




Integrated Performance Report

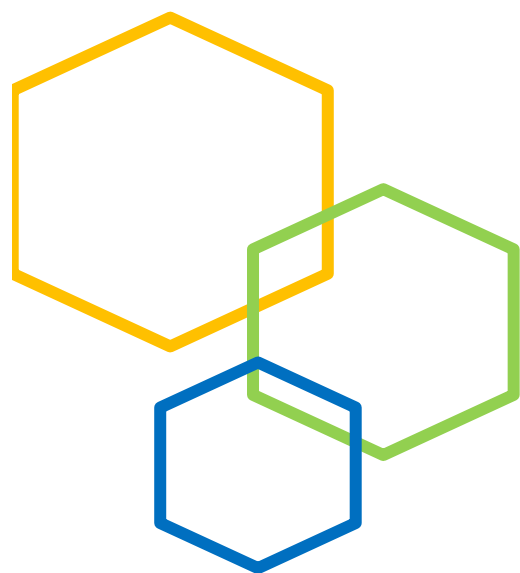
November 2020

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 – monitoring the system position.
- Ongoing Hospital Reconfigurations underway across the region – positive YAS engagement to support.
- COVID related capital plans: ongoing confirmation of agreed funding alongside new potential capital funds.
- ICS Next Steps Consultation released: ICS workshops with system partners being scheduled, to understand impact and develop system level response.
- Further Simon Stevens Letter anticipated before Christmas: not currently expected to provide full national planning guidance.
- NHS 111 First assurance activity aligned to Emergency Department arrival notification.
- Ongoing challenges associated with 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	SEP	OCT	NOV	SEP	OCT	Nov	SEP	OCT	NOV	SEP	OCT	NOV	SEP	OCT	NOV	SEP	OCT	NOV	SEP	OCT	NOV	SEP
IUEC DELIVERY PROGRAMME DAVE BEET																													
1. Patient Pathways Project developed and on track. Project team and Clinical Advisory Group in place. 2. NHS 111 First Project established recruitment/training complete, clinical capacity developed and phasing in, estates and facilities incorporated into wider Trust plan, IT and ED notification. 3. EOC Clinical Project established. 4. Remote Clinical Assessment People Project under development and on track for TEG overview presentation (9 December). 5. Mental Health Project first stage agreed, project plan drafted and recruitment of Project Manager underway. 6. Proposal to bring the Safer Right Care Project into this programme and work underway to scope this. 7. 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	A	A	A	G	G	G	
INFRASTRUCTURE STEVE PAGE																													
Digital Enablers: Unified Comms is RAG rated AMBER. TEG agreed to re-profile phased migrations to Feb / Mar '21. N365 is RAG rated AMBER. A paper will be presented to TMG and TEG w/c 07.12.20 recommending an extension to the original timelines. ePR Phase 3 continues to be RAG rated AMBER with the project on track and no issues to report. 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	A	G	G	G	A	G	G	R	G	G	NA	NA	NA	A	A	A	G	G	G	
	1.2 P109 N365 Implementation	LR	09/07/20	31/12/20	DELIVERY		↓	A	R	A	A	R	R	G	G	G	R	R	R	NA	R	R	R	A	A	G	A	A	
	1.3 P106 ePR Phase 3 (Development)	SR	01/04/21	31/03/21	DELIVERY	3	↔	A	A	A	G	G	G	A	A	A	A	R	A	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	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	G	G	G	G	G	G	G	G	
SERVICE DELIVERY & INTEGRATED WORKFORCE STEVE PAGE																													
Team Based Working is RAG rated AMBER. A Gate 1 Business Opportunity document relating to the Paramedic career pathway, a key strand of TBW, was reviewed at TMG Gate sub group, 03.11.20, followed by Gate 2 Business Case, 01.12.20. A final version of the Business Case (Gate 2) is expected to be presented at TMG, 27.01.21. Due to operational pressures facing EOC and A&E, the Integrated Transport Pilot has been paused. The project is scheduled to restart 14.12.20. The Rotational Paramedic Project is RAG rated AMBER. National developments will impact on the Trusts approach to delivery. The Trust awaits further details and confirmation of changes before developing a refreshed delivery plan.																													
	1 Team Based Working	AB/EL	STARTED	21/22	DELIVERY	NA	↔	G	A	A	G	A	A	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	
	2 Integrated Transport Pilot	AB	09/09/20	31/03/21	PAUSED	3	P	G	P	P	G	P	P	A	P	P	G	P	P	G	P	P	G	P	P	G	P	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	A	A	A	G	G	A	A	A	A	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																													
None																													

Service Line	Indicator ID	Exception Commentary
IUC	001	Core Clinical Advice has been below target for four months, despite providing clinical advice at a much higher than contracted level by 11.2%. Work is ongoing by the Business Intelligence team to understand the underlying reasons for this, it appears the patient mix may be a contributory factor with more health information cases associated with covid, although further analysis is required to understand this more. Due to the clinical demand higher than contracted levels performance is still below target at 46.7% call back in an hour (60% target), additional clinical staff have been recruited and currently in training which should support maintenance of this performance as demand increases in December .
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 November 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 November and the 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 where they are experiencing high abstraction rates due to Covid self isolation. Fleet is working with the manufacturers to ensure vehicles are repaired in a timely manner.
PTS	004	PTS reservations saw an improvement of 14.7% in call answering in November from previous month. Volume dropped and Capacity improved with new apprentices. This is the best performance since June; with lengthened screening questions and requirements. It is not appropriate to measure against pre-covid BAU KPI's.
	009	There was a slight dip in PDR compliance for November standing at 84.3%; however PTS still remains the second highest compliancy rating within the Trust. Plans are in place to improve the figures going forward. Statutory and Mandatory workbooks data are still under review.
	PTS Chart 6	Regionally we missed target by less than 1.2% of the "Short Notice - Picked Up in 120 Mins" - November 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. 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 of vehicles and that manufacturers no longer supply parts for these vehicles. There are 123 vehicles on order which will bring the age profile in line with the trusts vehicle replacement plan, these vehicles will be delivered through Q4.
INFORMATION MANAGEMENT	016	IG compliance dipped in November from 91.2% to 89.8%, most likely due to the current COVID-19 pandemic and winter pressures. 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 help increase this rate. FOI compliance decreased dipped to 89.2% which is slightly below the 90% target and is due to a single FOIA request being disclosed out of time. However, the workstream is in a strong position and it is hoped that the compliance will return next month to above 90%.



