



Integrated Performance Report

September 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).







Contents

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





Strategy 2018 - 2023

September 2020



Delivery is directly supported by a range of enabling strategies





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.
- 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.
- B Develop public and community engagement to promote YAS as a community partner; supporting education, employment and community safety.

Service Transformation & System Pressures

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

• Increasing focus on health inequalities across the health and care sector – particularly in response to COVID – increasing role for system partners to develop clear action plans

- Phase 3 planning submissions successfully completed overview summary received and being reviewed for YAS focused summary against each ICS level plan
- Increased emphasis on the NHS People Plan and Mental Health Guidance.
- Ongoing YAS engagement with system level planning to support response to COVID and winter planning.
- Winter and flu vaccination planning commenced.
- Awaiting confirmation of capital bids, to support ICS response to COVID
- 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.



Summary of Exceptions

Service Line	Indicator ID	Exception Commentary
IUC	001	The IUC / NHS 111 saw much higher than forecast demand (calls answered) during September 2020 September 2019 and 25% above the contract ceiling demand for September. As a result of high dema KPIs in September. They most notable are: Call Performance (answered in 60 seconds) was significantly below target at 70.3%, the worst perform down on August. Relatedly, the abandon rate for calls was 5.2%, missing the target of 5% for the first Clinical demand for September was 41,205 cases compared to the contract level of 32,903, a rise in of clinical advice and validations were below target, even though we had provided more clinical input tha Clinical Advice was just below target in September at 29.3%, however proportion of call backs made v 41.2%, down from 49.7% in August. Proportion of Call Backs made within 1 hour is now below target f ED and Ambulance Validations also fell below target for the first time since May, both around 10 perce YTD figures for both are now around 5 percentage points below target. This needs to be set in the cor acuity with ED validations for September were 6,609 against 4,031 in the plan, 64% above plan levels
500	002	Telephony - 999 Calls Answered within 5 Seconds has been challenging. Overall staffing capacity, sic much lower than expected call answer standards.
EOC	009	PDR Staff Appraisals - Given the staffing challenge in September and focus on operational delivery P produced have been challenging to improve upon.
	003	Significant pressure as a result of increased total abstractions resulted in a lack of delivery in all but C represents a significant degradation from the year to date position.
	009	PDR Staff Appraisals - Given the staffing challenge in September and focus on operational delivery, F produced have been challenging to improve upon.
A+E	A&E Chart 3	Demand - See, Treat & Refer % - See treat and refer had seen an upward trend for several months pr stages of the Covid pandemic and many patients calling 999 were dealt with without attendance at A+ Specialist advice cell in A+E supported Clinicians on scene with decision making and further advice. T in continued positive exception which is a key work stream being taken forward through recovery and stream.
	A&E Chart 4	Demand - See, Treat & Convey % - This exception is the mirror of the above as conveyance to hospit
	021	The vehicle availability remains under target partly due to the turnaround time within the dealer networ rates due to Covid self isolation, Fleet are working with the manufacturers to ensure vehicles are repa
	004	July to September has seen a surge in PTS bookings as planned care restarts. In addition, more ques patient safety is maintained, and PTS resource capacity is protected for those patients who are eligible a 6% improvement upon previous month.
	009	PDR Staff Appraisals - current rate is below the Trust target but 15% better than the Trust average, Pl September to 85.3% with plans in place to improve further going forward.
PTS	PTS Chart 6	Short Notice - Picked Up in 120 Mins - Performance for discharge at acute sites is under pressure due Short notice bookings account for 24% of total PTS activity, up to 120% pre-COVID. NHS E mandate discharge requirements. Regionally we missed target by 0.1% of the On Day 120 min KPI.
	021	Vehicle availability has increased slightly but still remains under target, this is mainly due to the over a supplying parts for these vehicles. There are 126 vehicles on order which will bring the age profile in li these vehicles will be delivered through Q3 / 4.

September 2020

20 at 151,588; up 19.7% compared with nand levels there were exceptions across many

rmance since April and 17.7 percentage points st time since April.

n demand by 25%, subsequently the KPIs for nan the contract level.

e within 1 hour was much further below target at et for year to date.

centage points short of the target proportion. context of significant increase in demand and els.

sickness and COVID absence have resulted in

PDR compliance recovery plans that have been

Cat 1 90th performance standards and

PDR compliance recovery plans that have been

pre COVID, this was built upon during the early A+E. Actions such as the introduction of the . This continues to be the case and has resulted ind the IUEC Programme via the EOC work

bital declined as a result.

ork were they are experiencing high abstraction paired in a timely manor.

estions must be asked in order to ensure that ble and average call durations are up. Sept saw

PDR compliance improved by 3.4% in

lue to exceptional levels of discharge demand. tes that KPIs are suspended due to Rapid Covid

age vehicles and the manufacturers no longer line with the trusts vehicle replacement plan,



Summary of Exceptions

Service Line	Indica	itor ID	Exception Commentary
INFORMATION MANAGEMENT	0,	16	Although FOI compliance decreased in September but remains above the previous monthly rate. Rer that this will increase compliance for next month. IG compliance is continuing to improve at 91.1%. Mitigating actions continue by contacting Informatio encourage staff who's training has expired or is due to expire within the next month to complete the trathis rate.
FINANCE	019	11.20	In line with COVID-19 Financial Regime the Trust is in a breakeven position at M6. A full review of financial metrics will be undertaken and aligned to the Trust's overarching COVID-19 r

September 2020

emedial action has been taken and it is hoped

tion Asset Owners and senior managers to training as soon as possible to further increase

ecovery plan.

