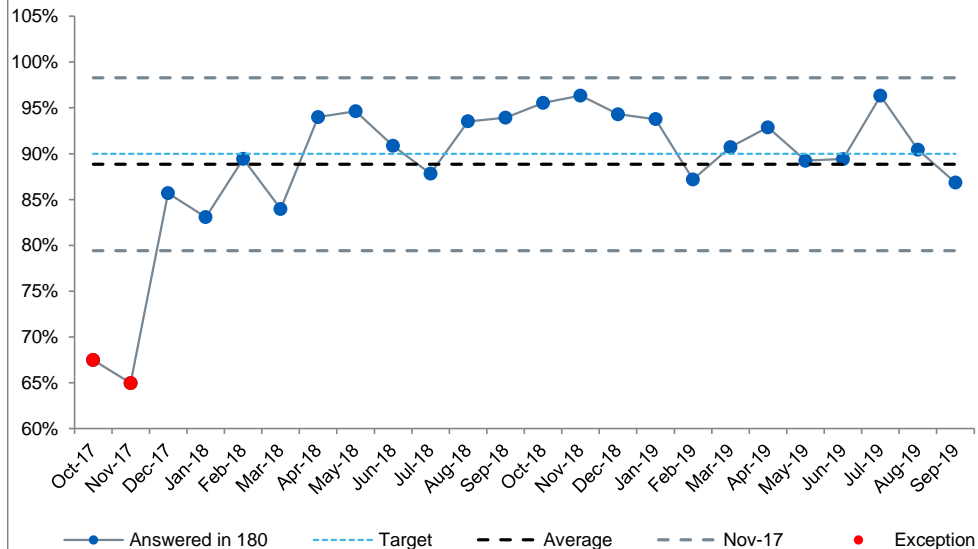
PTS Chart 5: Performance - % Pre Planned - Picked Up in 90 Minutes



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



PTS Chart 7: Telephony - Calls Answered within 180 Seconds



Performance Commentary:

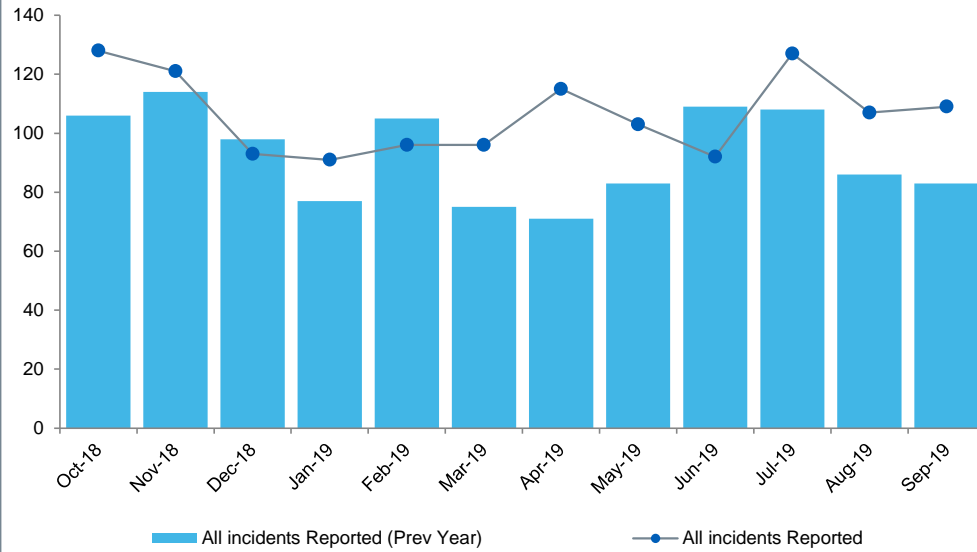
PTS September performance was in line with YTD average in all PTS performance areas.

Positive to report that PTS delivered on the KPI for patients arriving prior to appointment time. In addition PTS exceeded, met or within a % of contractual KPI target in September with the exception of:

