



Integrated Performance Report

August 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).

Single Oversight Framework Score Improvement Model Ambulance (July 2019)





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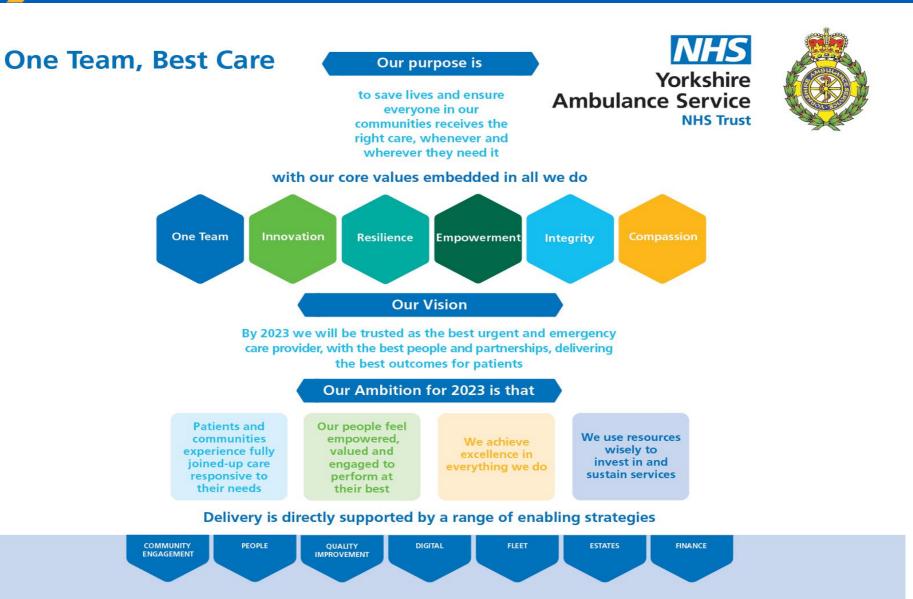
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Strategy 2018 - 2023



Ambitions & Key Priorities

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

- 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.
- 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.
- 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.

External System Pressures

- National Phase 3 Planning Guidance now released; requiring system level planning submission, based on Activity, Workforce and Finance.
- Demand modelling and assumptions being developed against the guidance.
- Increased emphasis on the NHS People Plan and Mental Health Guidance.
- Ongoing YAS engagement with system level planning to support Phase 3 Plan submission.
- Winter and flu vaccination planning commenced.
- Further analysis being undertaken across each ICS to understand capacity and resource requirements until March 2021.
- Engagement continuing, to develop 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.

	Summa	ary of I	Exceptions August 2020								
Service Line	Indic	ator ID	Exception Commentary								
			IUC is seeing demand above contract ceiling levels 11.7% in August, specific briefing notes have been completed to commissioners on this issue.								
IUC	0	01	Clinician Called Back within 1 Hour -Call backs clinically have been delayed due to the increase in demand. Real time queue management and long wait audit processes are in place to help support with the safe management of the queue								
			Bookings into UTC - All Face to face bookings have been reduced to support safer working in light of covid.								
			Clinical advice - Clinical advice levels were just below 30% this month.								
	0	02	Telephony - 999 Calls Answered within 5 Seconds								
EOC	0	09	Increase in sickness.								
	0	03	Cat 1 mean missed by 10 seconds								
	0	09	PDR Staff Appraisals - Given the staffing challenges and focus on operational utilisation of the Clinical Supervisor staff, PDR's have slipped however recovery plans are underway to catch up on lost ground.								
A+E	A&E (Chart 3	Demand - See, Treat & Refer % - See treat and refer had seen an upward trend for several months pre covid, this was built upon during the early stages of the Covid pandemic and many patients calling 999 were dealt with without attendance at A+E. Actions such as the introduction of the Specialist advice cell in A+E supported Clinicians on scene with decision making and further advice. This continues to be the case and has result n continued positive exception which is a key work stream being taken forward through recovery and the IUEC Programme via the EOC work stream.								
	A&E	Chart 4	Demand - See, Treat & Convey % - This exception is the mirror of the above as conveyance to hospital declined as a result.								
	0	04	July into August has seen an increase in booking call volumes with more callers requiring to undertake screening questions which increases the average length of calls. Sickness was poor in reservations in July and August resulting in a significant drop and action is underway to improve sickness, which is improving in September								
PTS	0	09	PDR Staff Appraisals - although current rate is below the Trust target, PDR compliance improved by 1.1% in August to 82.3% with plans in place to improve further going forward.								
	PTS	Chart 6	Performance - % Short Notice - Picked Up in 120 Mins - Performance for discharge at acute sites in North, East and Mid Yorkshire has been down due to exceptionally high levels of discharge demand. Short notice bookings now account for 20% of total PTS activity, up from 10% pre-COVID. NB NHS E Guidance mandates that contractual KPIs for performance are suspended due to Rapid Covid discharge requirements.								
INFORMATION MANAGEMENT	0	16	FOI compliance is now above target and at 90.9% is at an all time high. IG compliance is continuing to improve but at 88.8% is below the 95% target which is required to comply with the staff training assertion within the DSP Toolkit; our next submission is due on 30th September. Mitigating actions are underway to contact Information Asset Owners and senior managers to encourage staff who's training has expired or is due to expire within the next month to complete the training as soon as possible to further increase this percentage ahead of the end of September deadline and beyond.								
FINANCE	019	020	In line with COVID-19 Financial Regime the Trust is in a breakeven position at M3. A full review of financial metrics will be undertaken and aligned to the Trust's overarching COVID-19 recovery plan.								