	Patien	ts & Co	ommunities													Sept	ember	2020
				Oct-19	NI- 40	D							1.1.00		00		Sep-20	
Indicator ID	Key Ope	erational Stand	ational Standard Description		Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Target / Forecast	Actual	Actual v Target/Fcast
			Calls Offered	137,427	156,871	175,308	144,564	148,175	308,185	175,235	153,686	133,386	139,324	154,845	173,929	128,644	173,929	
			Call Answered	122,183	132,591	160,403	135,455	135,463	155,346	143,075	141,878	127,239	132,417	147,469	151,588		151,588	
		Calls	Answered within 60 Seconds	81.7%	75.8%	83.1%	90.7%	85.0%	26.2%	67.3%	87.8%	94.8%	90.1%	88.0%	70.3%	90%	70.3%	▼
			Core Clinical Advice	31.2%	29.5%	28.3%	30.5%	28.3%	28.2%	28.0%	30.7%	32.7%	31.3%	29.7%	29.3%	30%	29.3%	▼
001	Integrated Urgent Care	Clinic	an Called Back within 1 Hour	53.2%	51.2%	56.9%	59.8%	46.6%	45.9%	71.7%	70.4%	58.1%	56.2%	49.7%	41.2%	60%	41.2%	
001			Direct Bookings	44.9%	44.7%	45.2%	45.8%	45.0%	35.0%	29.9%	35.1%	34.0%	33.4%	32.6%	32.6%	30%	32.6%	
			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%	19.0%	50%	19.0%	
		Bookin	gs into IUC Treatment Centres	61.2%	60.4%	60.2%	62.9%	61.6%	55.5%	48.3%	49.9%	51.4%	48.3%	42.9%	42.5%	95%	42.5%	
			ED Validations		52.1%	46.6%	50.8%	37.7%	29.9%	33.0%	35.4%	52.8%	53.0%	50.2%	39.7%	50%	39.7%	
		Ambulance Validations		97.5%	98.1%	97.8%	98.3%	90.4%	53.6%	74.3%	94.1%	97.6%	96.4%	95.9%	86.7%	95%	86.7%	
002	EOC	Telephony - 999 Calls Answered		63,779	63,358	68,507	57,223	54,569	67,046	50,458	46,629	47,355	53,867	57,811	60,000		60,000	
002	EOC	Telephony - 9	99 Calls Answered within 5 Seconds	91.4%	87.6%	88.0%	94.8%	96.1%	77.6%	93.1%	97.9%	93.0%	92.2%	90.6%	82.7%	95%	82.7%	
		All A	Activity (H&T + STR + STC)	71,982	71,517	76,409	72,149	67,218	73,608	64,197	64,125	63,924	68,032	69,026	67,600		67,600	
			Hear & Treat (H&T)	6.5%	7.3%	8.5%	6.5%	7.2%	12.6%	9.8%	7.9%	7.6%	7.6%	8.8%	8.9%		8.9%	
		S	See, Treat & Refer (STR)	24.5%	23.9%	25.0%	25.1%	25.5%	31.0%	39.0%	33.4%	30.7%	29.6%	28.7%	28.1%		28.1%	
		Se	ee, 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%	62.9%		62.9%	
		999	Responses (STR + STC)	67,273	66,263	70,017	67,446	62,407	64,362	57,916	59,083	59,057	62,855	62,961	61,555	70,509	61,555	\checkmark
		Ostanomia	Mean	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	00:07:46	00:07:00	00:07:46	
003	A&E Operations	Category 1	90th Percentile	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	00:13:22	00:15:00	00:13:22	
			Mean	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	00:22:42	00:18:00	00:22:42	
		Category 2	90th Percentile	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	00:47:27	00:40:00	00:47:27	
		Category 3	90th Percentile	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	02:22:07	02:00:00	02:22:07	
		Category 4	90th Percentile	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	03:02:41	03:00:00	03:02:41	
		A	verage Turnaround Time	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	00:36:15	00:30:00	00:36:15	
		Averag	e Job Cycle Time (Responses)	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	02:02:19		02:02:19	
		Journeys		81,442	75,033	69,065	78,620	72,004	63,751	30,448	37,068	44,138	53,887	54,984	62,594	74,548	62,594	▼
		Pati	ent Journeys < 120 Minutes	99.1%	99.0%	99.2%	99.5%	99.5%	99.4%	99.4%	98.7%	98.5%	97.9%	98.0%	99.4%	90.0%	99.4%	
	8-0	· · · · ·		89.5%	88.0%	88.7%	90.2%	88.9%	91.0%	93.2%	92.8%	92.5%	90.1%	88.6%	90.0%	90.0%	90.0%	•
004	PTS % Pre Planned - Picked Up in 90 Minutes	90.3%	89.4%	89.4%	89.7%	90.3%	93.0%	97.9%	97.4%	96.9%	93.5%	93.1%	92.9%	90.4%	92.9%			
		% Pre Planned - Picked Up in 90 Minutes % Short Notice - Picked Up in 120 Minutes	75.9%	74.3%	73.0%	71.9%	74.5%	81.0%	89.4%	93.8%	93.8%	91.4%	87.9%	87.9%	88.8%	87.9%	▼	
		Calls /	Answered within 180 Seconds	91.9%	93.4%	94.4%	88.3%	93.1%	88.2%	98.0%	99.4%	95.3%	70.9%	58.5%	64.8%	90.0%	64.8%	▼

Indicator ID	Key Ope	erational Standard Description	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	
		% Received STEMI Bundle	53.1%			40.0%			58.7%			44.0%	
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.

Feb-20	Mar-20
94.6%	

	Our Pe	eople													Sept	embe	2020
Indicator ID	Koy One	rational Standard Description	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20		Sep-20	
Indicator iD	Key Ope	rational Standard Description	001-19	NOV-19	Dec-19	Jan-20	rep-20	Mai-20	Apr-20	Way-20	Juli-20	Jui-20	Aug-20	3ep-20	Target / Forecast	Actual	Actual v Target/Fcast
006	Workforce	Total FTE in Post	4,732	4,773	4,753	4,759	4,777	4,836	4,898	4,924	4,993	4,987	4,986	5,026		5,026	
000	WORKIOICC	BME %	5.2%	5.1%	5.1%	5.1%	5.3%	5.3%	5.2%	5.3%	5.4%	5.4%	5.5%	5.6%	11.1%	5.6%	▼
007	Recruitment	New Starters (FTE)	62.3	53.1	13.3	44.6	42.1	89.1	104.3	41.8	60.1	50.0	27.9	107.3		107.3	
008	Turnover (FTE)	YAS (Rolling 12 Month Periods)	9.7%	10.1%	9.7%	9.7%	9.7%	9.2%	9.2%	8.7%	8.4%	8.6%	8.3%	8.3%		8.3%	
		YAS	77.6%	76.4%	75.7%	74.6%	75.9%	71.6%	65.5%	64.6%	66.3%	68.1%	69.5%	70.5%	90.0%	70.5%	▼
		A&E Operations	80.2%	80.5%	78.8%	78.3%	78.8%	74.8%	68.2%	63.4%	65.8%	69.0%	72.0%	74.0%	90.0%	74.0%	
009	PDR / Staff Appraisals	EOC	67.0%	65.1%	67.1%	68.7%	68.5%	65.3%	63.9%	69.4%	71.8%	72.5%	69.4%	66.1%	90.0%	66.1%	▼
		Integrated Urgent Care	67.5%	63.0%	60.8%	56.2%	65.0%	58.6%	58.1%	81.5%	89.6%	93.4%	92.4%	89.3%	90.0%	89.3%	
		PTS	89.1%	86.2%	88.4%	86.9%	87.7%	82.9%	74.5%	80.3%	79.9%	81.2%	82.3%	85.3%	90.0%	85.3%	▼
		YAS	98.4%	98.0%	97.6%	97.2%	97.6%	97.4%							90.0%		
		A&E Operations	99.0%	98.6%	98.2%	97.8%	97.9%	97.8%							90.0%		
010	Training: Stat & Mand (Substantive Employees)	EOC	97.7%	97.7%	97.4%	96.5%	98.3%	98.0%		Stat Mand	Reporting is	currently u	nder review		90.0%		
		Integrated Urgent Care	98.7%	98.2%	96.1%	95.7%	97.1%	96.7%							90.0%		
	PTS	PTS	99.5%	99.6%	100.0%	100.0%	100.0%	100.0%							90.0%		
		Total Sickness Rate	6.5%	6.5%	7.1%	6.5%	6.0%	8.4%	8.8%	6.9%	6.2%	5.9%	6.4%	7.2%		7.2%	
011	Health & Wellbeing	Long Term Sickness Rate	4.0%	3.7%	4.3%	3.8%	3.6%	3.8%	3.8%	4.0%	3.9%	3.7%	4.2%	4.2%		4.2%	
		Short Term Sickness Rate	2.6%	2.8%	2.8%	2.7%	2.5%	4.6%	5.0%	2.9%	2.3%	2.2%	2.2%	3.0%		3.0%	



