




Integrated Performance Report

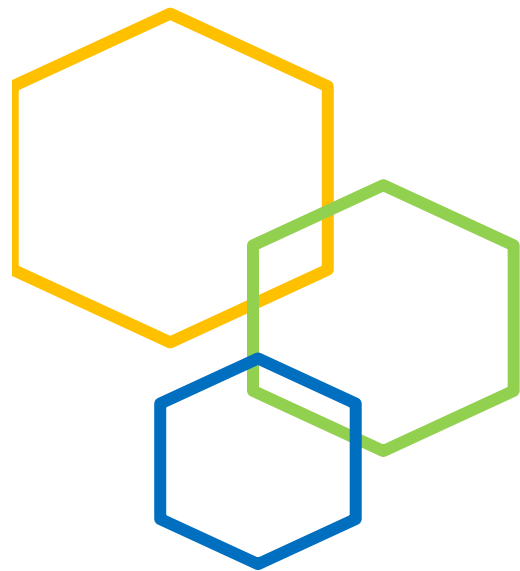
October 2020

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).

Improvement Model Ambulance (July 2019)	Single Oversight Framework Score	Inspected and rated
	2	Good 



1. Executive Overview
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 - a. Integrated Urgent Care
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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.



External System Pressures

- System focus on Testing capacity and vaccine deployment
- Winter and Flu Vaccination – plans in place and monitored
- Ongoing Hospital Reconfigurations underway across the region – positive YAS engagement to support
- COVID related capital plans: awaiting full confirmation of Trust bids
- Increasing focus on Health Inequalities and BAME across ICSs – building on the independent review into the impact of COVID, chaired by Professor Dame Donna Kinnair in WY&H ICS
- NHS111 First Assurance activity aligned to Emergency Department arrival booking
- Increasing demand impact on Hospital Handover delays across the region
- Ongoing YAS engagement with system level planning to support response to COVID and winter planning
- YAS engagement in wider planned care forums to ensure YAS service offers remain appropriate and effective

Exception	PROGRAMME/PROJECT	Lead	Start	End	STATUS	GATE	OVERALL RAG			BUDGET/COSTS			RESOURCES			DELIVERY			KPIS			RISKS & ISSUES			COMMS				
							TREND	AUG	SEP	OCT	AUG	SEP	OCT	AUG	SEP	OCT	AUG	SEP	OCT	AUG	SEP	OCT	AUG	SEP	OCT	AUG	SEP	OCT	AUG
IUEC DELIVERY PROGRAMME		DAVE BEET																											
The Patient Pathways Project is under development and on track and project team developed. The NHS 111 First Project established and on track - Email Notification and EDDI set up. EOC Clinical Project established but may be delayed. Joint EOC/IUC Clinical People Project under development and on track. Mental Health Project subject to commissioner funding and are discussions underway. Multi-disciplinary teams are engaged to support the programme and alignment on expectation.																													
	1 IEUC Programme	AC/DB	01/09/20	TBC	DELIVERY	3	↔	G	G	G	A	A	A	A	A	A	G	G	G	G	G	G	G	A	A	G	G	G	
INFRASTRUCTURE		STEVE PAGE																											
Digital Enablers: Unified Comms is now RAG rated AMBER down from the September RED position. This change is based on TEG agreement to re-profile phased migrations to Feb / Mar '21. N365 is RAG rated RED, a move from the AMBER rating in September. A lack of a clear overarching plan is impacting on delivery timescales. Hub and Spoke and AVP continue to be RAG rated GREEN with no areas of concern.																													
	1 Digital Enablers	SM																											
	1.1 P91 Unified Comms	TM	02/01/19	Nov 20	DELIVERY	3	↓		R	A		G	G		A	A		R	R		NA		A	A		G	G		
E1	1.2 P109 N365 Implementation	LR	09/07/20	31/12/20	DELIVERY		↑	G	A	R	G	A	R	G	G	G	R	R	R		NA	R	R	R	A	G	G	A	
	1.3 P106 ePR Phase 3 (Development)	SR	01/04/21	31/03/21	DELIVERY	3	↔	G	A	A	G	G	G	A	A	A	G	A	R		G	G	G	A	A	A	G	G	G
2 Hub & Spoke / AVP		CW																											
	2.1 Hub & Spoke and AVP	CW			DELIVERY		↔		G	G		G	G		G			G	G		G	G		G	G		G	G	
	2.2 Logistics Hub	CW	Mar 20	TBC	SCOPING	2	↔		G	G		G	G		G			G	G		G	G		G	G		G	G	
SERVICE DELIVERY & INTEGRATED WORKFORCE		STEVE PAGE																											
Team Based Working is RAG rated overall as AMBER. A Gate 1 business case relating to the Paramedic career pathway, a key strand of TBW, will be reviewed at TMG Gate sub group, 03.11.20. Due to operational pressures facing EOC and A&E, the Integrated Transport Pilot has been paused, however, it is expected this project will recommence Nov 20. The Rotational Paramedic Project is RAG rated AMBER. The first cohort of Rotational Paramedics is due to start 09.11.20, focussing on Primary Care Networks in West Yorkshire.																													
E2	1 Team Based Working	AB/EL	STARTED	21/22	DELIVERY	NA	↑		G	A		G	A		G	G		G	G		G	G		G	G		G	G	
E3	2 Integrated Transport Pilot	AB	09/09/20	31/03/21	PAUSED	3			G	P		G	P		A	P		G	P		G	P		G	P		G	P	
	3 Rotational Paramedics	GA			SCOPING																								
CAPACITY AND CAPABILITY		CHRISTINE BRERETON																											
Capacity and Capability performance is rated AMBER. In response to Covid19, the Accountability Framework plan has been recast and agreed with the working group.																													
	1 Accountability Framework	GA	Jul 20		SCOPING	NA	↔		A	A		A	A		A	A		G	G		A	A		A	A		A	A	
PIPELINE AND PROJECTS/WORKSTREAMS NOT REPORTING THIS MONTH																													
	P1 Future Training Delivery Models	DA	TBC	TBC	SCOPING																								
	P2 International Recruitment	NB	TBC	TBC	SCOPING	1																							
PLACE BASED CARE		ROD BARNES																											
PAUSED																													
Place Board last met on 28 September 2020 and is currently paused pending Transformation Board review. Mental Health and Ageing Well projects and key workstreams that previously reported to Place Board will transfer to the IUEC Delivery Programme.																													
EXCEPTIONS																													
E1	1.2 P109 N365 Implementation	After a national meeting with NHS Digital on 30.10.20 the YAS project team is re-writing the overarching plan for this project. Due to additional steps required by NHS Digital the Trust does not have full visibility of the timelines involved. Ongoing planned work will continue with the intention of commencing migration with the exception of shared one drive. An options appraisal will be created for TEG as soon as the project team has clarity from NHS Digital on timescales and associated risks.																											
E2	1 Team Based Working	Moved from Green to Amber due to cost pressure associated with the paramedic career pathway and operating model business case to be presented at TMG review sub-group and if supported TEG finance prioritisation session, 11.11.20.																											
E3	2 Integrated Transport Pilot	Pilot paused with agreement from TEG due to COVID outbreak in EOC and pressures facing A&E.																											

Service Line	Indicator ID	Exception Commentary
IUC	001	The IUC / NHS 111 saw much higher than forecast demand (calls answered) during October 2020 at 151,319; up 23.8% compared with October 2019 and 13% above the contract ceiling demand for October. As a result of high demand levels there were exceptions across many KPIs in September. Call Performance (answered in 60 seconds) was significantly below target at 80.5%, though this was a large improvement of 10.2 percentage points on September.
EOC	002	Telephony - 999 Calls Answered within 5 Seconds has been challenging. Overall staffing capacity, sickness and COVID absence have resulted in much lower than expected call answer standards.
	009	PDR Staff Appraisals - Given the staffing challenge in September and focus on operational delivery PDR compliance recovery plans that have been produced have been challenging to improve upon.
A+E	003	Significant pressure as a result of increased total abstractions resulted in a lack of delivery in all but Cat 1 90th performance standards and represents a significant degradation from the year to date position.
	009	PDR Staff Appraisals - Given the staffing challenge in October and focus on operational delivery, PDR compliance recovery plans that have been produced have been challenging to improve upon.
	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 EOC supported clinicians on scene with decision making and further advice. This continues to be the case and has resulted in 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.
	021	The vehicle availability remains under target partly due to the turnaround time within the dealer network were they are experiencing high abstraction rates due to Covid self isolation, Fleet are working with the manufacturers to ensure vehicles are repaired in a timely manor.
PTS	004	October has seen a further surge in PTS bookings as planned care restarts. In addition, more questions must be asked in order to ensure that patient safety is maintained, and PTS resource capacity is protected for those patients who are eligible and average call durations are up. October saw a 6.6% improvement upon previous month.
	009	PDR Staff Appraisals - current rate is below the Trust target but better than the Trust average, PDR compliance reduced in October with senior and operational management focus and time deliberately spent on delivering services for patients in response to Covid-19.
	PTS Chart 6	Short Notice - Picked Up in 120 Mins - October demand for discharge at acute sites saw pressure due to exceptional levels of discharge demand (110%). Short notice bookings account for 24% of total PTS activity, up to 120% pre-COVID. NHS E mandates that KPIs are suspended due to Rapid Covid discharge requirements. Regionally we missed target by less than 1% of the On Day 120 min KPI. To note this is increasing throughout the hours of the day and at weekends, during these periods we have seen upto 400% increase in demand.
	021	Vehicle availability has increased slightly but still remains under target, this is mainly due to the over age vehicles and the manufacturers no longer supplying parts for these vehicles. There are 126 vehicles on order which will bring the age profile in line with the trusts vehicle replacement plan, these vehicles will be delivered through Q3 / 4.



Service Line	Indicator ID	Exception Commentary
INFORMATION MANAGEMENT	016	Although FOI compliance decreased in September but remains above the previous monthly rate. Remedial action has been taken and it is hoped that this will increase compliance for next month. IG compliance is continuing to improve at 91.2%. Mitigating actions continue by contacting 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 rate.



Indicator ID	Key Operational Standard Description	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Oct-20				
														Target / Forecast	Actual	Actual v Target/Fcast		
001	Integrated Urgent Care	Calls Offered	156,871	175,308	144,564	148,175	308,185	175,235	153,686	133,386	139,324	154,845	173,929	174,744	128,644	174,744	▲	
		Call Answered	132,591	160,403	135,455	135,463	155,346	143,075	141,878	127,239	132,417	147,469	151,588	151,319		151,319		
		Calls Answered within 60 Seconds	75.8%	83.1%	90.7%	85.0%	26.2%	67.3%	87.8%	94.8%	90.1%	88.0%	70.3%	80.5%	90%	80.5%	▼	
		Core Clinical Advice	29.5%	28.3%	30.5%	28.3%	28.2%	28.0%	30.7%	32.7%	31.3%	29.7%	29.3%	TBD*	30%	TBD*		
		Clinician Called Back within 1 Hour	51.2%	56.9%	59.8%	46.6%	45.9%	71.7%	70.4%	58.1%	56.2%	49.7%	41.2%	47.8%	60%	47.8%	▼	
		Direct Bookings	44.7%	45.2%	45.8%	45.0%	35.0%	29.9%	35.1%	34.0%	34.9%	37.4%	37.1%	34.1%	30%	34.1%	▲	
		Bookings into UTC	52.2%	51.0%	56.7%	56.7%	49.0%	16.0%	15.1%	18.8%	21.5%	22.5%	19.0%	21.7%	50%	21.7%	▼	
		Bookings into IUC Treatment Centres	60.4%	60.2%	62.9%	61.6%	55.5%	48.3%	49.9%	51.4%	50.8%	50.3%	50.3%	45.8%	95%	45.8%	▼	
		ED Validations	52.1%	46.6%	50.8%	37.7%	29.9%	33.0%	35.4%	52.8%	53.0%	50.2%	39.7%	TBD*	50%	TBD*		
002	EOC	Ambulance Validations	98.1%	97.8%	98.3%	90.4%	53.6%	74.3%	94.1%	97.6%	96.4%	95.9%	86.7%	96.4%	95%	96.4%	▲	
		Telephony - 999 Calls Answered	63,358	68,507	57,223	54,569	67,046	50,458	46,629	47,355	53,867	57,811	60,000	51,759		51,759		
003	A&E Operations	Telephony - 999 Calls Answered within 5 Seconds	87.6%	88.0%	94.8%	96.1%	77.6%	93.1%	97.9%	93.0%	92.2%	90.6%	82.7%	61.1%	95%	61.1%	▼	
		All Activity (H&T + STR + STC)	71,517	76,409	72,149	67,218	73,608	64,197	64,125	63,924	68,032	69,026	67,600	71,496		71,496		
		Hear & Treat (H&T)	7.3%	8.5%	6.5%	7.2%	12.6%	9.8%	7.9%	7.6%	7.6%	8.8%	8.9%	9.0%		9.0%		
		See, Treat & Refer (STR)	23.9%	25.0%	25.1%	25.5%	31.0%	39.0%	33.4%	30.7%	29.6%	28.7%	28.1%	29.2%		29.2%		
		See, Treat & Convey (STC)	68.8%	66.7%	68.4%	67.3%	56.4%	51.2%	58.7%	61.7%	62.7%	62.5%	62.9%	61.8%		61.8%		
		999 Responses (STR + STC)	66,263	70,017	67,446	62,407	64,362	57,916	59,083	59,057	62,855	62,961	61,555	65,054	70,509	65,054	▼	
		Category 1	Mean	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	00:08:42	00:07:00	00:08:42	▲
			90th Percentile	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	00:15:00	00:15:00	◀▶
		Category 2	Mean	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	00:29:13	00:18:00	00:29:13	▲
			90th Percentile	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	01:01:55	00:40:00	01:01:55	▲
		Category 3	90th Percentile	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	03:23:52	02:00:00	03:23:52	▲
Category 4	90th Percentile	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	04:00:47	03:00:00	04:00:47	▲		
Average Turnaround Time	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	00:39:10	00:30:00	00:39:10	▲			
Average Job Cycle Time (Responses)	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	02:15:15		02:15:15				
004	PTS	Journeys	75,033	69,065	78,620	72,004	63,751	30,448	37,068	44,138	53,887	54,984	62,594	65,283	81,442	65,283	▼	
		Patient Journeys < 120 Minutes	99.0%	99.2%	99.5%	99.5%	99.4%	99.4%	98.7%	98.5%	97.9%	98.0%	99.4%	99.6%	90.0%	99.6%	▲	
		Patients Arrive at Appointment on Time	88.0%	88.7%	90.2%	88.9%	91.0%	93.2%	92.8%	92.5%	90.1%	88.6%	90.0%	90.5%	90.0%	90.5%	▲	
		% Pre Planned - Picked Up in 90 Minutes	89.4%	89.4%	89.7%	90.3%	93.0%	97.9%	97.4%	96.9%	93.5%	93.1%	92.9%	94.3%	90.4%	94.3%	▲	
		% Short Notice - Picked Up in 120 Minutes	74.3%	73.0%	71.9%	74.5%	81.0%	89.4%	93.8%	93.8%	91.4%	87.9%	87.9%	89.1%	88.8%	89.1%	▲	
Calls Answered within 180 Seconds	93.4%	94.4%	88.3%	93.1%	88.2%	98.0%	99.4%	95.3%	70.9%	58.5%	64.8%	70.4%	90.0%	70.4%	▼			

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%		44.0%	
		% Received Stroke Diagnostic Bundle		93.4%				95.9%				94.6%	
		% 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.