		Patient	s & Communities	S												Α	ugust	2020
																	Aug-20	
Indicator ID	Key Op	erational Stand	ard Description	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Target / Forecast	Actual	Actual v Target/Fcast
			Calls Offered	126,624	137,427	156,871	175,308	144,564	148,175	308,185	175,235	153,686	133,386	139,324	154,845	128,644	154,845	A
			Call Answered	115,557	122,183	132,591	160,403	135,455	135,463	155,346	143,075	141,878	127,239	132,417	147,469		147,469	
		Calls	Answered within 60 Seconds	89.0%	81.7%	75.8%	83.1%	90.7%	85.0%	26.2%	67.3%	87.8%	94.8%	90.1%	88.0%	90%	88.0%	▼
			Core Clinical Advice	31.4%	31.2%	29.5%	28.3%	30.5%	28.3%	28.2%	28.0%	30.7%	32.7%	31.3%	29.7%	30%	29.7%	▼
001	Integrated Urgent Care	Clinic	ian Called Back within 1 Hour	59.1%	53.2%	51.2%	56.9%	59.8%	46.6%	45.9%	71.7%	70.4%	58.1%	56.2%	49.7%	60%	49.7%	\mathbf{V}
001	integrated Orgenit Care		Direct Bookings	46.6%	44.9%	44.7%	45.2%	45.8%	45.0%	35.0%	29.9%	35.1%	34.0%	33.4%	14.7%	30%	14.7%	•
		Bookings into UTC			54.0%	52.2%	51.0%	56.7%	56.7%	49.0%	16.0%	15.1%	18.8%	21.5%	22.5%	50%	22.5%	•
		Bookir	gs into IUC Treatment Centres	61.7%	61.2%	60.4%	60.2%	62.9%	61.6%	55.5%	48.3%	49.9%	51.4%	48.3%	39.0%	95%	39.0%	▼
		ED Validations			54.6%	52.1%	46.6%	50.8%	37.7%	29.9%	33.0%	35.4%	52.8%	53.0%	50.2%	50%	50.2%	
	Ambula		Ambulance Validations	98.7%	97.5%	98.1%	97.8%	98.3%	90.4%	53.6%	74.3%	94.1%	97.6%	96.4%	95.9%	95%	95.9%	
000	500	Tele	phony - 999 Calls Answered	58,919	63,779	63,358	68,507	57,223	54,569	67,046	50,458	46,629	47,355	53,867	57,811		57,811	
002	EOC	Telephony - 999 Calls Answered within 5 Seconds		95.2%	91.4%	87.6%	88.0%	94.8%	96.1%	77.6%	93.1%	97.9%	93.0%	93.8%	90.6%	95%	90.6%	▼
		All Activity (H&T + STR + STC) Hear & Treat (H&T)		67,636	71,982	71,517	76,409	72,149	67,218	73,608	64,197	64,125	63,924	68,032	69,026		69,026	
				6.0%	6.5%	7.3%	8.5%	6.5%	7.2%	12.6%	9.8%	7.9%	7.6%	7.6%	8.8%		8.8%	1
		See, Treat & Refer (STR)		24.9%	24.5%	23.9%	25.0%	25.1%	25.5%	31.0%	39.0%	33.4%	30.7%	29.6%	28.7%		28.7%	1
		S	See, Treat & Convey (STC)		69.0%	68.8%	66.7%	68.4%	67.3%	56.4%	51.2%	58.7%	61.7%	62.7%	62.5%		62.5%	
		99	9 Responses (STR + STC)	63,537	67,273	66,263	70,017	67,446	62,407	64,362	57,916	59,083	59,057	62,855	62,961	70,509	62,961	•
			Mean	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	00:06:59	00:07:24	00:07:00	00:07:24	
003	A&E Operations	Category 1	90th Percentile	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	00:12:01	00:12:44	00:15:00	00:12:44	•
			Mean	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	00:15:34	00:18:29	00:18:00	00:18:29	
		Category 2	90th Percentile	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	00:30:52	00:38:00	00:40:00	00:38:00	V
		Category 3	90th Percentile	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	01:11:42	01:34:56	02:00:00	01:34:56	_
		Category 4	90th Percentile	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	02:11:59	02:42:23	03:00:00	02:42:23	_
			verage Turnaround Time	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	00:34:30	00:35:10	00:30:00	00:35:10	
			e Job Cycle Time (Responses)	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	01:47:41	01:53:37		01:53:37	
			Journeys	74,545	81,442	75,033	69,065	78,620	72,004	63,751	30,448	37,068	44,138	53,887	54,984	73,573	54,984	▼
	004 PTS -	Pat	ent Journeys < 120 Minutes	99.2%	99.1%	99.0%	99.2%	99.5%	99.5%	99.4%	99.4%	98.7%	98.5%	97.9%	98.0%	90.0%	98.0%	
		Patients	Arrive at Appointment on Time	89.9%	89.5%	88.0%	88.7%	90.2%	88.9%	91.0%	93.2%	92.8%	92.5%	90.1%	88.6%	90.0%	88.6%	•
004				89.8%	90.3%	89.4%	89.4%	89.7%	90.3%	93.0%	97.9%	97.4%	96.9%	93.5%	93.1%	90.4%	93.1%	
				77.5%	75.9%	74.3%	73.0%	71.9%	74.5%	81.0%	89.4%	93.8%	93.8%	91.4%	87.9%	88.8%	87.9%	•
			Answered within 180 Seconds	86.9%	91.9%	93.4%	94.4%	88.3%	93.1%	88.2%	98.0%	99.4%	95.3%	70.9%	58.5%	90.0%	58.5%	· ·

Indicator ID	Key Operational Standard Description			May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
	% Received STEMI Bundle	53.1%			40.0%			58.7%			44.0%			
005	005 ACQI	% Received Stroke Diagnostic Bundle		93.4%			95.9%			83.6%				
		% Received Sepsis Care Bundle			60.9%			72.7%			76.8%			

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

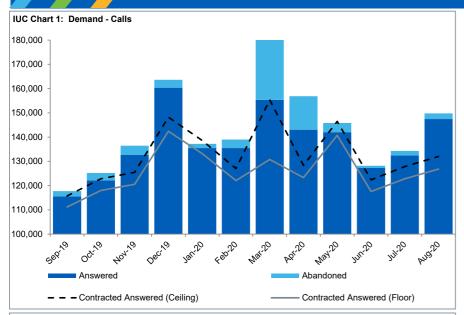
		Our People													А	ugust	2020
			0	0.1.40	N. (0	D	1-11 00	Ech 20	11			1				Aug-20	
Indicator ID	Key Ope	erational Standard Description	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Target / Forecast	Actual	Actual v Target/Fcast
006	Workforce	Total FTE in Post	4,727	4,732	4,773	4,753	4,759	4,777	4,836	4,898	4,924	4,993	4,987	4,986		4,986	
006	vvorkiorce	BME %	5.1%	5.2%	5.1%	5.1%	5.1%	5.3%	5.3%	5.2%	5.3%	5.4%	5.4%	5.5%	11.1%	5.5%	•
007	Recruitment	New Starters (FTE)	92.9	62.3	53.1	13.3	44.6	42.1	89.1	104.3	41.8	60.1	50.0	27.9		27.9	
008	Turnover (FTE)	YAS (Rolling 12 Month Periods)	9.9%	9.7%	10.1%	9.7%	9.7%	9.7%	9.2%	9.2%	8.7%	8.4%	8.6%	8.3%		8.3%	
		YAS	76.6%	77.6%	76.4%	75.7%	74.6%	75.9%	71.6%	65.5%	64.6%	66.3%	68.1%	69.5%	90.0%	69.5%	▼
		A&E Operations	77.9%	80.2%	80.5%	78.8%	78.3%	78.8%	74.8%	68.2%	63.4%	65.8%	69.0%	72.0%	90.0%	72.0%	▼
009	PDR / Staff Appraisals	EOC	61.1%	67.0%	65.1%	67.1%	68.7%	68.5%	65.3%	63.9%	69.4%	71.8%	72.5%	69.4%	90.0%	69.4%	
	009 PDR / Staff Appraisals	Integrated Urgent Care	70.9%	67.5%	63.0%	60.8%	56.2%	65.0%	58.6%	58.1%	81.5%	89.6%	93.4%	92.4%	90.0%	92.4%	▲
		PTS	90.9%	89.1%	86.2%	88.4%	86.9%	87.7%	82.9%	74.5%	80.3%	79.9%	81.2%	82.3%	90.0%	82.3%	•
		YAS	98.3%	98.4%	98.0%	97.6%	97.2%	97.6%	97.4%						90.0%		
		A&E Operations	98.9%	99.0%	98.6%	98.2%	97.8%	97.9%	97.8%	1					90.0%		
010	Training: Stat & Mand (Substantive Employees)	EOC	98.5%	97.7%	97.7%	97.4%	96.5%	98.3%	98.0%	Stat	Mand Repor	ting is curre	ntly under r	eview	90.0%		
	(Integrated Urgent Care	98.7%	98.7%	98.2%	96.1%	95.7%	97.1%	96.7%	I					90.0%		
		PTS	99.5%	99.5%	99.6%	100.0%	100.0%	100.0%	100.0%	1					90.0%		
		Total Sickness Rate	6.0%	6.5%	6.5%	7.1%	6.5%	6.0%	8.4%	8.8%	6.9%	6.2%	5.9%	6.4%		6.4%	
011	Health & Wellbeing	Long Term Sickness Rate	3.8%	4.0%	3.7%	4.3%	3.8%	3.6%	3.8%	3.8%	4.0%	3.9%	3.7%	4.2%		4.2%	
		Short Term Sickness Rate	2.3%	2.6%	2.8%	2.8%	2.7%	2.5%	4.6%	5.0%	2.9%	2.3%	2.2%	2.2%		2.2%	