Patients & Communities

November 2020

Indicator ID	Key Operational Standard Description	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Nov-20				
														Target / Forecast	Actual	Actual v Target/Fcast		
001	Integrated Urgent Care	Calls Offered	175,308	144,564	148,175	308,185	175,235	153,686	133,386	139,324	154,845	173,929	174,744	163,768	128,644	163,768	▲	
		Call Answered	160,403	135,455	135,463	155,346	143,075	141,878	127,239	132,417	147,469	151,588	151,319	147,925		147,925		
		Calls Answered within 60 Seconds	83.1%	90.7%	85.0%	26.2%	67.3%	87.8%	94.8%	90.1%	88.0%	70.3%	80.5%	89.8%	90%	89.8%	▼	
		Core Clinical Advice	28.3%	30.5%	28.3%	28.2%	28.0%	30.7%	32.7%	31.3%	29.7%	29.3%	28.7%	28.4%	30%	28.4%	▼	
		Clinician Called Back within 1 Hour	56.9%	59.8%	46.6%	45.9%	71.7%	70.4%	58.1%	56.2%	49.7%	41.2%	47.8%	46.7%	60%	46.7%	▼	
		Direct Bookings	45.2%	45.8%	45.0%	35.0%	29.9%	35.0%	33.9%	34.9%	37.4%	37.2%	36.6%	35.9%	30%	35.9%	▲	
		Bookings into UTC	51.0%	56.7%	56.7%	49.0%	16.0%	15.1%	18.8%	21.5%	22.5%	19.0%	21.7%	19.8%	50%	19.8%	▼	
		Bookings into IUC Treatment Centres	60.2%	62.9%	61.6%	55.5%	48.3%	50.4%	51.1%	50.9%	50.7%	50.2%	50.6%	49.9%	95%	49.9%	▼	
		ED Validations	46.6%	50.8%	37.7%	29.9%	33.0%	35.4%	52.8%	53.0%	50.2%	48.2%	52.0%	52.6%	50%	52.6%	▲	
	Ambulance Validations	97.8%	98.3%	90.4%	53.6%	74.3%	94.1%	97.6%	96.4%	95.9%	86.7%	96.4%	95.6%	95%	95.6%	▲		
002	EOC	Telephony - 999 Calls Answered	68,507	57,223	54,569	67,046	50,458	46,629	47,355	53,867	57,811	60,000	51,759	50,598		50,598		
		Telephony - 999 Calls Answered within 5 Seconds	88.0%	94.8%	96.1%	77.6%	93.1%	97.9%	93.0%	92.2%	90.6%	82.7%	61.1%	84.2%	95%	84.2%	▼	
003	A&E Operations	All Activity (H&T + STR + STC)	76,409	72,149	67,218	73,608	64,197	64,125	63,924	68,032	69,026	67,600	71,496	68,697		68,697		
		Hear & Treat (H&T)	8.5%	6.5%	7.2%	12.6%	9.8%	7.9%	7.6%	7.6%	8.8%	8.9%	9.0%	8.6%		8.6%		
		See, Treat & Refer (STR)	25.0%	25.1%	25.5%	31.0%	39.0%	33.4%	30.7%	29.6%	28.7%	28.1%	29.2%	30.0%		30.0%		
		See, Treat & Convey (STC)	66.7%	68.4%	67.3%	56.4%	51.2%	58.7%	61.7%	62.7%	62.5%	62.9%	61.8%	61.4%		61.4%		
		999 Responses (STR + STC)	70,017	67,446	62,407	64,362	57,916	59,083	59,057	62,855	62,961	61,555	65,054	62,784	70,509	62,784	▼	
		Category 1	Mean	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	00:08:14	00:07:00	00:08:14	▲
			90th Percentile	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	00:14:08	00:15:00	00:14:08	▼
		Category 2	Mean	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	00:24:36	00:18:00	00:24:36	▲
			90th Percentile	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	00:52:07	00:40:00	00:52:07	▲
		Category 3	90th Percentile	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	02:35:25	02:00:00	02:35:25	▲
Category 4	90th Percentile	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	03:23:35	03:00:00	03:23:35	▲		
	Average Turnaround Time	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	00:39:26	00:30:00	00:39:26	▲		
	Average Job Cycle Time (Responses)	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	02:08:29		02:08:29			
004	PTS	Journeys	69,065	78,620	72,004	63,751	30,448	37,068	44,138	53,887	54,984	62,594	65,283	61,711	75,033	61,711	▼	
		Patient Journeys < 120 Minutes	99.2%	99.5%	99.5%	99.4%	99.4%	98.7%	98.5%	97.9%	98.0%	99.4%	99.6%	99.2%	90.0%	99.2%	▲	
		Patients Arrive at Appointment on Time	88.7%	90.2%	88.9%	91.0%	93.2%	92.8%	92.5%	90.1%	88.6%	90.0%	90.5%	91.1%	90.0%	91.1%	▲	
		% Pre Planned - Picked Up in 90 Minutes	89.4%	89.7%	90.3%	93.0%	97.9%	97.4%	96.9%	93.5%	93.1%	92.9%	94.3%	94.4%	90.4%	94.4%	▲	
		% Short Notice - Picked Up in 120 Minutes	73.0%	71.9%	74.5%	81.0%	89.4%	93.8%	93.8%	91.4%	87.9%	87.9%	89.1%	88.8%	88.8%	88.8%	◀▶	
		Calls Answered within 180 Seconds	94.4%	88.3%	93.1%	88.2%	98.0%	99.4%	95.3%	70.9%	58.5%	64.8%	70.4%	86.1%	90.0%	86.1%	▼	

Indicator ID	Key Operational Standard 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
005	ACQI	% Received STEMI Bundle			58.7%		44.0%			Not Published			51.5%
		% Received Stroke Diagnostic Bundle	95.9%			83.6%			94.6%		Not Published		
		% Received Sepsis Care Bundle		72.7%			76.8%			Not Published			73.9%