* ED validations information is not yet available this month. Validations form part of the clinical advice we offer and therefore the Core Clinical Advice measure is affected as well

Indicator ID	Key Operational Standard Description	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Oct-20			
														Target / Forecast	Actual	Actual v Target/Fcast	
006	Workforce	Total FTE in Post	4,773	4,753	4,759	4,777	4,836	4,898	4,924	4,993	4,987	4,986	5,026	5,102		5,102	
		BME %	5.1%	5.1%	5.1%	5.3%	5.3%	5.2%	5.3%	5.4%	5.4%	5.5%	5.6%	5.7%	11.1%	5.7%	▼
007	Recruitment	New Starters (FTE)	53.1	13.3	44.6	42.1	89.1	104.3	41.8	60.1	50.0	27.9	107.3	101.5		101.5	
008	Turnover (FTE)	YAS (Rolling 12 Month Periods)	10.1%	9.7%	9.7%	9.7%	9.2%	9.2%	8.7%	8.4%	8.6%	8.3%	8.3%	8.0%		8.0%	
009	PDR / Staff Appraisals	YAS	76.4%	75.7%	74.6%	75.9%	71.6%	65.5%	64.6%	66.3%	68.1%	69.5%	70.5%	70.8%	90.0%	70.8%	▼
		A&E Operations	80.5%	78.8%	78.3%	78.8%	74.8%	68.2%	63.4%	65.8%	69.0%	72.0%	74.0%	75.4%	90.0%	75.4%	▼
		EOC	65.1%	67.1%	68.7%	68.5%	65.3%	63.9%	69.4%	71.8%	72.5%	69.4%	66.1%	56.6%	90.0%	56.6%	▼
		Integrated Urgent Care	63.0%	60.8%	56.2%	65.0%	58.6%	58.1%	81.5%	89.6%	93.4%	92.4%	89.3%	90.4%	90.0%	90.4%	▲
		PTS	86.2%	88.4%	86.9%	87.7%	82.9%	74.5%	80.3%	79.9%	81.2%	82.3%	85.3%	84.9%	90.0%	84.9%	▼
010	Training: Stat & Mand (Substantive Employees)	YAS	98.0%	97.6%	97.2%	97.6%	97.4%	Stat Mand Reporting is currently under review							90.0%		
		A&E Operations	98.6%	98.2%	97.8%	97.9%	97.8%								90.0%		
		EOC	97.7%	97.4%	96.5%	98.3%	98.0%								90.0%		
		Integrated Urgent Care	98.2%	96.1%	95.7%	97.1%	96.7%								90.0%		
		PTS	99.6%	100.0%	100.0%	100.0%	100.0%								90.0%		
011	Health & Wellbeing	Total Sickness Rate	6.5%	7.1%	6.5%	6.0%	8.4%	8.8%	6.9%	6.2%	5.9%	6.4%	7.2%	7.6%		7.6%	
		Long Term Sickness Rate	3.7%	4.3%	3.8%	3.6%	3.8%	3.8%	4.0%	3.9%	3.7%	4.2%	4.2%	3.5%		3.5%	
		Short Term Sickness Rate	2.8%	2.8%	2.7%	2.5%	4.6%	5.0%	2.9%	2.3%	2.2%	2.2%	3.0%	4.2%		4.2%	

Indicator ID	Key Operational Standard Description		Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Oct-20			
			Target / Forecast	Actual	Actual v Target/Fcast													
012	Incidents	All Reported	736	735	801	739	687	524	633	716	758	721	709	760		760		
		Serious	6	7	2	2	4	1	1	3	1	5	5	4		4		
		Moderate	23	23	8	23	16	11	18	22	31	27	28	28		28		
		Medication Related	69	69	60	64	50	43	58	81	63	52	47					
013	Patient Relations	A&E	Complaint	20	13	16	16	21	17	15	25	29	33	32	31		31	
			Compliment	117	102	125	109	91	82	69	87	104	79	94	85		85	
			Concern	12	20	17	15	10	8	7	16	18	9	14	15		15	
			Service to Service	25	16	29	23	13	21	21	18	33	29	19	26		26	
		EOC	Complaint	18	12	4	6	1	6	5	9	10	9	11	22		22	
			Compliment	4	2	3	3	3	1	0	0	1	0	5	1		1	
			Concern	9	17	6	8	3	0	1	9	3	2	6	11		11	
			Service to Service	18	23	20	5	15	2	4	4	13	10	13	22		22	
		Integrated Urgent Care	Complaint	18	31	19	24	14	9	15	18	13	13	9	13		13	
			Compliment	7	12	10	4	2	2	5	7	8	3	3	3		3	
			Concern	3	9	2	3	1	1	3	1	2	2	2	0		0	
			Service to Service	17	17	26	40	52	31	24	43	53	44	57	25		25	
		PTS	Complaint	15	7	9	11	14	2	6	9	6	11	16	14		14	
			Compliment	7	9	5	3	2	2	2	1	11	8	5	2		2	
			Concern	23	22	24	24	24	10	3	7	12	11	15	13		13	
			Service to Service	24	24	47	34	22	7	7	7	24	17	13	20		20	
014	Clinical Outcomes Data	Stroke - Call to Hospital Arrival (Mean)	N/A	01:19	01:10	01:14	Not Published			01:08	N/A	N/A	N/A	N/A		N/A		
		Stemi - Call to Catheter Insertion for Angio (Mean)	02:18	02:12	02:08	02:10				02:05	N/A	N/A	N/A	N/A		N/A		
		ROSC (Utstein)	75.0%	52.9%	57.1%	54.8%				41.2%	N/A	N/A	N/A	N/A		N/A		
		Survival (Utstein)	30.4%	41.4%	37.8%	30.8%				20.7%	N/A	N/A	N/A	N/A		N/A		
015	Safeguarding	Adult Referrals	1,013	1,045	1,049	947	749	833	1,054	1,030	1,095	1,145	1,056	1,284		1,284		
		Child Referrals	551	540	603	638	532	441	539	608	653	657	615	571		571		
016	Information Management	Information Governance Training Compliance	73.3%	70.3%	64.3%	72.3%	72.3%	72.8%	76.1%	81.3%	83.3%	88.8%	91.1%	91.2%	95%	91.2%	▼	
		FOI Request Compliance	32.3%	61.9%	69.7%	70.3%	57.1%	56.0%	83.3%	85.7%	70.6%	90.9%	82.6%	92.0%	90%	92.0%	▲	
017	IPC Audit	Hand Hygiene	98.3%	98.4%	99.3%	98.8%	98.9%	99.8%	100.0%	99.0%	99.0%	100.0%	99.0%	99.0%	95%	99.0%	▲	
		Premise	99.0%	96.7%	98.4%	98.3%	98.7%	98.8%	100.0%	99.0%	99.0%	99.0%	99.0%	98.0%	95%	98.0%	▲	
		Vehicle	99.1%	98.0%	98.7%	99.1%	98.4%	99.3%	99.0%	99.0%	99.0%	98.0%	99.0%	99.0%	95%	99.0%	▲	
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	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Oct-20			YTD			
														Plan	Actual	Plan v Actual	Plan	Actual	Plan v Actual	
019	Finance Overview	Risk Rating	1	1	1	1	1	1	1	1	1	1	1	1	1	1	◀	1	1	◀
		EBITDA	-1,315	-812	-824	-855	-998	N/A	N/A	N/A	N/A	N/A	N/A	7,063	7,060	7,063	3	7,060	7,063	3
		Surplus	-249	238	4	240	159	N/A	N/A	N/A	N/A	N/A	N/A	-219	-210	-219	-9	-210	-219	-9
		Capital	1,889	1,947	957	2,967	4,908	0	874	562	68	189	332	478	1,298	478	-819	4,132	2,525	-1,607
		Cash	57,627	58,179	58,364	54,700	46,201	76,062	81,510	76,988	79,694	82,331	83,579	86,976	83,247	86,976	3,729	83,247	86,976	3,729
		CIP	532	532	582	582	623										0			0
020	CIP	A&E	28	28	28	28	28									0			0	
		Business Development	0	0	0	0	0										0			0
		CEO Directorate	2	2	2	2	2										0			0
		Clinical	2	2	2	2	2										0			0
		Estates	19	19	19	19	19										0			0
		Finance	36	36	36	36	36										0			0
		Fleet	87	87	87	87	123										0			0
		Planned & Urgent Care	67	74	81	81	82										0			0
		Quality, Governance	0	0	0	0	0										0			0
		Hub & Spoke	0	0	0	0	0										0			0
		Workforce OD	57	57	57	57	56										0			0
		RESERVE	234	227	269	269	274										0			0
		Current Position (Cumulative YTD)	532	532	5,387	5,969	6,592										0			0
021	Transport/Fleet	A&E	Vehicle age +7	1.8%	3.5%	6.6%	3.5%	3.5%	6.7%	6.7%	8.9%	8.2%	8.4%	8.4%	8.7%		8.7%			
			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%		0.2%		
			Availability	91.2%	91.7%	91.2%	90.6%	90.6%	92.5%	95.9%	92.7%	92.9%	92.7%	91.4%	91.1%	95%	91.1%	▼		
		PTS	Vehicle age +7	19.4%	15.3%	10.7%	16.7%	16.7%	8.6%	8.6%	17.7%	18.2%	16.5%	16.5%	16.7%		16.7%			
			Vehicle age +10	22.5%	26.6%	36.5%	27.2%	27.2%	22.5%	22.5%	20.8%	16.9%	17.7%	17.7%	17.7%		17.7%			
			Availability	90.0%	88.0%	89.0%	89.0%	89.0%	91.9%	92.4%	93.1%	93.1%	91.0%	91.7%	92.8%	95%	92.8%	▼		

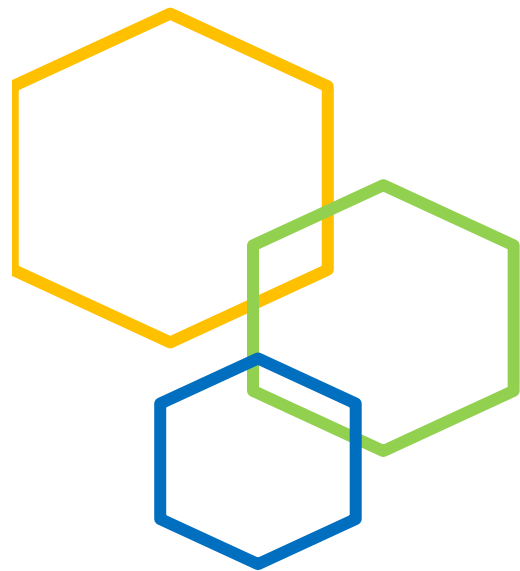
Risk Rating - Under the "Single Oversight Framework" the overall Trust's rating for the year to date remains at 1 (1 being lowest risk, 4 being highest risk). As advised by NHSE/I organisations remain within previously assessed rating and will only move segments under exceptional circumstances during 20/21

EBITDA - The Trust's Earnings before Interest Tax Depreciation and Amortisation (EBITDA) position at the 31st October (Month 7) is £7.063m against a plan of £7.060m a favourable variance of £0.03m. This measure was reinstated as a key financial measure from M7; during M1 to 6 the Covid-19 business rules and the receipt of retrospective top up income meant this measure was not pertinent.

Surplus/(Deficit) - The Trust has an accounting deficit at the end of October (Month 7) of (£219k) against the plan of (£210k). The Trust was in a breakeven position for month 1 to 6 due to the Covid-19 Business Rules for that period. The planned deficit for the remainder of the year is (£1,754k).

Capital - Whilst YTD expenditure was only £2.5m, a further £4m of funds were committed or had purchase orders raised. £2.3m has been earmarked for Hub & Spoke land purchase and Central Warehouse, but inability to find suitable sites means that these purchases are unlikely to take place in this financial year. Forecast outturn includes £1.1m of Covid expenditure, for which, additional funding is anticipated. If all expected funds are received, the forecast underspend would increase to £2.7m. A number of mitigating actions are being considered to manage this.

Cash - At the end of October the Trust had £83m cash at bank, £36m higher than the year-end. The increase in cash balances reflects the move to block CIP - Due to the temporary finance regime only those schemes that can be achieved without detriment to the Trust's response to Covid remain, other schemes suspended. payments made in advance within the temporary Covid finance regime.