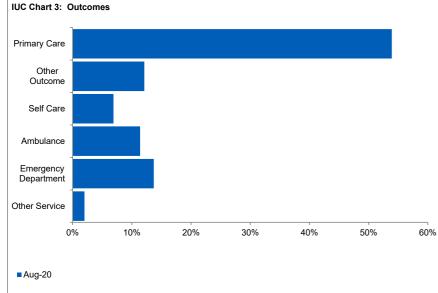
		Achieving E	xcellence													Α	ugust	2020
Indiantes ID	Kau Or	neutional Clandard Decention	lien	0	Oct-19	Nov. 40	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May 20	Jun-20	Jul-20	Aug 20		Aug-20	
Indicator ID	Key Of	perational Standard Descript	lion	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	war-20	Apr-20	May-20	Jun-20	Jui-20	Aug-20	Target / Forecast	Actual	Actual v Target/Fcast
		All Rep		638	666	736	735	801	739	687	524	633	716	758	721		721	
012	Incidents	Serio		1	1	6	7	2	2	4	1	1	3	1	5		5	
		Moder		17	14	23	23	8	23	16	11	18	22	31	27		27	
		Medication	T	66	75	69	69	60	64	50	43	58	81	63	52		52	
			Complaint	17 102	19 88	20 117	13 102	16 125	16 109	21 91	17 82	15 69	25 87	29 104	33 79		33 79	
		A&E	Compliment Concern	21	23	117	20	125	109	10	8	09 7	16	104	9		9	
			Service to Service	9	25	25	16	29	23	13	° 21	21	18	33	29		29	+
			Complaint	4	11	18	12	4	6	10	6	5	9	10	9		9	+
			Compliment	2	0	4	2	3	3	3	1	0	0	1	0		0	+
		EOC	Concern	3	17	9	17	6	8	3	0	- 1	9	3	2		2	
			Service to Service	8	13	18	23	20	5	15	2	4	4	13	10		10	
013	Patient Relations		Complaint	17	29	18	31	19	24	14	9	15	18	13	13		13	
			Compliment	7	4	7	12	10	4	2	2	5	7	8	3		3	
	Integrated Urgent Care	Concern	2	6	3	9	2	3	1	1	3	1	2	2		2	1	
			Service to Service	46	21	17	17	26	40	52	31	24	43	53	44		44	
			Complaint	16	14	15	7	9	11	14	2	6	9	6	11		11	
		PTS	Compliment	6	4	7	9	5	3	2	2	2	1	11	8		8	
		110	Concern	28	31	23	22	24	24	24	10	3	7	12	11		11	
			Service to Service	15	27	24	24	47	34	22	7	7	7	24	17		17	
		Stroke - Call to Hosp	oital Arrival (Mean)	01:13	01:21	N/A	01:19	01:10	N/A	N/A	N/A	N/A	N/A	N/A	N/A		N/A	
014	Clinical Outcomes Data	Stemi - Call to Catheter Ins	sertion for Angio (Mean)	02:03	02:06	02:18	02:12	02:08	N/A	N/A	N/A	N/A	N/A	N/A	N/A		N/A	
014	omiliar outcomes but	ROSC (L	Jtstein)	51.4%	61.1%	75.0%	52.9%	57.1%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		N/A	
		Survival (Utstein)	30.3%	34.6%	30.4%	41.4%	37.8%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		N/A	
015	Safeguarding	Adult Re	ferrals	887	906	1,013	1,045	1,049	947	749	833	1,054	1,030	1,095	1,145		1,145	
		Child Re	ferrals	575	587	551	540	603	638	532	441	539	608	653	657		657	
016	Information Management	Information Governance		95.2%	95.2%	73.3%	70.3%	64.3%	72.3%	72.3%	72.8%	76.1%	81.3%	83.3%	88.8%	95%	88.8%	▼
	5	FOI Request (42.5%	60.5%	32.3%	61.9%	69.7%	70.3%	57.1%	56.0%	83.3%	85.7%	70.6%	90.9%	90%	90.9%	
		Hand Hy		98.0%	99.1%	98.3%	98.4%	99.3%	98.8%	98.9%	99.8%	100.0%	99.0%	99.0%	100.0%	95%	100.0%	
017	IPC Audit	Prem		99.0%	98.9%	99.0%	96.7%	98.4%	98.3%	98.7%	98.8%	100.0%	99.0%	99.0%	99.0%	95%	99.0%	A
		Vehi		99.0%	99.4%	99.1%	98.0%	98.7%	99.1%	98.4%	99.3%	99.0%	99.0%	98.0%	99.0%	95%	99.0%	
		National CCG2: Stat National CCG10: Ambular										No reporting i						
	Information at Sc		ne (Assurance)									No reporting i	required					
	Local 1:	National CCG10B: Ambulance – at Scene (Der	nonstration)									No reporting i	required					
		Local 1: Supporting the needs Patients via Tele										No reporting i	required					
018		Local 1: IUC/111 Stat	Ŭ.									No reporting	required					1
		Local 2: IUC/111 F	Frequent Callers									No reporting	required					1
		Local 3: IUC/111 S	epsis Awareness									No reporting						1
		Local 1: PTS Vehicle Ele										No reporting	-					1
		Local 1: PTS Staff I										No reporting	-					+

