



Integrated Performance Report

June 2020

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).

<p>Improvement Model Ambulance (July 2019)</p>	<p>Single Oversight Framework Score</p> <p>2</p>	<p>Inspected and rated</p> <p>Good</p> <p> Care Quality Commission</p>
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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. As part of the Trust's planning for recovery and re-setting the Transformation Programme is under review.

Service Delivery & Integrated Workforce

AMBER

A&E Trajectory: deployment rates strong during April-June, contributing to good performance. Planning ongoing for remainder of the year, including modelling and forecasting across various potential scenarios relating to levels of Covid-19 infection.

Integrated Workforce: Route map outlining the governance and accountability structure for the Trusts Integrated Workforce programme has been developed. The route map includes all projects that align to and inform the Trust's integrated workforce programme including; Team Based Working, Rotational Paramedics, Total Transport and the Clinical Hub Integration. Key developments include; a schedule of activity, benefits and outcome measures, and interdependencies across the workforce programme.

EOC Hear and Treat (H&T): practice innovations (e.g. digital / video triage) led to an increase in Hear and Treat rates during the initial COVID response in March and April (and attracted positive feedback from staff and patients). Hear and Treat rates have since dropped back towards pre-COVID levels (7.9% in May, 7.6% in June).

YAS Total Transport: a change request has been approved to pause the project due to resource constraints arising from Covid-19 response activity. Background work will continue, including collation of lessons learned and practice innovations arising from the Covid response.

Integrated Clinical Advice Service (CAS), EOC and 111: Structured programme of work paused during Covid response phase but is now re-commencing, with alignment to wider system plans for implementation of Talk Before You Walk/NHS111 First. Initial scope endorsed but will be reviewed along with more detailed work has commenced on options, timeline, sequencing and benefits modelling. Learning and innovations regarding integrated working during Covid response will be captured and fed in to programme planning.

Team Based Working: project progressing but at reduced pace due to Covid response work. The organisational change policy and job descriptions that are in development are both key enablers to progress this work. There have been slight changes to the original concept on roles.

Paramedic Recruitment: proposal developed to pursue international recruitment activity but this is dependent on Covid restrictions

Place Based Care

AMBER

Mental Health Programme – Programme and majority of projects are paused as leads are currently redeployed to support the Trusts strategic response to Covid19. Activity will resume following recovery and return to BAU. The Mental Health Five Year Forward View will focus on investment in:

1. Mental health professionals in ambulance control rooms to triage and support other mental health specific initiatives and capacity in ambulance services.
2. Increase mental health training and education of ambulance staff.
3. Dedicated mental health response vehicles to increase capacity to respond in a more timely manner and in a more suitable vehicle.

Ageing Well Programme – Majority of projects are currently on hold due to the COVID19 incident and it has been agreed that recovery will focus on Falls and Care Homes for the next few months.

999 Academy Aspire – Activity is currently paused due to COVID19. The programme is in its second year and an evaluation undertaken in April 2020 shows that it has delivered on budget with good session feedback. Two proposals which involve partnership work with the Police and Fire Services are being explored for future programme activity.

Volunteering and Public Health – Population health management data is being developed and monitored to support system approaches to future healthcare requirements. Discussions are underway with Integrated Care Systems to mitigate the wider socio-economic impacts of the pandemic.

Patient Advocacy: The Leeds project is paused from a recruiting patients perspective due to COVID19 but we are continuing to scope and make amendments from lessons learnt so far. We are continuing to put mechanisms in place to restart post recovery and exploring how patient held plans may be adapted and used in the current incident to support individual patient plans in Sheffield.

Infrastructure

AMBER

ePR: Phase 2 of the project now closed. Phase 3 ready to start, which contains a series of system developments and enhancements

Unified Comms: 'Go Live date' deferred to Sept / Oct.

Agile working (scanning solution): Work underway to scope a target operating model for a corporate electronic document scanning and storage solution, linked as appropriate to MS 365 implementation.

Benefits realisation: The Programme Board has initiated a review to focus on benefits realisation and alignment of disparate initiatives relating to digital and agile working developments ensuring a more focused approach to the 2020/21 overall programme. MIH consultancy has been commissioned to provide support on a benefits realisation piece on Microsoft 365 and Unified Comms. Workshops will be held to revisit and refresh the proposed benefits, and agree a clear set of project metrics to measure impact of both MS 365 and Unified Comms.

Hub and Spoke/AVP: The formal opening of the new Doncaster Hub was scheduled to take place, 30.03.20 - this has now been postponed until a later date. Business cases for Hull and Scarborough have been presented at F&IC, 12.03.20 and Trust Board, 27.03.20

Logistics Hub: The business case for the Logistics Hub is under review. The final business case will go forward to Trust Management Group (TMG) and then Trust Board for corporate decision making.

Capacity & Capability

AMBER

Accountability Framework:

Work streams reviewed and refined with Executive leads. High performance management system added as a new work stream. Programme governance structure in place and agreed. The programme is being re-focused as a set of enablers to support wider work on organisational form.

Future Training Estates:

A number of different delivery model options have been further refined from the January C&C Board meeting. Options appraisal results and recommendations have been presented to C&CPB prior to consideration by TEG in July.

Staff Engagement Platform:

Procurement of a QI staff ideas platform to support ideas and innovation management across the Trust has taken place. The one year pilot is underway. The platform - Simply Do Ideas - launched in May and an early focus is on staff well being and the general capture of 'bright ideas' with additional 'challenges' being added in discussion with different department leads.



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

- Ongoing YAS engagement with system level planning around Phase 3 Recovery Plans.
- Further analysis being undertaken across each ICS to understand capacity and resource requirements until March 2021.
- Regional engagement with CCG leads to develop principles and priorities for a regional approach to NHS111 response, supporting wider system capacity and flow.
- YAS engagement in wider planned care forums to ensure YAS service offers remain appropriate and effective.
- ICS level programmes have been reviewed to establish those that can be accelerated, continued, paused or stopped, in response to COVID-19; seeking to maximise impact and seek opportunities to redeploy resources.
- ICS plans are being developed around phasing key services back on stream – YAS engaged in these programmes.
- Public health data being utilised to support decision making; particularly around key impacted areas and population groups.

Service Line	Indicator ID	Exception Commentary
PTS		<p>A number of operational and corporate metrics have been impacted by the covid-19 response. A full review of the performance metrics will be completed and appropriate recovery plans and trajectories agreed as part of the Trust's overarching COVID-19 recovery plan.</p>
A+E		
EOC		
FINANCE	019 020	<p>In line with COVID-19 Financial Regime the Trust is in a breakeven position at M2. A full review of financial metrics will be undertaken and aligned to the Trust's overarching COVID-19 recovery plan.</p>

Patients & Communities

June 2020

Indicator ID	Key Operational Standard Description	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jun-20				
														Target / Forecast	Actual	Actual v Target/Fcast		
001	Integrated Urgent Care	Calls Offered	136,129	134,814	126,624	137,427	156,871	175,308	144,564	148,175	308,185	175,235	153,686	133,386	128,644	133,386	▲	
		Call Answered	121,263	121,422	115,557	122,183	132,591	160,403	135,455	135,463	155,346	143,075	141,878	127,239		127,239		
		Calls Answered within 60 Seconds	84.1%	86.8%	89.0%	81.7%	75.8%	83.1%	90.7%	85.0%	26.2%	67.3%	87.8%	94.8%	90%	94.8%	▲	
		Core Clinical Advice	33.4%	31.6%	31.4%	31.2%	29.5%	28.3%	30.5%	28.3%	28.2%	28.0%	30.7%	32.7%	30%	32.7%	▲	
		Clinician Called Back within 1 Hour	59.6%	62.9%	59.1%	53.2%	51.2%	56.9%	59.8%	46.6%	45.9%	71.7%	70.4%	58.1%	60%	58.1%	▼	
		Direct Bookings	44.7%	47.3%	46.6%	44.9%	44.7%	45.2%	45.8%	45.0%	35.0%	29.9%	35.1%	34.0%	30%	34.0%	▲	
		Bookings into UTC	53.9%	52.9%	54.7%	54.0%	52.2%	51.0%	56.7%	56.7%	49.0%	16.0%	15.1%	18.8%	50%	18.8%	▼	
		Bookings into IUC Treatment Centres	60.3%	60.4%	61.7%	61.2%	60.4%	60.2%	62.9%	61.6%	55.5%	48.3%	49.9%	51.4%	95%	51.4%	▼	
		ED Validations	63.0%	51.6%	53.1%	54.6%	52.1%	46.6%	50.8%	37.7%	29.9%	33.0%	35.4%	52.8%	50%	52.8%	▲	
002	EOC	Ambulance Validations	98.6%	98.9%	98.7%	97.5%	98.1%	97.8%	98.3%	90.4%	53.6%	74.3%	94.1%	97.6%	95%	97.6%	▲	
		Telephony - 999 Calls Answered	63,132	60,147	58,919	63,779	63,358	68,507	57,223	54,569	67,046	50,458	46,629	47,355		47,355		
003	A&E Operations	Telephony - 999 Calls Answered within 5 Seconds	94.5%	94.8%	95.2%	91.4%	87.6%	88.0%	94.8%	96.1%	77.6%	93.1%	97.9%	93.0%	95%	93.0%	▼	
		All Activity (H&T + STR + STC)	71,887	69,246	67,636	71,982	71,517	76,409	72,149	67,218	73,608	64,197	64,125	63,924		63,924		
		Hear & Treat (H&T)	6.7%	6.0%	6.0%	6.5%	7.3%	8.5%	6.5%	7.2%	12.6%	9.8%	7.9%	7.6%		7.6%		
		See, Treat & Refer (STR)	24.2%	25.1%	24.9%	24.5%	23.9%	25.0%	25.1%	25.5%	31.0%	39.0%	33.4%	30.7%		30.7%		
		See, Treat & Convey (STC)	69.2%	68.9%	69.1%	69.0%	68.8%	66.7%	68.4%	67.3%	56.4%	51.2%	58.7%	61.7%		61.7%		
		999 Responses (STR + STC)	67,106	65,078	63,537	67,273	66,263	70,017	67,446	62,407	64,362	57,916	59,083	59,057	70,509	59,057	▼	
		Category 1	Mean	00:06:54	00:06:50	00:06:58	00:07:19	00:07:29	00:07:46	00:06:54	00:07:11	00:08:00	00:07:17	00:07:11	00:06:59	00:07:00	00:06:59	▼
			90th Percentile	00:12:11	00:11:53	00:12:02	00:12:31	00:12:46	00:13:15	00:11:54	00:12:32	00:13:23	00:12:32	00:12:17	00:12:13	00:15:00	00:12:13	▼
		Category 2	Mean	00:18:17	00:17:04	00:18:26	00:21:50	00:23:10	00:27:12	00:17:54	00:18:49	00:23:53	00:15:15	00:12:23	00:13:32	00:18:00	00:13:32	▼
			90th Percentile	00:37:26	00:34:21	00:37:32	00:45:13	00:49:00	00:58:00	00:36:33	00:38:24	00:48:52	00:29:13	00:22:35	00:25:24	00:40:00	00:25:24	▼
Category 3	90th Percentile	01:42:47	01:26:58	01:33:37	02:09:51	02:18:59	02:56:46	01:31:25	01:45:20	02:14:44	00:59:24	00:45:53	00:56:19	02:00:00	00:56:19	▼		
Category 4	90th Percentile	04:01:23	02:47:17	02:41:57	03:00:32	02:38:08	03:18:01	02:15:18	02:19:03	02:54:15	01:52:54	01:36:45	01:45:04	03:00:00	01:45:04	▼		
	Average Turnaround Time	00:36:40	00:35:54	00:36:20	00:36:14	00:38:03	00:41:00	00:39:22	00:36:49	00:37:24	00:37:11	00:36:05	00:35:35	00:30:00	00:35:35	▲		
	Average Job Cycle Time (Responses)	01:55:44	01:52:44	01:52:53	01:57:12	02:01:54	02:07:07	01:54:19	01:54:48	01:57:51	01:43:52	01:41:46	01:45:08		01:45:08			
004	PTS	Journeys	82,095	73,568	74,545	81,442	75,033	69,065	78,620	72,004	63,751	30,448	37,068	44,138	73,554	44,138	▼	
		Patient Journeys < 120 Minutes	99.3%	99.2%	99.2%	99.1%	99.0%	99.2%	99.5%	99.5%	99.4%	99.4%	98.7%	98.5%	90.0%	98.5%	▲	
		Patients Arrive at Appointment on Time	90.9%	91.1%	89.9%	89.5%	88.0%	88.7%	90.2%	88.9%	91.0%	93.2%	92.8%	92.5%	90.0%	92.5%	▲	
		% Pre Planned - Picked Up in 90 Minutes	89.5%	90.5%	89.8%	90.3%	89.4%	89.4%	89.7%	90.3%	93.0%	97.9%	97.4%	96.9%	90.4%	96.9%	▲	
		% Short Notice - Picked Up in 120 Minutes	77.8%	79.4%	77.5%	75.9%	74.3%	73.0%	71.9%	74.5%	81.0%	89.4%	93.8%	93.8%	88.8%	93.8%	▲	
	Calls Answered within 180 Seconds	96.3%	90.4%	86.8%	91.8%	93.3%	94.3%	88.2%	93.0%	88.2%	97.9%	99.4%	95.3%	90.0%	95.3%	▲		