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

Indicator ID	Key Operational Standard Description	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Nov-20			
														Target / Forecast	Actual	Actual v Target/Fcast	
006	Workforce	Total FTE in Post	4,753	4,759	4,777	4,836	4,898	4,924	4,993	4,987	4,986	5,026	5,102	5,110		5,110	
		BME %	5.1%	5.1%	5.3%	5.3%	5.2%	5.3%	5.4%	5.4%	5.5%	5.6%	5.7%	5.8%	11.1%	5.8%	▼
007	Recruitment	New Starters (FTE)	13.3	44.6	42.1	89.1	104.3	41.8	60.1	50.0	27.9	107.3	101.5	57.4		57.4	
008	Turnover (FTE)	YAS (Rolling 12 Month Periods)	9.7%	9.7%	9.7%	9.2%	9.2%	8.7%	8.4%	8.6%	8.3%	8.3%	8.0%	8.3%		8.3%	
009	PDR / Staff Appraisals	YAS	75.7%	74.6%	75.9%	71.6%	65.5%	64.6%	66.3%	68.1%	69.5%	70.5%	70.8%	70.7%	90.0%	70.7%	▼
		A&E Operations	78.8%	78.3%	78.8%	74.8%	68.2%	63.4%	65.8%	69.0%	72.0%	74.0%	75.4%	76.5%	90.0%	76.5%	▼
		EOC	67.1%	68.7%	68.5%	65.3%	63.9%	69.4%	71.8%	72.5%	69.4%	66.1%	56.6%	55.2%	90.0%	55.2%	▼
		Integrated Urgent Care	60.8%	56.2%	65.0%	58.6%	58.1%	81.5%	89.6%	93.4%	92.4%	89.3%	90.4%	85.7%	90.0%	85.7%	▼
		PTS	88.4%	86.9%	87.7%	82.9%	74.5%	80.3%	79.9%	81.2%	82.3%	85.3%	84.9%	84.3%	90.0%	84.3%	▼
010	Training: Stat & Mand (Substantive Employees)	YAS	97.6%	97.2%	97.6%	97.4%	Stat Mand Reporting is currently under review								90.0%		
		A&E Operations	98.2%	97.8%	97.9%	97.8%									90.0%		
		EOC	97.4%	96.5%	98.3%	98.0%									90.0%		
		Integrated Urgent Care	96.1%	95.7%	97.1%	96.7%									90.0%		
		PTS	100.0%	100.0%	100.0%	100.0%									90.0%		
011	Health & Wellbeing	Total Sickness Rate	7.1%	6.5%	6.0%	8.4%	8.8%	6.9%	6.2%	5.9%	6.4%	7.2%	7.6%	8.2%		8.2%	
		Long Term Sickness Rate	4.3%	3.8%	3.6%	3.8%	3.8%	4.0%	3.9%	3.7%	4.2%	4.2%	3.5%	4.1%		4.1%	
		Short Term Sickness Rate	2.8%	2.7%	2.5%	4.6%	5.0%	2.9%	2.3%	2.2%	2.2%	3.0%	4.2%	4.1%		4.1%	

Indicator ID	Key Operational Standard Description	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Nov-20				
														Target / Forecast	Actual	Actual v Target/Fcast		
012	Incidents	All Reported	735	801	739	687	524	633	716	758	721	709	760	683		683		
		Serious	7	2	2	4	1	1	3	1	5	5	4	6		6		
		Moderate	23	8	23	16	11	18	22	31	27	28	28	25		25		
		Medication Related	69	60	64	50	43	58	81	63	52	47	58	47		47		
013	Patient Relations	A&E	Complaint	13	16	16	21	17	15	25	29	33	32	31	32		32	
			Compliment	102	125	109	91	82	69	87	104	79	94	85	82		82	
			Concern	20	17	15	10	8	7	16	18	9	14	15	13		13	
			Service to Service	16	29	23	13	21	21	18	33	29	19	26	16		16	
		EOC	Complaint	12	4	6	1	6	5	9	10	9	11	22	15		15	
			Compliment	2	3	3	3	1	0	0	1	0	5	1	0		0	
			Concern	17	6	8	3	0	1	9	3	2	6	11	4		4	
			Service to Service	23	20	5	15	2	4	4	13	10	13	22	21		21	
		Integrated Urgent Care	Complaint	31	19	24	14	9	15	18	13	13	9	13	21		21	
			Compliment	12	10	4	2	2	5	7	8	3	3	3	9		9	
			Concern	9	2	3	1	1	3	1	2	2	2	0	1		1	
			Service to Service	17	26	40	52	31	24	43	53	44	57	25	42		42	
		PTS	Complaint	7	9	11	14	2	6	9	6	11	16	14	10		10	
			Compliment	9	5	3	2	2	2	1	11	8	5	2	2		2	
			Concern	22	24	24	24	10	3	7	12	11	15	13	10		10	
			Service to Service	24	47	34	22	7	7	7	24	17	13	20	24		24	
014	Clinical Outcomes Data	Stroke - Call to Hospital Arrival (Mean)	01:19	01:10	01:14	Not Published				01:08	01:08	N/A	N/A	N/A	N/A		N/A	
		Stemi - Call to Catheter Insertion for Angio (Mean)	02:12	02:08	02:10	Not Published				02:05	02:13	N/A	N/A	N/A	N/A		N/A	
		ROSC (Utstein)	52.9%	57.1%	54.8%	Not Published				41.2%	44.4%	N/A	N/A	N/A	N/A		N/A	
		Survival (Utstein)	41.4%	37.8%	30.8%	Not Published				20.7%	29.0%	N/A	N/A	N/A	N/A		N/A	
015	Safeguarding	Adult Referrals	1,045	1,049	947	749	833	1,054	1,030	1,095	1,145	1,056	1,284	1,263		1,263		
		Child Referrals	540	603	638	532	441	539	608	653	657	615	571	587		587		
016	Information Management	Information Governance Training Compliance	70.3%	64.3%	72.3%	72.3%	72.8%	76.1%	81.3%	83.3%	88.8%	91.1%	91.2%	89.8%	95%	89.8%	▼	
		FOI Request Compliance	61.9%	69.7%	70.3%	57.1%	56.0%	83.3%	85.7%	70.6%	90.9%	82.6%	92.0%	89.3%	90%	89.3%	▼	
017	IPC Audit	Hand Hygiene	98.4%	99.3%	98.8%	98.9%	99.8%	100.0%	99.0%	99.0%	100.0%	99.0%	99.0%	99.0%	95%	99.0%	▲	
		Premise	96.7%	98.4%	98.3%	98.7%	98.8%	100.0%	99.0%	99.0%	99.0%	99.0%	98.0%	98.0%	95%	98.0%	▲	
		Vehicle	98.0%	98.7%	99.1%	98.4%	99.3%	99.0%	99.0%	99.0%	98.0%	99.0%	99.0%	99.0%	95%	99.0%	▲	
018	CQUIN	National CCG2: Staff Flu Vaccinations																
		National CCG10: Ambulance – Access to Patient Information at Scene (Assurance)																
		National CCG10B: Ambulance – Access to Patient Information at Scene (Demonstration)																
		Local 1: Supporting the needs of complex Mental Health Patients via Teleconferencing																
		Local 1: IUC/111 Staff Flu Vaccinations																
		Local 2: IUC/111 Frequent Callers																
		Local 3: IUC/111 Sepsis Awareness																
		Local 1: PTS Vehicle Electronic Checklist App																
Local 1: PTS Staff Flu Vaccinations																		