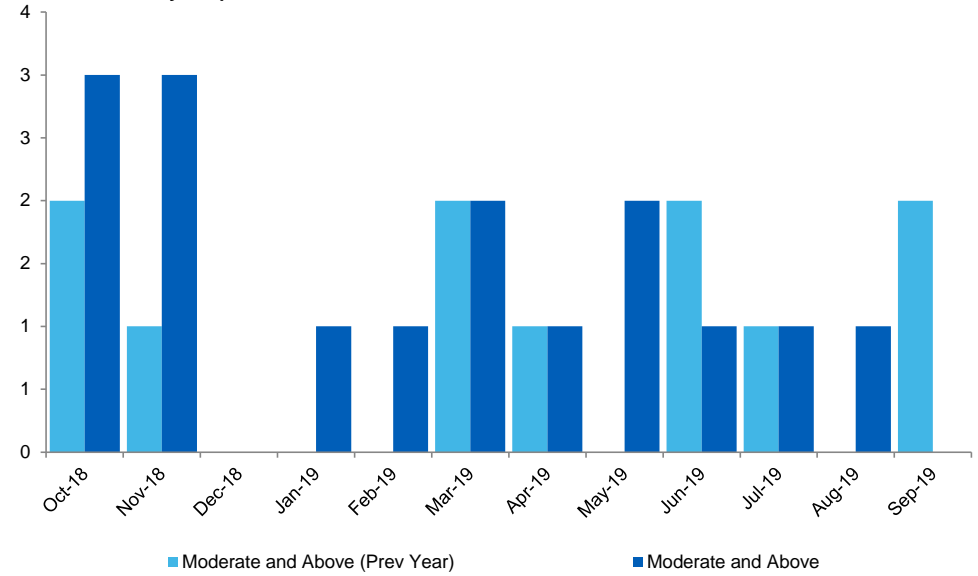
- a) Short Notice "on-day" continued to improve for the 4th successive month, but is still below blended KPI target of 88.8%
- b) Call answered within 180 seconds - 3.2% below target

*This KPI target was changed in West Yorkshire to 85% in June and achieved for the first time on record. discussion are underway with other CCG's to reach agreement on realistic "on-day" 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.

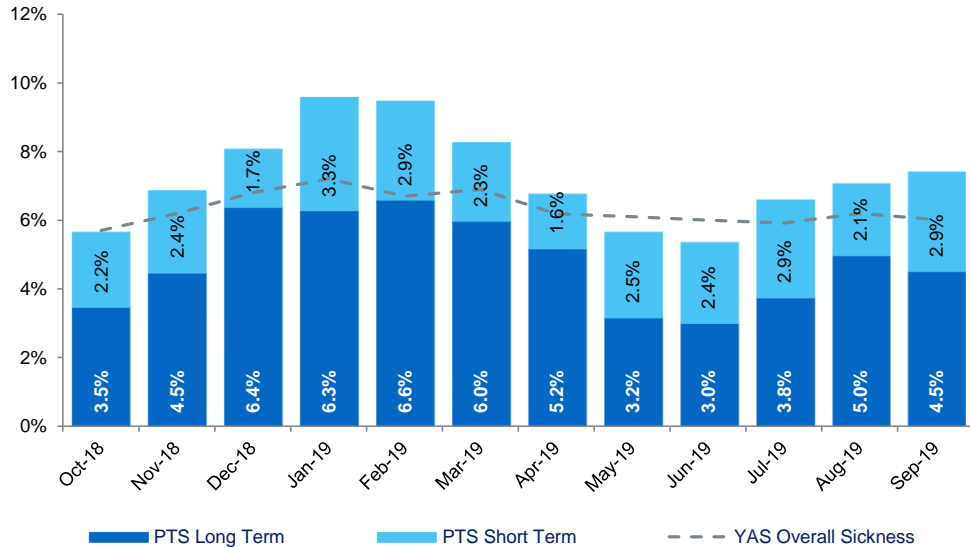
PTS Chart 8: Quality - Reported Incidents



PTS Chart 9: Quality - Reported Incidents - Moderate & Above



PTS Chart 10: Quality - Sickness



Quality Commentary:

All incidents are being managed in accordance with process and escalation as and when required via Incident Reporting Group and are monitored and reviewed at the monthly Performance Review Meetings.

For IPR there are no reported incidents for this year "moderate or above"

Workforce Commentary:

Statutory and Mandatory Workbook compliance remains well above the 90% Trust target.

PDR compliancy is well above the Trust average.

There are no exceptions to report for September staff sickness - there is a slight increase for the 4th month in a row.