Indicator ID	Key Operational Standard Description	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
005	ACQI	% Received STEMI Bundle	53.1%			40.0%				58.7%		N/A	
		% Received Stroke Diagnostic Bundle		93.4%				95.9%			83.6%		N/A
		% Received Sepsis Care Bundle			60.9%				72.7%			N/A	

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

Our People

June 2020

Indicator ID	Key Operational Standard Description	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jun-20				
														Target / Forecast	Actual	Actual v Target/Fcast		
006	Workforce	Total FTE in Post	4,675	4,690	4,727	4,732	4,773	4,753	4,759	4,777	4,836	4,898	4,924	4,993				
		BME %	5.0%	5.0%	5.1%	5.2%	5.1%	5.1%	5.1%	5.3%	5.3%	5.2%	5.3%	5.4%	11.1%	5.4%	▼	
007	Recruitment	New Starters (FTE)	49.6	56.6	92.9	62.3	53.1	13.3	44.6	42.1	89.1	104.3	41.8	60.1		60.1		
008	Turnover (FTE)	YAS (Rolling 12 Month Periods)	9.9%	10.0%	9.9%	9.7%	10.1%	9.7%	9.7%	9.2%	9.2%	8.7%	8.4%		8.4%			
009	PDR / Staff Appraisals	YAS	71.7%	74.6%	76.6%	77.6%	76.4%	75.7%	74.6%	75.9%	71.6%	65.5%	64.6%	66.3%	90.0%	66.3%	▼	
		A&E Operations	72.2%	76.2%	77.9%	80.2%	80.5%	78.8%	78.3%	78.8%	74.8%	68.2%	63.4%	65.8%	90.0%	65.8%	▼	
		EOC	63.8%	60.6%	61.1%	67.0%	65.1%	67.1%	68.7%	68.5%	65.3%	63.9%	69.4%	71.8%	90.0%	71.8%	▼	
		Integrated Urgent Care	75.6%	76.1%	70.9%	67.5%	63.0%	60.8%	56.2%	65.0%	58.6%	58.1%	81.5%	89.6%	90.0%	89.6%	▼	
		PTS	78.3%	83.0%	90.9%	89.1%	86.2%	88.4%	86.9%	87.7%	82.9%	74.5%	80.3%	79.9%	90.0%	79.9%	▼	
010	Training: Stat & Mand (Substantive Employees)	YAS	98.3%	98.2%	98.3%	98.4%	98.0%	97.6%	97.2%	97.6%	97.4%	Stat Mand Reporting is currently under review				90.0%		
		A&E Operations	98.7%	98.6%	98.9%	99.0%	98.6%	98.2%	97.8%	97.9%	97.8%					90.0%		
		EOC	97.5%	97.2%	98.5%	97.7%	97.7%	97.4%	96.5%	98.3%	98.0%					90.0%		
		Integrated Urgent Care	98.6%	98.6%	98.7%	98.7%	98.2%	96.1%	95.7%	97.1%	96.7%					90.0%		
		PTS	99.7%	99.6%	99.5%	99.5%	99.6%	100.0%	100.0%	100.0%	100.0%					90.0%		
011	Health & Wellbeing	Total Sickness Rate	5.9%	6.2%	6.0%	6.5%	6.5%	7.1%	6.5%	6.0%	8.4%	8.8%	6.9%	6.2%		6.2%		
		Long Term Sickness Rate	3.6%	3.9%	3.8%	4.0%	3.7%	4.3%	3.8%	3.6%	3.8%	3.8%	4.0%	3.9%		3.9%		
		Short Term Sickness Rate	2.3%	2.3%	2.3%	2.6%	2.8%	2.8%	2.7%	2.5%	4.6%	5.0%	2.9%	2.3%		2.3%		

Indicator ID	Key Operational Standard Description	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jun-20				
														Target / Forecast	Actual	Actual v Target/Fcast		
012	Incidents	All Reported	729	605	638	666	736	735	801	739	687	524	633	716				
		Serious	6	1	1	1	6	7	2	2	4	1	1	3				
		Moderate	20	22	17	14	23	23	8	23	16	11	18	22				
		Medication Related	80	52	66	75	69	69	60	64	50	43	58	81				
013	Patient Relations	A&E	Complaint	20	22	17	19	20	13	16	16	21	17	15	25			25
			Compliment	84	107	102	88	117	102	125	109	91	82	69	87			87
			Concern	20	15	21	23	12	20	17	15	10	8	7	16			16
			Service to Service	27	16	9	26	25	16	29	23	13	21	21	18			18
		EOC	Complaint	16	7	4	11	18	12	4	6	1	6	5	9			9
			Compliment	2	2	2	0	4	2	3	3	3	1	0	0			0
			Concern	10	7	3	17	9	17	6	8	3	0	1	9			9
			Service to Service	26	10	8	13	18	23	20	5	15	2	4	4			4
		Integrated Urgent Care	Complaint	17	34	17	29	18	31	19	24	14	9	15	18			18
			Compliment	4	2	7	4	7	12	10	4	2	2	5	7			7
			Concern	2	1	2	6	3	9	2	3	1	1	3	1			1
			Service to Service	19	25	46	21	17	17	26	40	52	31	24	43			43
		PTS	Complaint	21	16	16	14	15	7	9	11	14	2	6	9			9
			Compliment	8	10	6	4	7	9	5	3	2	2	2	1			1
			Concern	29	24	28	31	23	22	24	24	24	10	3	7			7
			Service to Service	30	22	15	27	24	24	47	34	22	7	7	7			7
014	Clinical Outcomes Data	Stroke - Call to Hospital Arrival (Mean)	01:15	01:10	01:13	01:21	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A			N/A	
		Stemi - Call to Catheter Insertion for Angio (Mean)	02:12	02:17	02:03	02:06	02:18	N/A	N/A	N/A	N/A	N/A	N/A	N/A			N/A	
		ROSC (Utstein)	55.0%	54.1%	51.4%	61.1%	75.0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A			N/A	
		Survival (Utstein)	28.6%	30.0%	30.3%	34.6%	30.4%	N/A	N/A	N/A	N/A	N/A	N/A	N/A			N/A	
015	Safeguarding	Adult Referrals	986	918	887	906	1,013	1,045	1,049	947	749	833	1,054	1,030			1,030	
		Child Referrals	612	519	575	587	551	540	603	638	532	441	539	608			608	
016	Information Management	Information Governance Training Compliance	94.7%	95.0%	95.2%	95.2%	73.3%	70.3%	64.3%	72.3%	72.3%	72.8%	76.1%	81.3%	95%	81.3%	▼	
		FOI Request Compliance	42.4%	60.0%	42.5%	60.5%	32.3%	61.9%	69.7%	70.3%	57.1%	56.0%	83.3%	85.7%	90%	85.7%	▼	
017	IPC Audit	Hand Hygiene	99.0%	99.0%	98.0%	99.1%	98.3%	98.4%	99.3%	98.8%	98.9%	99.8%	100.0%	99.0%	95%	99.0%	▲	
		Premise	99.0%	99.0%	99.0%	98.9%	99.0%	96.7%	98.4%	98.3%	98.7%	98.8%	100.0%	99.0%	95%	99.0%	▲	
		Vehicle	98.0%	99.0%	99.0%	99.4%	99.1%	98.0%	98.7%	99.1%	98.4%	99.3%	99.0%	98.0%	95%	98.0%	▲	
018	CQUIN	National CCG2: Staff Flu Vaccinations															No reporting required	
		National CCG10: Ambulance – Access to Patient Information at Scene (Assurance)																No reporting required
		National CCG10B: Ambulance – Access to Patient Information at Scene (Demonstration)																No reporting required
		Local 1: Supporting the needs of complex Mental Health Patients via Teleconferencing																No reporting required
		Local 1: IUC/111 Staff Flu Vaccinations																No reporting required
		Local 2: IUC/111 Frequent Callers																No reporting required
		Local 3: IUC/111 Sepsis Awareness																No reporting required
		Local 1: PTS Vehicle Electronic Checklist App																No reporting required
		Local 1: PTS Staff Flu Vaccinations																No reporting required

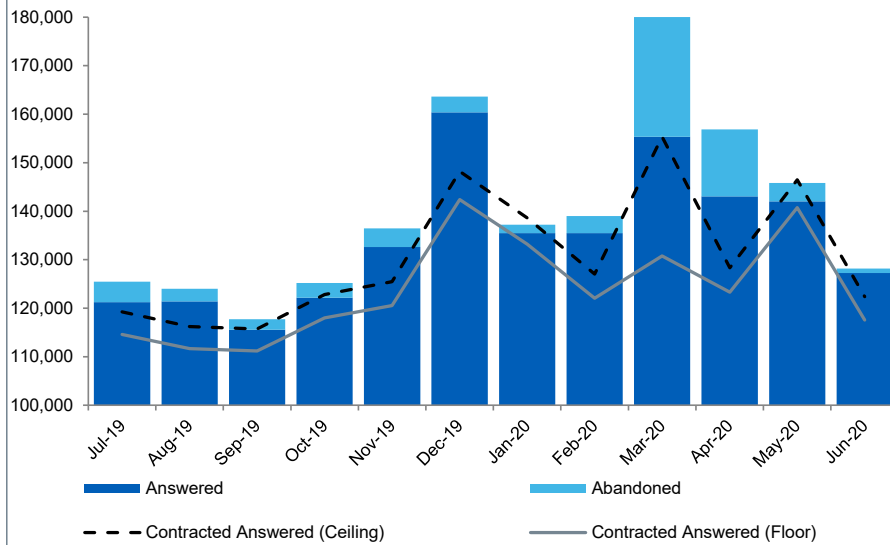
Indicator ID	Key Operational Standard Description		Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jun-20			YTD					
			Plan	Actual	Plan v Actual	Plan	Actual	Plan v Actual	Plan	Actual	Plan v Actual												
019	Finance Overview	Risk Rating	1	1	1	1	1	1	1	1	1	PLEASE SEE SUMMARY EXCEPTION	PLEASE SEE SUMMARY EXCEPTION	PLEASE SEE SUMMARY EXCEPTION									
		EBITDA	-1,861	-1,831	-1,683	-2,073	-1,315	-812	-824	-855	-998												
		Surplus	-764	-545	-605	-507	-249	238	4	240	159												
		Capital	794	1,685	379	1,152	1,889	1,947	957	2,967	4,908												
		Cash	49,253	52,397	52,816	53,688	57,627	58,179	58,364	54,700	46,201												
		CIP	525	528	560	532	532	532	582	582	623												
020	CIP	A&E	28	28	28	28	28	28	28	28	28	PLEASE SEE SUMMARY EXCEPTION	PLEASE SEE SUMMARY EXCEPTION	PLEASE SEE SUMMARY EXCEPTION									
		Business Development	0	0	0	0	0	0	0	0	0												
		CEO Directorate	-10	2	2	2	2	2	2	2	2												
		Clinical	4	2	2	2	2	2	2	2	2												
		Estates	9	5	19	19	19	19	19	19	19												
		Finance	35	36	36	36	36	36	36	36	36												
		Fleet	67	87	123	87	87	87	87	87	123												
		Planned & Urgent Care	66	66	66	67	67	74	81	81	82												
		Quality, Governance	-5	0	0	0	0	0	0	0	0												
		Hub & Spoke	0	0	0	0	0	0	0	0	0												
		Workforce OD	56	58	57	57	57	57	57	57	56												
		RESERVE	275	244	227	234	234	227	269	269	274												
		Current Position (Cumulative YTD)	2,123	528	560	532	532	532	5,387	5,969	6,592												
021	Transport/Fleet	A&E	Vehicle age +7	5.2%	5.2%	3.2%	3.3%	1.8%	3.5%	6.6%	3.5%	3.5%	6.7%	6.7%	8.9%		8.9%						
			Vehicle age +10	3.3%	3.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%		0.2%					
			Availability	90.0%	90.0%	90.2%	91.0%	91.2%	91.7%	91.2%	90.6%	90.6%	92.5%	95.9%	92.7%		95%	92.7%	▼				
		PTS	Vehicle age +7	31.0%	31.0%	16.7%	16.9%	19.4%	15.3%	10.7%	16.7%	16.7%	8.6%	8.6%	17.7%			17.7%					
			Vehicle age +10	24.1%	24.1%	24.0%	24.0%	22.5%	26.6%	36.5%	27.2%	27.2%	22.5%	22.5%	20.8%			20.8%					
		Availability	91.0%	91.0%	92.0%	90.0%	90.0%	88.0%	89.0%	89.0%	89.0%	91.9%	92.4%	93.1%		95%	93.1%	▼					