Achieving Excellence

	Acme	/ing Excellen	Ce													Sept	emper	2020
	K. A.		• • •	0.1.40		D		E.L.OO					1.1.00				Sep-20	
Indicator ID	Кеу Ор	perational Standard Descript	lion	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Target / Forecast	Actual	Actual v Target/Fcast
		All Rep	orted	666	736	735	801	739	687	524	633	716	758	721	709	Torocuot	709	Turgour ouor
012	Incidents	Serio	us	1	6	7	2	2	4	1	1	3	1	5	5		5	
012	incidents	Moder	rate	14	23	23	8	23	16	11	18	22	31	27	28		28	
		Medication	Related	75	69	69	60	64	50	43	58	81	63	52	47		47	
			Complaint	19	20	13	16	16	21	17	15	25	29	33	32		32	
		A&E	Compliment	88	117	102	125	109	91	82	69	87	104	79	94		94	
			Concern	23	12	20	17	15	10	8	7	16	18	9	14		14	
			Service to Service	26	25	16	29	23	13	21	21	18	33	29	19		19	
			Complaint	11	18	12	4	6	1	6	5	9	10	9	11		11	
		EOC	Compliment	0	4	2	3	3	3	1	0	0	1	0	5		5	
			Concern	17	9	17	6	8	3	0	1	9	3	2	6		6	
013	Patient Relations		Service to Service	13	18	23	20	5	15	2	4	4	13	10	13		13	
			Complaint	29	18	31	19	24	14	9	15	18	13	13	9		9	+
		Integrated Urgent Care	Compliment	4	7	12 9	10 2	4	2	2	5 3	7	8	3	3		3	
	PTS	Concern Service to Service	21	3 17	9 17	2	40	52	31	3 24	43	53	44	2 57		57		
		Complaint	14	17	7	9	11	14	2	6	43 9	6	11	16		16		
			Compliment	4	7	9	5	3	2	2	2	9	11	8	5		5	
		PTS -		Concern	31	23	22	24	24	24	10	3	7	12	11	15		15
			Service to Service	27	24	24	47	34	22	7	7	7	24	17	13		13	
		Stroke - Call to Hosp		01:21	N/A	01:19	01:10	01:14	N/A	N/A	N/A	N/A	N/A	N/A	N/A		N/A	
		Stemi - Call to Catheter Ins	. ,	02:06	02:18	02:12	02:08	02:10	N/A	N/A	N/A	N/A	N/A	N/A	N/A		N/A	
014	Clinical Outcomes Data	ROSC (U	- , ,	61.1%	75.0%	52.9%	57.1%	54.8%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		N/A	
		Survival (I	Jtstein)	34.6%	30.4%	41.4%	37.8%	30.8%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		N/A	
		Adult Re	ferrals	906	1,013	1,045	1,049	947	749	833	1,054	1,030	1,095	1,145	1,056		1,056	
015	Safeguarding	Child Re	ferrals	587	551	540	603	638	532	441	539	608	653	657	615		615	
040		Information Governance	Training Compliance	95.2%	73.3%	70.3%	64.3%	72.3%	72.3%	72.8%	76.1%	81.3%	83.3%	88.8%	91.1%	95%	91.1%	
016	Information Management	FOI Request (Compliance	60.5%	32.3%	61.9%	69.7%	70.3%	57.1%	56.0%	83.3%	85.7%	70.6%	90.9%	82.6%	90%	82.6%	▼
		Hand Hy	giene	99.1%	98.3%	98.4%	99.3%	98.8%	98.9%	99.8%	100.0%	99.0%	99.0%	100.0%	99.0%	95%	99.0%	
017	IPC Audit	Prem	ise	98.9%	99.0%	96.7%	98.4%	98.3%	98.7%	98.8%	100.0%	99.0%	99.0%	99.0%	99.0%	95%	99.0%	
		Vehio	cle	99.4%	99.1%	98.0%	98.7%	99.1%	98.4%	99.3%	99.0%	99.0%	98.0%	99.0%	99.0%	95%	99.0%	
		National CCG2: Staf										No reporting r	required					
		National CCG10: Ambular Information at Sce										No reporting r	required					
		National CCG10B: Ambulance –	Access to Patient Information									No reporting i	required					
	at Scene (Demon Local 1: Supporting the need	eds of complex Mental									No reporting i	-					+	
018	COLIIN	Health Patients via Teleconferencing																
010	CQUIN Local 1: IUC/111 Staff Flu Vaccinations										No reporting r							
		Local 2: IUC/111 F	•									No reporting r	-					<u> </u>
		Local 3: IUC/111 Se	•									No reporting r	-					<u> </u>
		Local 1: PTS Vehicle Electronic Checklist App									No reporting r	required					<u> </u>	
		Local 1: PTS Staff I	Flu Vaccinations									No reporting r	required					

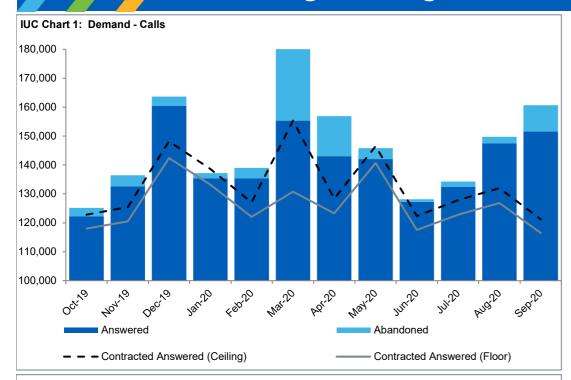


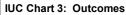
Resource & Sustainability

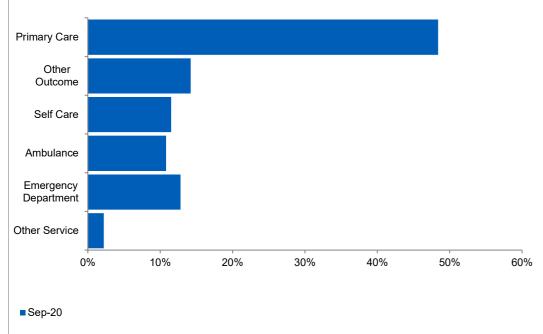
Indicator ID	Kayon	anational Stand	ard Description	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20		Sep-20			YTD					
	Key Op			001-19	NOV-19	Dec-19	Jan-20	rep-20	War-20	Арт-20	May-20	Jun-20	Jui-20	Aug-20	Sep-20	Plan	Actual	Plan v Actual	Plan	Actual	Plan v Actual				
			Risk Rating	1	1	1	1	1	1																
			EBITDA	-2,073	-1,315	-812	-824	-855	-998																
019	Finance Overview		Surplus	-507	-249	238	4	240	159																
019			Capital	1,152	1,889	1,947	957	2,967	4,908																
			Cash	53,688	57,627	58,179	58,364	54,700	46,201		_	_	_		_										
			CIP	532	532	532	582	582	623	EXCEPTION	EXCEPTION	SUMMARY EXCEPTION	EXCEPTION	SUMMARY EXCEPTION	EXCEPTION										
			A&E	28	28	28	28	28	28	EP	EPI) EP1	EPI	EPI	EPI										
			Business Development	0	0	0	0	0	0	EXC		EXC		ЕХС	EXC										
			CEO Directorate	2	2	2	2	2	2	SUMMARY	SUMMARY	ARY	ARY	ΔRY	SUMMARY										
			Clinical	2	2	2	2	2	2	Ŵ	ŴW	ŴW	SUMMARY	WW	ŴW										
			Estates	19	19	19	19	19	19		su														
			Finance	36	36	36	36	36	36	SEE	PLEASE SEE	SEE		PLEASE SEE	SEE										
020	CIP		Fleet	87	87	87	87	87	123	PLEASE (PLEASE	ASE	PLEASE	ASE	PLEASE										
			Planned & Urgent Care	67	67	74	81	81	82	PLE	PLE	PLE	PLE	PLE	PLE										
			Quality, Governance	0	0	0	0	0	0																
			Hub & Spoke	0	0	0	0	0	0																
			Workforce OD	57	57	57	57	57	56																
			RESERVE	234	234	227	269	269	274																
		Curren	nt Position (Cumulative YTD)	532	532	532	5,387	5,969	6,592																
			Vehicle age +7	3.3%	1.8%	3.5%	6.6%	3.5%	3.5%	6.7%	6.7%	8.9%	8.2%	8.4%	8.4%		8.4%								
		A&E	Vehicle age +10	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.2%	0.2%	0.2%		0.2%								
021	021 Transport/Fleet		Availability	91.0%	91.2%	91.7%	91.2%	90.6%	90.6%	92.5%		92.7%	92.9%	92.7%	91.4%	95%	91.4%	▼							
021		Transport/Fleet	Transport/Fleet	Transport/Fleet	Transport/Fleet	Transport/Fleet		Vehicle age +7	16.9%	19.4%	15.3%	10.7%	16.7%	16.7%	8.6%	8.6%	17.7%	18.2%	16.5%	16.5%		16.5%			
		PTS	Vehicle age +10	24.0%	22.5%	26.6%	36.5%	27.2%	27.2%	22.5%	22.5%	20.8%	16.9%	17.7%	17.7%		17.7%								
			Availability	90.0%	90.0%	88.0%	89.0%	89.0%	89.0%	91.9%	92.4%	93.1%	93.1%	91.0%	91.7%	95%	91.7%	▼							