Indicator ID	Key Operational Standard Description	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Nov-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	-812	-824	-855	-998	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7,063	7,636	7,060	7,636	576	7,060	14,699	7,639
		Surplus	238	4	240	159	N/A	N/A	N/A	N/A	N/A	N/A	N/A	-219	-243	-252	-243	9	-462	-462	0
		Capital	1,947	957	2,967	4,908	0	874	562	68	189	332	501	511	724	511	-213	5,297	3,036	-2,261	
		Cash	58,179	58,364	54,700	46,201	76,062	81,510	76,988	79,694	82,331	83,579	86,976	89,615	85,594	89,615	4,021	85,594	89,615	4,021	
		CIP	532	582	582	623											0			0	
020	CIP	A&E	28	28	28	28										0			0		
		Business Development	0	0	0	0										0			0		
		CEO Directorate	2	2	2	2										0			0		
		Clinical	2	2	2	2										0			0		
		Estates	19	19	19	19										0			0		
		Finance	36	36	36	36										0			0		
		Fleet	87	87	87	123										0			0		
		Planned & Urgent Care	74	81	81	82										0			0		
		Quality, Governance	0	0	0	0										0			0		
		Hub & Spoke	0	0	0	0										0			0		
		Workforce OD	57	57	57	56										0			0		
		RESERVE	227	269	269	274										0			0		
		Current Position (Cumulative YTD)	532	5,387	5,969	6,592										0			0		
021	Transport/Fleet	A&E	Vehicle age +7	3.5%	6.6%	3.5%	3.5%	6.7%	6.7%	8.9%	8.2%	8.4%	8.4%	8.7%	8.5%		8.5%				
			Vehicle age +10	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.2%	0.2%	0.2%	0.2%	0.0%		0.0%			
			Availability	91.7%	91.2%	90.6%	90.6%	92.5%	95.9%	92.7%	92.9%	92.7%	91.4%	91.1%	92.5%	95%	92.5%	▼			
		PTS	Vehicle age +7	15.3%	10.7%	16.7%	16.7%	8.6%	8.6%	17.7%	18.2%	16.5%	16.5%	16.7%	16.7%	16.7%		16.7%			
			Vehicle age +10	26.6%	36.5%	27.2%	27.2%	22.5%	22.5%	20.8%	16.9%	17.7%	17.7%	17.7%	17.5%		17.5%				
			Availability	88.0%	89.0%	89.0%	89.0%	91.9%	92.4%	93.1%	93.1%	91.0%	91.7%	92.8%	92.0%	95%	92.0%	▼			

Risk Rating - Under the "Single Oversight Framework" the overall Trust's rating for the year to date remains at 1 (1 being lowest risk, 4 being highest risk). 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 30th November (Month 8) is £7.636m against a plan of £7.893m, a small adverse variance of £0.3m. 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 November (Month 8) of (£462k) against the plan of (£462k). 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 £3m, a further £4.2m of funds were committed or had purchase orders raised. YTD underspends are evident within the Fleet budget (£1.4m), due to delay in completing DCA conversions and 4x4 vehicles (now expected in Q4) and Estates budgets (£918k) due to delays to works on ambulance station refurbishments.

Cash - At the end of November the Trust had £89.6m cash at bank, £43m higher than the year-end. The increase in cash balances reflects the move to block payments made in advance under the temporary Covid finance regime, as well as slower capital expenditure than planned for the year to date.

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.