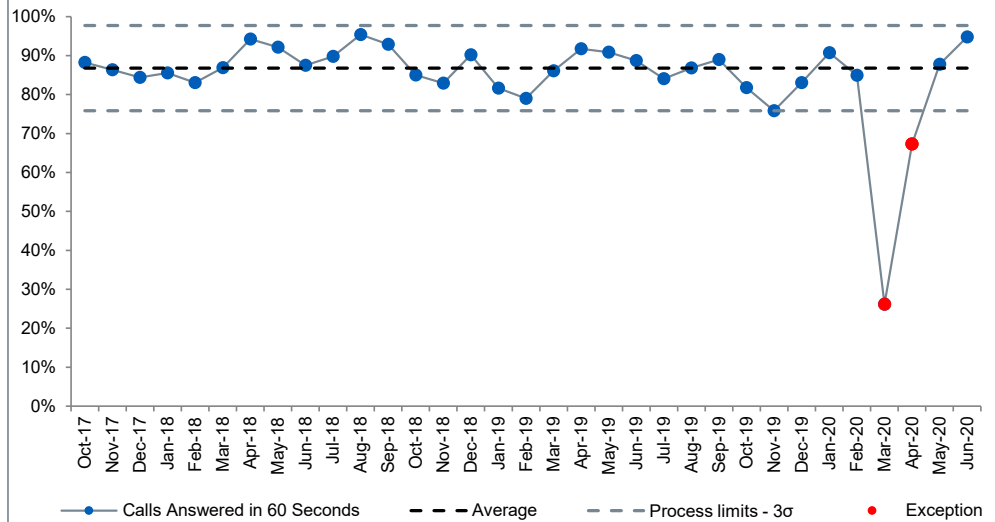
Integrated Urgent Care

June 2020

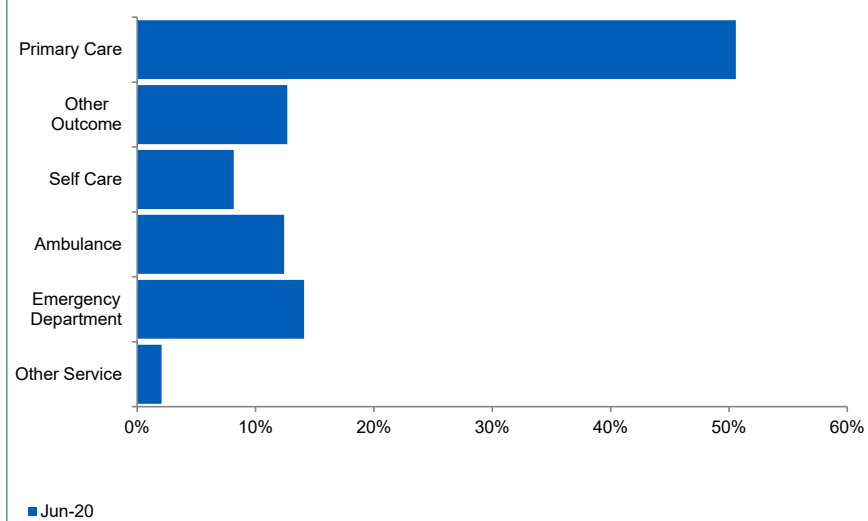
IUC Chart 1: Demand - Calls



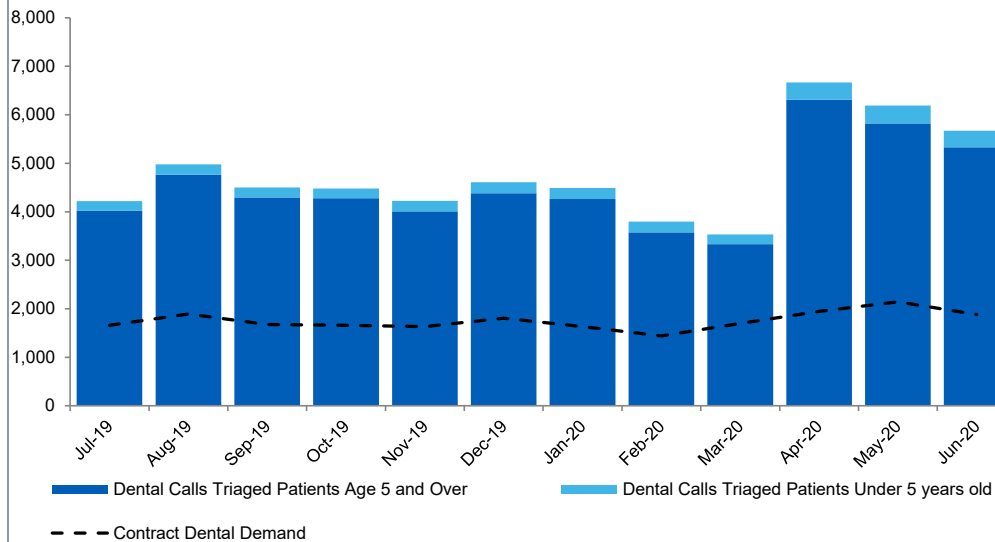
IUC Chart 2: Performance - Calls Answered in 60 Seconds



IUC Chart 3: Outcomes



IUC Chart 4: Demand - Dental





Integrated Urgent Care

June 2020

IUC Tbl1: IUC KPI's

IUC KPI's (Target)	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	YTD
Calls Answered in 60 (90%)	67.3%	87.8%	94.8%										82.8%
Core Clinical Advice (30%)	28.0%	30.7%	32.7%										30.3%
Clinician Called Back within 1 Hour (60%)	72.2%	70.3%	58.1%										67.0%
Direct Bookings * (30%)	29.9%	35.1%	34.0%										33.2%
Bookings into UTC * (50%)	16.1%	15.1%	18.8%										16.6%
Bookings into IUC Treatment Centres * (95%)	48.3%	49.9%	51.4%										49.9%
ED Validations (50%)	33.0%	35.4%	52.8%										41.1%
Ambulance Validations (95%)	74.3%	94.1%	97.6%										88.3%

** 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*

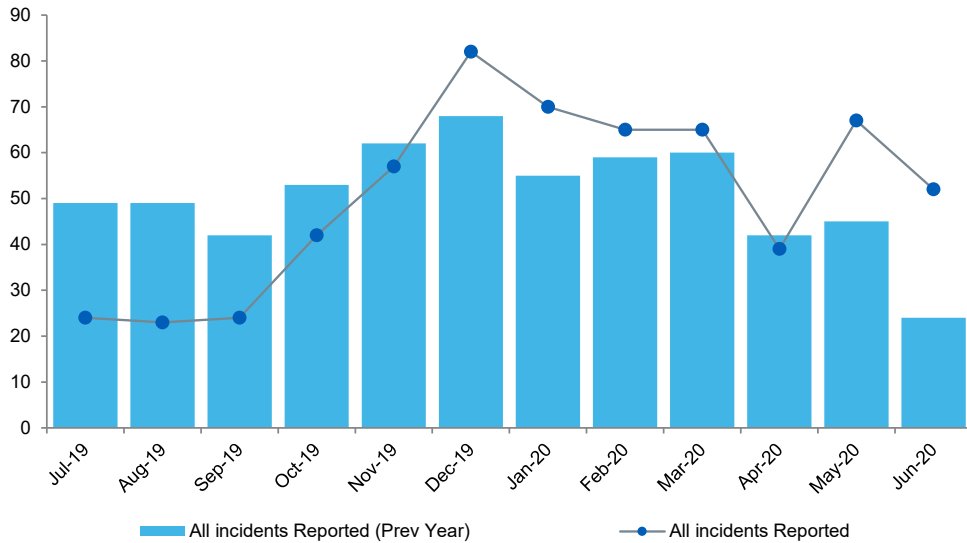
Performance Commentary:

Demand (Calls Offered) in June once again saw a reduction; down 12.2% on May. Despite this, call levels are still above the typical June, with an increase of 4.3% on last June. Our response has been to increase our levels of staffing and redeploy clinical staff from other parts of the Trust into NHS 111.

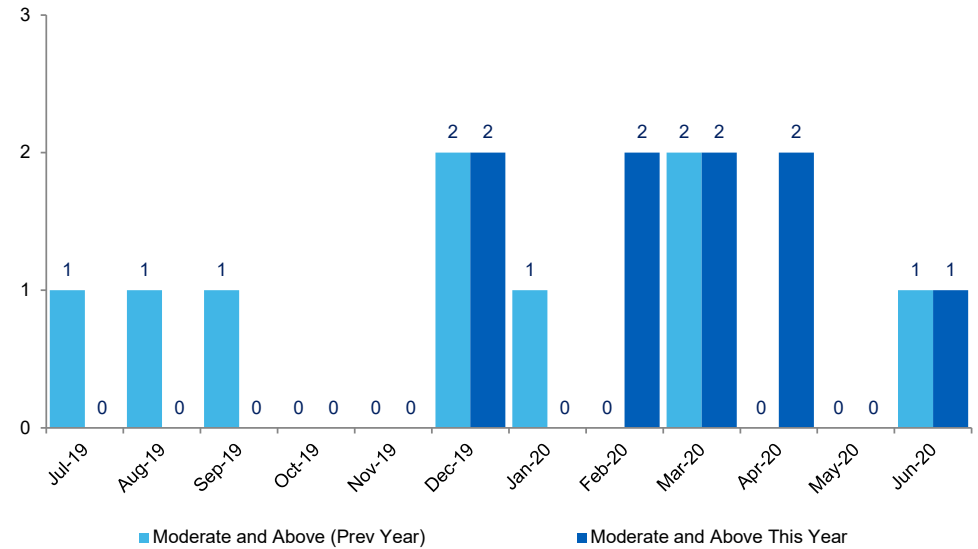
Increase in staff levels has had a positive impact on performance. Call Performance has continued to improve; up 7% on May's figure, with the proportion of calls answered in 60 seconds in June above target at 94.8%. Clinical Advice has also increased back above target for the 2nd month running, bringing the YTD figure above target. Proportion of Call Backs made within 1 hour has reduced below the target for the month but still on track year to date.

ED and Ambulance Validations have both improved to above target levels during June, however the YTD figure for both are still below target.

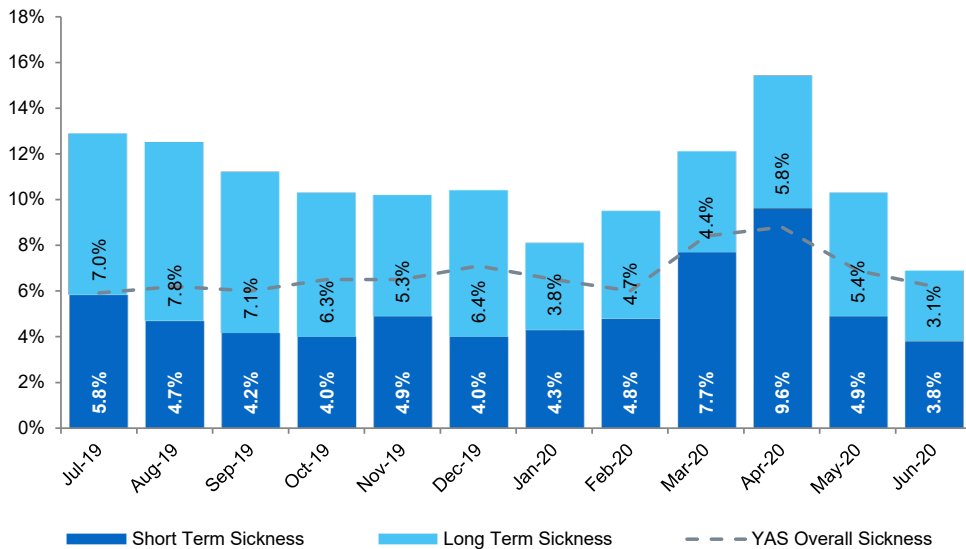
IUC Chart 5: Quality - Reported Incidents



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



IUC Chart 7: Workforce - Sickness



Quality Commentary:

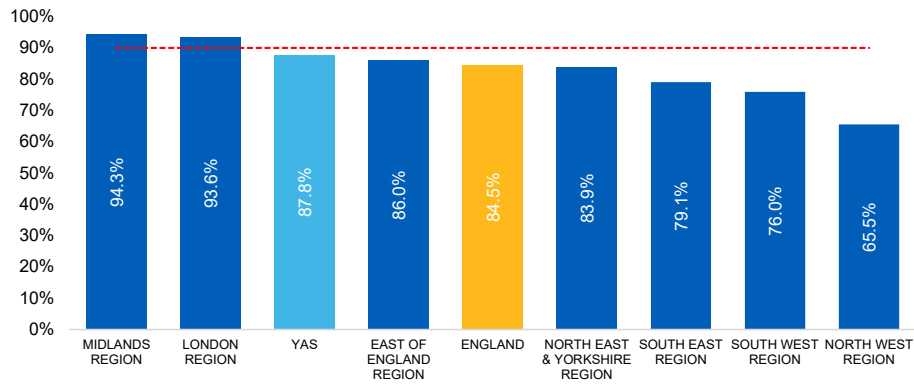
The IUC is involved in a safety review as part of the incidents, complaints and any other issues identified as learning, through the initial covid response phase one period. Recent reported incidents have reduced in June.

Workforce Commentary:

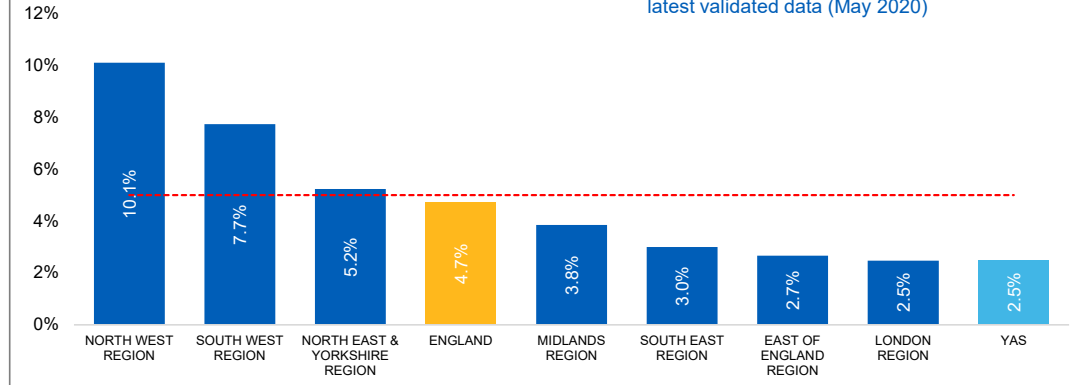
April was the peak absence time for Covid related absence in IUC, similar to other areas of the Trust. Health & Wellbeing support for staff has been in place from the Trust and shielding staff within IUC have been provided with home working solutions where possible for their roles.