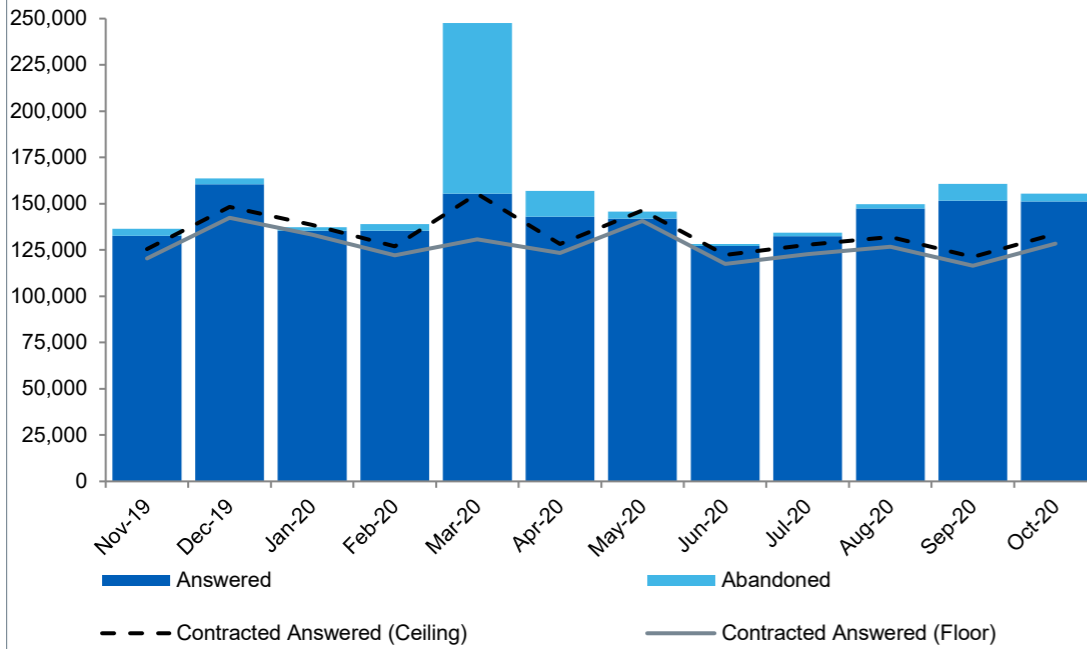


SERVICE LINES

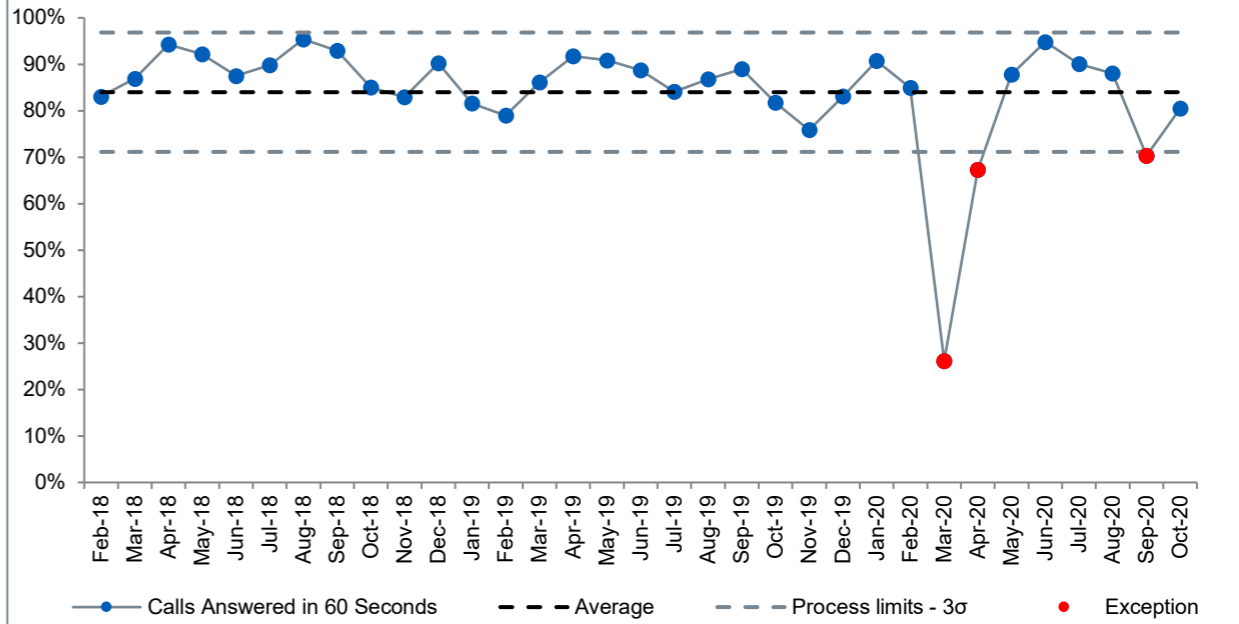
Integrated Urgent Care

October 2020

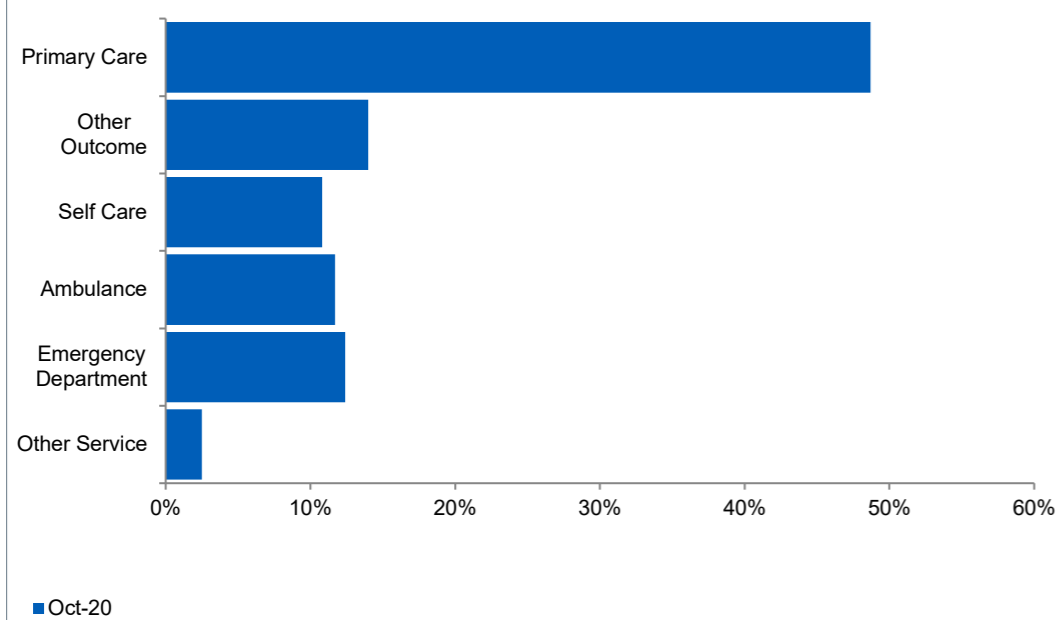
IUC Chart 1: Demand - Calls



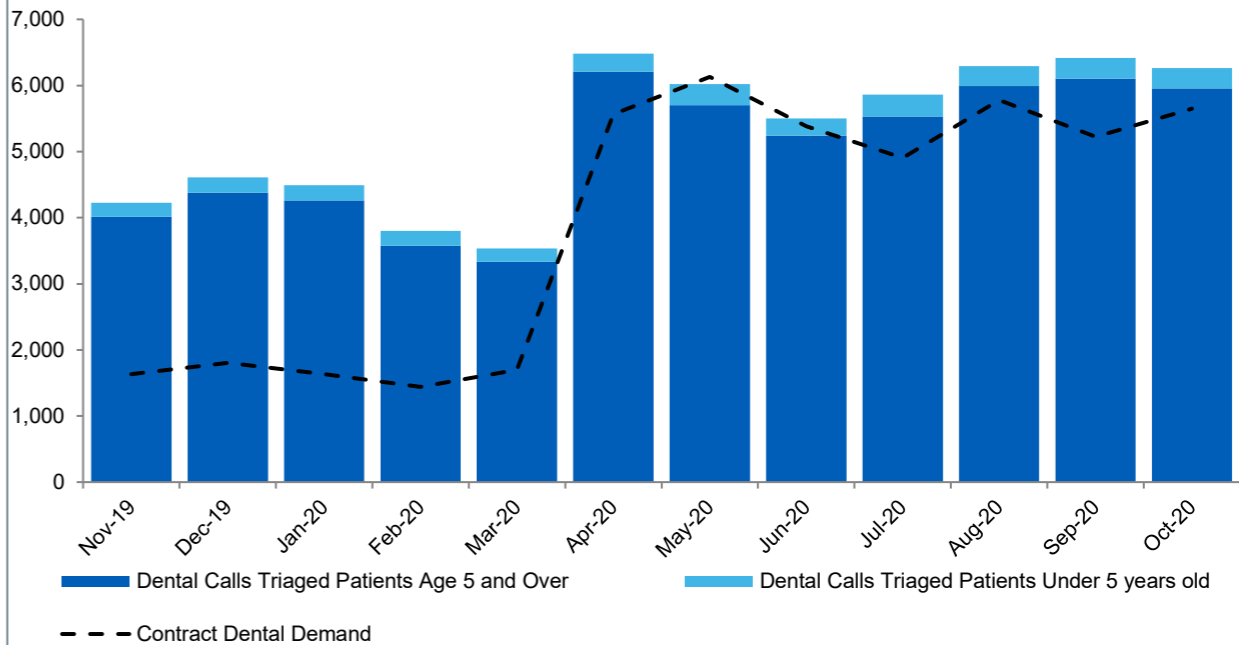
IUC Chart 2: Performance - Calls Answered in 60 Seconds



IUC Chart 3: Outcomes



IUC Chart 4: Demand - Dental





Integrated Urgent Care

October 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%	80.5%						82.3%
Core Clinical Advice (30%)**	28.0%	30.7%	32.7%	31.3%	29.7%	29.3%	TBD						TBD
Clinician Called Back within 1 Hour (60%)	72.2%	70.3%	58.1%	56.2%	49.7%	41.2%	47.8%						56.2%
Direct Bookings * (30%)	29.9%	35.1%	34.0%	34.9%	37.4%	37.1%	34.1%						34.9%
Bookings into UTC * (50%)	16.1%	15.1%	18.8%	21.5%	22.5%	19.0%	21.7%						19.5%
Bookings into IUC Treatment Centres * (95%)	48.3%	49.9%	51.4%	50.8%	50.3%	50.3%	45.8%						49.6%
ED Validations (50%)**	33.0%	35.4%	52.8%	53.0%	50.2%	39.7%	TBD						TBD
Ambulance Validations (95%)	74.3%	94.1%	97.6%	96.4%	95.9%	86.7%	96.4%						91.4%

* 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

** ED validations information is not yet available this month. Validations form part of the clinical advice we offer and therefore the Core Clinical Advice measure is affected as well

Performance Commentary:

Most performance measures were below target levels in October, in general relating to the ongoing challenges with a new wave of the Covid pandemic.

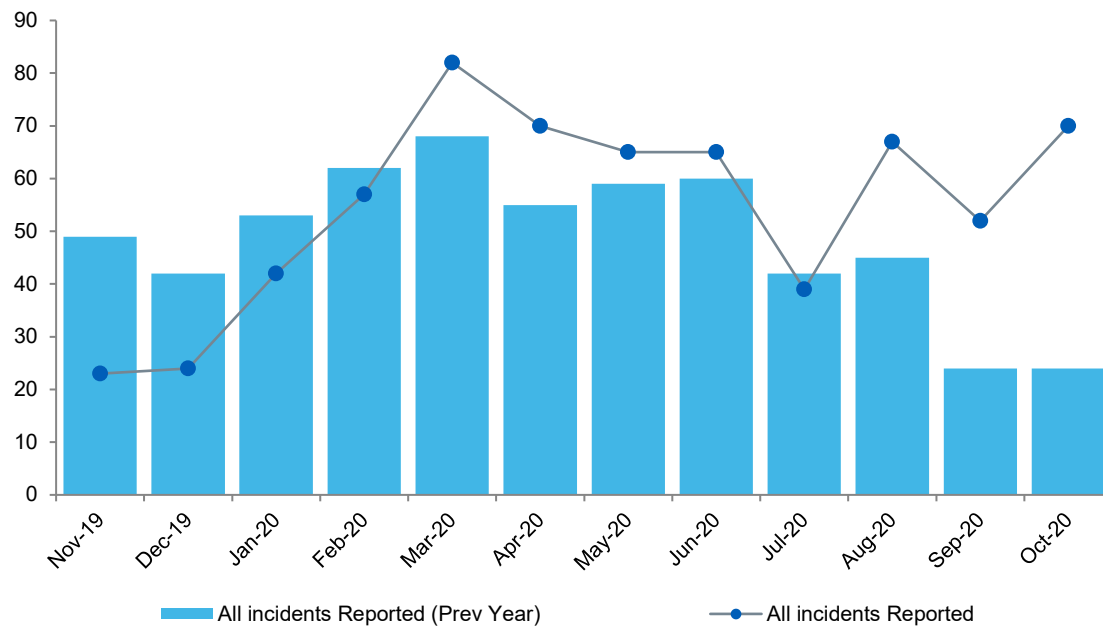
The number of calls answered in October was almost identical to that in September, however overall calls offered was lower and fewer calls were abandoned. Calls answered were 23.8% higher than the same month last year.

Call Performance was a significant improvement on September, with the proportion of calls answered in 60 seconds for October at 80.5%, up 10.2 percentage points. However this remains well below the 90% target. The proportion of Clinician Call Backs made within 1 hour was 47.8% against a target of 60%.

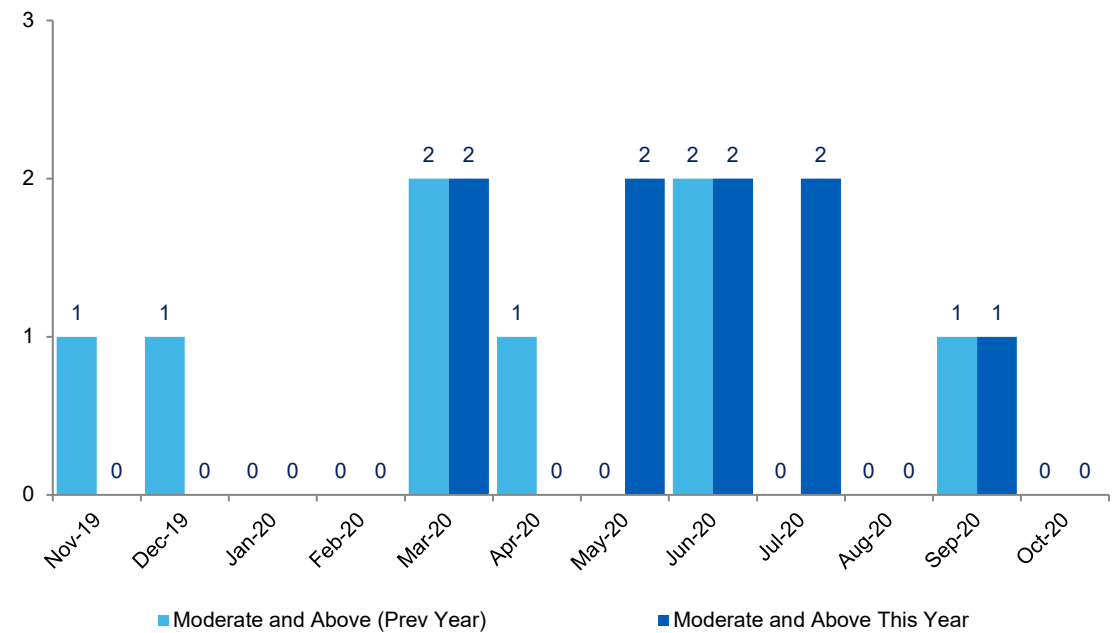
Ambulance validations returned to above target level. ED validations information is not yet available this month.

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.

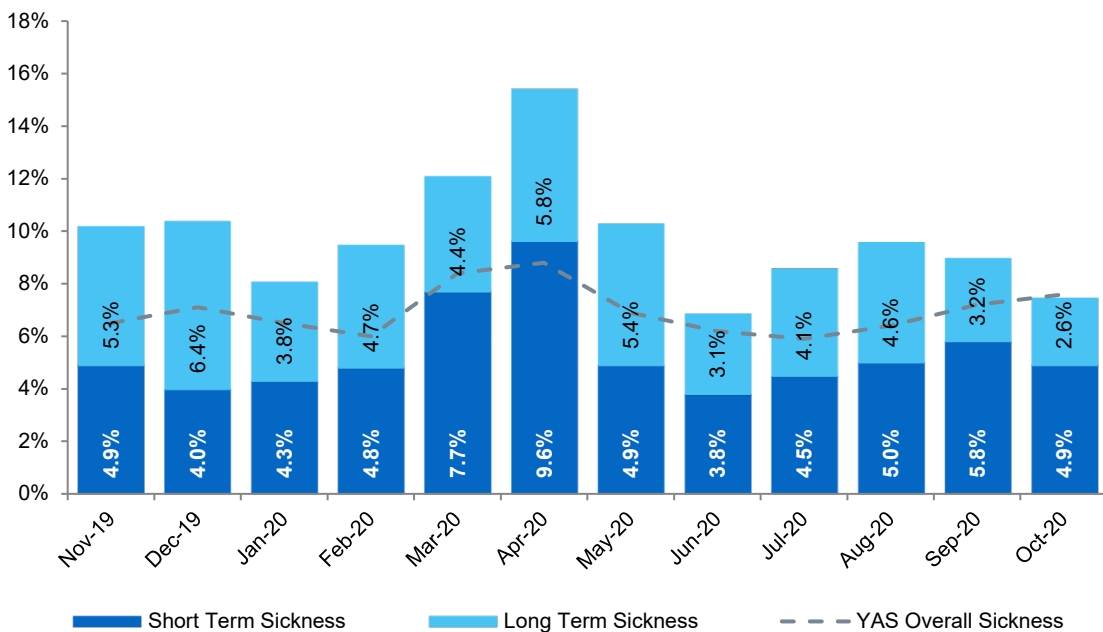
IUC Chart 5: Quality - Reported Incidents



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



IUC Chart 7: Workforce - Sickness



Quality Commentary:

Patient safety update sent out to all IUC and a new clinical audit tool has been developed for none NHS Pathways clinicians and this will be launched on 1 December 2020. There is also a new 'live' audit process for all NHS Pathways IUC team being used as part of developing and supporting more real time feedback.

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:

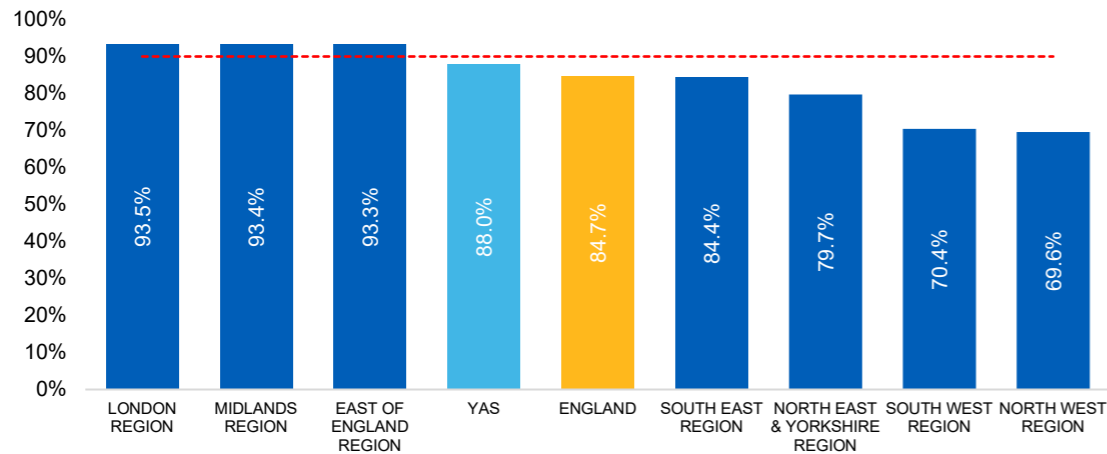
Successful recruitment and training: 2 courses were 'stood up' from a contingency pool in November in light of the ongoing demand pressures in IUC 22 health advisors and 7 clinical advisors starting on 2 November.

NHS Pathways: Training for the next release of NHS Pathways will take place during November for go live early December.

Flu Vaccinations: 75% 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. Ongoing work to create more space within the Trust estate for front line call centres across the Trust is underway.