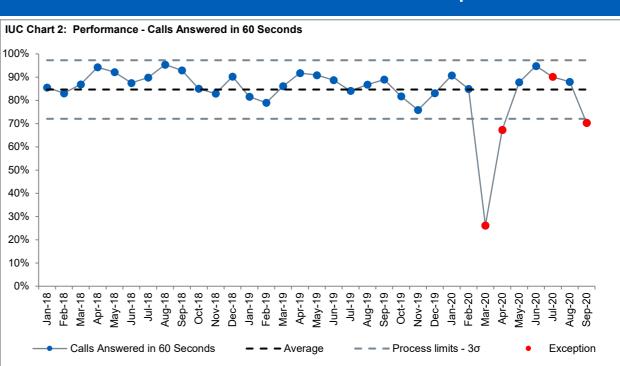


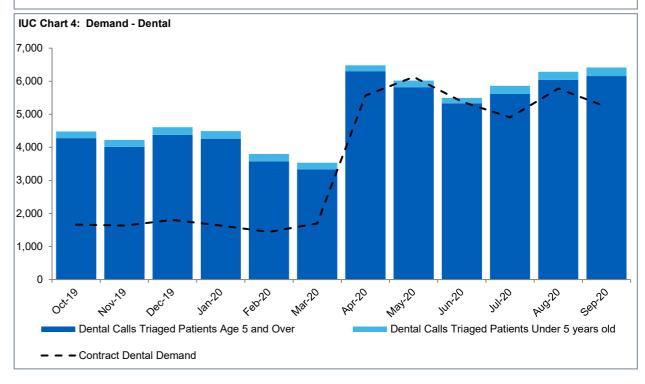














September 2020

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%	70.3%							82.6%
Core Clinical Advice (30%)	28.0%	30.7%	32.7%	31.3%	29.7%	29.3%							30.2%
Clinician Called Back within 1 Hour (60%)	72.2%	70.3%	58.1%	56.2%	49.7%	41.2%							57.6%
Direct Bookings * (30%)	29.9%	35.1%	34.0%	33.4%	32.6%	32.6%							33.0%
Bookings into UTC * (50%)	16.1%	15.1%	18.8%	21.5%	22.5%	19.0%							19.1%
Bookings into IUC Treatment Centres * (95%)	48.3%	49.9%	51.4%	48.3%	42.9%	42.5%							47.0%
ED Validations (50%)	33.0%	35.4%	52.8%	53.0%	50.2%	39.7%							44.4%
Ambulance Validations (95%)	74.3%	94.1%	97.6%	96.4%	95.9%	86.7%							90.8%

* 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:

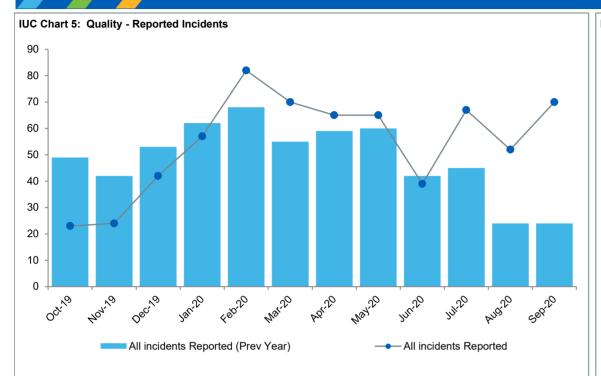
Most performance measures were below target levels in September, in general as a result of very high demand that mirrored the challenges faced during March and April.

Demand (Calls offered) in September saw an increase of 2.8% compared with August, and were 19.7% higher than the same month last year.

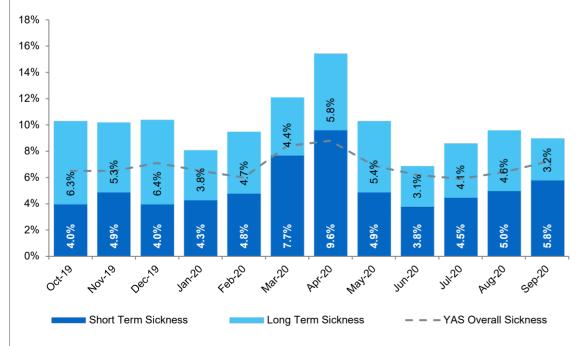
Call Performance was substantially below target, with the proportion of calls answered in 60 seconds for September at 70.3%, down 17.7 percentage points on August's figure. The proportion of Clinician Call Backs made within 1 hour was 41.2% against a target of 60%.

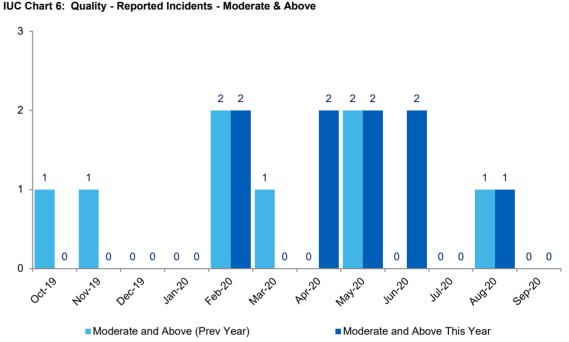
ED and Ambulance Validations were also considerably below target levels all as a result of this unprecedented demand.

As a result of the demand within the NHS 111 Brand locally and nationally NHS England are now standing up the national covid response service (CRS) to remove the covid demand from core IUC services. The CRS was nationally in place 5 October 2020.









Quality Commentary:

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

Workforce Commentary:

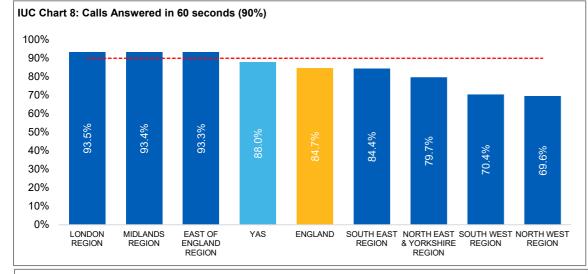
The IUC team continue to support the ongoing pandemic, preparation for NHS 111 First and winter with the following key achievements associated with workforce:

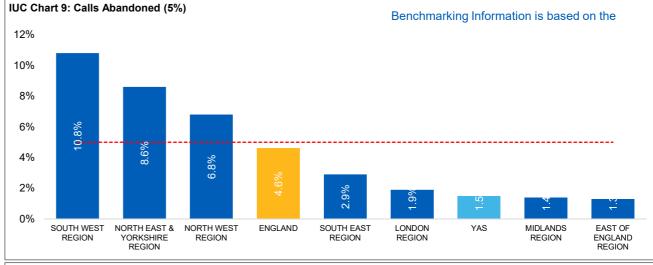
Successful recruitment and training: 121(heads) Health Advisors and 12 (heads) clinical advisors recruited into the service Sept and October intakes. Additional 5 (heads) clinical advisors planned for a November course with ongoing recruitment process and interviews planned for 12 clinical bank staff and 16 clinical advisors.