Recently sickness levels have improved with June being the best month within the last 12 months.

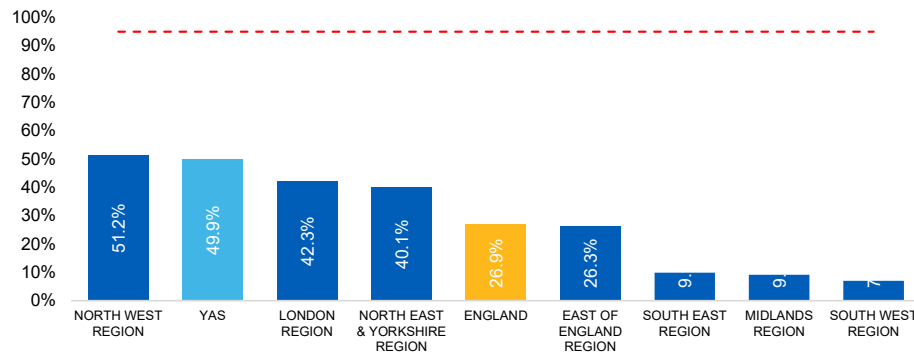
IUC Chart 8: Calls Answered in 60 seconds (90%)



IUC Chart 9: Calls Abandoned (5%)



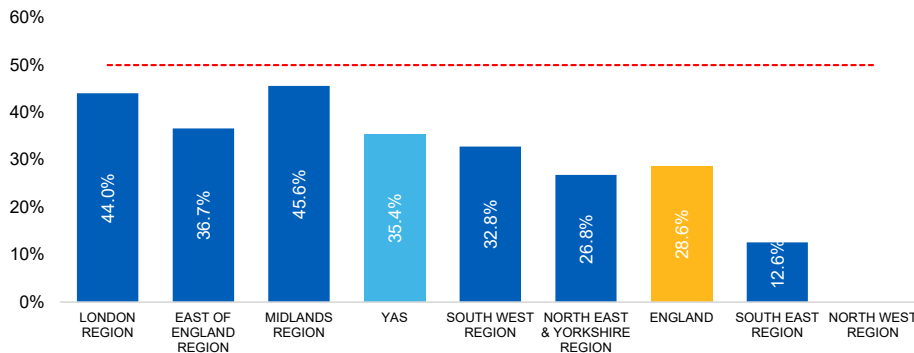
IUC Chart 10: Bookings into IUC Treatment Centres (95%)



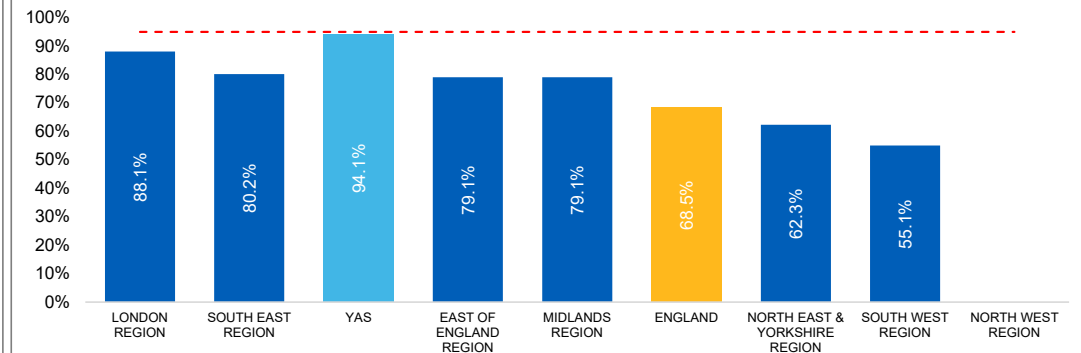
IUC Chart 11: Bookings into UTC (50%)



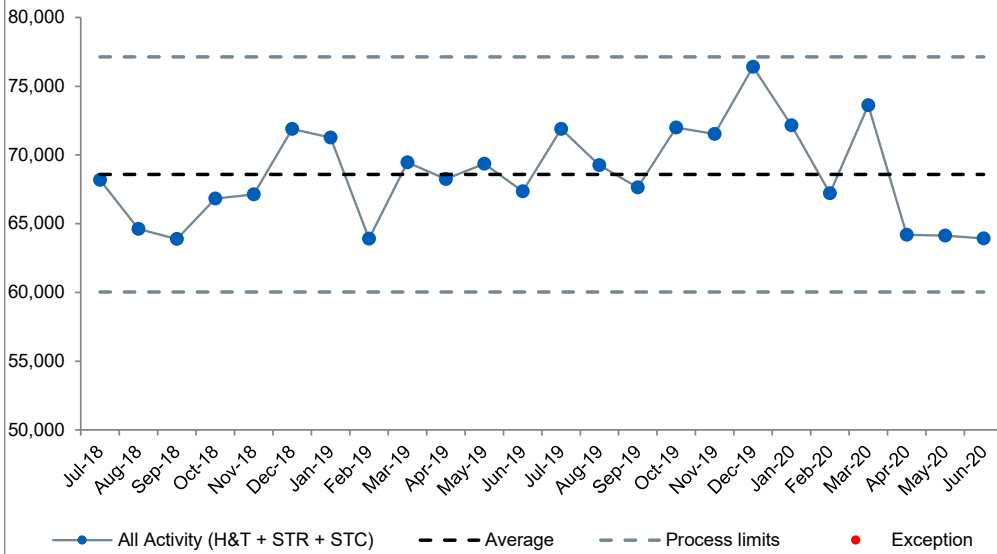
IUC Chart 12: ED Validations (50%)



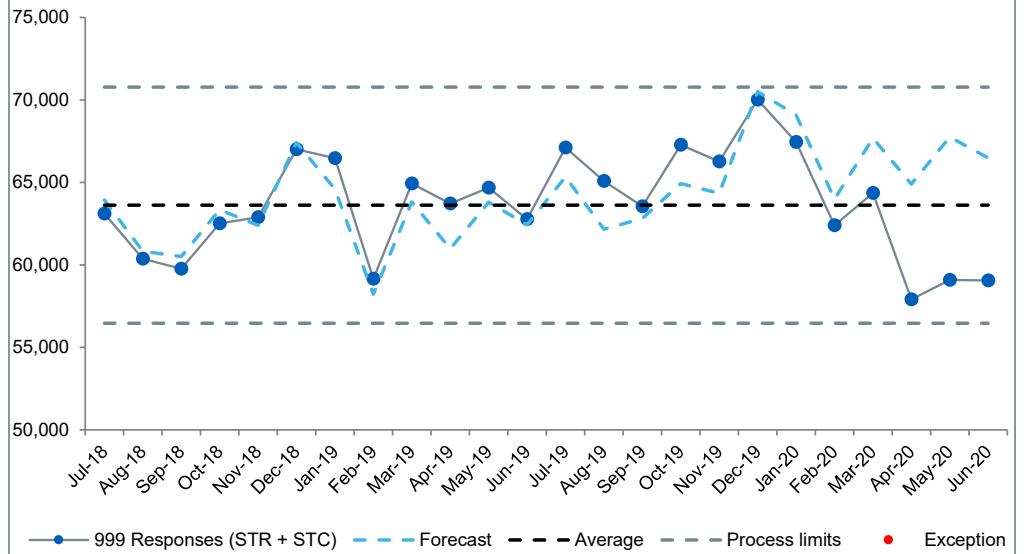
IUC Chart 13: Ambulance Validations (95%)



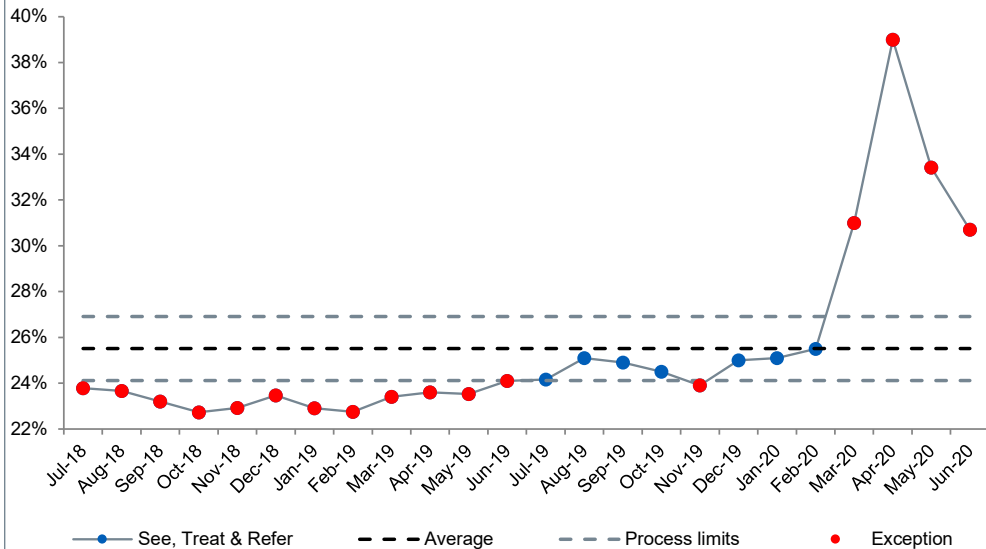
A&E Chart 1: Demand - All Activity (H&T + STR + STC)



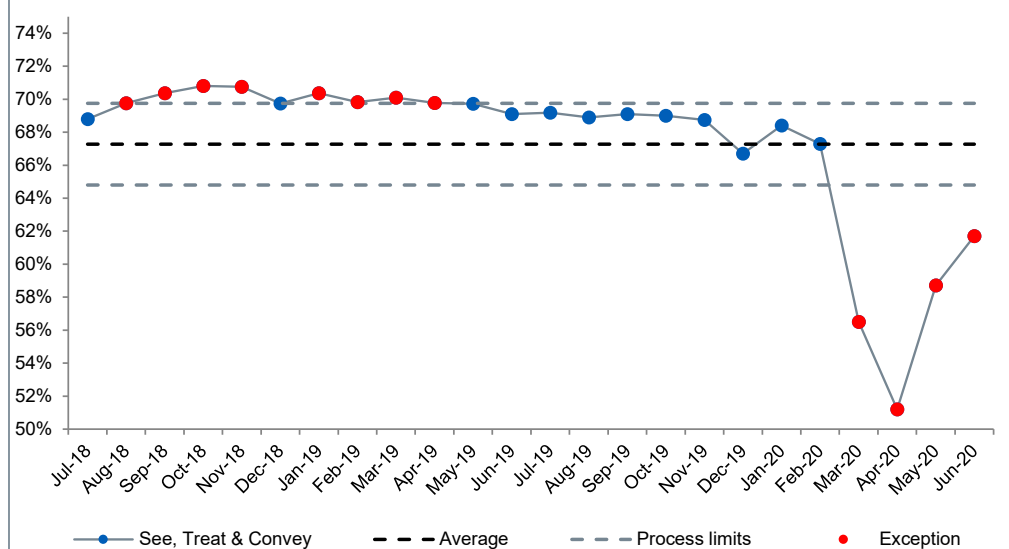
A&E Chart 2: Demand - 999 Responses (STR + STC)



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

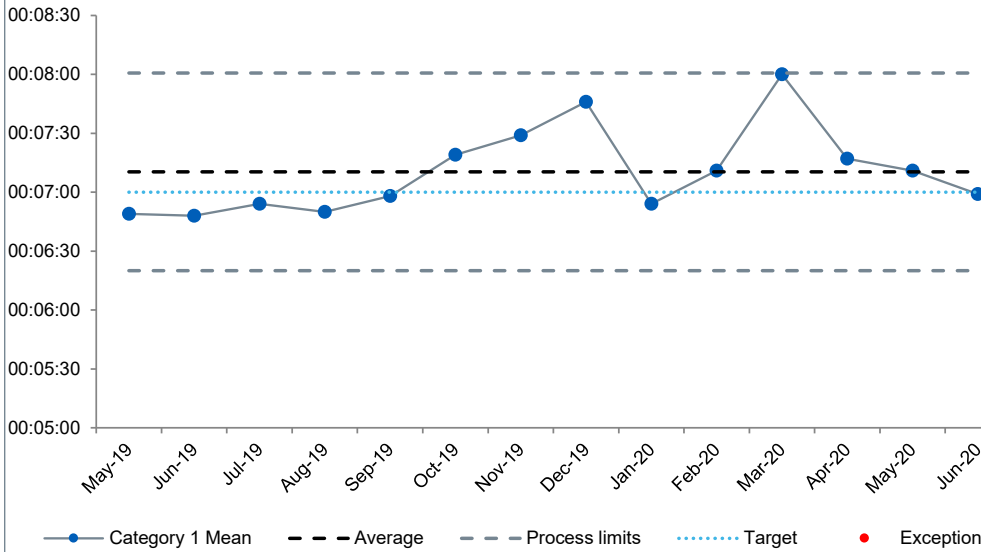


A&E Chart 4: Demand - See, Treat & Convey %



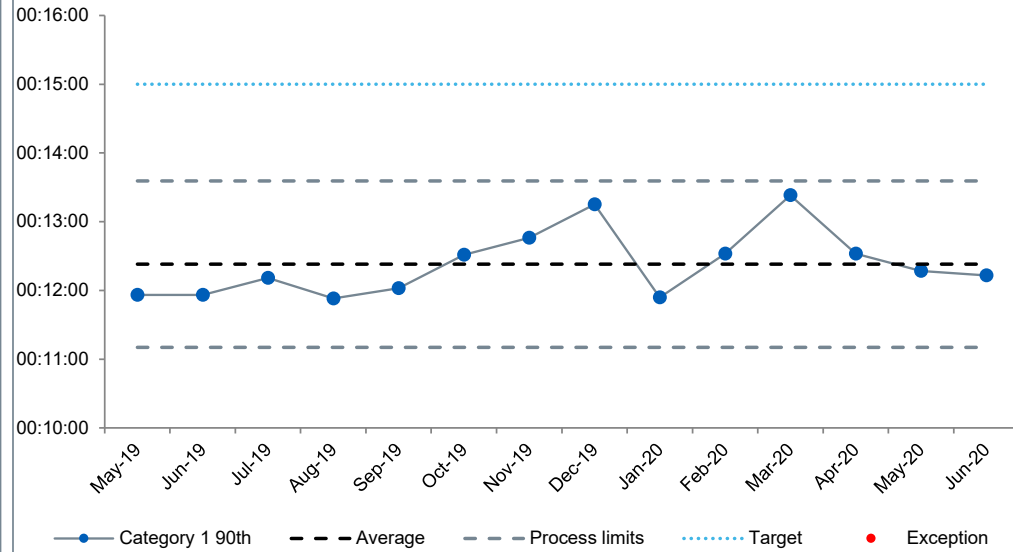
A&E Chart 5: Performance - Category 1 Mean