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

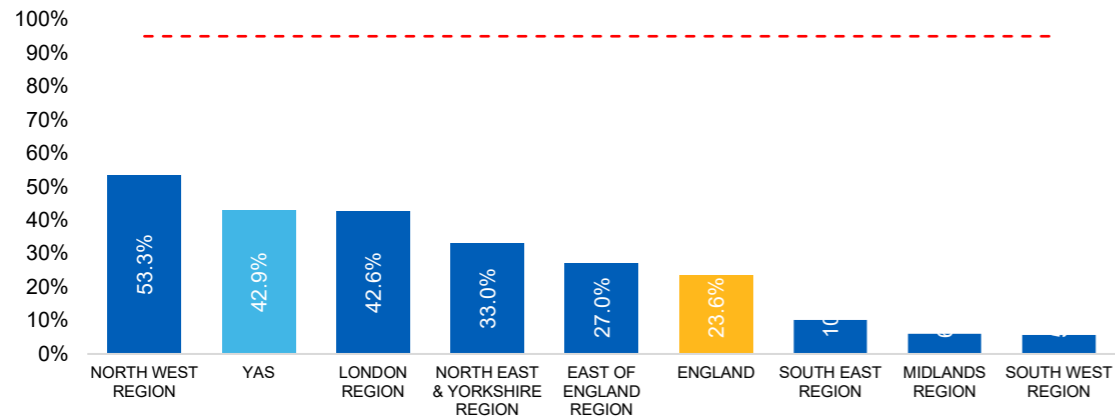


IUC Chart 9: Calls Abandoned (5%)

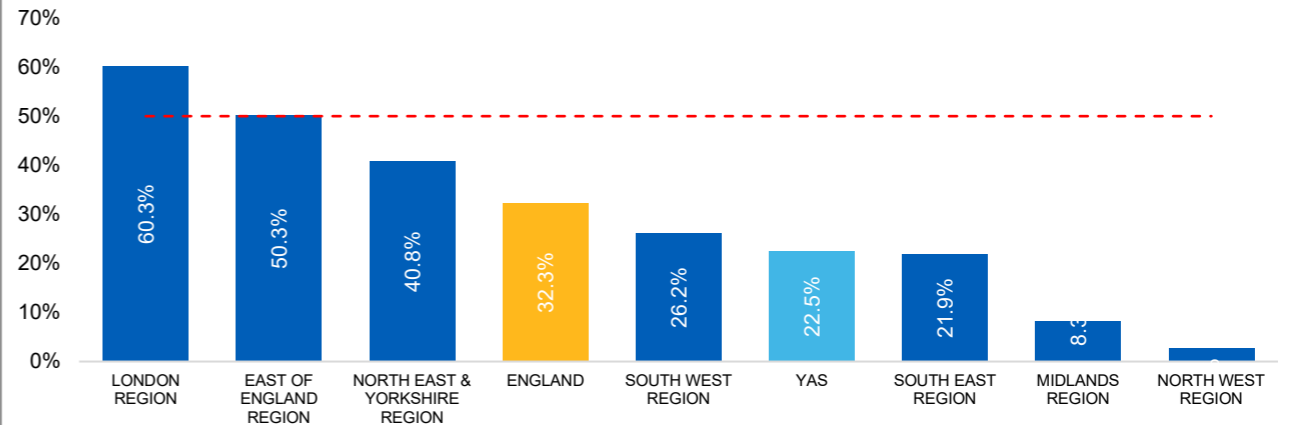
Benchmarking Information is based on the



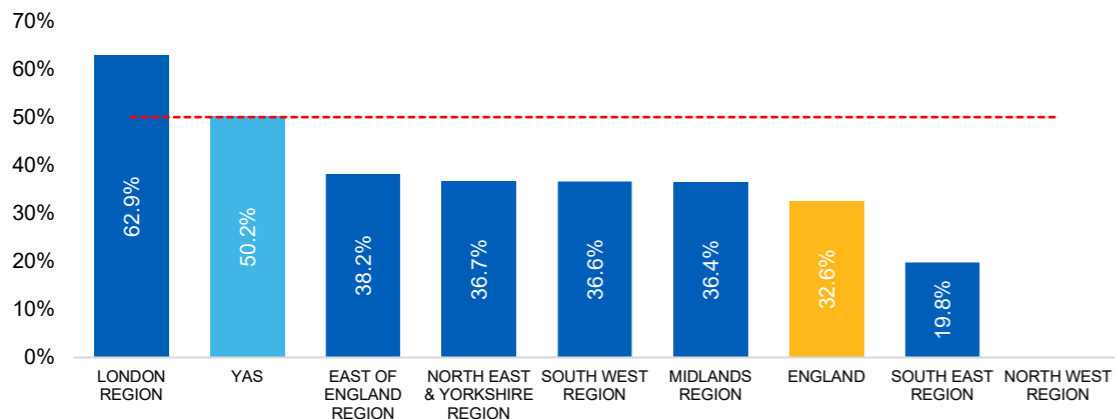
IUC Chart 10: Bookings into IUC Treatment Centres (95%)



IUC Chart 11: Bookings into UTC (50%)



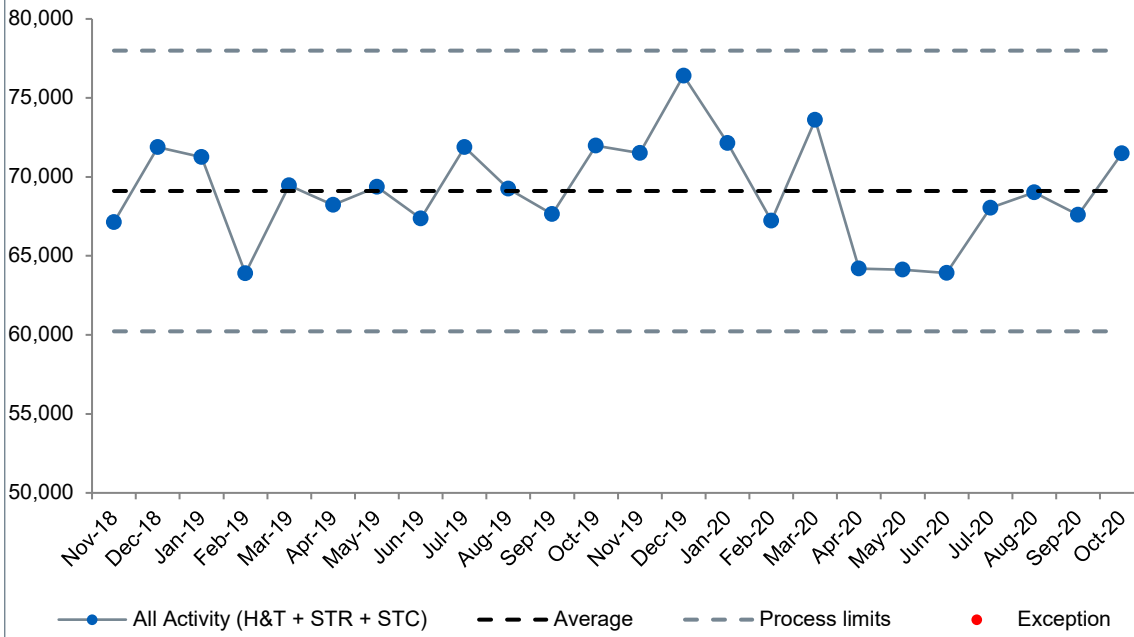
IUC Chart 12: ED Validations (50%)



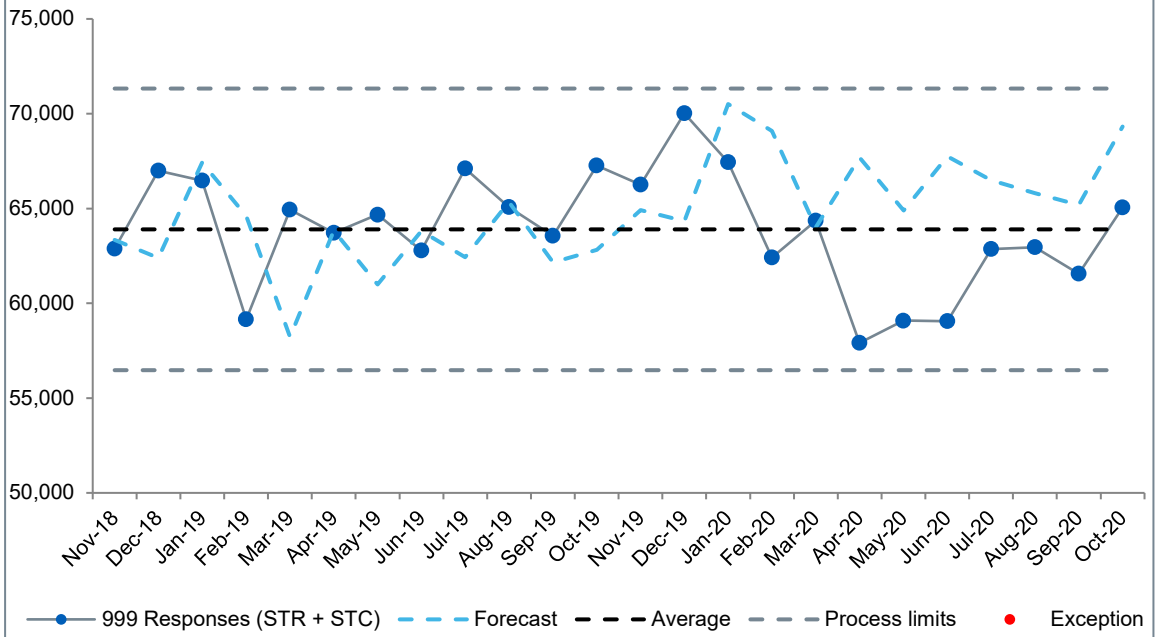
IUC Chart 13: Ambulance Validations (95%)



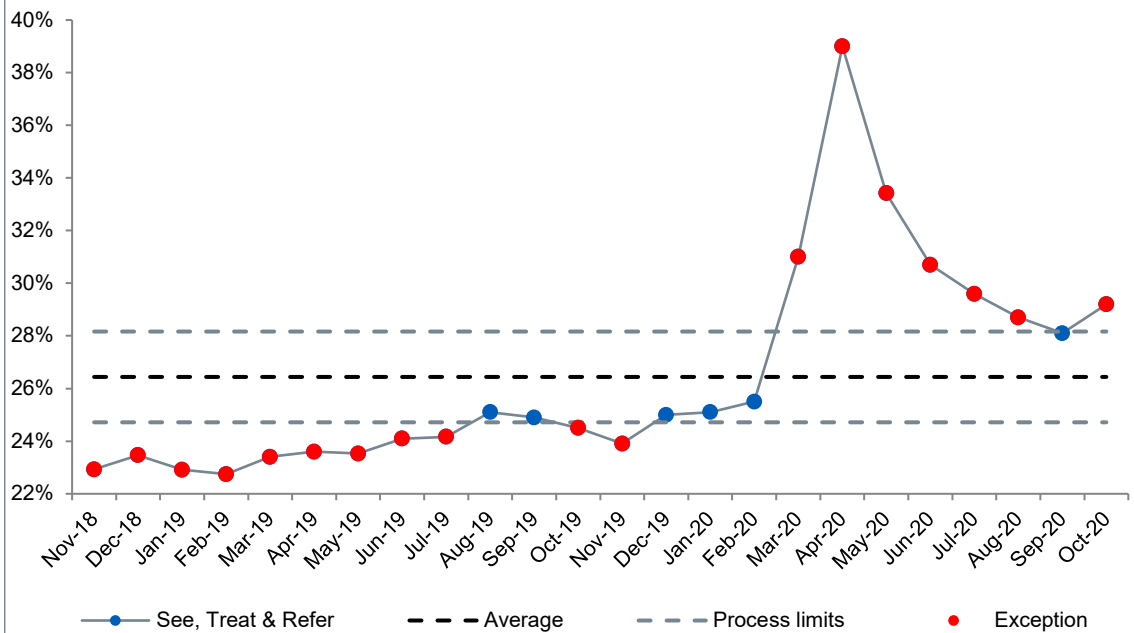
A&E Chart 1: Demand - All Activity (H&T + STR + STC)



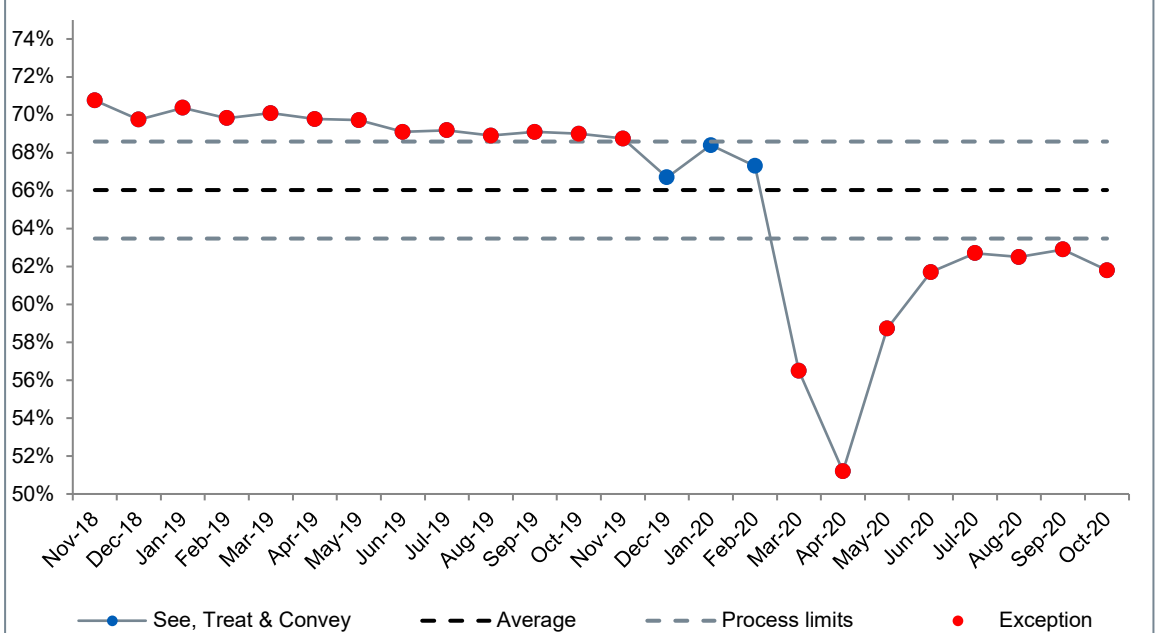
A&E Chart 2: Demand - 999 Responses (STR + STC)