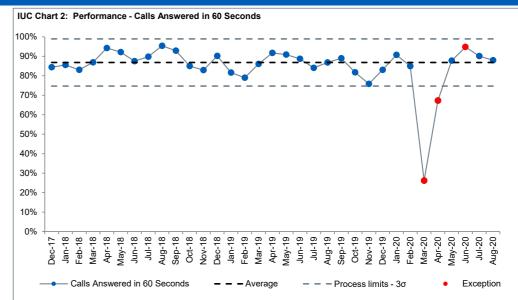
		Res	source & Sustain	abili	ty													Α	ugus	t 202	0
																	Jul-20			YTD	
Indicator ID	Кеу Оре	erational Stand	lard Description	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Plan	Actual	Plan v Actual	Plan	Actual	Plan v Actual
			Risk Rating	1	1	1	1	1	1	1											
			EBITDA	-1,683	-2,073	-1,315	-812	-824	-855	-998											
019	Finance Overview		Surplus	-605	-507	-249	238	4	240	159											
013			Capital	379	1,152	1,889	1,947	957	2,967	4,908											
			Cash	52,816	53,688	57,627	58,179	58,364	54,700	46,201	-	-	-	7	-						
			CIP	560	532	532	532	582	582	623	P	TION	10 L	10 L	٥́۲						
			A&E	28	28	28	28	28	28	28	EXCEPTION	EXCEPTION	EXCEPTION	EXCEPTION	EXCEPTION						
			Business Development	0	0	0	0	0	0	0					Ă						
			CEO Directorate	2	2	2	2	2	2	2	SUMMARY	SUMMARY	SUMMARY	SUMMARY	SUMMARY						
			Clinical	2	2	2	2	2	2	2	MM M	MML	MML	MML	MM						
			19	19	19	19	19	19	19												
		Finance		36	36	36	36	36	36	36	E SEE	SEE	SEI SEI	PLEASE SEE	ESE						
020	CIP	Fleet		123	87	87	87	87	87	123	S	PLEASE			ASE						
			Planned & Urgent Care	66	67	67	74	81	81	82	PLEA	PLE	PLE	PLE	PLE						
			Quality, Governance	0	0	0	0	0	0	0											
			Hub & Spoke	0	0	0	0	0	0	0											
			Workforce OD	57	57	57	57	57	57	56											L
			RESERVE	227	234	234	227	269	269	274											
		Curre	nt Position (Cumulative YTD)	560	532	532	532	5,387	5,969	6,592											ļ
			Vehicle age +7	3.2%	3.3%	1.8%	3.5%	6.6%	3.5%	3.5%	6.7%	6.7%	8.9%	8.2%							
		A&E	Vehicle age +10	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.2%							
021	Transport/Fleet		Availability	90.2%	91.0%	91.2%	91.7%	91.2%	90.6%	90.6%	92.5%	95.9%	92.7%	92.9%		95%					
			Vehicle age +7	16.7%	16.9%	19.4%	15.3%	10.7%	16.7%	16.7%	8.6%	8.6%		18.2%							
		PTS	Vehicle age +10	24.0%	24.0%	22.5%	26.6%	36.5%	27.2%	27.2%	22.5%	22.5%	20.8%	16.9%							
		Availability		92.0%	90.0%	90.0%	88.0%	89.0%	89.0%	89.0%	91.9%	92.4%	93.1%	93.1%		95%					

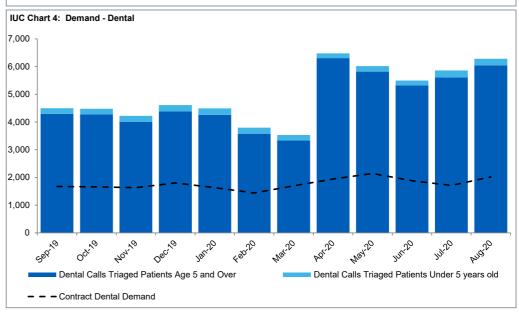














August 2020

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%	90.1%	88.0%								85.3%
Core Clinical Advice (30%)	28.0%	30.7%	32.7%	31.3%	29.7%								30.5%
Clinician Called Back within 1 Hour (60%)	72.2%	70.3%	58.1%	56.2%	49.7%								60.8%
Direct Bookings * (30%)	29.9%	35.1%	34.0%	33.4%	14.7%								28.6%
Bookings into UTC * (50%)	16.1%	15.1%	18.8%	21.5%	22.5%								19.0%
Bookings into IUC Treatment Centres * (95%)	48.3%	49.9%	51.4%	48.3%	39.0%								48.4%
ED Validations (50%)	33.0%	35.4%	52.8%	53.0%	50.2%								46.2%
Ambulance Validations (95%)	74.3%	94.1%	97.6%	96.4%	95.9%								91.6%

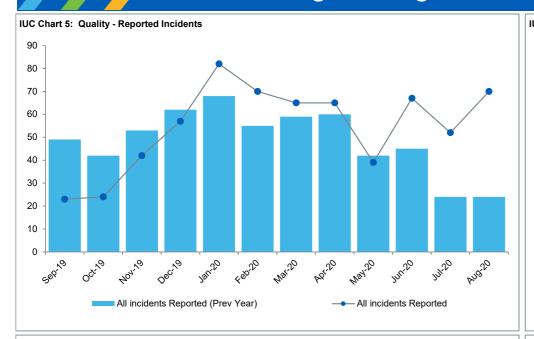
* U&EC whole system measures - national KPI for IUC treatment centres is a new measure and currently under monitoring with NHS England to be reviewed

Performance Commentary:

Demand (Calls offered) in August saw an increase of 11.1% compared with July, and were above the typical August, with a substantial increase of 14.9% on the same month last year.

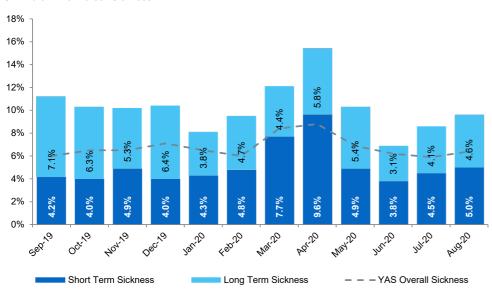
Call Performance was below target for the first time in three months, with the proportion of calls answered in 60 seconds for July at 88.0%, down 2.1 percentage points on July's figure. Clinical Advice was below target for the first time in three months, and proportion of Call Backs made within 1 hour was below target on the month, but both were still just about on track year to date.