Year to Date **00:07:09**



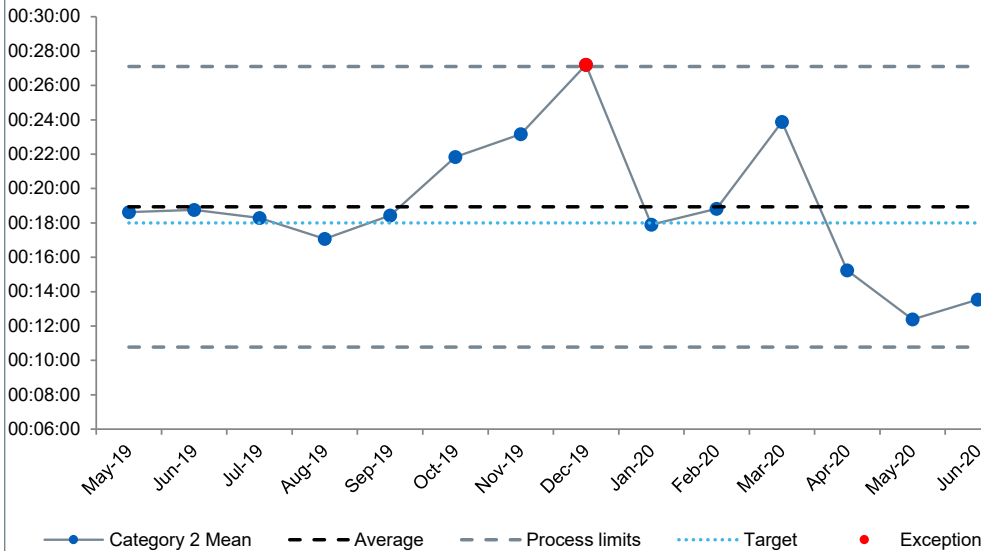
A&E Chart 6: Performance - Category 1 90th Percentile

Year to Date **00:12:21**



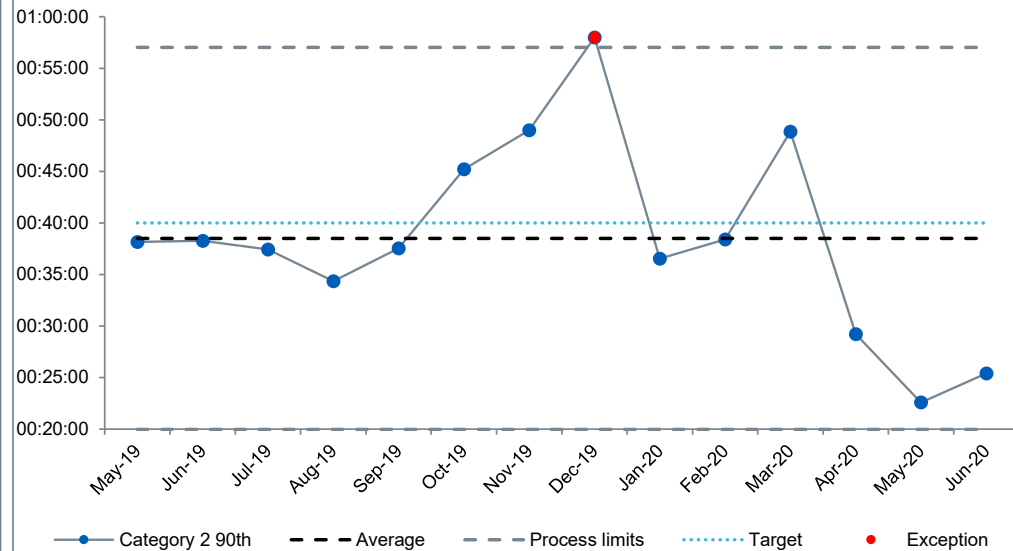
A&E Chart 7: Performance - Category 2 Mean

Year to Date **00:13:42**



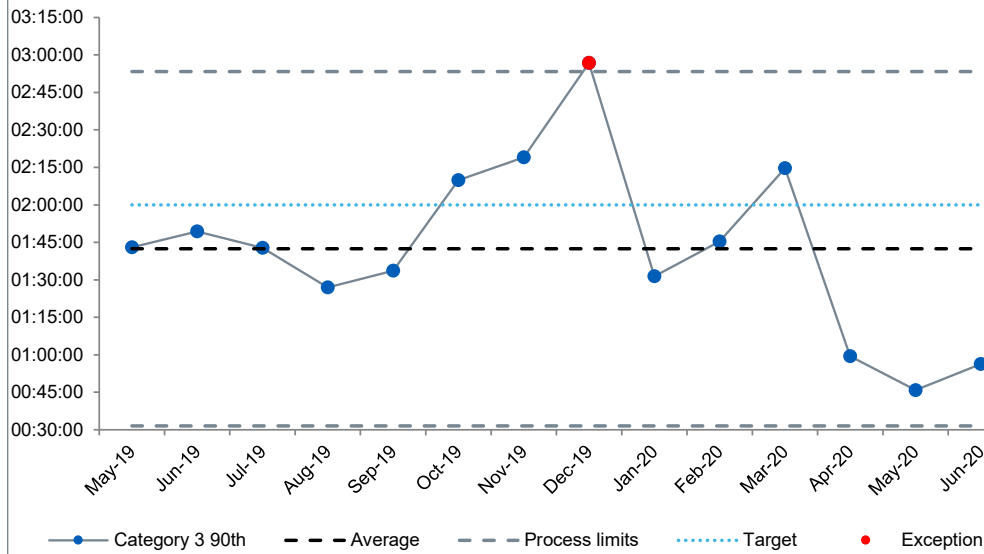
A&E Chart 8: Performance - Category 2 90th Percentile

Year to Date **00:25:30**



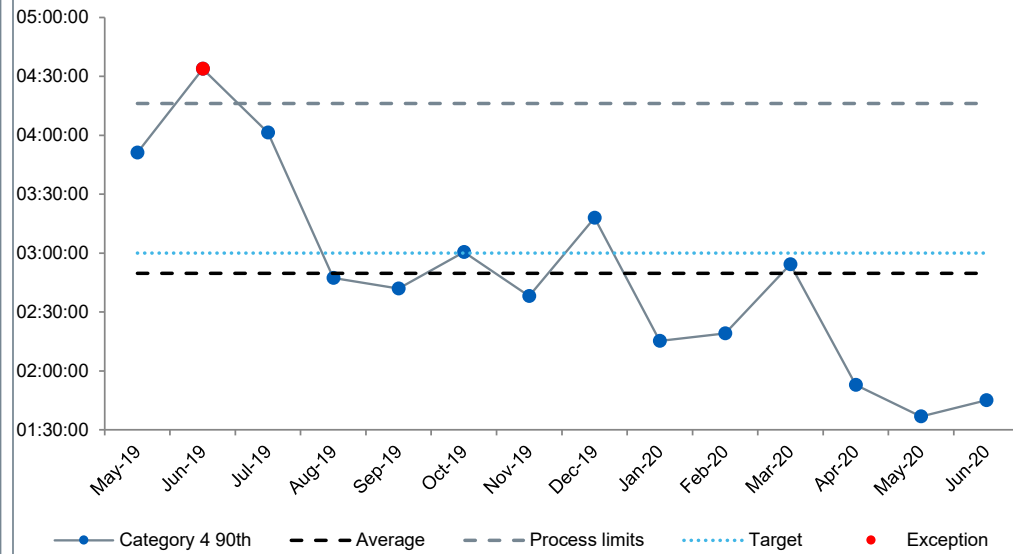
A&E Chart 9: Performance - Category 3 90th Percentile

Year to Date **00:53:42**

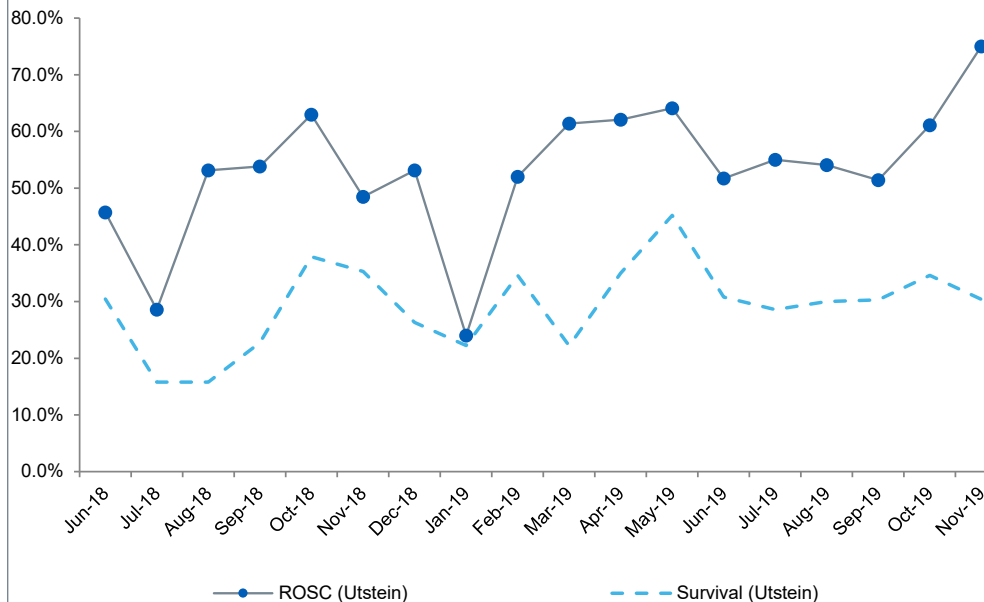


A&E Chart 10: Performance - Category 4 90th Percentile

Year to Date **01:44:24**



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



Performance Commentary:

Based upon modelling provided by NHSE sources, A+E Operations have been firmly focused on maximising the numbers of double crewed ambulances to ensure a timely response to patients. Demand for on scene attendance stayed static in June.

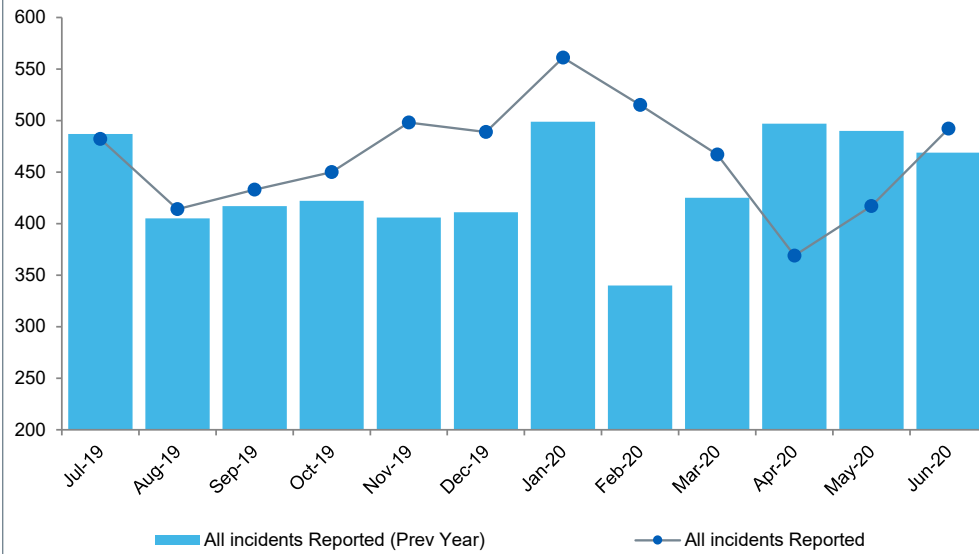
The level of STR and STC fell and rose respectively although it remains a significant positive exception throughout the COVID period compared to BAU. It would suggest that through June we are starting to see a return to normal patterns of patient and decision making behaviour with increasing levels of GP referrals into hospitals.