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



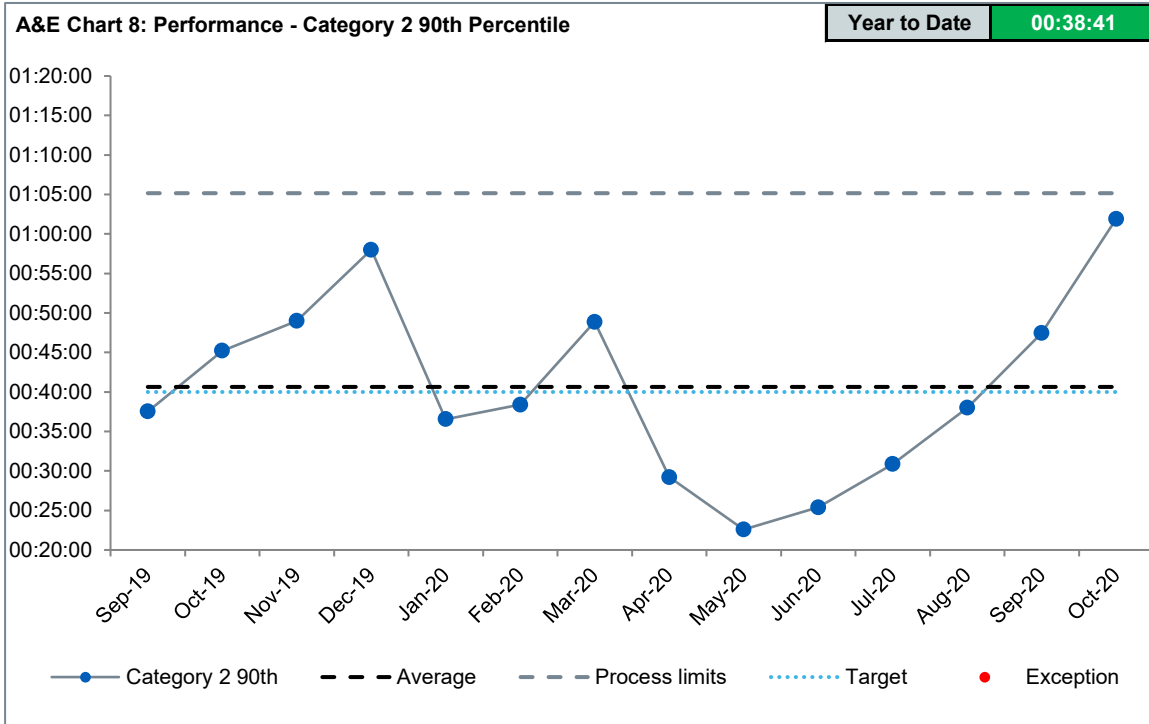
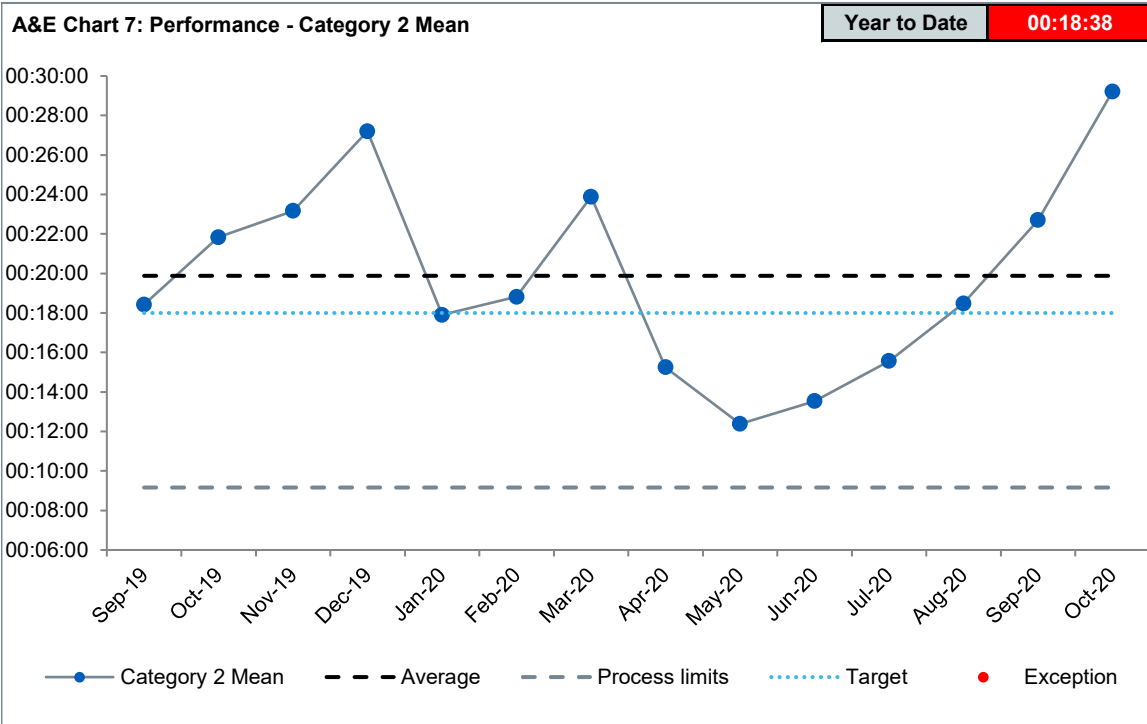
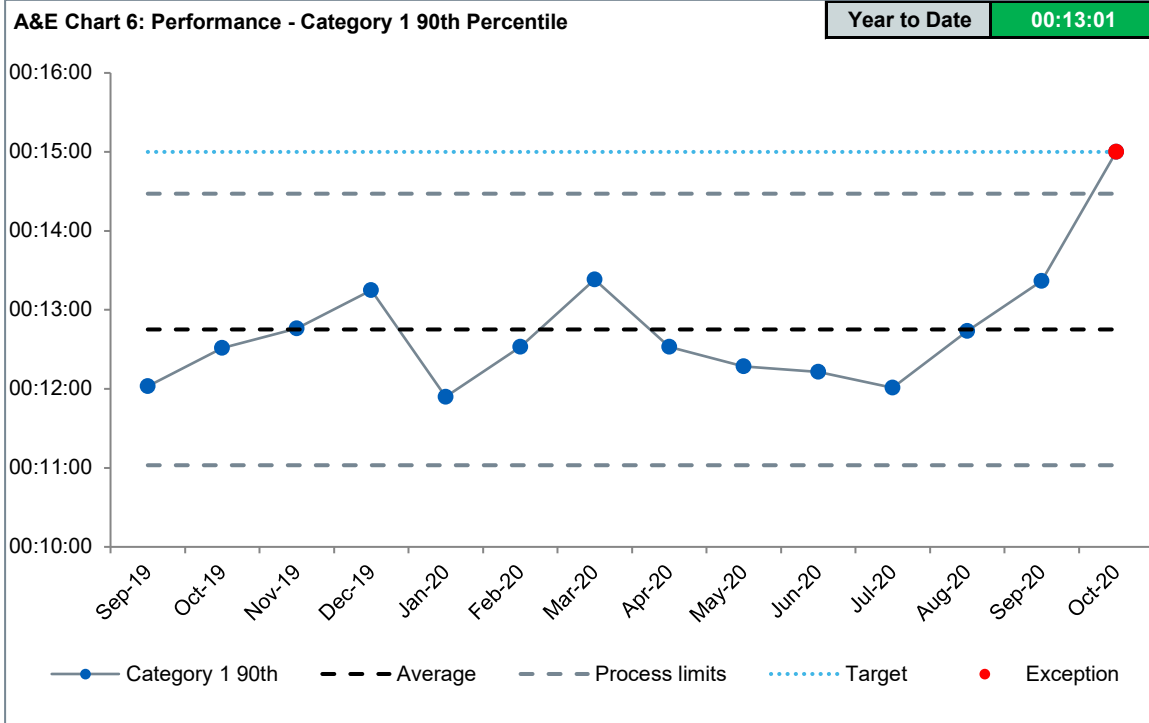
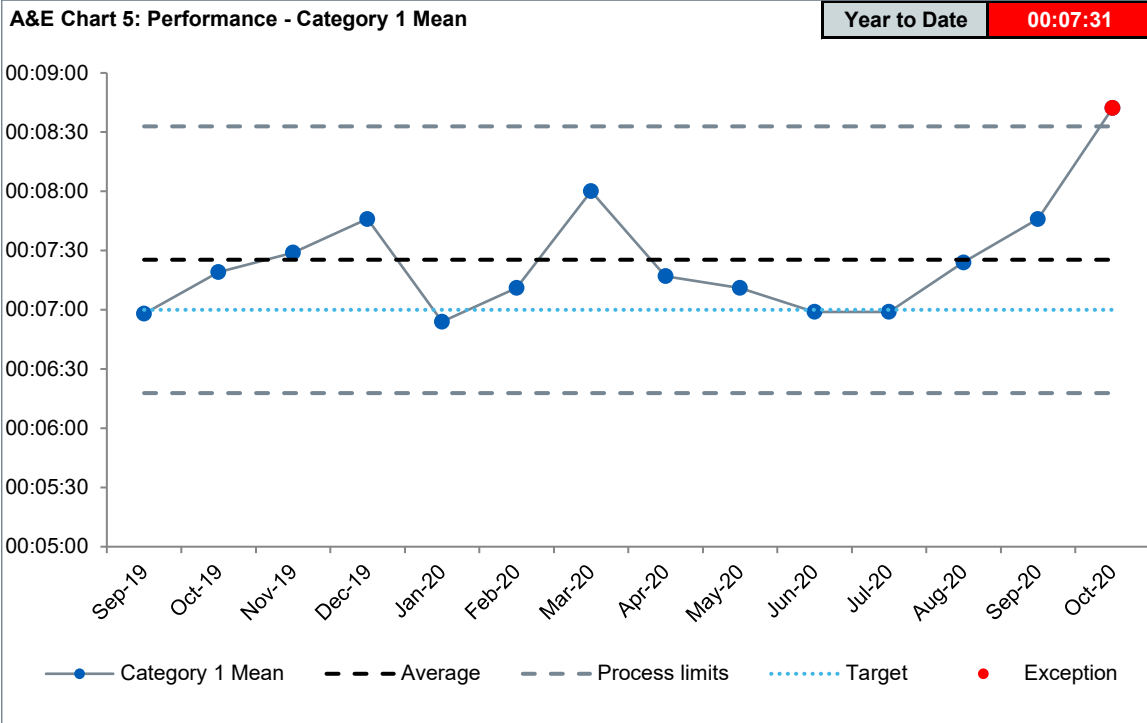
A&E Chart 4: Demand - See, Treat & Convey %





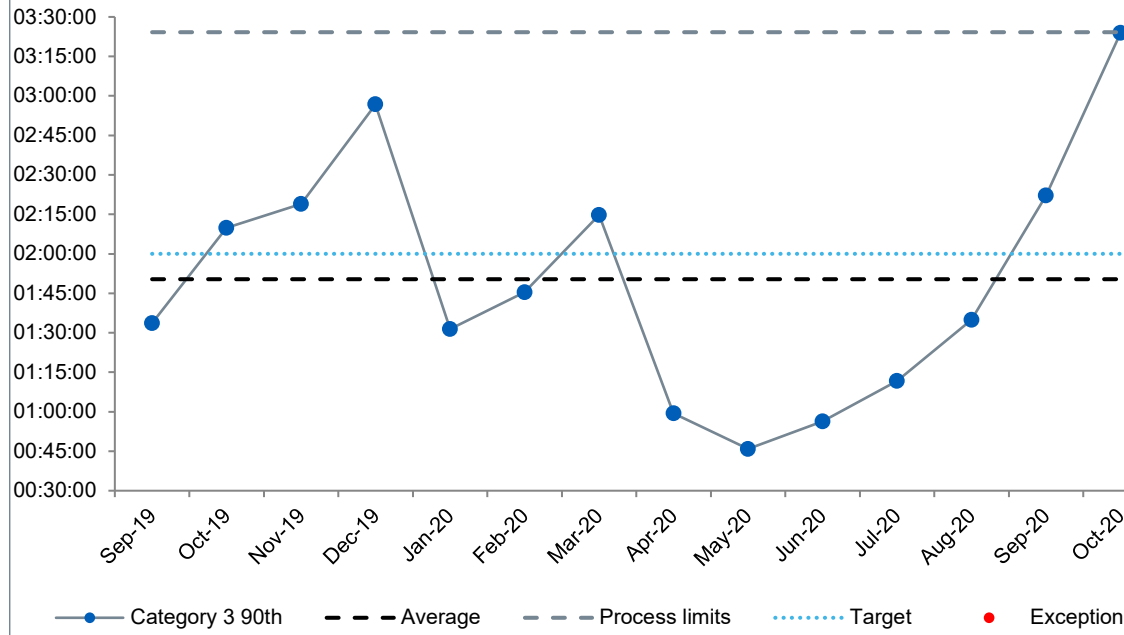
A&E Operations

October 2020



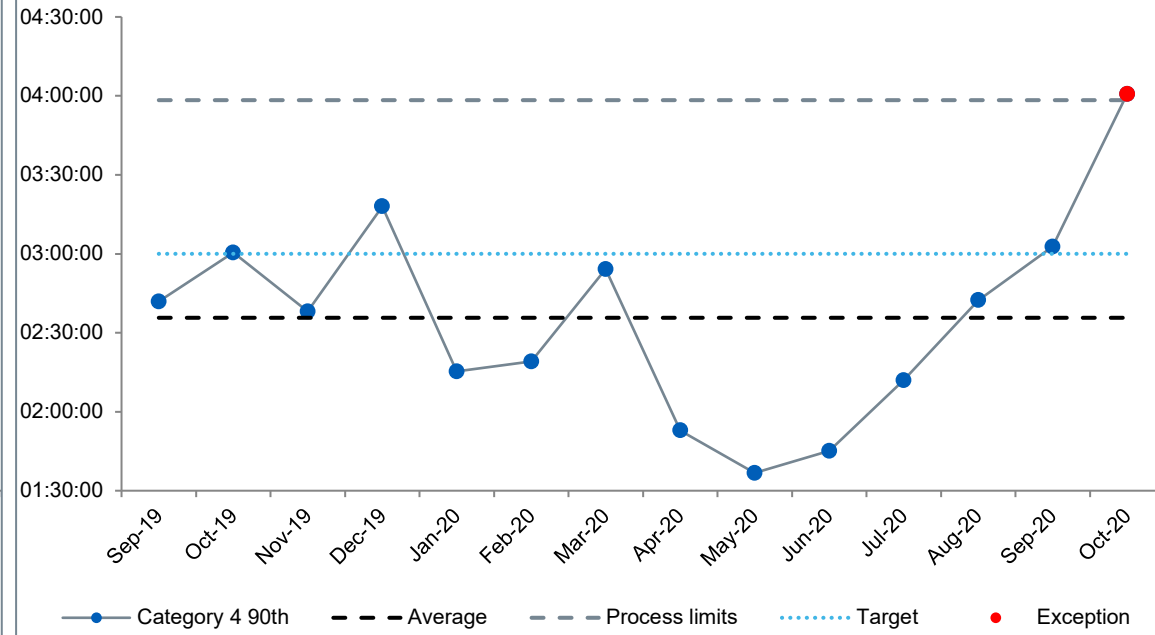
A&E Chart 9: Performance - Category 3 90th Percentile

Year to Date 01:32:16

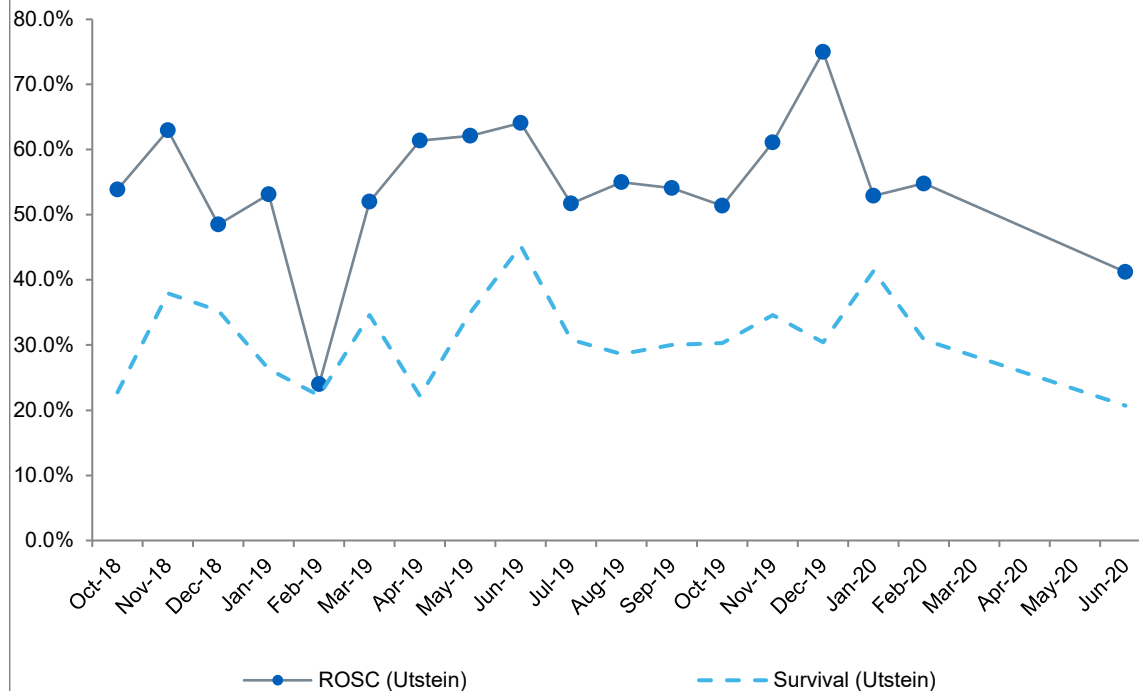


A&E Chart 10: Performance - Category 4 90th Percentile

Year to Date 02:17:23



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



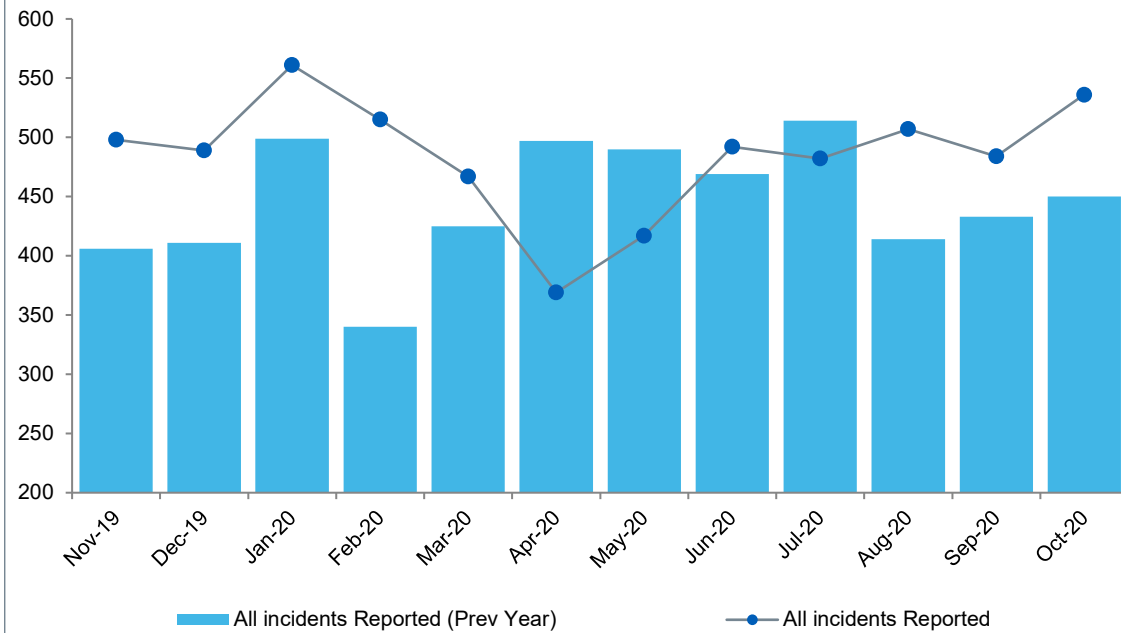
Performance Commentary:

Based upon falling COVID-19 demand RRVs were reintroduced to A&E Operations. Throughout October there was a slight increase in demand but volumes were in expected levels.