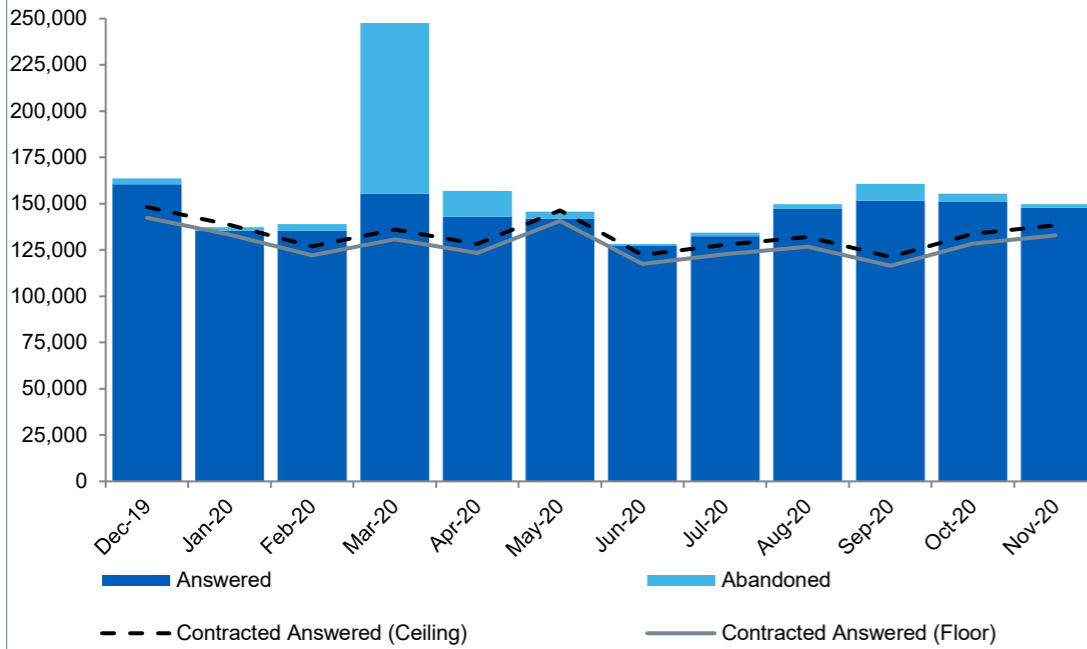


SERVICE LINES

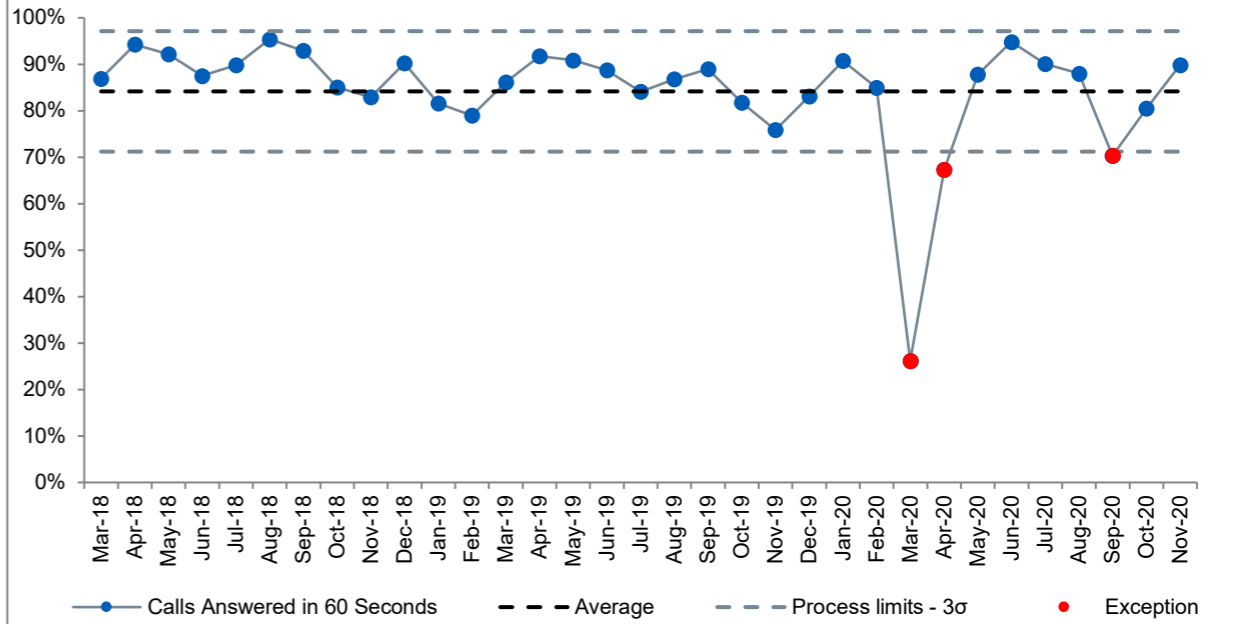
Integrated Urgent Care

November 2020

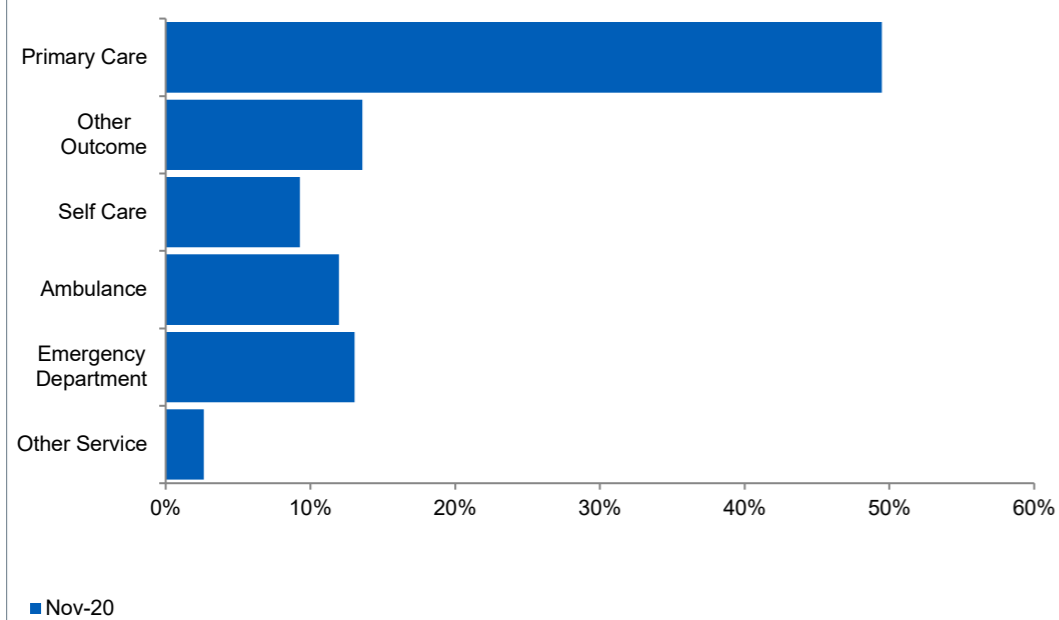
IUC Chart 1: Demand - Calls



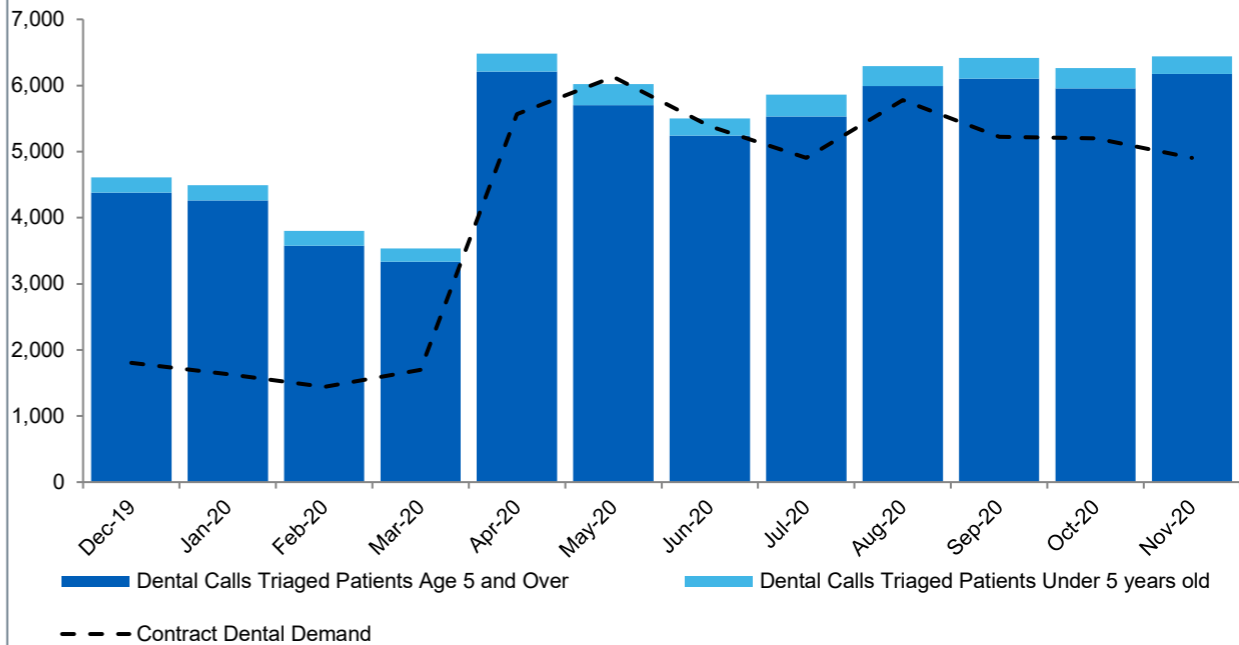
IUC Chart 2: Performance - Calls Answered in 60 Seconds



IUC Chart 3: Outcomes



IUC Chart 4: Demand - Dental





Integrated Urgent Care

November 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%	89.8%					83.3%
Core Clinical Advice (30%)**	28.0%	30.7%	32.7%	31.3%	29.7%	29.3%	28.7%	28.4%					29.8%
Clinician Called Back within 1 Hour (60%)	72.2%	70.3%	58.1%	56.2%	49.7%	41.2%	47.8%	46.7%					55.1%
Direct Bookings * (30%)	29.9%	35.0%	33.9%	34.9%	37.4%	37.2%	36.6%	35.9%					35.3%
Bookings into UTC * (50%)	16.1%	15.1%	18.8%	21.5%	22.5%	19.0%	21.7%	19.8%					19.5%
Bookings into IUC Treatment Centres * (95%)	48.3%	50.4%	51.1%	50.9%	50.7%	50.2%	50.6%	49.9%					50.3%
ED Validations (50%)**	33.0%	35.4%	52.8%	53.0%	50.2%	48.2%	52.0%	52.6%					47.8%
Ambulance Validations (95%)	74.3%	94.1%	97.6%	96.4%	95.9%	86.7%	96.4%	95.6%					91.7%