The H&T and S&T rates compared to previous months have led to increased vehicle availability. This trend has resulted in a reduction of job cycle time and has further contributed to the efficiency of A+E Operations. As these rates have fallen there has been an increased pressure on response times but these were all within the national ARP standards in June.

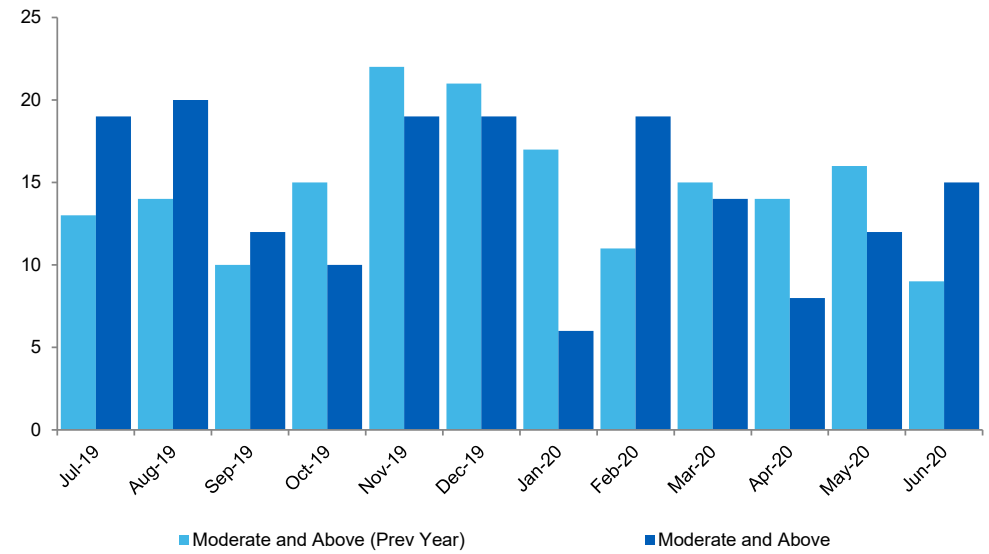
The response per incident ratio is at an all time low due to a change in the deployment of RRVs. Review of the standby process has improved mobilisation and this and shows a CAT1 improvement against May.

Many of these benefits have been recognised and recorded in the preparation of recovery plans.

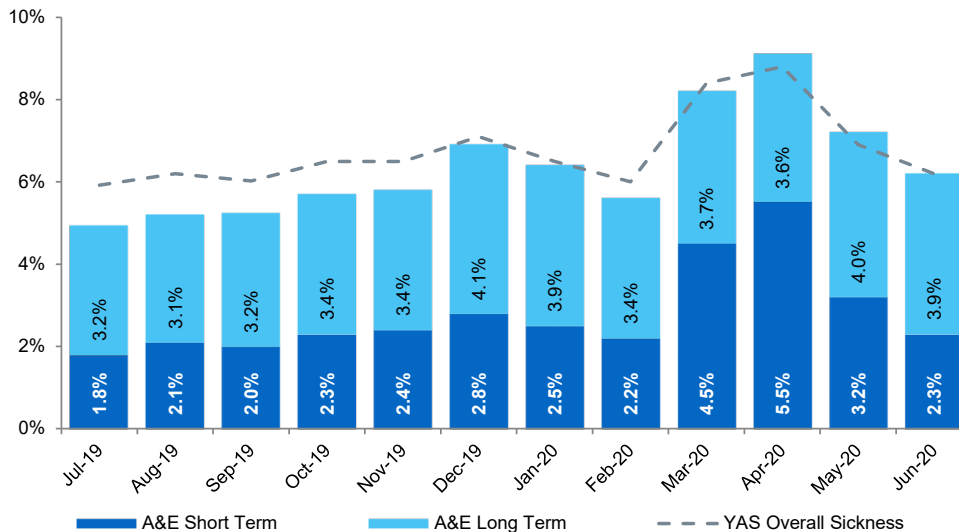
A&E Cht12: Quality - Reported Incidents



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



A&E Cht14: Workforce - Sickness



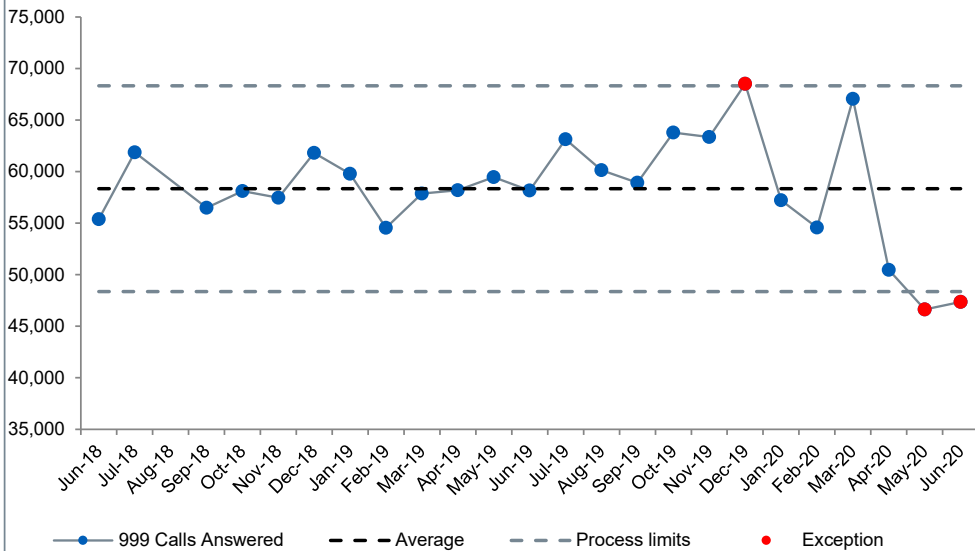
Quality Commentary:

Reported incidents rose in June but were lower than at the same period last year. The number of incidents rated moderate or above however increased and were higher than the previous year.

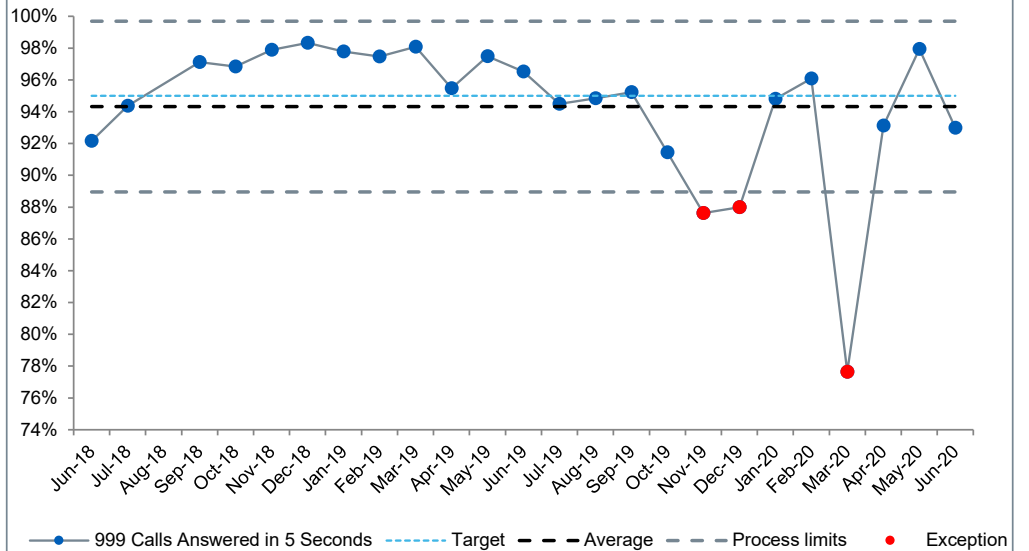
Workforce Commentary:

The overall sickness rate decreased again in June and is in line with the trust average. During the COVID-19 pandemic the NHS has seen higher levels of sickness absence and this is reflected in the rise of short term sickness. However June saw a continued reduction of sickness absence and Covid related abstraction. A number of actions have been taken to mitigate sickness absence and the impact governmental direction has had on available staffing. A number of health and wellbeing actions have also been undertaken to support staff including staff swabbing, serology testing and dedicated staff support actions through the local management support cells. Overtime uptake was high and the impact on staff is being taken into consideration to ensure they are rested and their wellbeing is considered in line with current policy. Staff training and recruitment has been highlighted as an area to support and actions have been taken to work with colleagues to ensure the maximisation of recruitment opportunities. Including the supporting of secondments to those functions with a view on our longer term workforce plans.

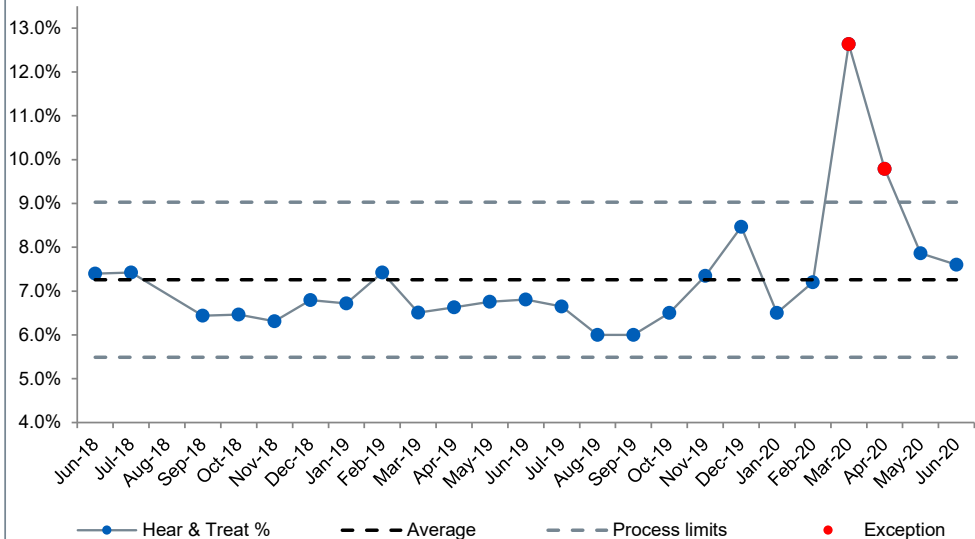
EOC Chart 1: Demand - 999 Calls Answered



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



EOC Chart 3: Performance - % Hear & Treat



Performance Commentary:

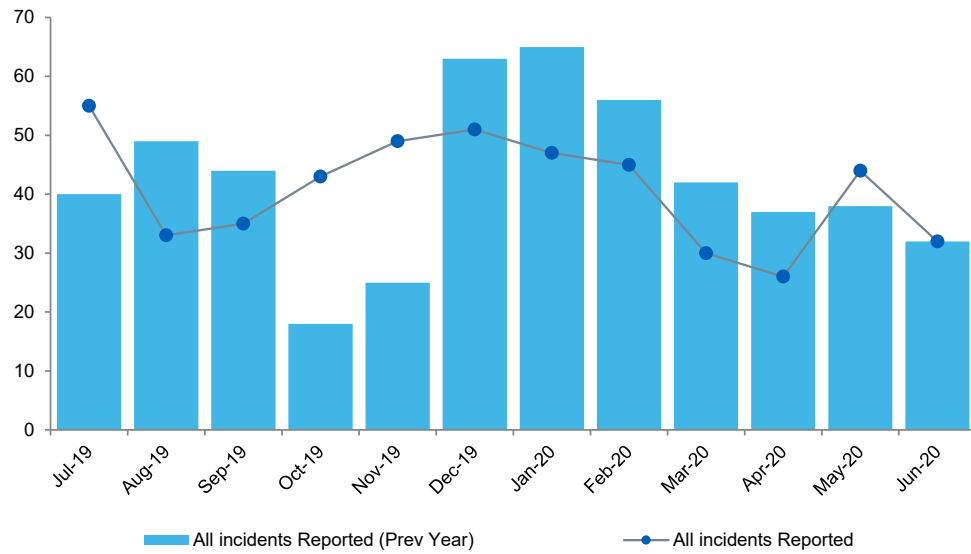
Against the background of the Covid 19 Pandemic, national lockdown and the introduction of the National Pandemic card 36, call demand increased slightly in June but remains well below originally forecast position.

The proportion of calls answered in 5 achieved 93% against a 95% KPI. The impact of staff absence within call handling teams reduced but the issue of staff shielding in this staff group has been a contributory issue.

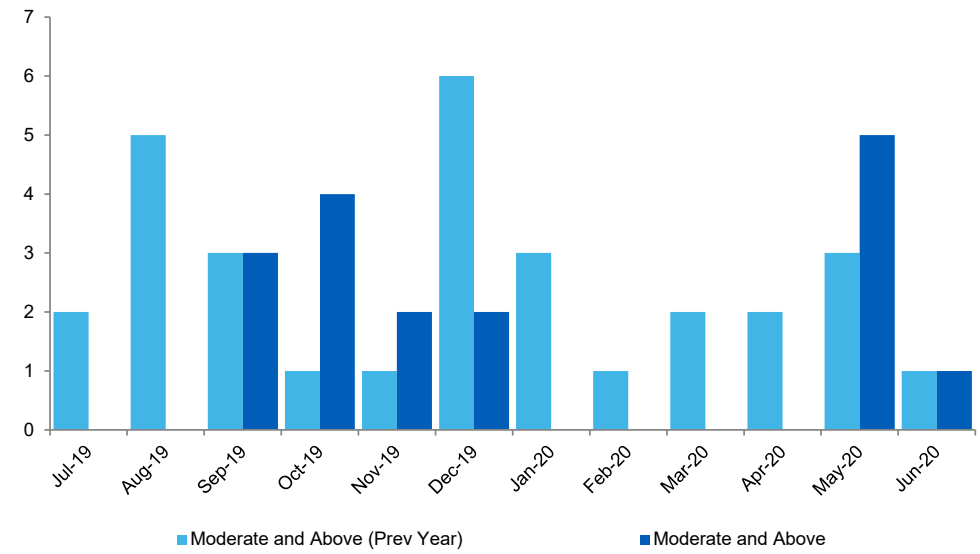
Significant effort has gone into training additional call handling staff which supported improvement towards April month end and carried over throughout May. However availability of some of these staff returning to work post lockdown has had a detrimental impact.