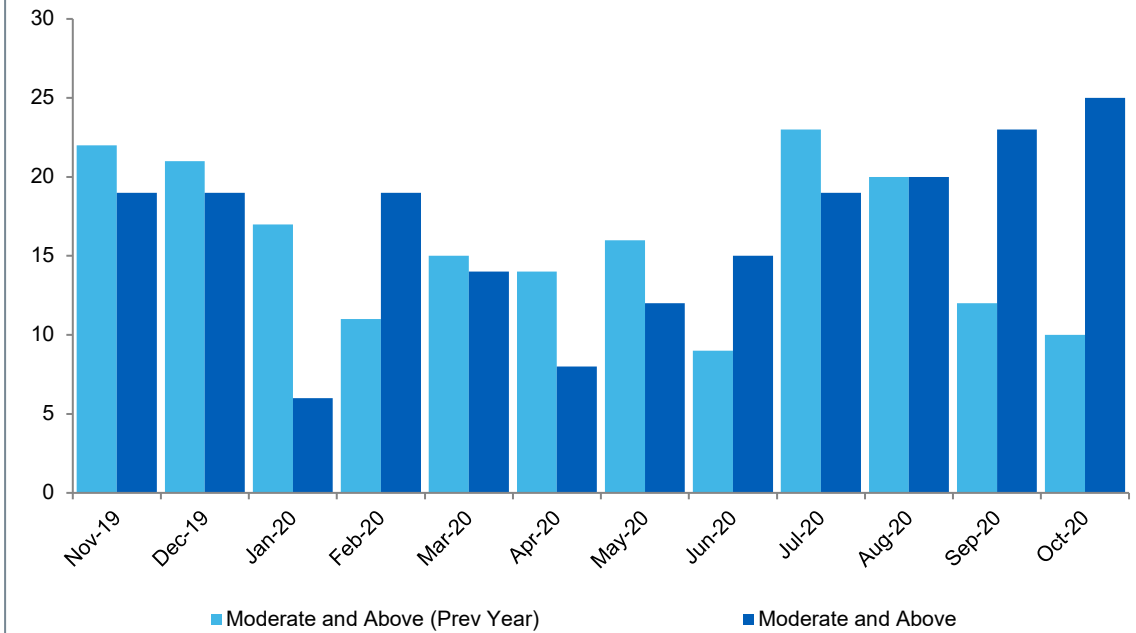
The level of STR and STC was similar to September. It remains a significant positive exception throughout the COVID period compared to BAU. STR rates continue on a downward trend whilst convey is increasing although at similar level to the previous month. This in isolation is a concern and work continues with local health partners to understand what is available to crews to avoid A&E attendance.

Against the background of a slight fall in demand we had an increased level of total abstraction due to an intensification in additional training as university courses enrolled through September and October. Additional abstractions were seen as we entered the second wave. An increase of handover delays at Hospitals were also experienced.

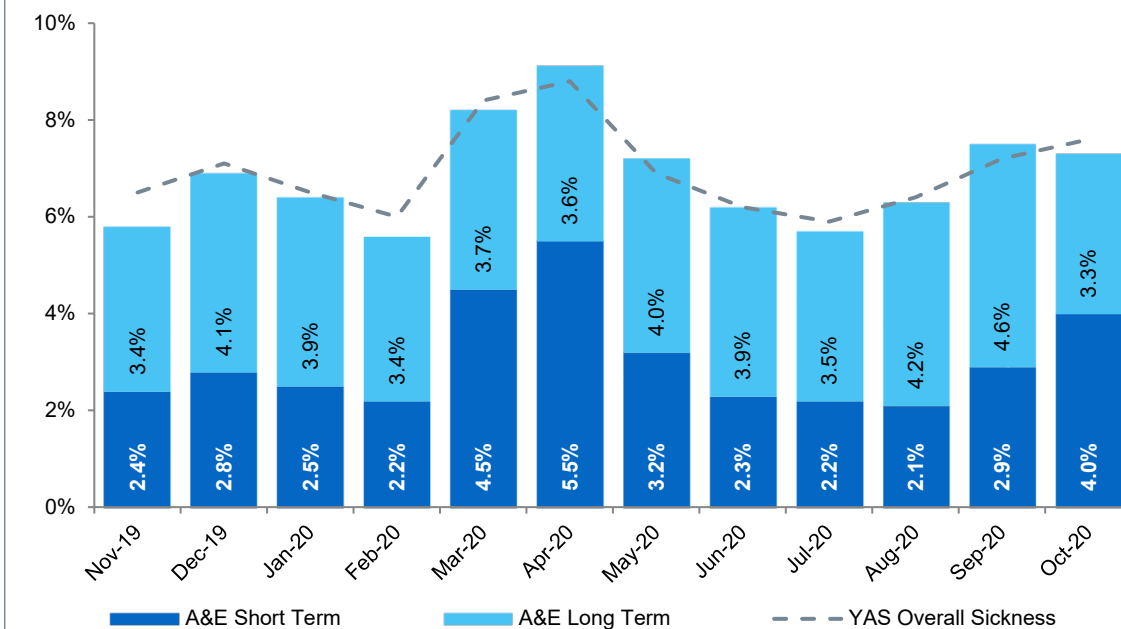
A&E Cht12: Quality - Reported Incidents



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



A&E Cht14: Workforce - Sickness



Quality Commentary:

Reported incidents fell in October 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.

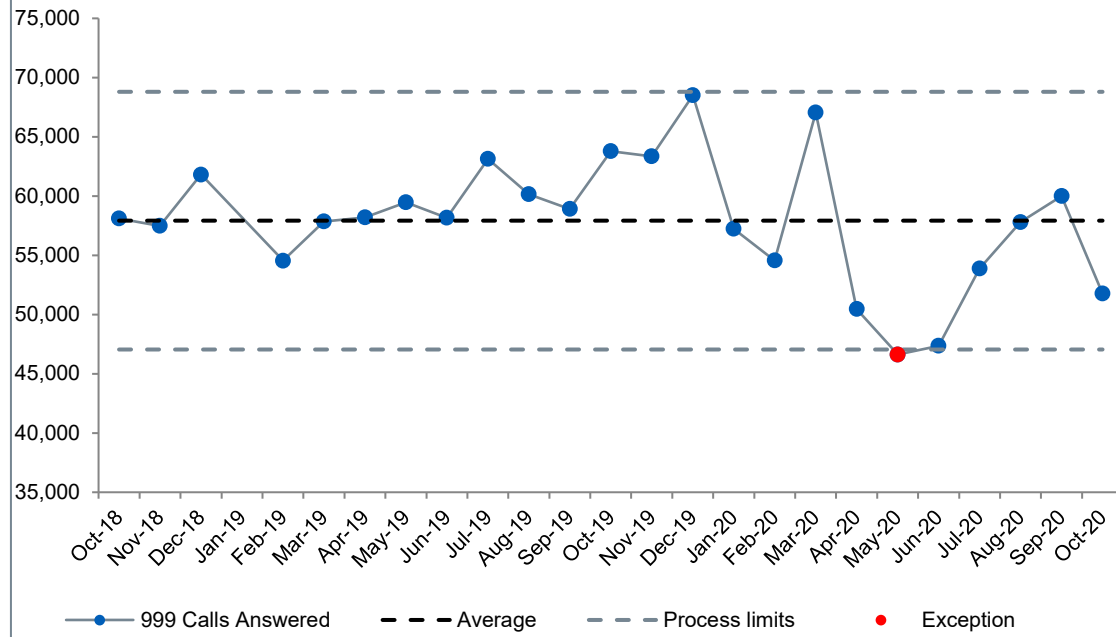
Workforce Commentary:

The overall sickness rate increased in October.

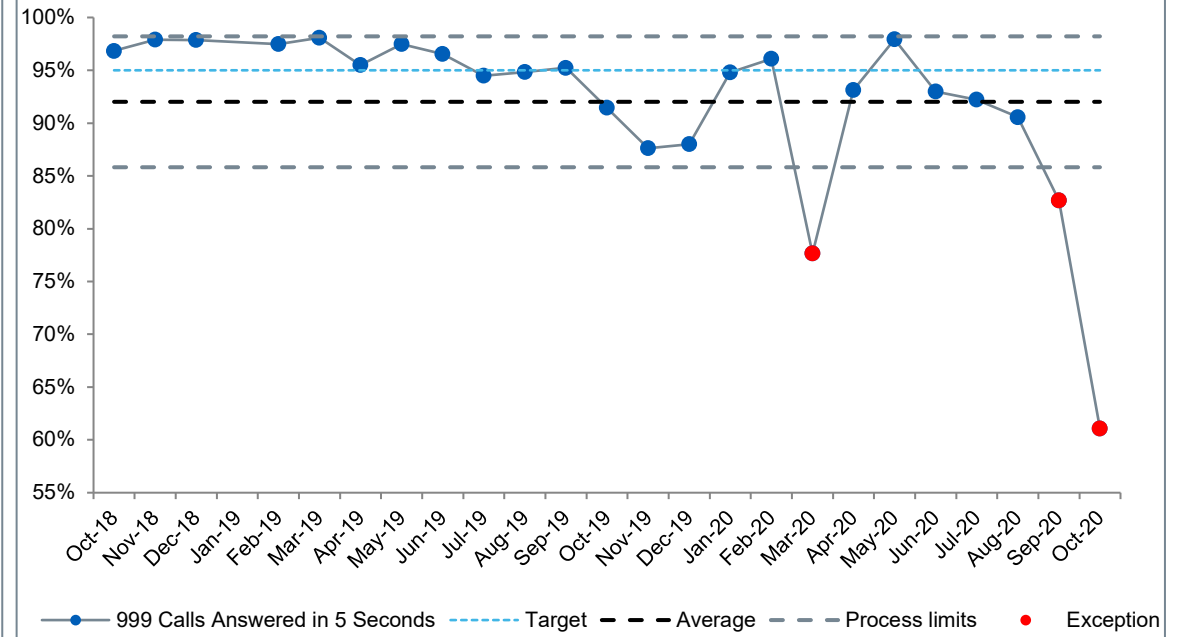
The COVID-19 pandemic has caused higher levels of sickness absence and abstraction due to those in isolation and quarantine. COVID-19 cases have increased regionally through October and is impacting staff numbers. A number of actions have been taken to mitigate sickness absence and the impact government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

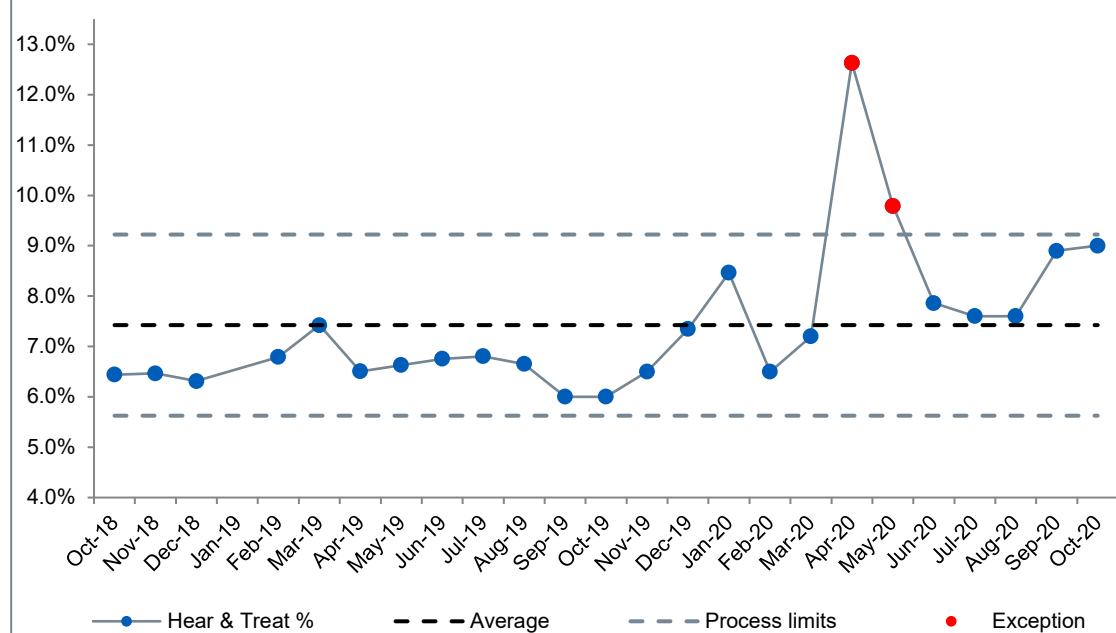
EOC Chart 1: Demand - 999 Calls Answered



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



EOC Chart 3: Performance - % Hear & Treat



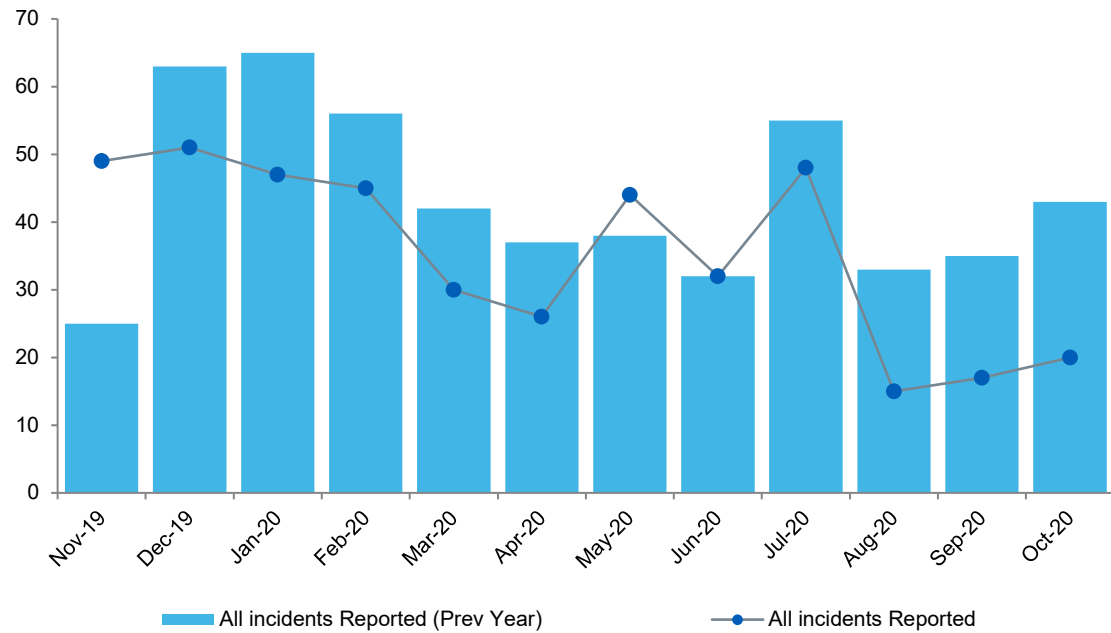
Performance Commentary:

The pandemic card 36 reduced nationally to level 0 early October which saw call demand and categorisation return to normal levels increasing pressure on operational response. The national level was escalated to level 1 for the remainder of the month.

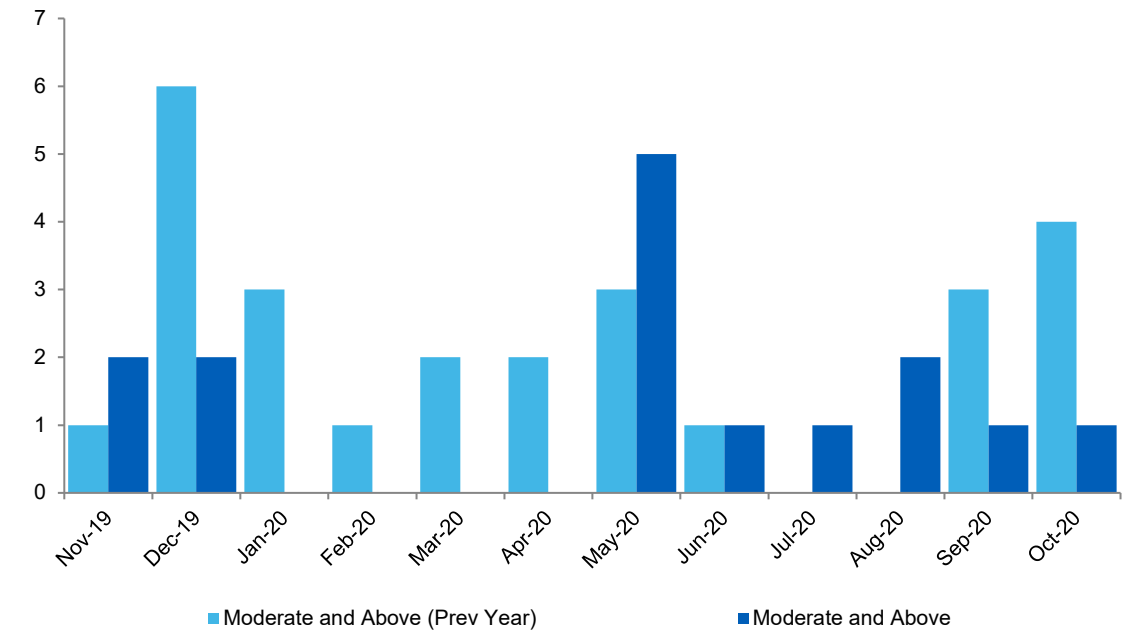
Call handling performance saw a significant downward trend in October as additional absence rates resulted in call handling capacity much lower than was required. Call handling times have extended which has increased pressure. Concerns around EOC capacity and staffing volumes were highlighted and additional support approved to allow return to budgeted establishment of call handling staff.