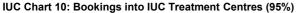
NHS Pathways: successful training / implementation of version 21 of NHS Pathways, Tuesday 6 October 2020

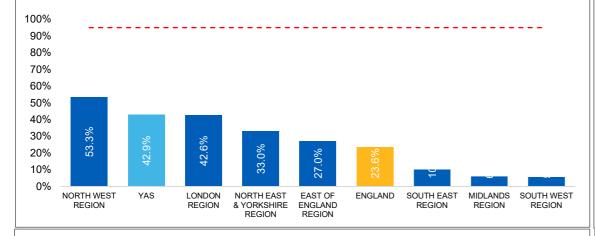
Flu Vaccinations: Flu clinical rolled out across the call centres with already 68% of staff in IUC vaccinated.

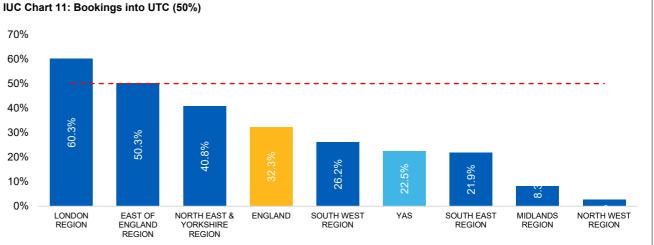
Updated IPC measures: Introduced new measures into the call centre based on updated national guidance and internal learning including the use of masks for staff walking away from their workstations.

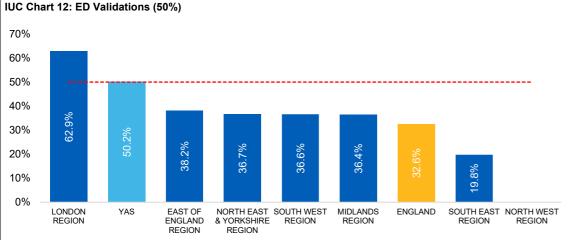






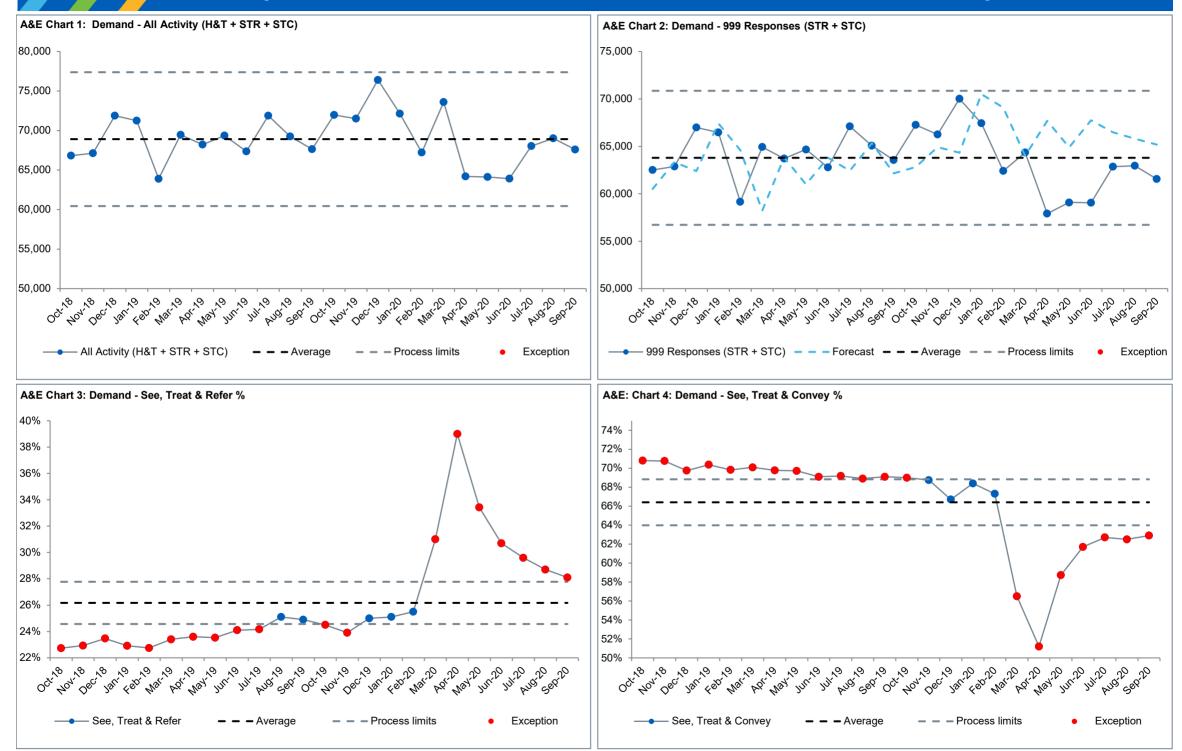


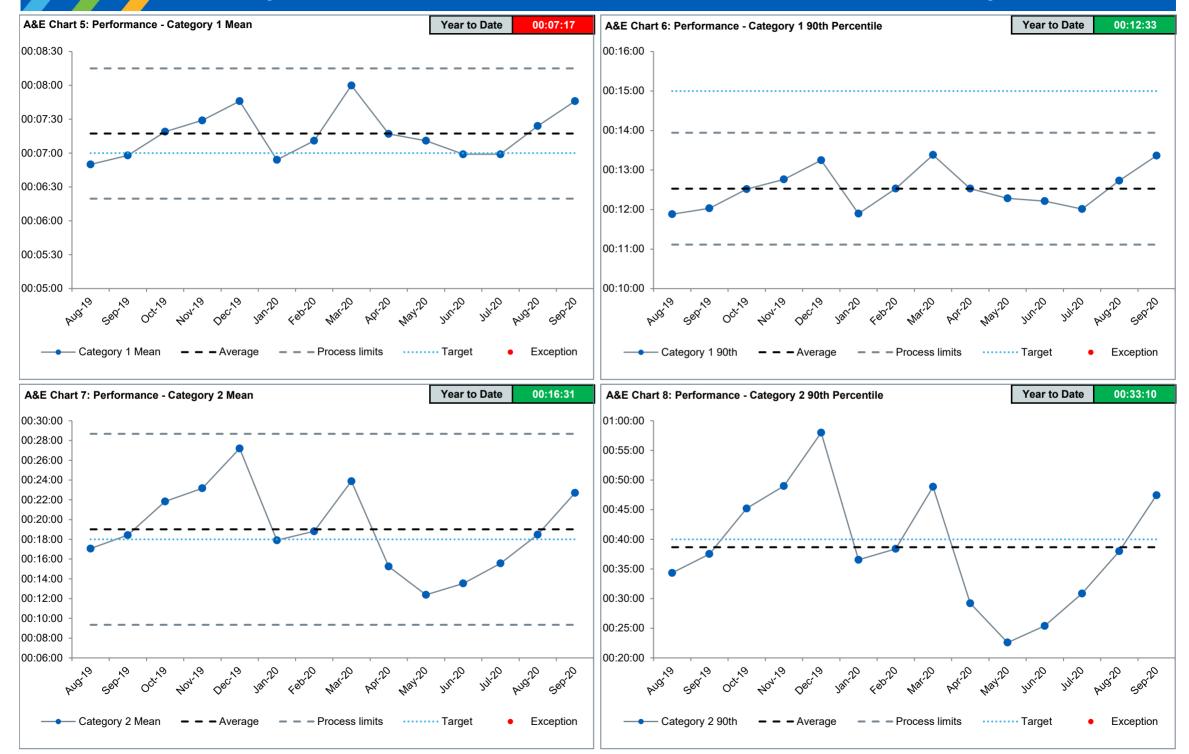




IUC Chart 13: Ambulance Validations (95%)