Hear and Treat performance fell in June, partly as a result of the Card 36 process and the reduction of Cat 5 demand. However the trend is still a positive position against the previous BAU trend and will be captured as part of the A+E Operational recovery plans. The specialist advice support cell has had a positive impact on this area in addition to the ST+R performance.

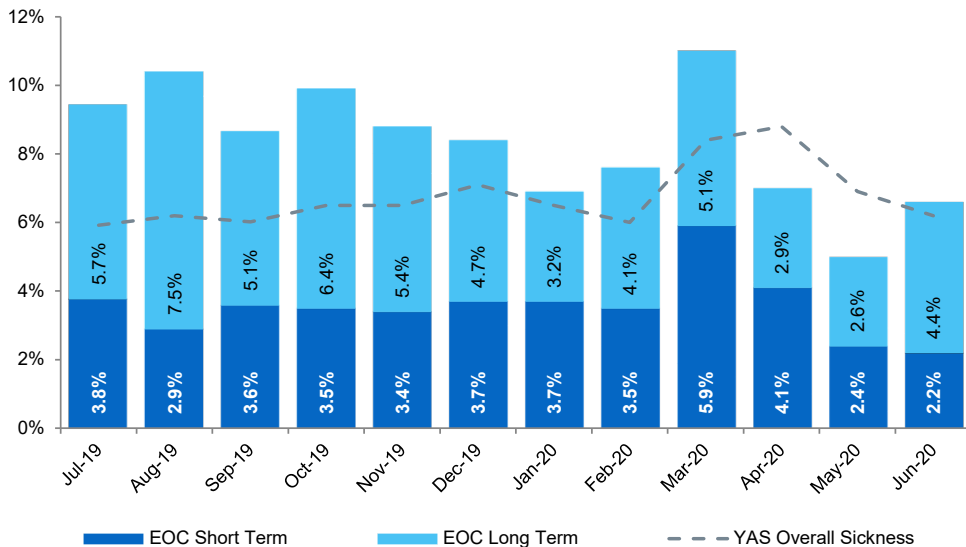
EOC Chart 4: Quality - Reported Incidents



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



EOC Chart 6: Workforce - Sickness



Quality Commentary:

The total number of incidents reduced in June and is equal to the volumes experienced in the previous year. The level of incidents classed as moderate or above fell significantly in June replicating the position seen 12 months prior.

Workforce Commentary:

The long term sickness rate showed a 1.6% increase in June. The levels of Covid related absence had an impact upon EOC performance KPI's. However overall sickness in EOC which had been challenging through the winter months is now tracking in line with the Trust average and is a significant improvement set against the COVID period.

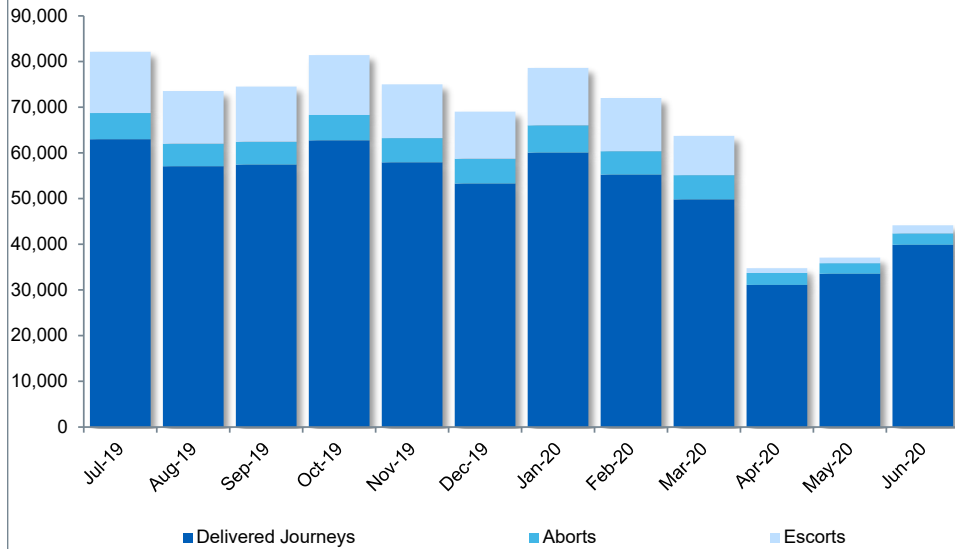
Actions taken to safeguard staff in EOC through social distancing protective measures have been well received and contributed to the overall wellbeing of the staff in that environment. Plans for supporting the return of shielding staff are underway for role out in early August.

Lessons learned in supporting EOC staff through 'working safely' guidance will be captured and taken into the recovery process.

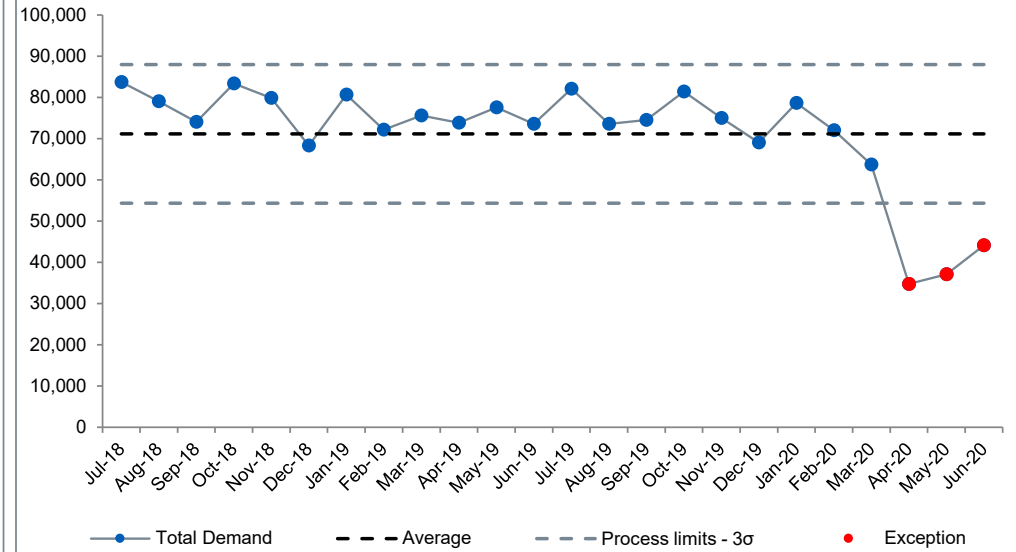
Patient Transport Service

June 2020

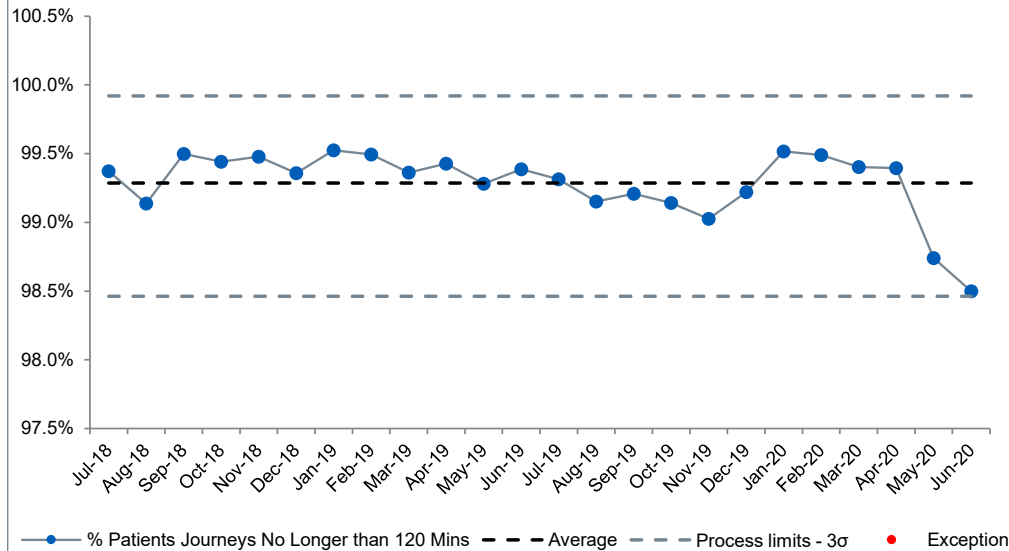
PTS Chart 1: Demand - Journeys



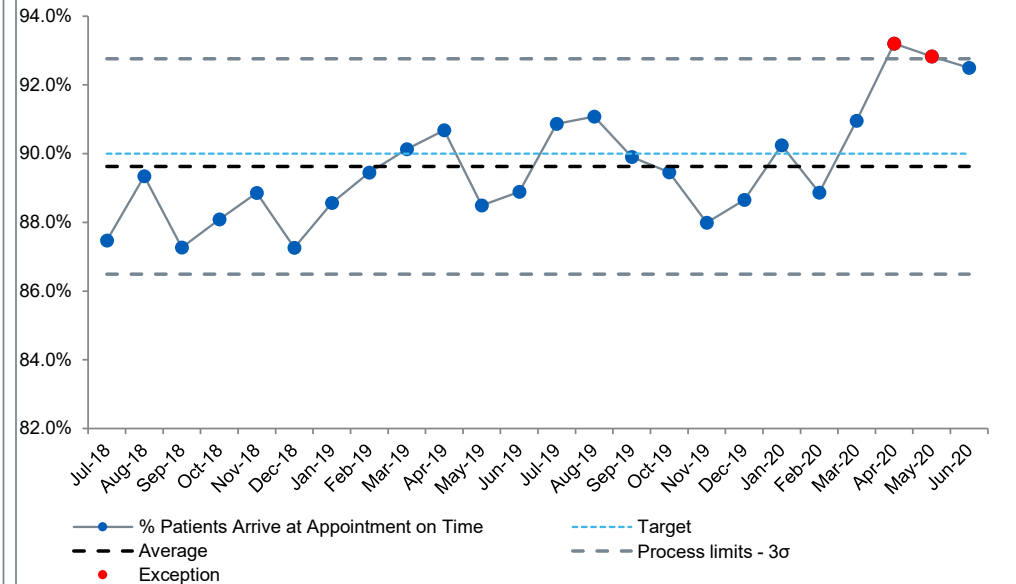
PTS Chart 2: Demand - Total Demand



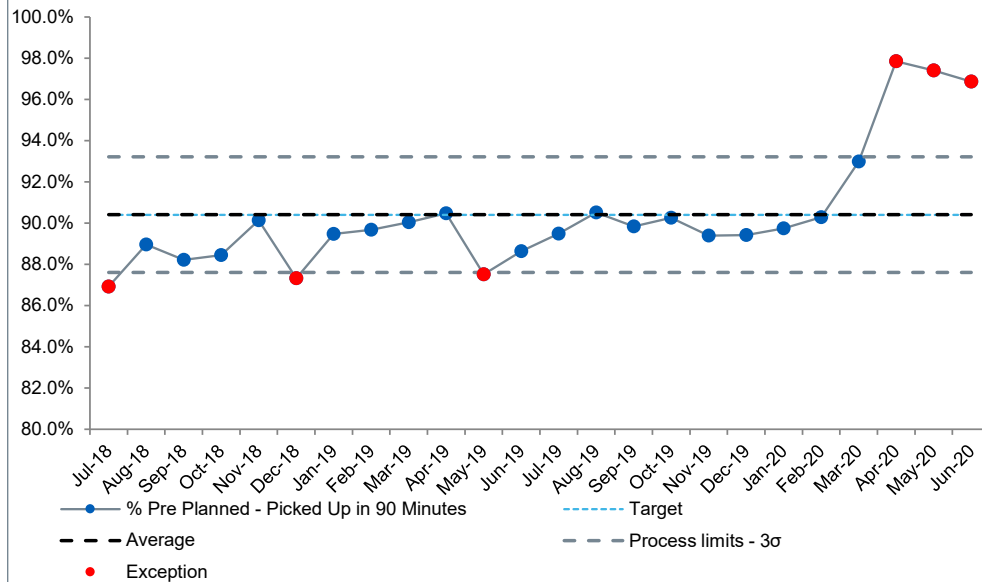
PTS Chart 3: % Patients Journeys to be no longer than 120 Minutes