Hear and Treat performance saw further improvements in October against the background of operational pressure. The specialist advice support cell has had a positive impact on this area in addition to the ST+R performance.

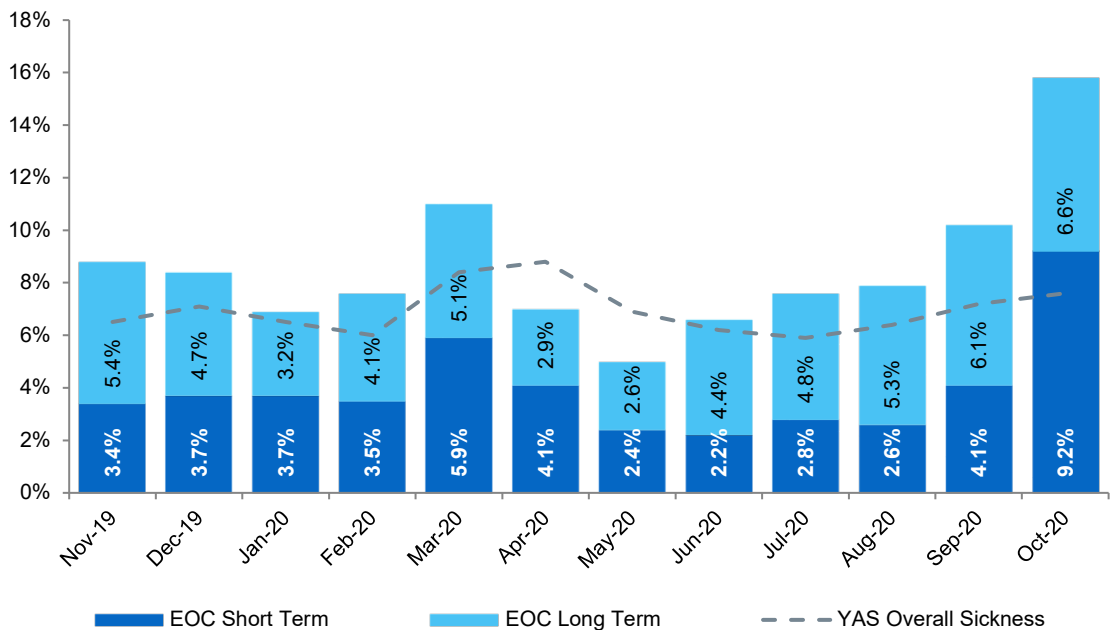
EOC Chart 4: Quality - Reported Incidents



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



EOC Chart 6: Workforce - Sickness



Quality Commentary:

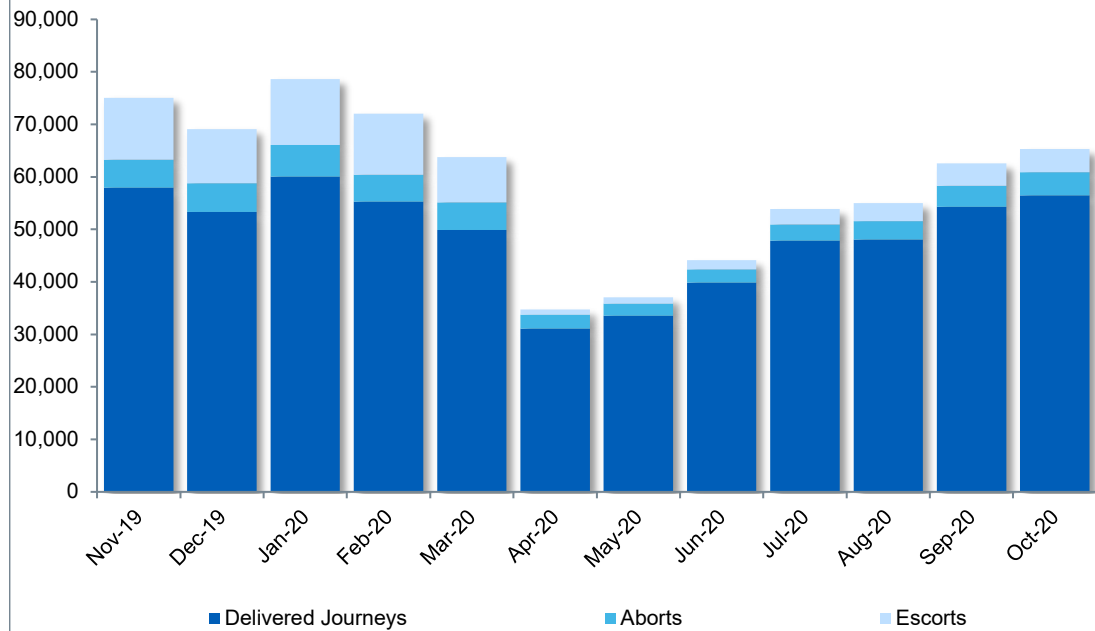
The total number of reported incidents saw an increase in October with only 1 incident classed as moderate.

Workforce Commentary:

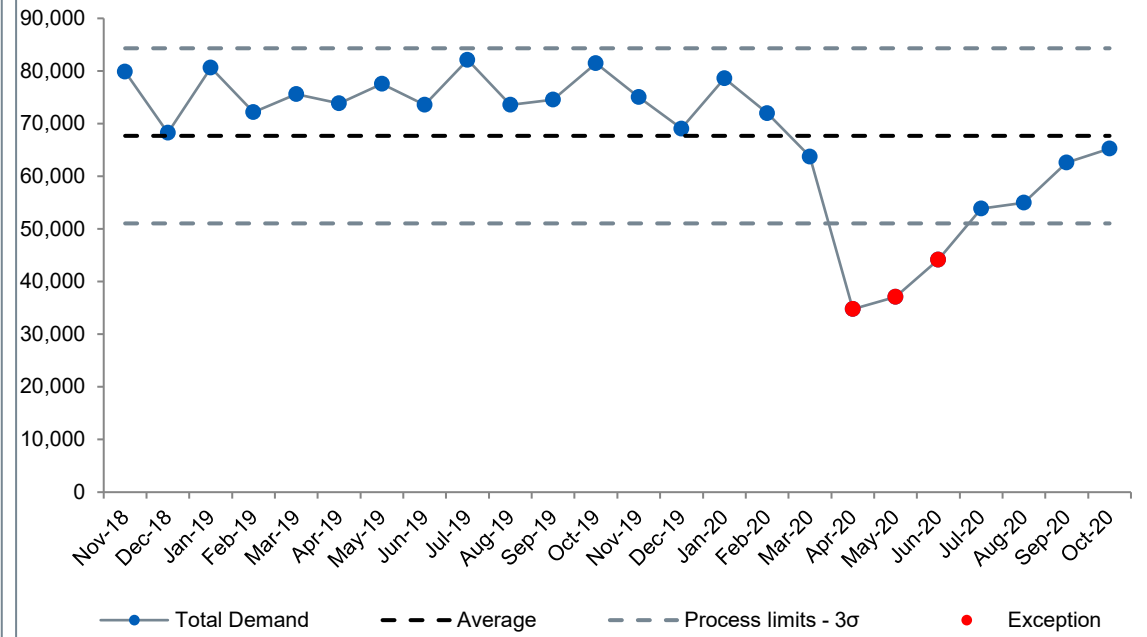
Both long term and short term sickness rates saw significant increase in October due to levels of COVID related absence. This has significantly impacted upon overall abstraction numbers and has had a negative impact on KPI achievement, This represents a concern around the resilience of staff groups and 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.

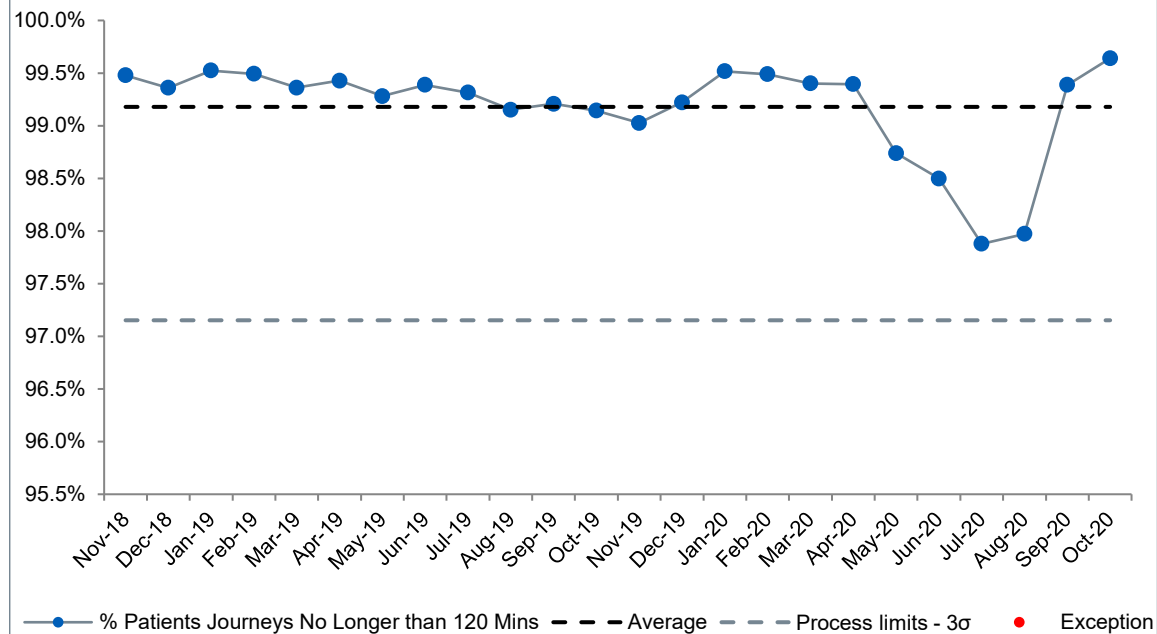
PTS Chart 1: Demand - Journeys



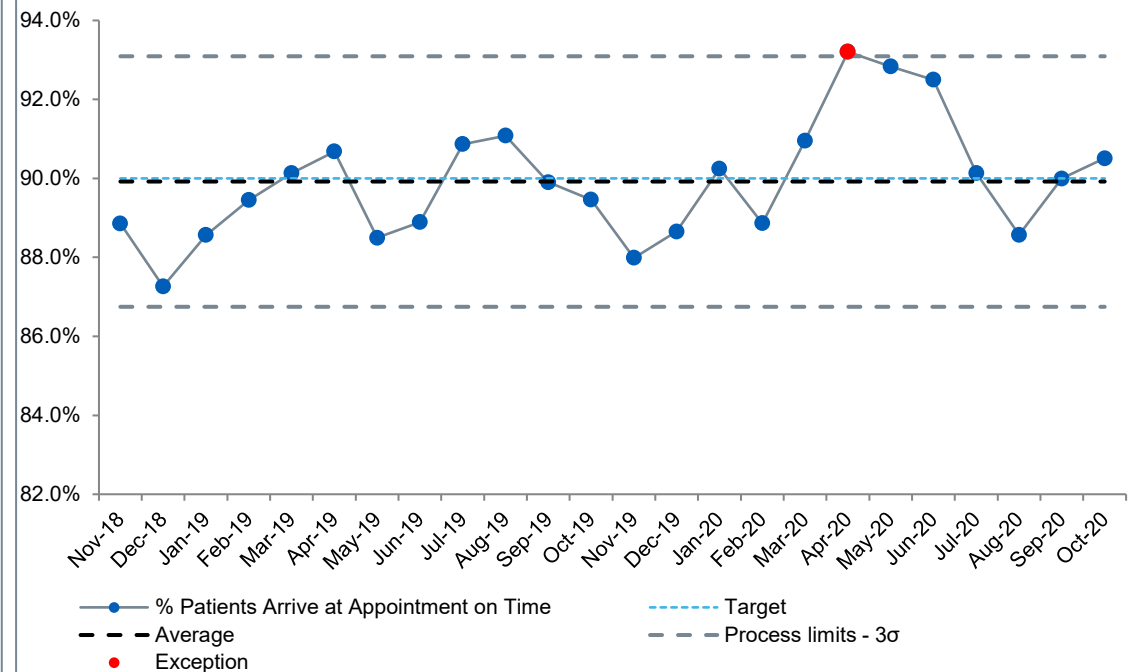
PTS Chart 2: Demand - Total Demand



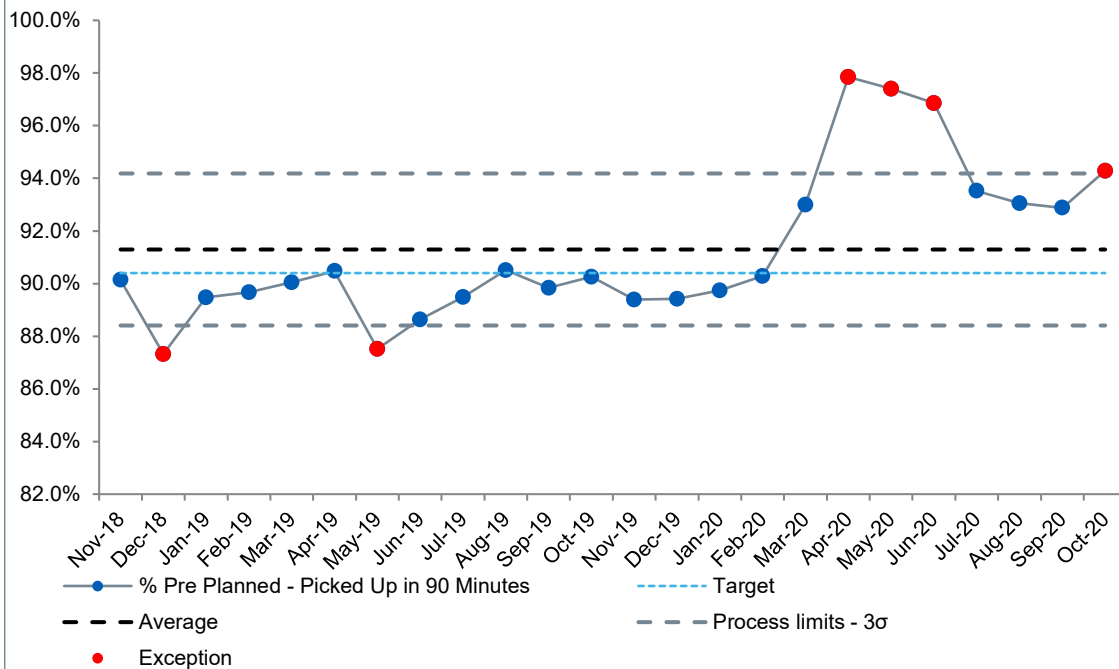
PTS Chart 3: % Patients Journeys to be no longer than 120 Minutes



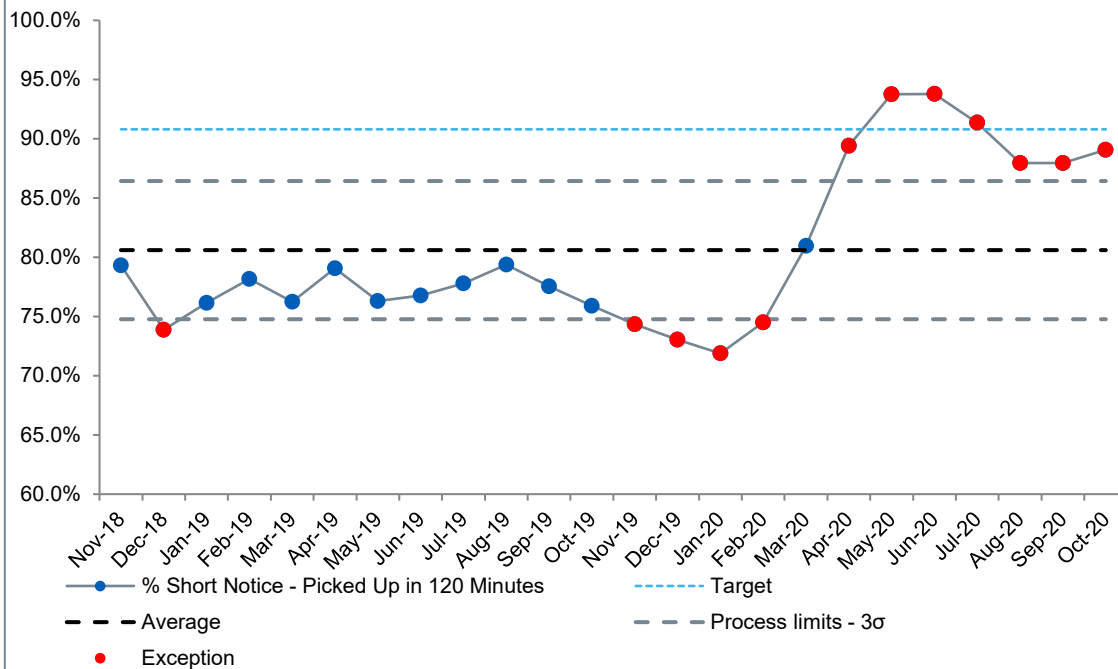
PTS Chart 4: % Patients Arrive at Appointment on Time