ED and Ambulance Validations remained remained above target levels, though the YTD figures for both are still below target.



IUC Chart 6: Quality - Reported Incidents - Moderate & Above 3 2 2 2 2 2 2 2 1 1 1 1 0 0 0 0 Λ Ω 0 Λ Ω 0 febr20 Mar.20 A91.20 May20 120-20 JU1-20 Jun:20 AUGIZO ~ 2 3 Moderate and Above (Prev Year) Moderate and Above This Year

IUC Chart 7: Workforce - Sickness



Quality Commentary:

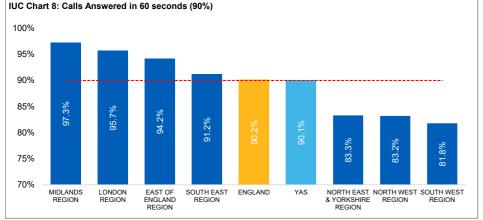
Socially distanced staff huddles have been used to share learning from the governance team so support continued learning.

Workforce Commentary:

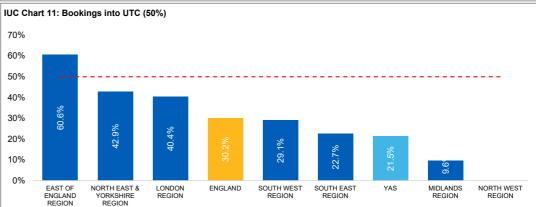
As part of the winter planning and to support staff through this period the IUC team are working with the Trust on delivering the flu vaccination programme to staff in the coming months. The changes to the self isolation rules have increased absence rates in August and there is an expectation that absence rates may increase further as children return to school.

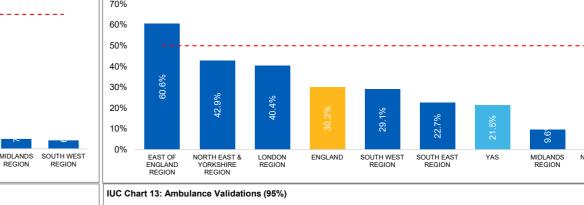
Additional staff have been recruiting for winter and the new NHS 111 First project with 59 new starters planned for beginning of September and similar planned for October. To accommodate these extra staff working safely further work is being undertaken in the call centres to increase capacity with additional Perspex screening.