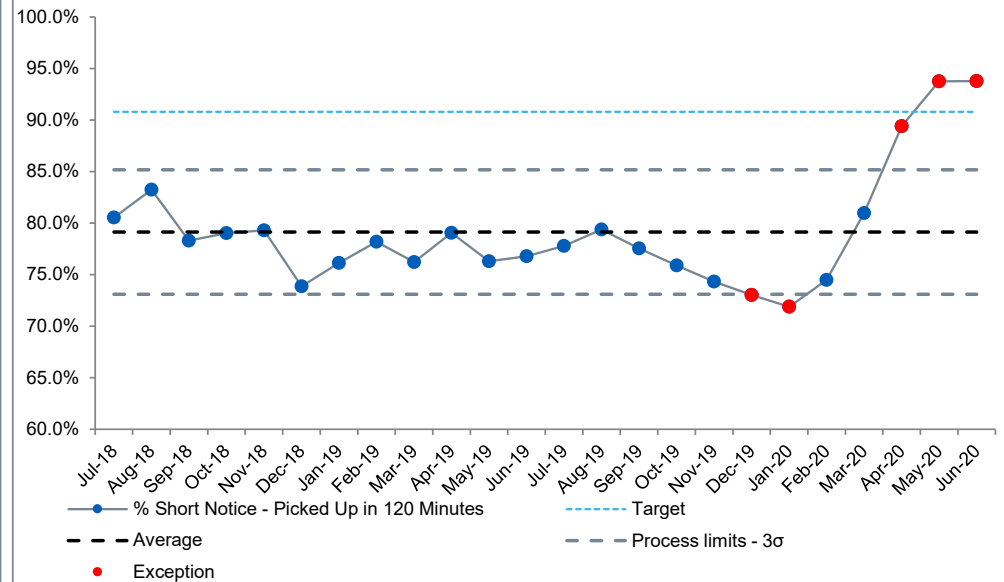
PTS Chart 4: % Patients Arrive at Appointment on Time



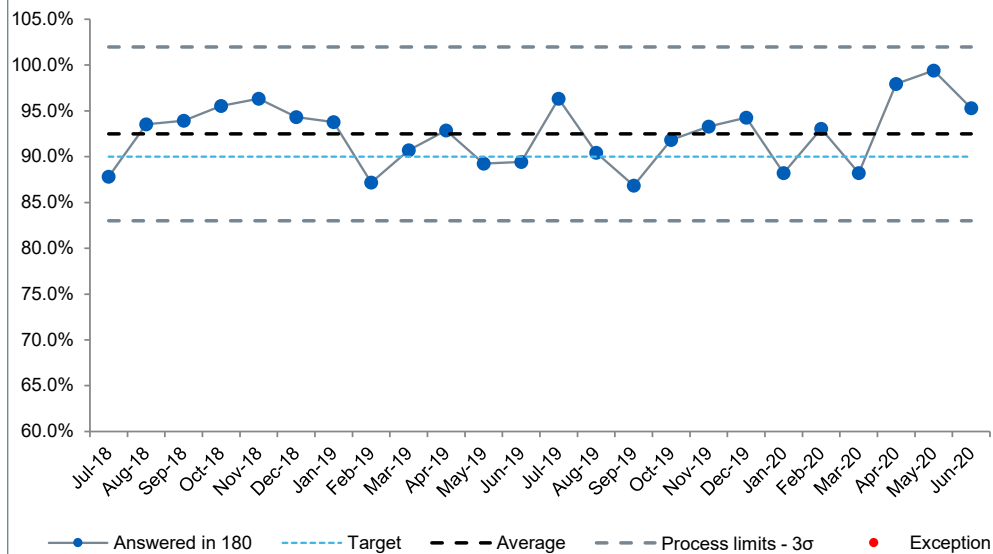
PTS Chart 5: Performance - % Pre Planned - Picked Up in 90 Minutes



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



PTS Chart 7: Telephony - Calls Answered within 180 Seconds



Performance Commentary:

A full review of the performance metrics will be completed with appropriate recovery plans and trajectories.

Demand represented 60% of BAU demand at the close of June. We have escalated that demand may exceed capacity, should forecast continue to increase in line with Acute Trust plans to increase levels of elective care and the current IP&C restrictions remain. Continuation of current Covid funding levels to meet this capacity requirement is sought.

PTS staff have conveyed over 5,500 suspected and positive patients (end of June).

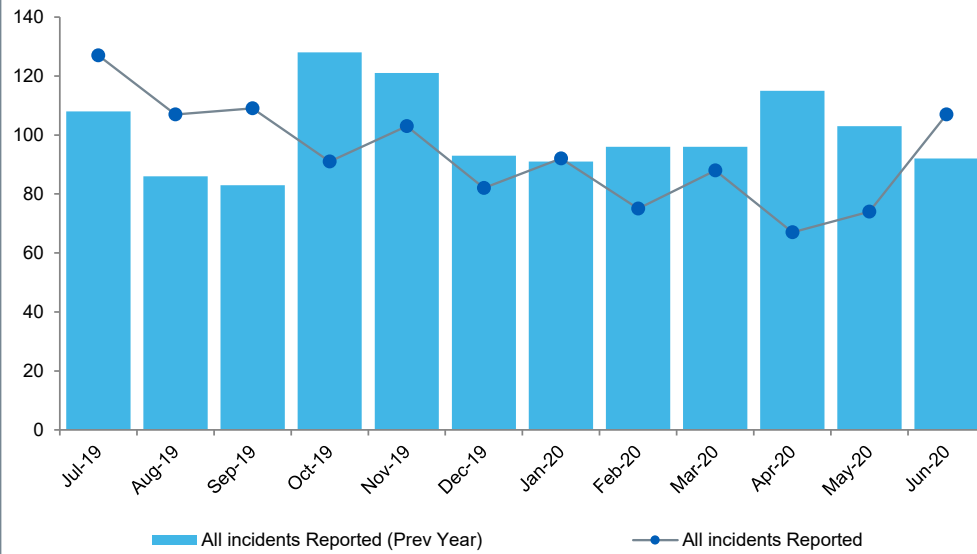
The contractual KPI performance measures have been suspended in line with NHS England Guidance due to COVID 19.

PTS is maintaining a good level of service for our renal and oncology patients and YAS chairs a regional Y&H NHSE renal network transport cell as part of the response.

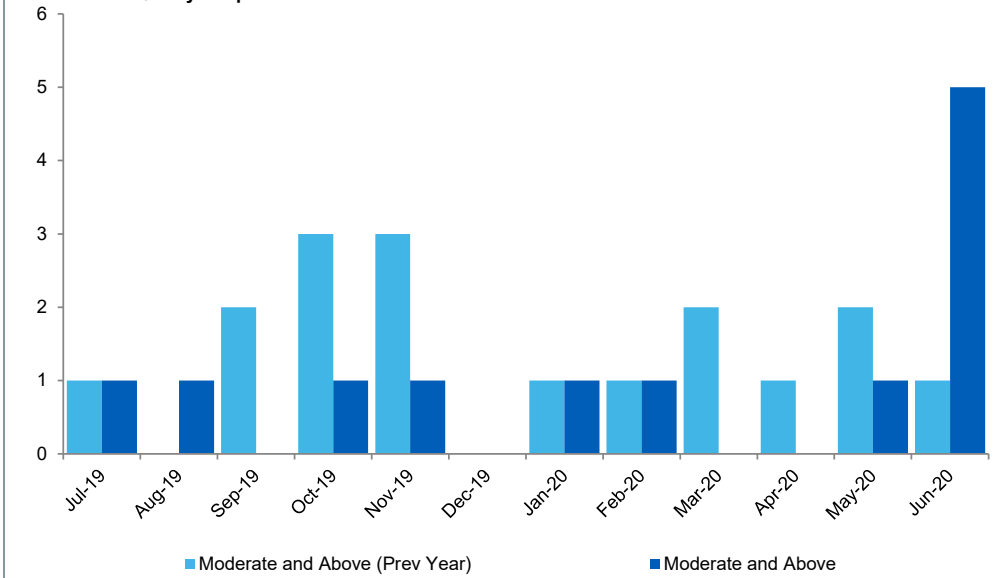
On average we are handling around 300 discharges and 1,800 outpatient journeys per day.

June has seen an increase in bookings call volume versus the previous 3 months as planned care activity increases; in addition more callers are required to undertake screening questions

PTS Chart 8: Quality - Reported Incidents



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



PTS Chart 10: Sickness

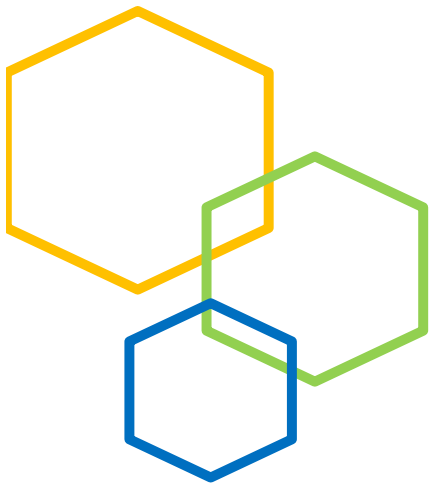


Quality Commentary:

There was an increase in the number of reported incidents in June with COVID adversely affecting all areas of the business. The main PTS reason for the increase relates to an incident impacting multiple patients with an incident logged for each one. Incidents remain below 0.01% of total PTS journeys.

Workforce Commentary:

There has been a slight decrease in long term sickness for the month of June by 1%. Short term sickness had reduced significantly since March month on month by 2.2%. The PDR rate decreased slightly by 0.42% standing at 79.89% compliant reflecting the current operating climate and Trust communication that PDR's were to be suspended. However, it still remains one of the highest rates within the Trust. Statutory and Mandatory workbooks data are still under review. The Trust and PTS Service Line report daily on sickness broken down by COVID related absences. FTE for PTS in June for COVID-19 Sickness and Medical Suspensions (Isolations and Shieldings) is 40.2 FTE, a significant decrease on last month.



National Benchmarking

Ambulance Quality Indicators

June 2020

System	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)	63,492	93,618	91,239	61,112	70,971	68,130	34,534	87,993	58,653	45,527
Incident Proportions%	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1 and C2 Incidents	57.4%	61.0%	57.2%	60.7%	58.5%	56.9%	56.6%	48.0%	53.6%	48.3%
C1 Incidents	6.7%	7.0%	7.3%	7.7%	7.7%	6.2%	6.3%	5.9%	6.0%	5.6%
C2 Incidents	50.8%	54.1%	49.8%	53.0%	50.8%	50.7%	50.4%	42.1%	47.6%	42.7%
C3 Incidents	23.2%	22.9%	18.1%	24.5%	20.3%	24.9%	27.5%	37.8%	35.4%	34.7%
C4 Incidents	1.6%	1.6%	4.6%	0.4%	0.9%	1.1%	1.4%	2.3%	0.7%	2.5%
C5 Incidents	0.4%	1.5%	1.2%	1.5%	8.3%	7.5%	0.0%	0.1%	0.0%	0.4%
HCP/IFT 1-4 Hour Incidents	9.7%	4.0%	7.9%	5.1%	4.1%	5.0%	8.5%	6.3%	4.9%	7.3%
Hear and Treat	7.7%	8.9%	11.0%	7.5%	7.8%	4.6%	5.7%	3.7%	6.3%	8.3%
Performance	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1-Mean response time (Target 00:07:00)	00:06:59	00:05:46	00:06:53	00:06:31	00:06:33	00:06:41	00:05:59	00:06:49	00:07:31	00:06:44
C1-90th centile response time (Target 00:15:00)	00:12:13	00:09:39	00:11:27	00:11:18	00:11:58	00:12:09	00:10:09	00:11:34	00:14:01	00:12:13
C2-Mean response time (Target 00:18:00)	00:13:32	00:09:33	00:17:49	00:16:34	00:16:57	00:18:22	00:18:31	00:10:52	00:16:43	00:12:54
C2-90th centile response time (Target 00:40:00)	00:25:24	00:16:24	00:34:55	00:32:29	00:34:05	00:36:12	00:36:42	00:19:02	00:31:02	00:24:40
C3-Mean centile response time (Target 01:00:00)	00:25:29	00:23:51	00:51:11	00:36:15	00:36:02	00:37:15	00:41:03	00:18:43	01:09:54	00:36:03
C3-90th centile response time (Target 02:00:00)	00:56:19	00:51:00	01:55:15	01:27:19	01:25:48	01:24:38	01:39:05	00:35:14	02:38:05	01:22:54
C4-90th centile response time (Target 03:00:00)	01:45:04	01:40:38	02:29:07	01:59:39	02:13:08	02:30:19	01:46:54	00:56:46	03:30:44	02:07:45
Proportion of All incidents	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
Incidents with transport to ED	53.1%	54.4%	53.9%	53.9%	53.3%	51.3%	54.3%	49.6%	57.5%	50.0%
Incidents with transport not to ED	8.3%	5.1%	5.9%	6.5%	4.5%	4.8%	8.7%	7.6%	1.6%	6.1%
Incidents with face to face response	30.9%	31.6%	29.2%	32.1%	34.4%	39.3%	31.3%	39.2%	34.6%	35.7%
Clinical up to November 2019 Suspended due to Covid-19	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	Pathways	Pathways	Pathways	Pathways
ROSC	30.4%	34.3%	27.2%	23.3%	24.5%	29.9%	29.0%	33.7%	26.6%	27.3%
ROSC - Utstein	75.0%	76.6%	43.6%	44.4%	47.1%	37.9%	47.1%	58.3%	52.0%	58.3%
Cardiac - Survival To Discharge	7.3%	7.8%	6.8%	5.9%	6.6%	11.6%	6.0%	11.9%	5.1%	6.4%
Cardiac - Survival To Discharge Utstein	30.4%	28.6%	20.6%	30.4%	26.0%	25.9%	20.0%	31.4%	21.7%	29.2%