National Benchmarking

Ambulance Quality Indicators

September 2019

| System (August 2019) | YAS | LOND | NWAS | EMAS | EEAS | SWAS | NEAS | WMAS | SECAMB | SCAS |
|---|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| | AMPDS | AMPDS | AMPDS | AMPDS | AMPDS | AMPDS | Pathways | Pathways | Pathways | Pathways |
| Total Incidents (HT+STR+STC) | 71,291 | 108,606 | 101,698 | 66,764 | 74,022 | 76,474 | 35,660 | 92,149 | 63,937 | 50,037 |
| Incident Proportions% | YAS | LOND | NWAS | EMAS | EEAS | SWAS | NEAS | WMAS | SECAMB | SCAS |
| C1 and C2 Incidents | 63.2% | 65.7% | 62.6% | 68.5% | 68.7% | 61.2% | 65.2% | 55.2% | 58.5% | 54.9% |
| C1 Incidents | 7.5% | 8.8% | 10.4% | 9.6% | 9.9% | 6.2% | 8.0% | 6.3% | 5.9% | 5.5% |
| C2 Incidents | 55.7% | 56.9% | 52.2% | 58.9% | 58.8% | 55.0% | 57.2% | 48.9% | 52.6% | 49.4% |
| C3 Incidents | 17.9% | 21.0% | 21.1% | 17.7% | 16.3% | 24.4% | 21.0% | 33.8% | 31.5% | 29.6% |
| C4 Incidents | 3.6% | 2.4% | 4.1% | 1.1% | 2.7% | 1.8% | 1.1% | 1.5% | 0.7% | 1.7% |
| HCP 1-4 Hour Incidents | 9.2% | 3.0% | 2.9% | 4.8% | 3.3% | 3.8% | 6.1% | 5.3% | 3.6% | 6.2% |
| Hear and Treat | 6.1% | 6.7% | 7.1% | 7.9% | 6.3% | 5.9% | 5.4% | 3.9% | 5.8% | 7.7% |
| Performance | YAS | LOND | NWAS | EMAS | EEAS | SWAS | NEAS | WMAS | SECAMB | SCAS |
| C1-Mean response time (Target 00:07:00) | 00:06:58 | 00:06:41 | 00:07:24 | 00:07:34 | 00:07:55 | 00:07:11 | 00:06:39 | 00:07:00 | 00:07:35 | 00:07:15 |
| C1-90th centile response time (Target 00:15:00) | 00:12:02 | 00:11:13 | 00:12:27 | 00:13:36 | 00:14:30 | 00:13:20 | 00:11:29 | 00:12:11 | 00:13:56 | 00:13:06 |
| C2-Mean response time (Target 00:18:00) | 00:18:26 | 00:18:27 | 00:24:06 | 00:28:34 | 00:27:22 | 00:30:04 | 00:29:49 | 00:13:09 | 00:18:51 | 00:18:40 |
| C2-90th centile response time (Target 00:40:00) | 00:37:32 | 00:37:09 | 00:51:32 | 00:58:37 | 00:56:32 | 01:02:51 | 01:01:39 | 00:24:10 | 00:35:49 | 00:38:31 |
| C3-90th centile response time (Target 02:00:00) | 01:33:37 | 02:16:02 | 03:07:42 | 03:29:12 | 03:49:55 | 03:14:14 | 04:13:16 | 01:49:15 | 03:17:42 | 02:13:42 |
| C4-90th centile response time (Target 03:00:00) | 01:28:16 | 03:01:50 | 03:29:27 | 02:55:35 | 03:38:18 | 03:34:50 | 03:31:55 | 02:55:44 | 04:34:31 | 02:46:18 |
| Proportion of All incidents | YAS | LOND | NWAS | EMAS | EEAS | SWAS | NEAS | WMAS | SECAMB | SCAS |
| Incidents with transport to ED | 59.8% | 58.1% | 58.8% | 62.8% | 58.3% | 53.5% | 58.3% | 54.5% | 61.1% | 53.3% |
| Incidents with transport not to ED | 9.2% | 6.7% | 5.9% | 4.5% | 2.4% | 4.7% | 10.3% | 6.7% | 1.2% | 6.0% |
| Incidents with face to face response | 25.0% | 28.5% | 28.1% | 24.8% | 33.0% | 35.9% | 25.9% | 34.9% | 31.9% | 33.1% |

| Clinical (April 2019) | YAS | LOND | NWAS | EMAS | EEAS | SWAS | NEAS | WMAS | SECAMB | SCAS |
|---|-------|-------|-------|-------|-------|-------|----------|----------|----------|----------|
| | AMPDS | AMPDS | AMPDS | AMPDS | AMPDS | AMPDS | Pathways | Pathways | Pathways | Pathways |
| ROSC | 31.8% | 36.2% | 31.5% | 26.6% | 34.0% | 38.7% | 28.1% | 30.6% | 23.7% | 21.2% |
| ROSC - Utstein | 64.1% | 62.1% | 56.8% | 44.4% | 67.3% | 60.9% | 44.4% | 55.6% | 58.1% | 73.9% |
| Cardiac - Survival To Discharge | 13.8% | 9.2% | 5.7% | 6.8% | 13.0% | 12.3% | 5.3% | 10.3% | 7.0% | 22.9% |
| Cardiac - Survival To Discharge Utstein | 45.2% | 29.6% | 23.5% | 21.2% | 40.4% | 35.6% | 17.6% | 35.7% | 32.3% | 42.9% |

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