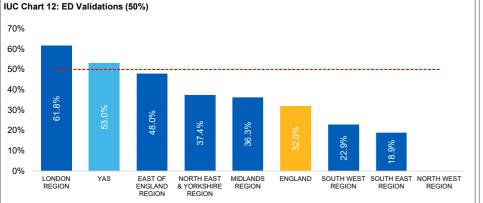
August 2020

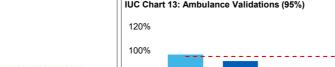


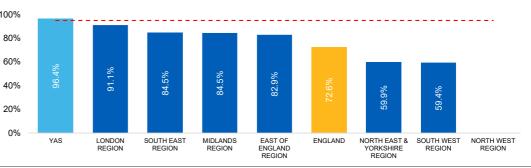






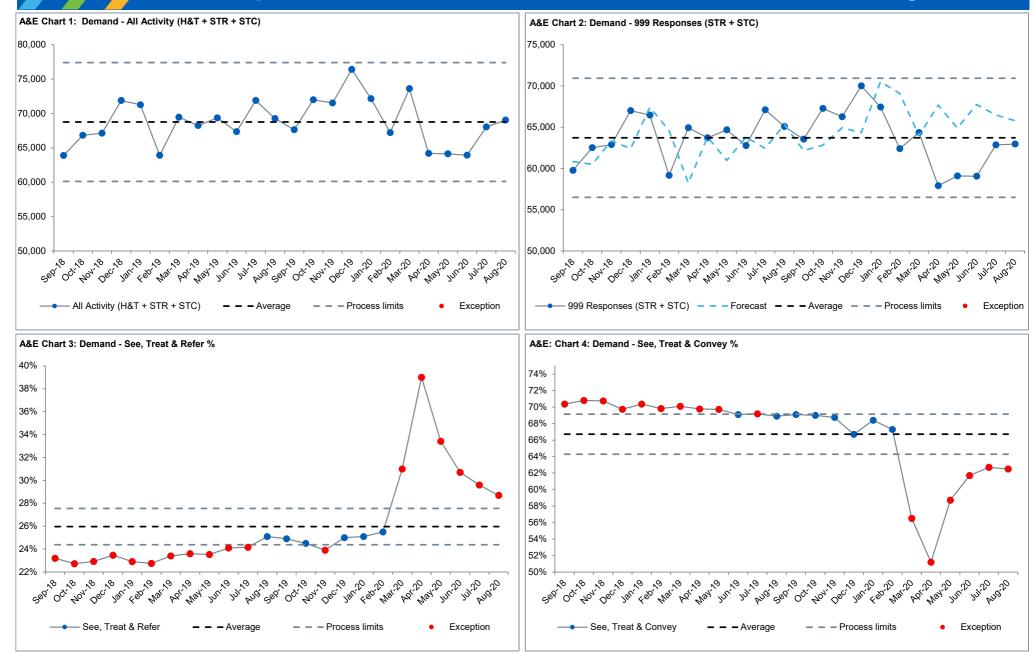




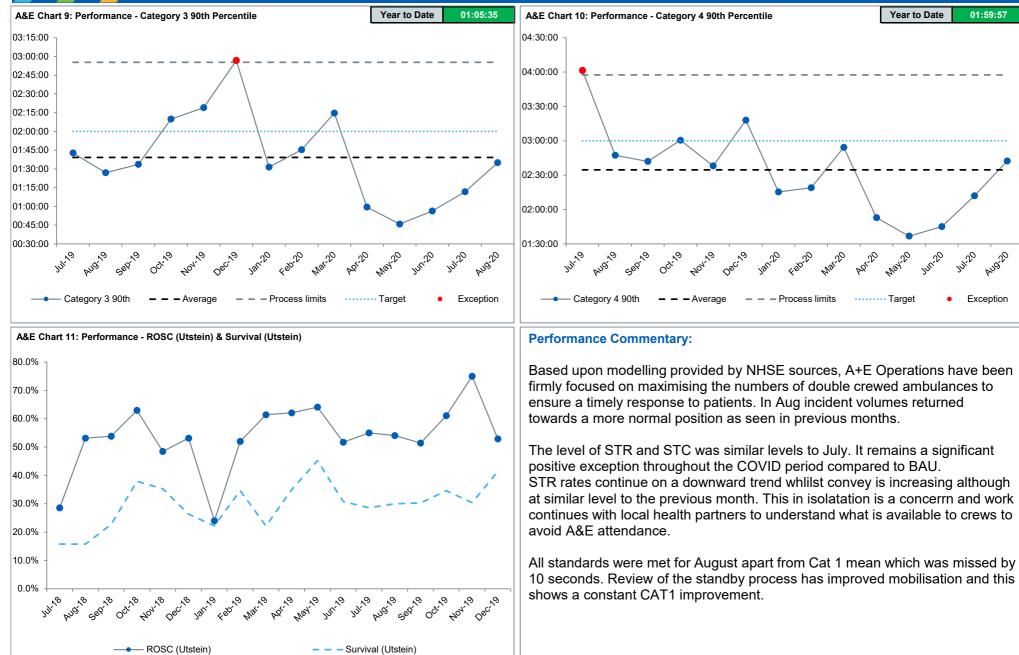


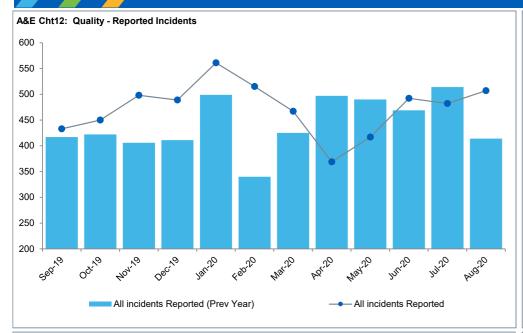
IUC Chart 10: Bookings into IUC Treatment Centres (95%)



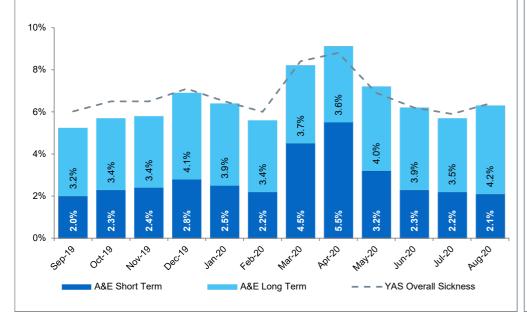


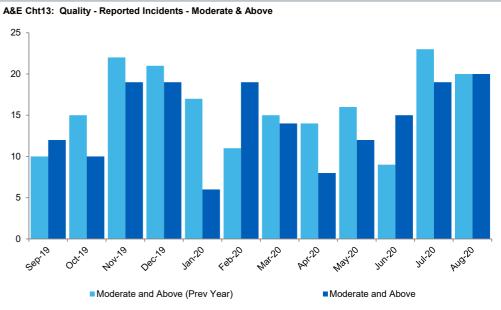
00:12:21 A&E Chart 5: Performance - Category 1 Mean Year to Date 00:07:10 Year to Date A&E Chart 6: Performance - Category 1 90th Percentile 00:08:30 00:16:00 00:08:00 00:15:00 00:07:30 00:14:00 00:07:00 00:13:00 00:06:30 00:12:00 00:06:00 00:11:00 00:05:30 00:05:00 00:10:00 120-20 111-19 Series 00000 404,19 Decing febr20 Mar 20 A91-20 May20 AUGIZO JU1-19 AU919 0000 404,19 feb-20 AU919 JUN-20 JU1-20 Serio Dec. 19 121-20 Nat-20 ~91^{.20} May20 AUG-20 - Category 1 Mean Process limits ······ Target Exception - Category 1 90th - Process limits Exception - Average ······ Target Average Year to Date 00:15:08 A&E Chart 7: Performance - Category 2 Mean A&E Chart 8: Performance - Category 2 90th Percentile Year to Date 00:29:29 00:30:00 01:00:00 00:28:00 00:55:00 00:26:00 00:24:00 00:50:00 00:22:00 00:45:00 00:20:00 00:18:00 00:40:00 00:16:00 00:35:00 00:14:00 00:12:00 00:30:00 00:10:00 00:25:00 00:08:00 00:06:00 00:20:00 APT-20 JU1-19 AUG 19 Series AQT-20 May 20 Jun 20 JU1-20 AU920 JU1-79 AU919 Geor 19 Mari20 May 20 JU1-20 AUG?20 JUN-20 Oct. Marine Dec. 19 rever terry Marine 0^{ct, 1,9} 40^{1,9} 0^{ec, 1,9} rauge teacy - Category 2 Mean - Average - Process limits ······ Target Exception Category 2 90th - Average - Process limits ······ Target Exception _











Quality Commentary:

Reported incidents rose in August, although moderate and above incidents remained unchanged. Further review is under way to identify any themes underlying the increase in overall reporting.

Workforce Commentary:

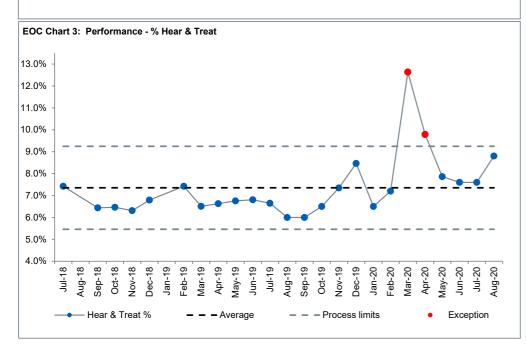
The overall sickness rate increased in August but is below the trust average. During the COVID-19 pandemic the NHS has seen higher levels of sickness absence and this is reflected in A&E staff sickness. As COVID cases increase regionally this is also seen in A&E as sickness levels continue to increase.

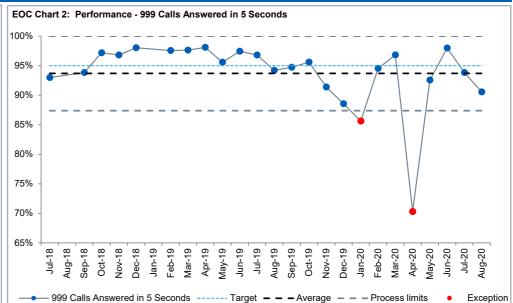
A number of actions have been taken to mitigate sickness absence and the impact governmental direction has had on available staffing. A number of health and wellbeing actions have also been undertaken to support staff including staff swabbing, serology testing and dedicated staff support 'safer working' actions through the local management teams.

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.