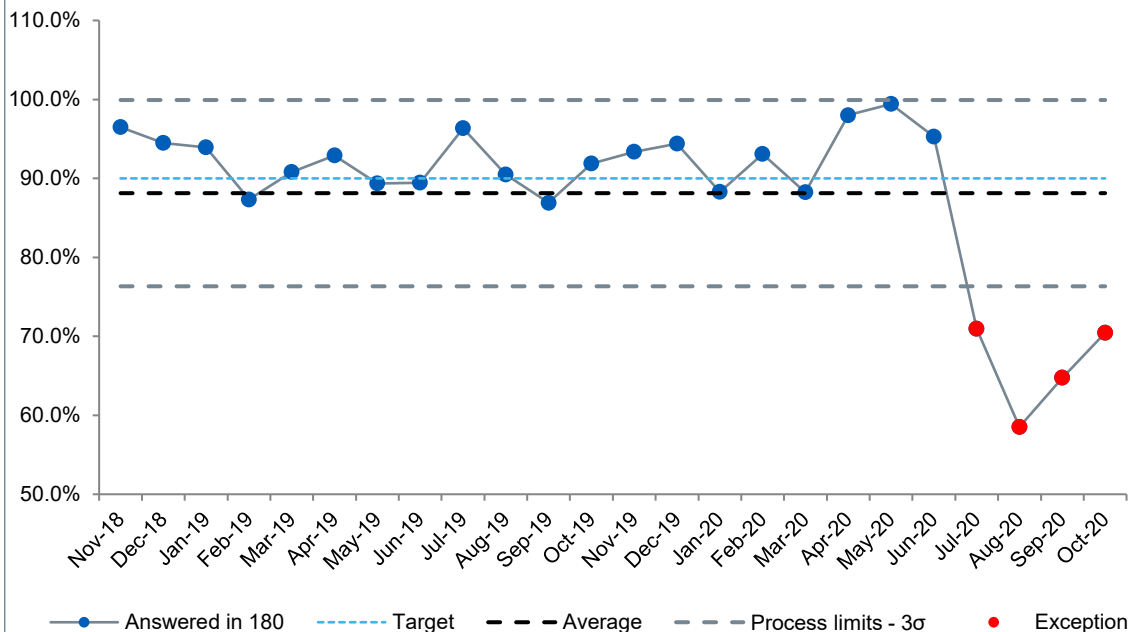
PTS Chart 5: Performance - % Pre Planned - Picked Up in 90 Minutes



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



PTS Chart 7: Telephony - Calls Answered within 180 Seconds



Performance Commentary:

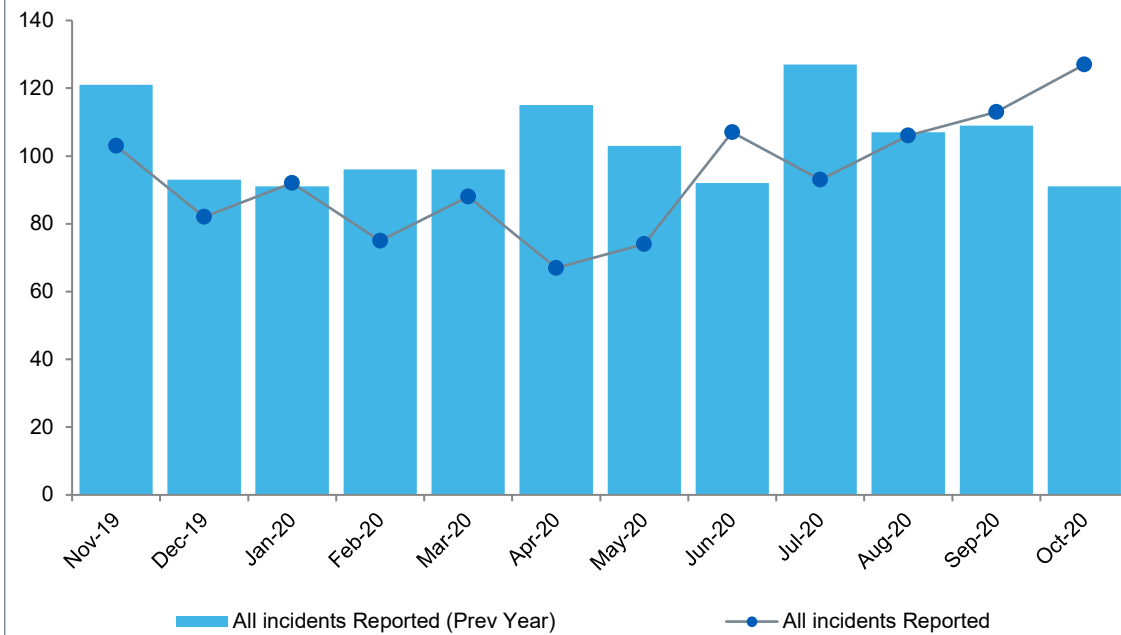
October PTS activity is at 81% (w/c 02/11) of pre-COVID BAU including discharge activity. Pre-planned activity is at 76%, same day discharge activity is at 120% of the same month last year. Some PTS contract areas are as high as 97% pre-COVID pre-planned BAU and 180% for on-day discharge. Additional resources from our YAS managed alternate provider framework are utilised to the extreme to cover this shortfall. The trajectory shows week on week increase during October, however the rate is starting to level. Work is ongoing to forecast and plan additional resource requirements within the Trust and externally.

PTS staff have conveyed over 8,300 Covid positive and suspected patients; w/c 02/11 YAS moved 697 covid/suspect patient journeys which is 5% more than the previous highest week in the first peak.

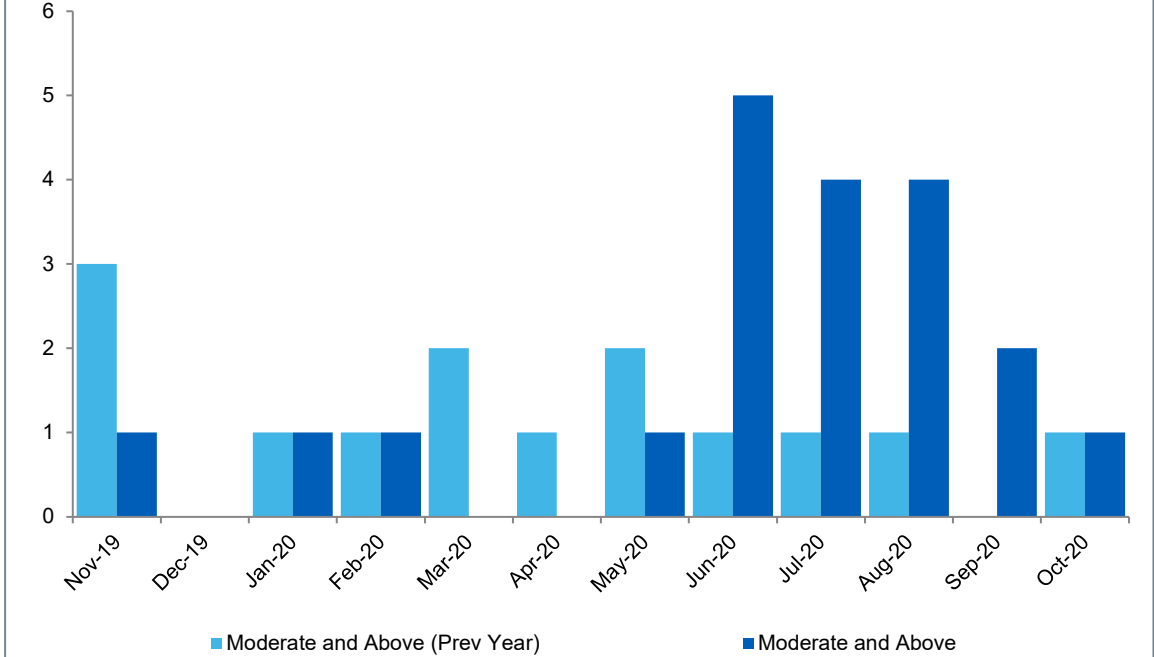
The contractual KPI performance measures have been suspended in line with NHS England Guidance due to COVID 19. PTS is maintaining a good level of service for our renal patients. On Day discharge performance for the whole region is broadly 90% within 120 minute target.

NHSE/I PTS Guidance: 24/9/20 Updated national guidance has now been released and being progressed with YAS PTS ensuring that we continue to move patients safely. Regular updates and sharing of practice with other NHS Ambulance Trusts is taking place. July into October has seen a surge in booking call volumes. October performance improved by 6.6%.

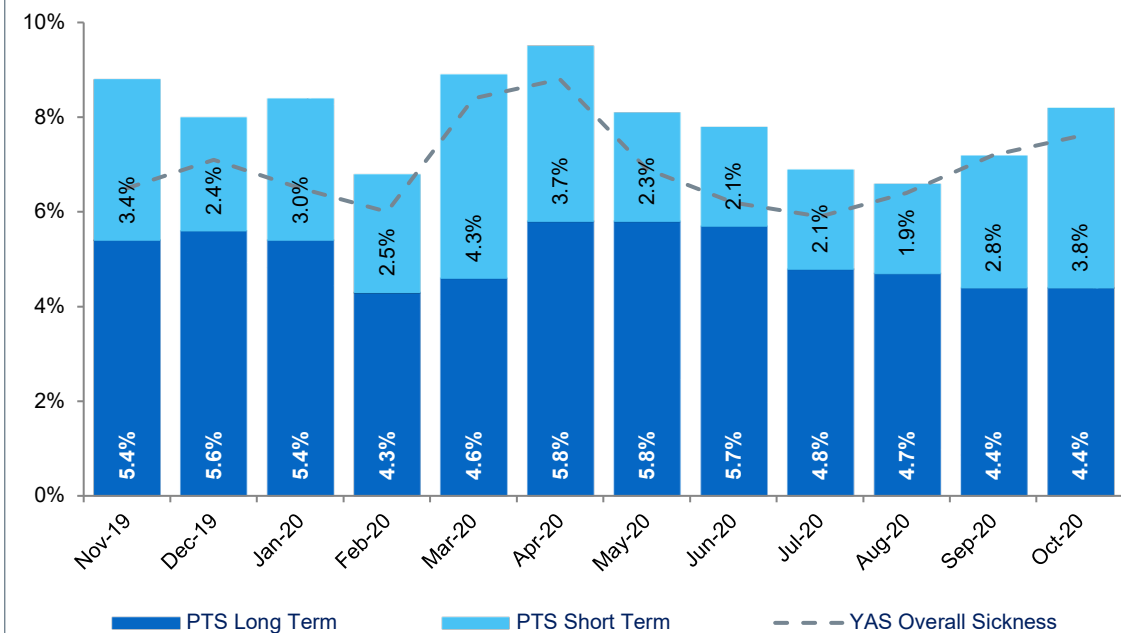
PTS Chart 8: Quality - Reported Incidents



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



PTS Chart 10: Sickness



Quality Commentary:

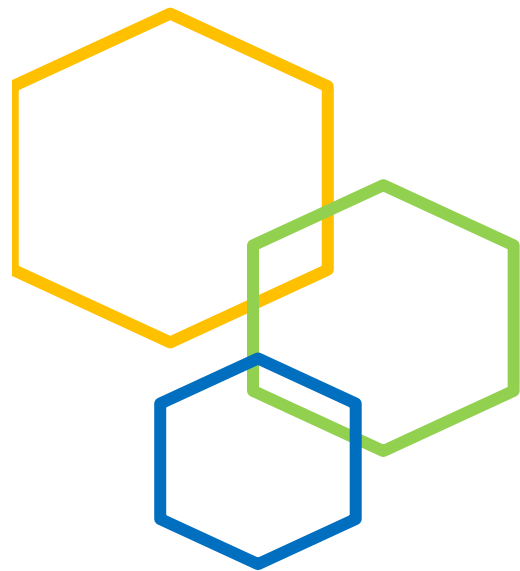
There was a decrease in the number of reported incidents in October. Incidents continue to remain below 0.01% of total PTS journeys.

Workforce Commentary:

There was an increase in short term sickness in October due to staff self isolating. Long term sickness remains at the same level as in September and at 4.4% is the lowest level since February 2020.

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 October; this is directly related to the Clinically Extremely Vulnerable PTS staff now shielding having had renewed risk assessments; in light of new national and YAS guidance.

There was a slight dip in PDR compliance for October standing at 84.9%. Plans are in place to improve going forward. Statutory and Mandatory workbooks data are still under review.



National Benchmarking



Ambulance Quality Indicators

October 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)	71,071	104,664	97,839	69,686	77,709	76,673	36,770	95,468	64,029	51,960
Incident Proportions%	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1 and C2 Incidents	64.6%	62.7%	62.8%	68.4%	63.3%	63.4%	63.5%	52.1%	57.0%	50.5%
C1 Incidents	8.1%	7.0%	9.6%	9.9%	8.1%	10.6%	7.0%	7.1%	6.4%	7.1%
C2 Incidents	56.5%	55.7%	53.2%	58.5%	55.2%	52.9%	56.5%	45.1%	50.6%	43.4%
C3 Incidents	16.2%	22.7%	15.5%	17.2%	17.1%	20.2%	18.2%	34.7%	32.9%	32.8%
C4 Incidents	0.5%	1.5%	2.6%	0.2%	0.5%	0.7%	1.1%	1.9%	0.5%	2.1%
C5 Incidents	0.7%	1.5%	1.6%	1.0%	6.5%	5.9%	0.0%	0.1%	0.1%	0.1%
HCP/IFT 1-4 Hour Incidents	8.9%	3.6%	6.9%	4.2%	3.5%	4.5%	7.5%	5.6%	3.8%	6.8%
Hear and Treat	9.0%	8.0%	10.6%	8.9%	9.0%	5.3%	9.6%	4.5%	6.2%	8.9%
Performance	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1-Mean response time (Target 00:07:00)	00:08:42	00:06:21	00:08:03	00:07:47	00:07:07	00:07:56	00:06:40	00:07:11	00:07:33	00:06:23
C1-90th centile response time (Target 00:15:00)	00:15:00	00:10:35	00:13:22	00:13:52	00:13:13	00:14:46	00:11:25	00:12:31	00:13:59	00:11:43
C2-Mean response time (Target 00:18:00)	00:29:13	00:15:13	00:45:40	00:30:11	00:23:45	00:27:08	00:32:20	00:13:23	00:18:20	00:15:27
C2-90th centile response time (Target 00:40:00)	01:01:55	00:29:13	01:40:28	01:03:15	00:48:43	00:55:02	01:05:29	00:24:43	00:33:41	00:29:54
C3-Mean centile response time (Target 01:00:00)	01:24:16	00:39:22	02:18:38	01:39:52	01:01:25	01:20:51	01:57:58	00:40:20	01:23:48	00:45:52
C3-90th centile response time (Target 02:00:00)	03:23:52	01:31:38	05:36:30	04:02:08	02:32:25	03:14:49	04:53:30	01:33:39	03:06:47	01:45:17
C4-90th centile response time (Target 03:00:00)	04:00:47	02:52:32	05:57:11	04:23:32	03:19:22	04:16:45	03:56:46	02:22:11	04:28:26	02:37:28
Proportion of All incidents	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
Incidents with transport to ED	53.9%	55.6%	52.6%	53.7%	56.2%	52.3%	54.6%	52.1%	58.7%	50.7%
Incidents with transport not to ED	7.7%	5.4%	7.0%	6.2%	2.6%	4.4%	8.3%	5.7%	1.7%	6.2%
Incidents with face to face response	29.4%	31.0%	29.8%	31.2%	32.2%	38.0%	27.6%	37.7%	33.4%	34.1%
Clinical - June 2020	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	Pathways	Pathways	Pathways	Pathways
ROSC	25.0%	31.1%	28.4%	16.2%	30.0%	29.2%	28.3%	34.4%	24.7%	25.6%
ROSC - Utstein	41.2%	56.1%	51.6%	39.1%	62.8%	46.3%	40.9%	57.5%	45.2%	54.5%
Cardiac - Survival To Discharge	6.7%	6.2%	5.4%	4.5%	10.2%	8.9%	4.2%	12.1%	9.0%	12.2%
Cardiac - Survival To Discharge Utstein	20.7%	19.4%	25.0%	18.2%	38.1%	15.0%	22.2%	28.9%	30.8%	31.8%