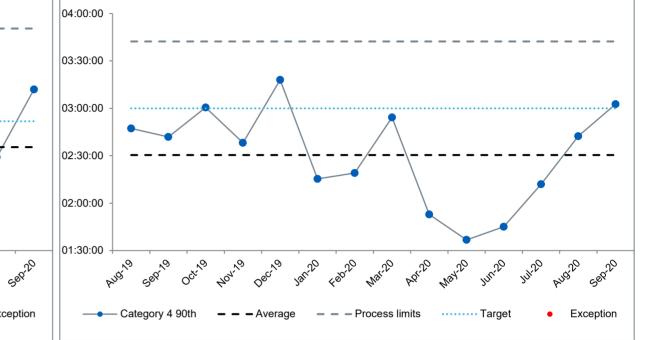


— ROSC (Utstein)

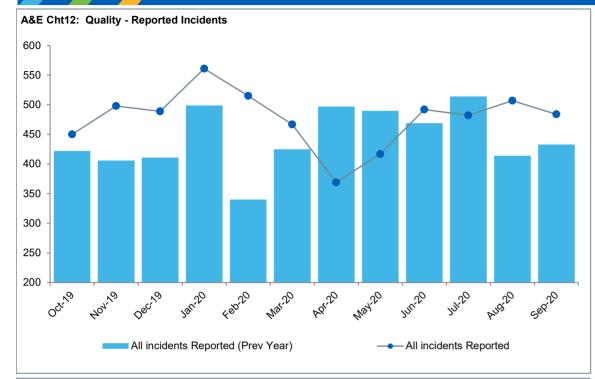
Year to Date 01:15:48 Year to Date 02:09:28 A&E Chart 9: Performance - Category 3 90th Percentile A&E Chart 10: Performance - Category 4 90th Percentile 03:15:00 04:00:00 03:00:00 02:45:00 03:30:00 02:30:00 02:15:00 03:00:00 02:00:00 01:45:00 02:30:00 01:30:00 01:15:00 02:00:00 01:00:00 00:45:00 00:30:00 01:30:00 AUGTZO Serie Exception Exception Category 3 90th Averade Process limits Target Category 4 90th Average Process limits ······ Target A&E Chart 11: Performance - ROSC (Utstein) & Survival (Utstein) **Performance Commentary:** 80.0% Based upon falling COVID-19 demand RRVs were reintroduced to A&E Operations . Throughout September there was a slight fall in demand however 70.0% volumes were in expected levels. 60.0% The level of STR and STC was similar to August. It remains a significant positive exception throughout the COVID period compared to BAU. STR rates 50.0% continue on a downward trend whilst convey is increasing although at similar 40.0% level to the previous month. This in isolation is a concern and work continues with local health partners to understand what is available to crews to avoid 30.0% A&E attendance. Against the background of a slight fall in demand we had an increased level of 20.0% total abstraction due to an increase in additional training as university courses 10.0% enrolled through September. Total abstractions in line with the national COVID picture, additional abstractions were seen above as we enter a second wave. 0.0% Janio Maying An increase of handover delays at Hospitals were experienced due to entering 000,18 404.18 Dec.18 Jun 19 JU1-79 AUGIO Series 0000 404,09 AU018 Jan 20 Leon Marine Porne a second wave.

Survival (Utstein)

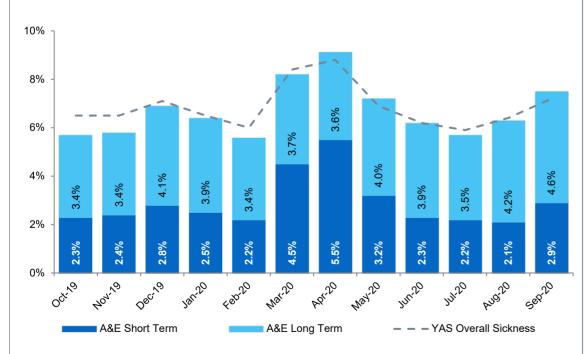
All categories showed a decline in performance against national standards.

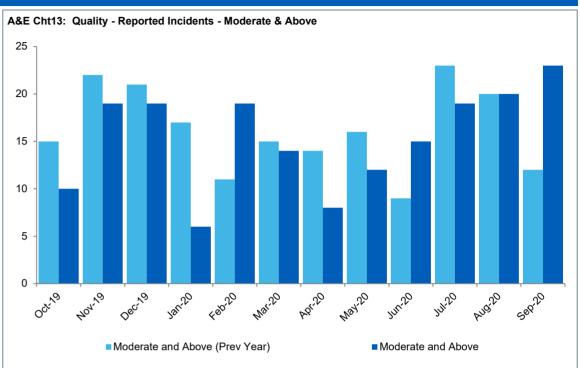


September 2020









Quality Commentary:

Reported incidents fell in September but those of moderate and above increased from the previous month. Delays in response were particularly noted towards the end of the month due to the capacity challenges.

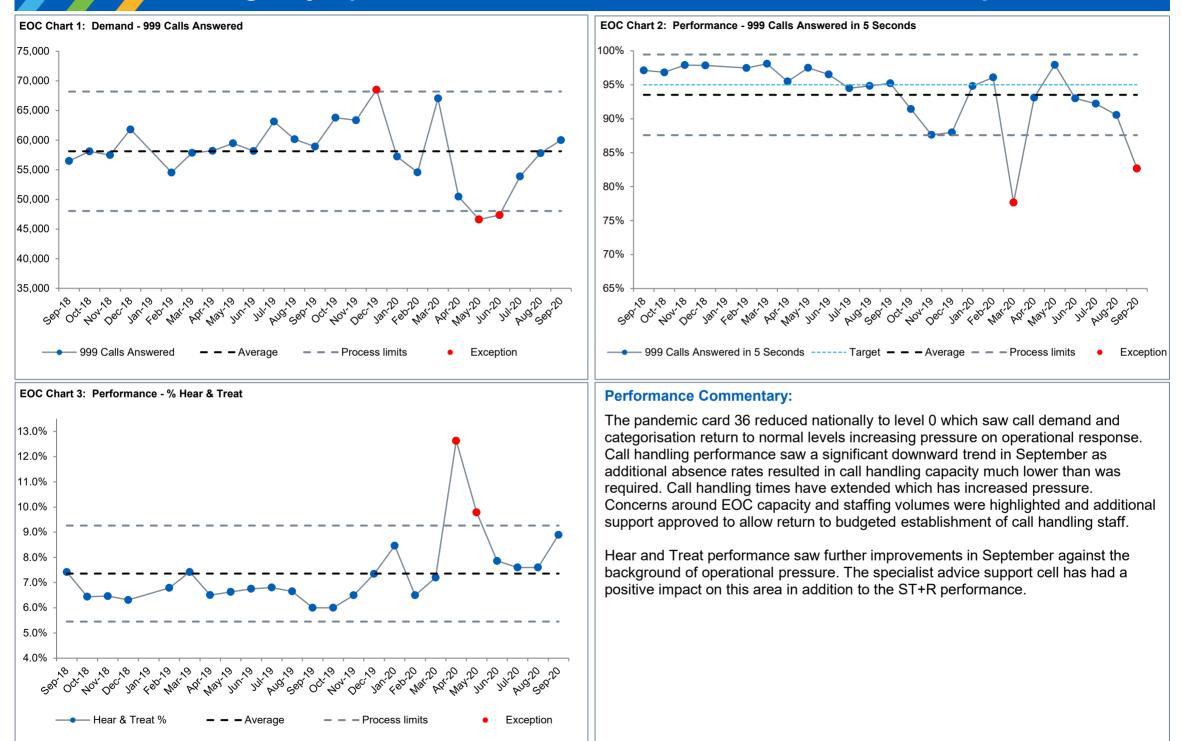
Workforce Commentary:

The overall sickness rate increased in September to above the Trust average.