* 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:

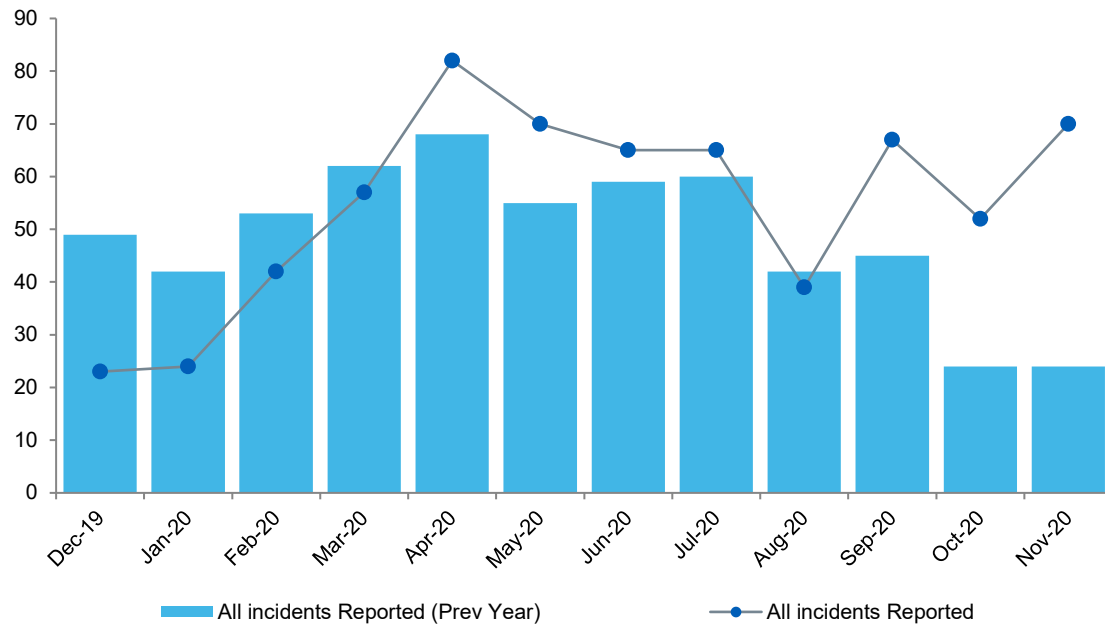
Most performance measures remained below target levels in November, reflecting the ongoing challenges with the second wave of the Covid pandemic.

The number of calls answered in November was very similar to the monthly volume over the previous three months. Calls answered were 7% above contract ceiling and 11.6% higher than the same month last year.

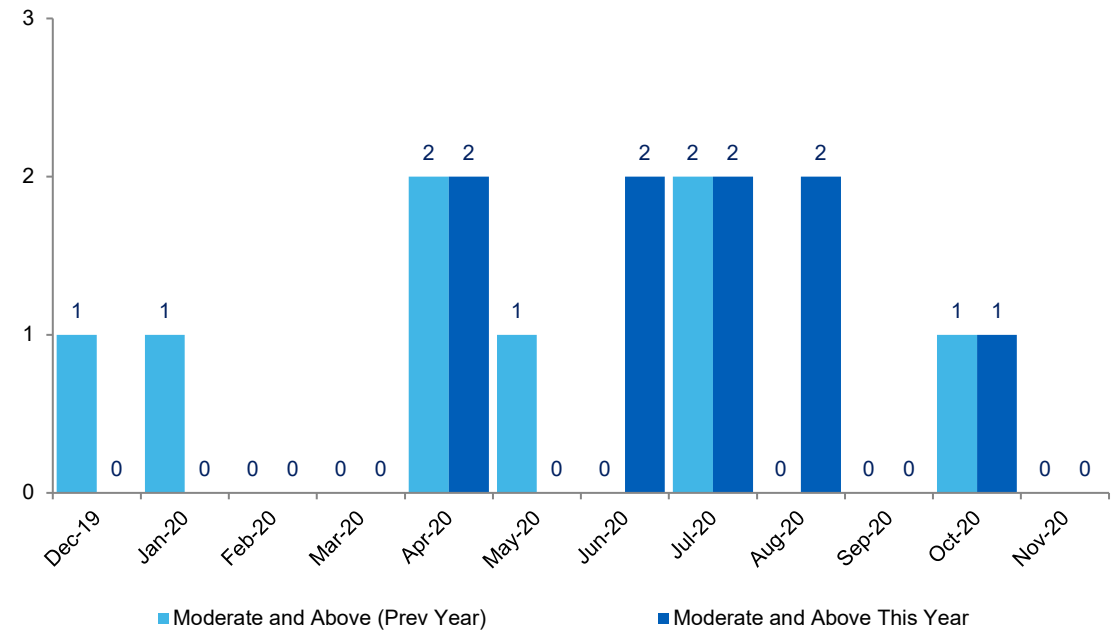
Call Performance was a significant improvement on September and October up 9.3 percentage points, with the proportion of calls answered in 60 seconds for November, being only just below target at 89.8%. The proportion of Clinician Call Backs made within 1 hour was 46.7% against a target of 60%.

Ambulance validations and Emergency Department validations were both above target.

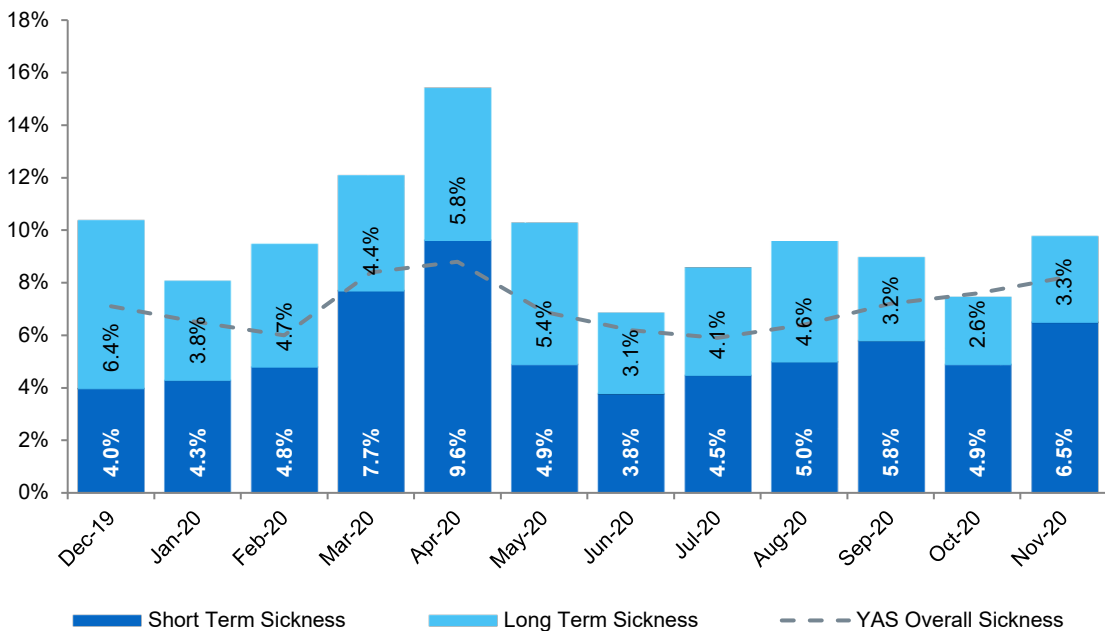
IUC Chart 5: Quality - Reported Incidents