Emergency Operations Centre

EOC Chart 1: Demand - 999 Calls Answered 75,000 70.000 65.000 60,000 55,000 50,000 45,000 40.000 35,000 Jul-18 Aug-19 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19 Feb-19 Mar-19 Apr-19 May-19 Jun-19 Jul-19 Sep-19 Oct-19 Nov-19 Dec-19 Jan-20 Feb-20 Mar-20 Apr-20 May-20 Jun-20 Jul-20 Aug-20 999 Calls Answered Exception Process limits





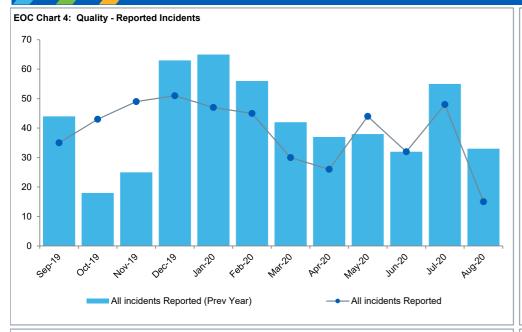
Performance Commentary:

Against the background of the Covid 19 Pandemic, national lockdown and the introduction of the National Pandemic card 36, call demand increased back in line with average.

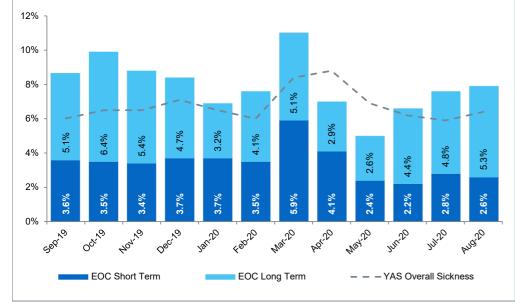
The proportion of calls answered in 5 achieved 90.6% against a 95% KPI. The impact of staff absence within call handling teams reduced but the issue of staff shielding in this staff group has been a contributory factor. Significant effort has gone into training additional call handling staff which supported 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.

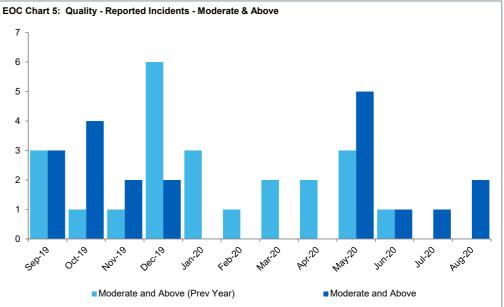
Hear and Treat performance stayed improved in August. The specialist advice support cell has had a positive impact on this area in addition to the ST+R performance.

Emergency Operations Centre









Quality Commentary:

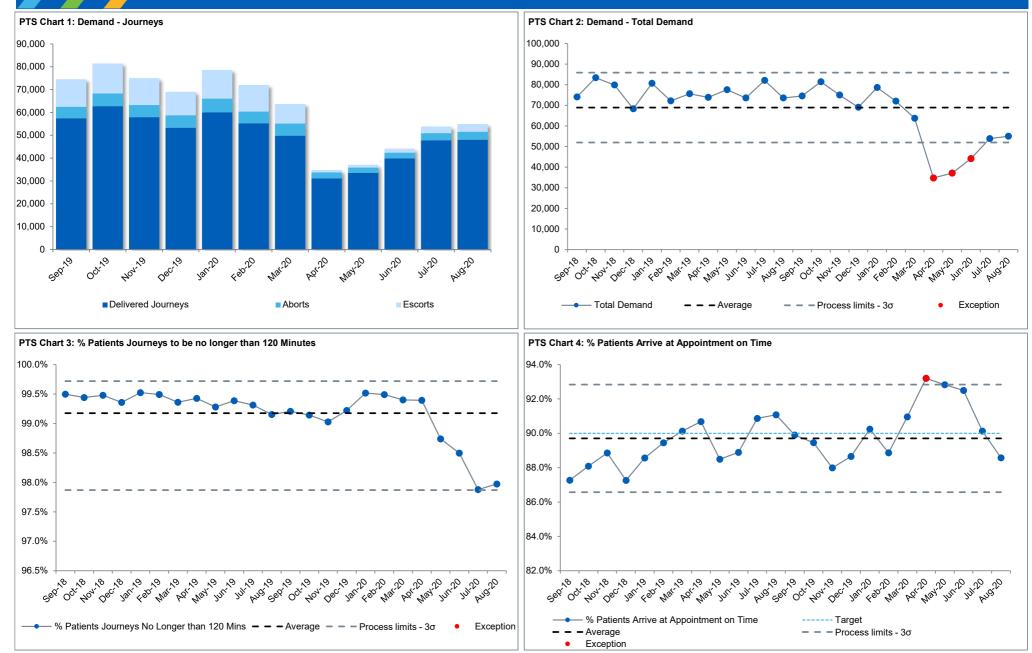
The total number of reported incidents reduced in August but is below the volume experienced in the previous year. Incidents classed as moderate or above will be reviewed as part of the overall A&E review.

Workforce Commentary:

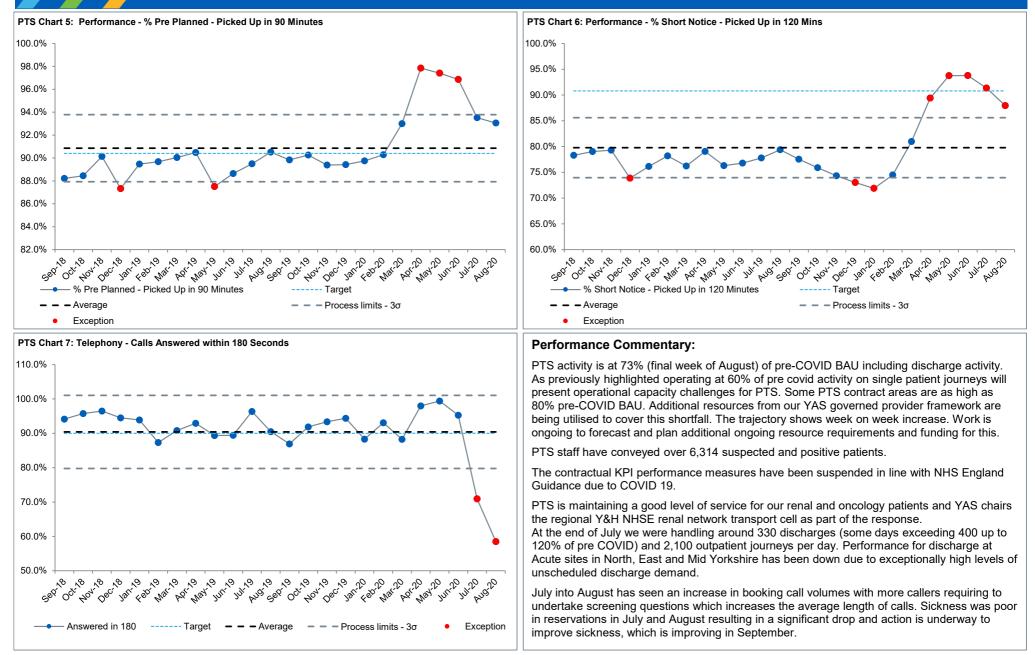
Both long term and short term sickness rates increased again in August, which has further increased from previous months. The levels of Covid related absence has impacted upon EOC performance KPI's. Sickness in EOC had been challenging through the winter months and is now tracking above the Trust average. This represents a concern around the resilience of staff groups and an ability to continue to work under pressure of the COVID period. Actions to support staff have been undertaken in line with Health and Wellbeing initiatives.