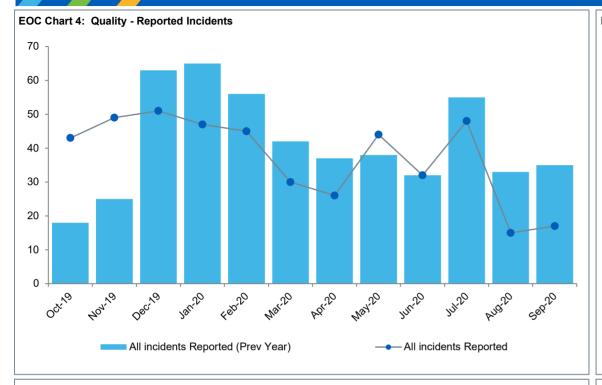
The COVID-19 pandemic has caused higher levels of sickness absence and abstraction due to those in isolation and quarantine. COVID-19 caused have increased regionally through September and is impacting staff numbers. A number of actions have been taken to mitigate sickness absence and the impact government direction has had on available staffing.

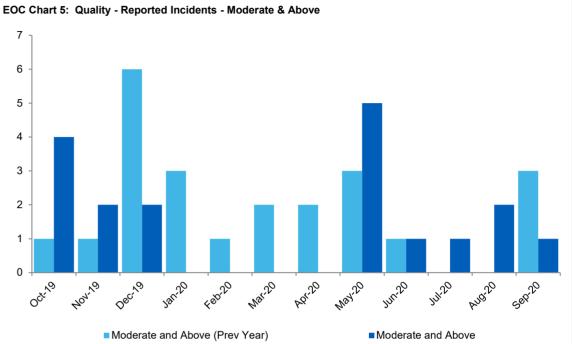
A number of health and wellbeing actions have also been undertaken to support staff including staff swabbing, serology testing and dedicated staff support 'safer working' actions through the local management teams.

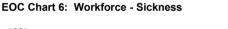
Emergency Operations Centre

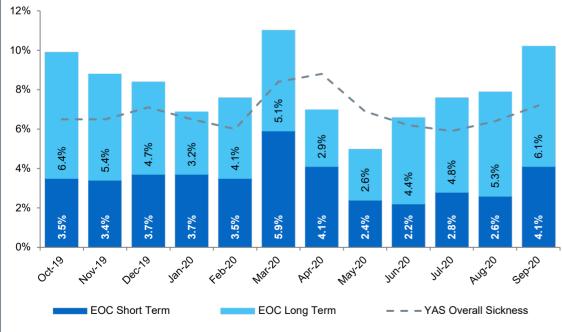


Emergency Operations Centre









Quality Commentary:

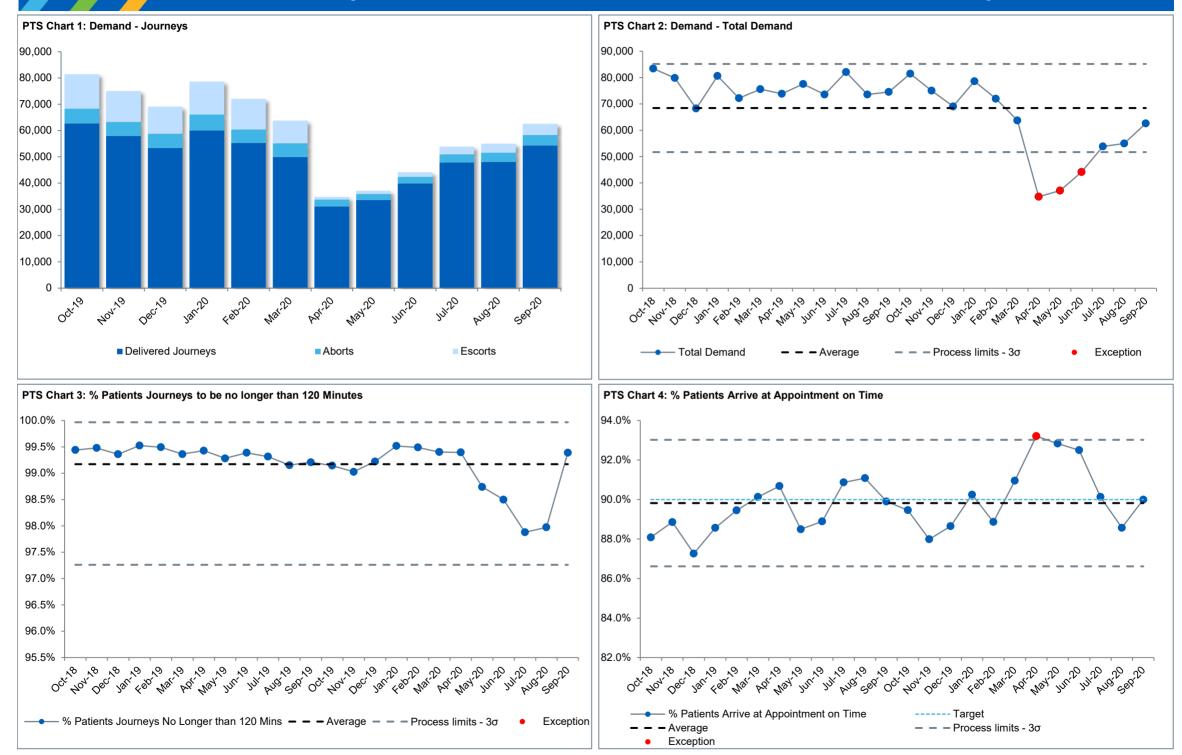
The total number of reported incidents saw a slight increase in September but is below the volume experienced in the previous. There was only 1 incident classed as moderate in September.

Workforce Commentary:

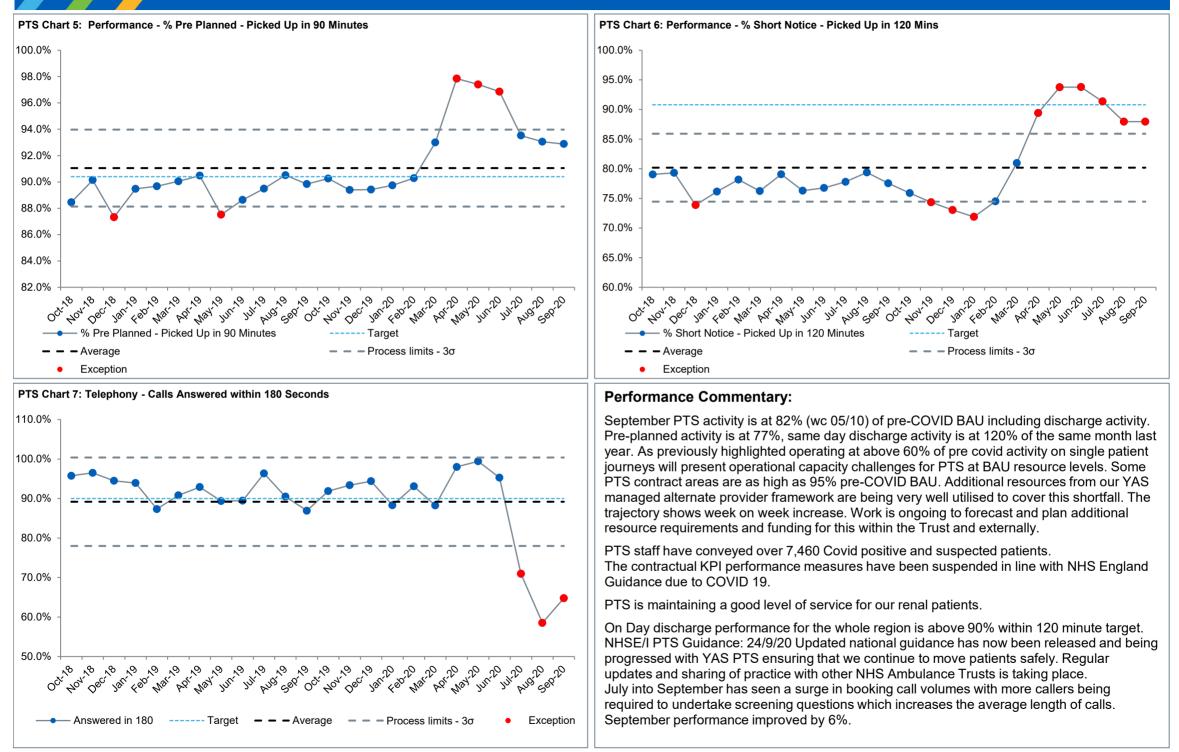
Both long term and short term sickness rates saw significant increase in September. The levels of Covid related absence has significantly impacted upon overall abstraction numbers and has had a negative impact on KPI achievement, This represents a concern around the resilience of staff groups and an ability to continue to work under pressure during the COVID period. Actions to support staff have been undertaken in line with Health and Wellbeing initiatives.

Further actions have been implemented to safeguard staff due to increase in COVID absence.

Patient Transport Service

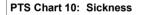


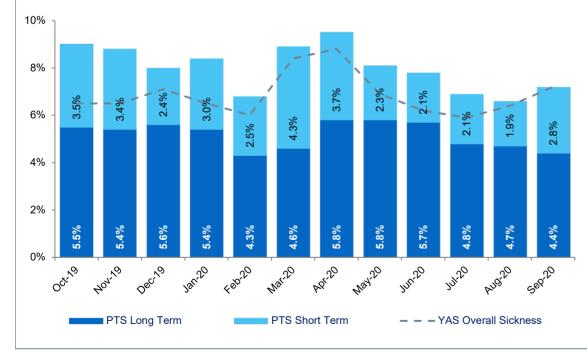
Patient Transport Service

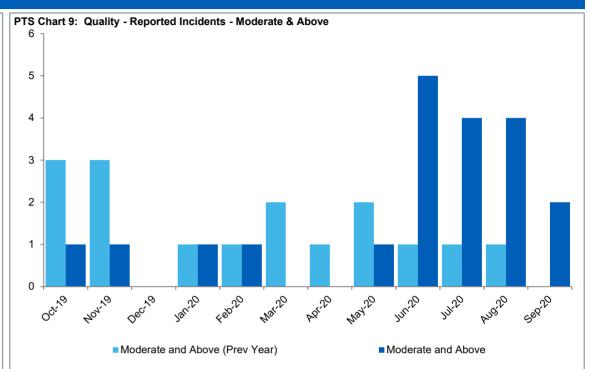


Patient Transport Service

PTS Chart 8: Quality - Reported Incidents 140 120 100 80 60 40 20 0 Jan 20 octing 401,0 Decilos Feb.20 Mar-20 A91-20 May 20 Juni20 111-20 AU920 989.JO All incidents Reported (Prev Year) — All incidents Reported







Quality Commentary:

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

Workforce Commentary:

There was a slight increase in short term sickness for the month of September. Long term sickness has reduced month on month since June and at 4.4% is the lowest it has been since February 2020.

PDR compliance improved by 3.4% in September to 85.31%. Plans are 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 an increase for the month of September.





Ambulance Quality Indicators

Sustam	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)	67,148	101,407	93,130	64,554	74,804	75,407	34,851	93,037	61,313	50,566
Incident Proportions%	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1 and C2 Incidents	62.7%	64.4%	62.4%	67.9%	63.4%	63.3%	61.4%	51.6%	57.7%	49.7%
C1 Incidents	7.7%	7.4%	9.2%	9.7%	8.4%	10.1%	6.8%	7.1%	6.5%	6.8%
C2 Incidents	55.0%	57.0%	53.2%	58.2%	55.0%	53.2%	54.6%	44.5%	51.1%	42.9%
C3 Incidents	17.1%	20.5%	16.2%	17.5%	16.5%	19.1%	22.2%	35.3%	32.6%	32.9%
C4 Incidents	0.8%	1.5%	3.0%	0.3%	0.6%	0.7%	1.3%	1.7%	0.5%	2.1%
C5 Incidents	1.4%	1.5%	1.9%	1.3%	7.5%	7.1%	0.0%	0.1%	0.1%	0.1%
HCP/IFT 1-4 Hour Incidents	9.1%	3.3%	7.0%	4.3%	3.3%	4.1%	7.9%	5.6%	3.3%	6.6%
Hear and Treat	8.9%	8.6%	9.6%	8.6%	8.6%	5.7%	7.2%	4.4%	6.4%	9.8%
Performance	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1-Mean response time (Target 00:07:00)	00:07:46	00:06:34	00:07:27	00:07:45	00:07:06	00:07:44	00:06:28	00:07:05	00:07:42	00:06:19
C1-90th centile response time (Target 00:15:00)	00:13:22	00:11:03	00:12:27	00:14:00	00:13:12	00:14:22	00:11:00	00:12:26	00:14:22	00:11:55
C2-Mean response time (Target 00:18:00)	00:22:42	00:16:52	00:32:16	00:28:08	00:22:55	00:27:30	00:24:20	00:13:15	00:18:55	00:16:32
C2-90th centile response time (Target 00:40:00)	00:47:27	00:33:40	01:10:34	00:58:05	00:47:04	00:56:14	00:48:26	00:24:36	00:35:28	00:32:19
C3-Mean centile response time (Target 01:00:00)	00:57:32	00:47:18	01:39:17	01:35:37	00:58:26	01:34:46	01:13:53	00:39:50	01:28:43	00:53:21
C3-90th centile response time (Target 02:00:00)	02:22:07	01:53:23	03:51:35	03:54:30	02:22:47	03:54:27	02:59:55	01:29:11	03:15:36	02:00:19
C4-90th centile response time (Target 03:00:00)	03:02:41	03:14:33	04:12:58	04:42:28	02:54:27	04:52:14	02:52:48	02:10:16	04:50:26	03:08:25
Proportion of All incidents	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
Incidents with transport to ED	54.9%	54.8%	53.6%	54.3%	56.0%	51.9%	56.3%	52.0%	58.7%	49.4%
Incidents with transport not to ED	7.8%	5.6%	7.5%	6.4%	2.6%	4.6%	8.4%	5.9%	1.7%	6.2%
Incidents with face to face response	28.4%	31.0%	29.4%	30.7%	32.9%	37.8%	28.0%	37.7%	33.3%	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	27.4%	33.3%	23.6%	25.8%	29.1%	34.0%	29.0%	34.0%	25.5%	28.7%
ROSC - Utstein	54.8%	50.0%	48.6%	53.6%	57.1%	59.3%	56.0%	47.2%	22.2%	45.8%
Cardiac - Survival To Discharge	7.7%	5.8%	4.8%	6.4%	8.1%	12.5%	3.2%	6.8%	6.6%	9.0%
Cardiac - Survival To Discharge Utstein	30.8%	14.3%	13.5%	22.2%	31.3%	27.8%	15.8%	16.3%	9.1%	25.0%