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



IUC Chart 7: Workforce - Sickness



Quality Commentary:

Following the implementation of NHS 111 First and the new booking for an arrival slot for patients needing ED departments the clinical governance team along with service development team are supporting stakeholders to understand the new patient processes.

Workforce Commentary:

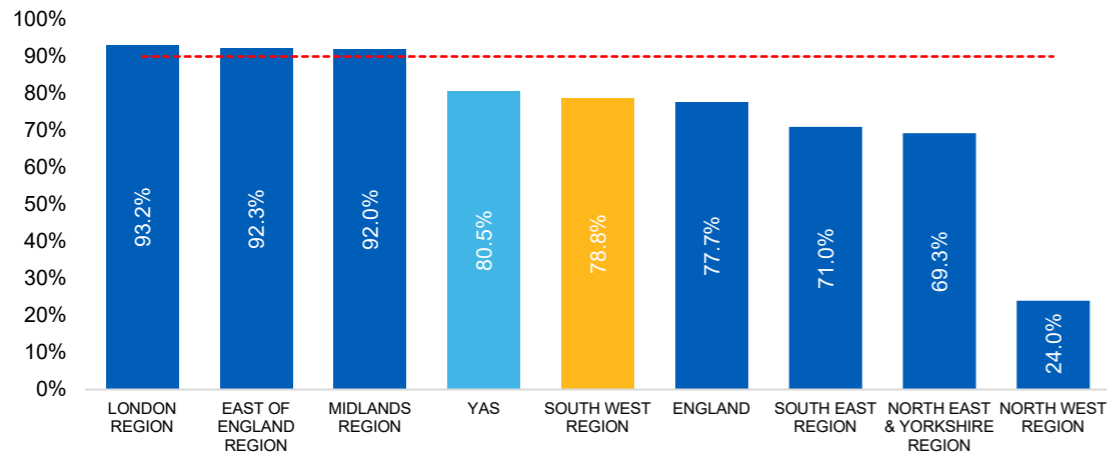
The IUC team continue to support the ongoing pandemic, preparation for NHS 111 First and winter with the following key achievements associated with workforce:

NHS Pathways: Successful implementation of NHS Pathways on 8th December.

Flu Vaccinations: 80.45% of staff in IUC vaccinated.

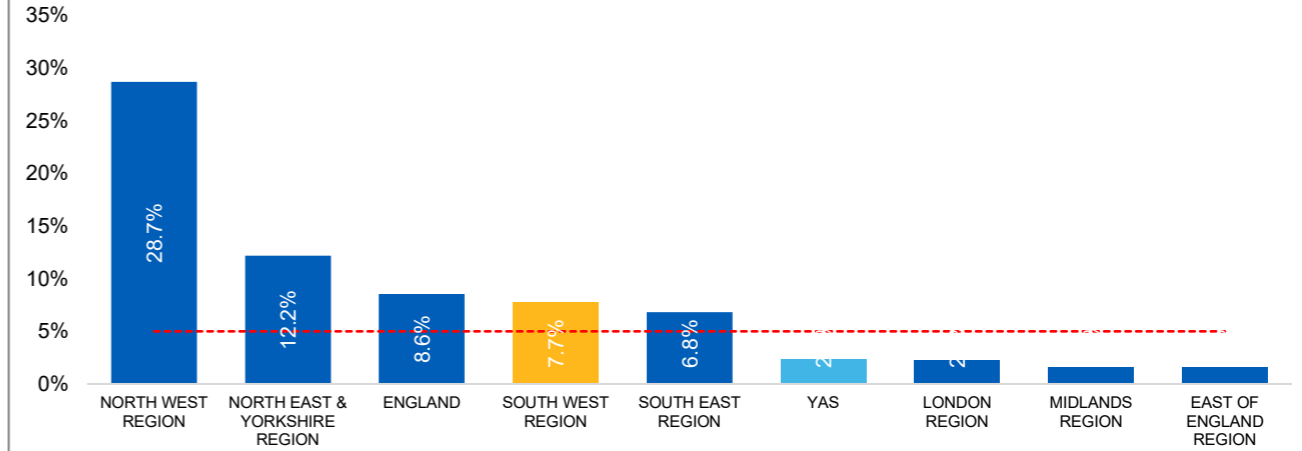
Schwartz rounds: The IUC team are running virtual Schwartz rounds to encourage staff to share their experience through the covid pandemic so far. These are taking place through December prior to the busy festive period.

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

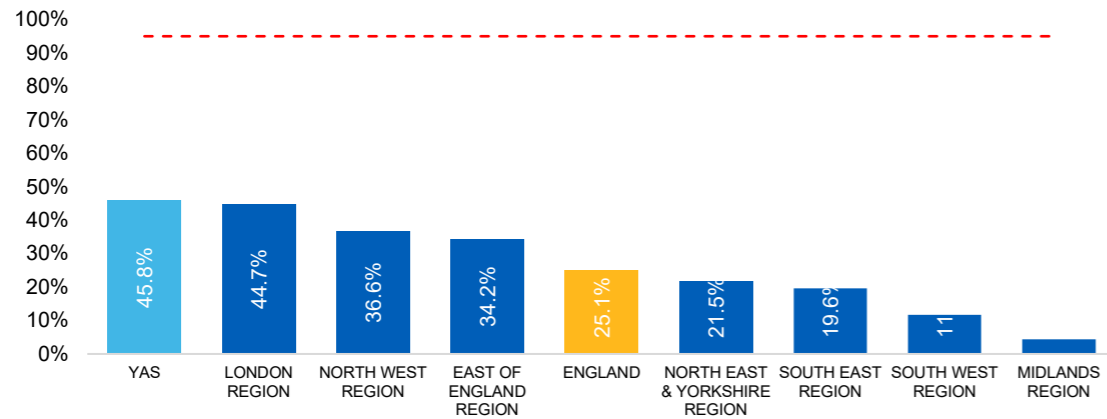


IUC Chart 9: Calls Abandoned (5%)