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.

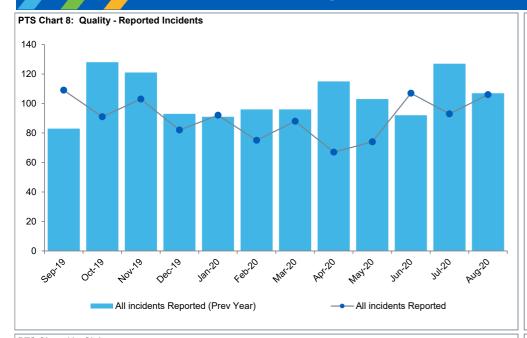
Patient Transport Service

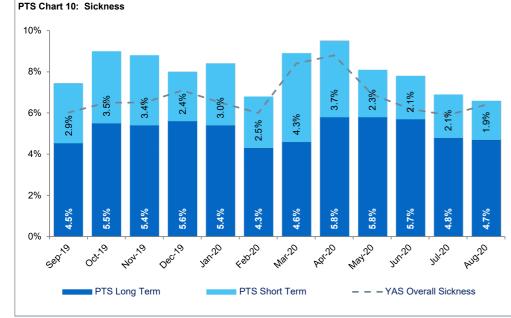


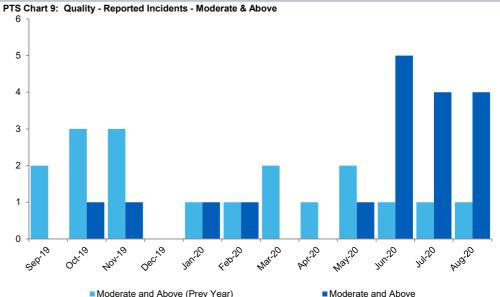
Patient Transport Service



Patient Transport Service







Quality Commentary:

There was a slight increase in the number of reported incidents in August. Incidents remain below 0.01% of total PTS journeys.

Workforce Commentary:

There has been a further decrease in long term sickness for the month of August. Short term sickness has reduced significantly since March and at 1.9% s the lowest it has been YTD at 1.9%.

We have seen a month on month reduction in overall sickness since March of this year currently standing at 6.4%

PDR compliance improved by 1.1% in August to 82.3% with plans in place to improve further going forward. 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 and we have seen a further decrease for the month





Ambulance Quality Indicators

Sustan	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
System	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	Pathways	Pathways	Pathways	Pathways
Total Incidents (HT+STR+STC)	68,558	103,983	96,134	65,202	77,498	77,116	36,308	94,079	64,489	51,314
Incident Proportions%	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1 and C2 Incidents	59.4%	62.7%	60.3%	64.3%	62.2%	61.2%	59.7%	50.1%	57.3%	49.3%
C1 Incidents	7.3%	7.6%	8.9%	8.5%	8.6%	7.9%	6.8%	6.6%	6.7%	7.2%
C2 Incidents	52.2%	55.1%	51.5%	55.8%	53.5%	53.3%	52.8%	43.5%	50.5%	42.2%
C3 Incidents	21.5%	21.4%	17.2%	21.0%	18.4%	22.0%	24.3%	37.0%	31.8%	33.3%
C4 Incidents	1.3%	1.5%	3.1%	0.3%	0.6%	0.8%	1.0%	2.0%	0.5%	2.1%
C5 Incidents	0.3%	1.5%	2.0%	1.5%	7.1%	7.2%	0.0%	0.1%	0.0%	0.2%
HCP/IFT 1-4 Hour Incidents	8.7%	3.4%	7.3%	4.2%	3.4%	4.0%	7.8%	5.5%	3.7%	6.5%
Hear and Treat	8.8%	9.5%	10.1%	8.5%	8.3%	4.9%	7.0%	4.0%	7.2%	9.8%
Performance	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1-Mean response time (Target 00:07:00)	00:07:24	00:06:22	00:07:27	00:07:13	00:07:08	00:07:23	00:06:28	00:06:56	00:07:53	00:06:29
C1-90th centile response time (Target 00:15:00)	00:12:44	00:10:49	00:12:35	00:12:56	00:13:22	00:13:58	00:11:09	00:12:09	00:14:50	00:12:05
C2-Mean response time (Target 00:18:00)	00:18:29	00:14:12	00:27:37	00:22:39	00:22:25	00:24:17	00:23:28	00:12:09	00:18:57	00:17:06
C2-90th centile response time (Target 00:40:00)	00:38:00	00:27:00	00:59:30	00:46:20	00:46:46	00:49:33	00:48:04	00:22:21	00:34:57	00:34:08
C3-Mean centile response time (Target 01:00:00)	00:39:55	00:35:58	01:29:22	01:01:54	00:55:39	01:10:58	01:04:39	00:29:15	01:34:11	00:54:55
C3-90th centile response time (Target 02:00:00)	01:34:56	01:21:15	03:27:07	02:30:09	02:14:03	02:52:44	02:36:02	01:02:22	03:31:37	02:08:18
C4-90th centile response time (Target 03:00:00)	02:42:23	02:25:10	03:47:57	03:06:17	02:49:31	03:58:17	02:29:36	01:34:53	05:01:24	03:07:46
Proportion of All incidents	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
Incidents with transport to ED	54.6%	54.3%	54.1%	54.5%	56.0%	51.9%	56.1%	52.1%	57.5%	50.0%
Incidents with transport not to ED	7.8%	5.4%	6.6%	6.0%	2.5%	4.2%	8.2%	6.2%	1.6%	5.7%
Incidents with face to face response	28.9%	30.9%	29.2%	31.0%	33.2%	39.0%	28.6%	37.8%	33.7%	34.6%
	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
Clinical - January 2020	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	Pathways	Pathways	Pathways	Pathways
ROSC	28.8%	32.5%	35.8%	34.1%	23.6%	30.6%	30.3%	32.1%	27.9%	28.6%
ROSC - Utstein	57.1%	59.1%	48.5%	63.6%	54.2%	56.0%	68.6%	52.5%	55.3%	50.0%
Cardiac - Survival To Discharge	11.4%	8.4%	7.4%	9.2%	8.3%	10.5%	3.9%	9.2%	9.9%	8.0%
Cardiac - Survival To Discharge Utstein	37.8%	28.3%	24.2%	30.3%	34.0%	36.2%	19.0%	25.0%	33.3%	23.5%