Benchmarking Information is based on the



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



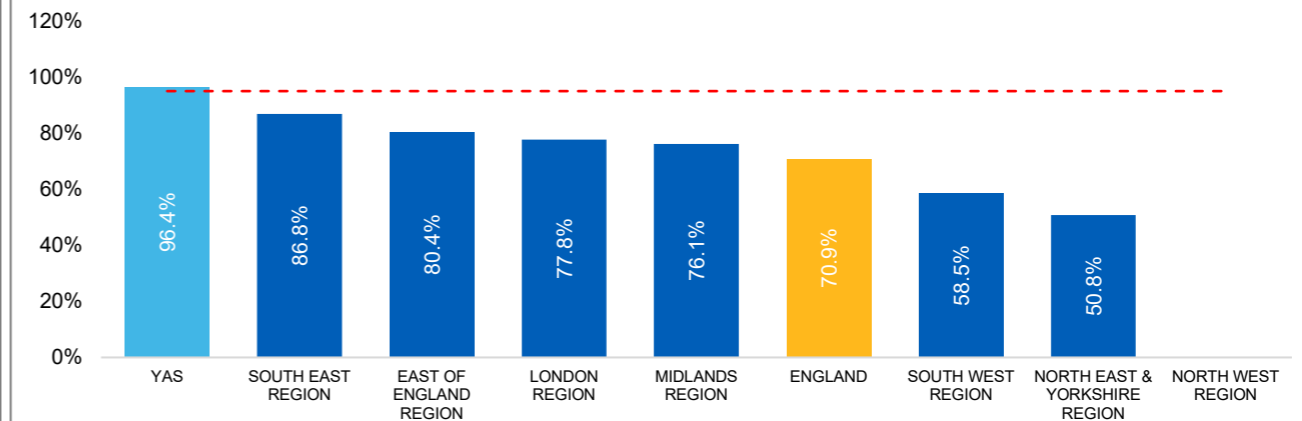
IUC Chart 11: Bookings into UTC (50%)



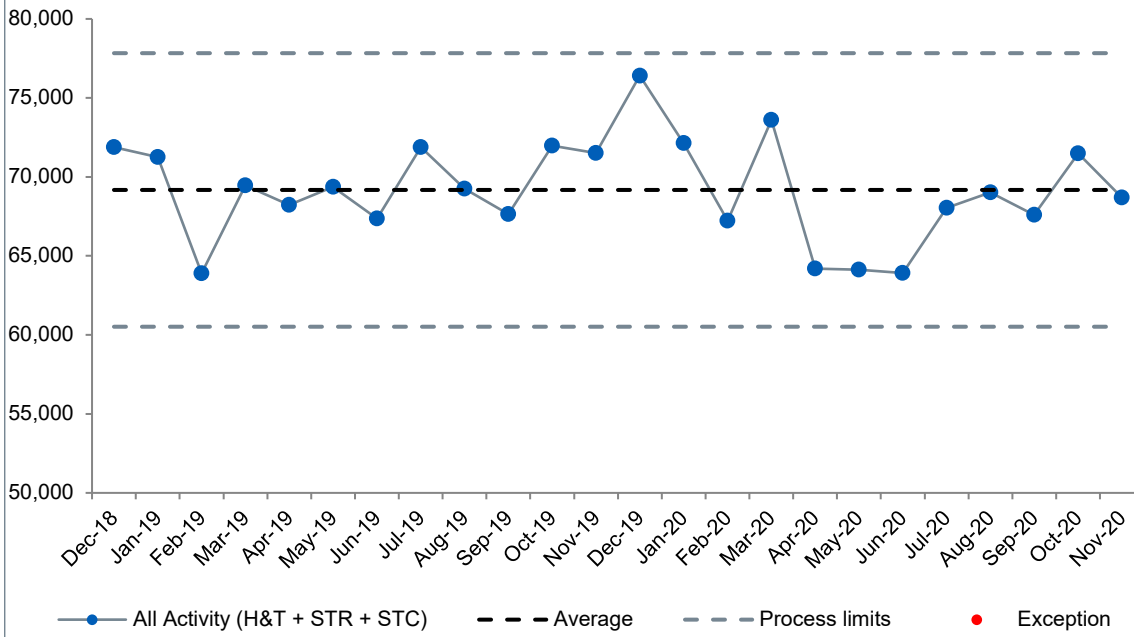
IUC Chart 12: ED Validations (50%)



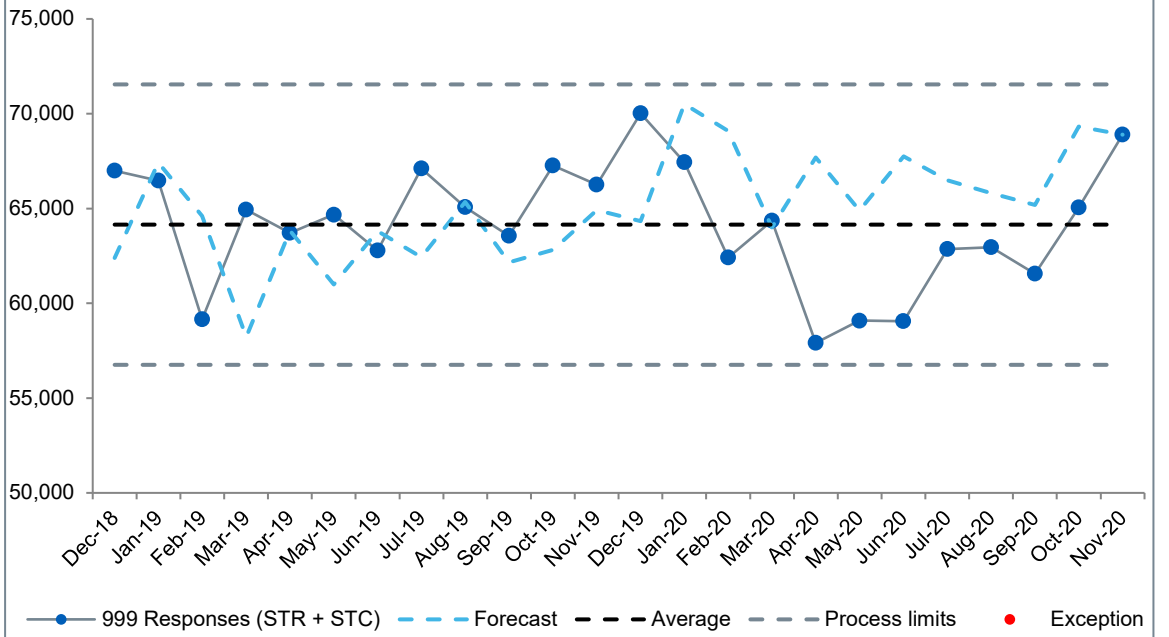
IUC Chart 13: Ambulance Validations (95%)



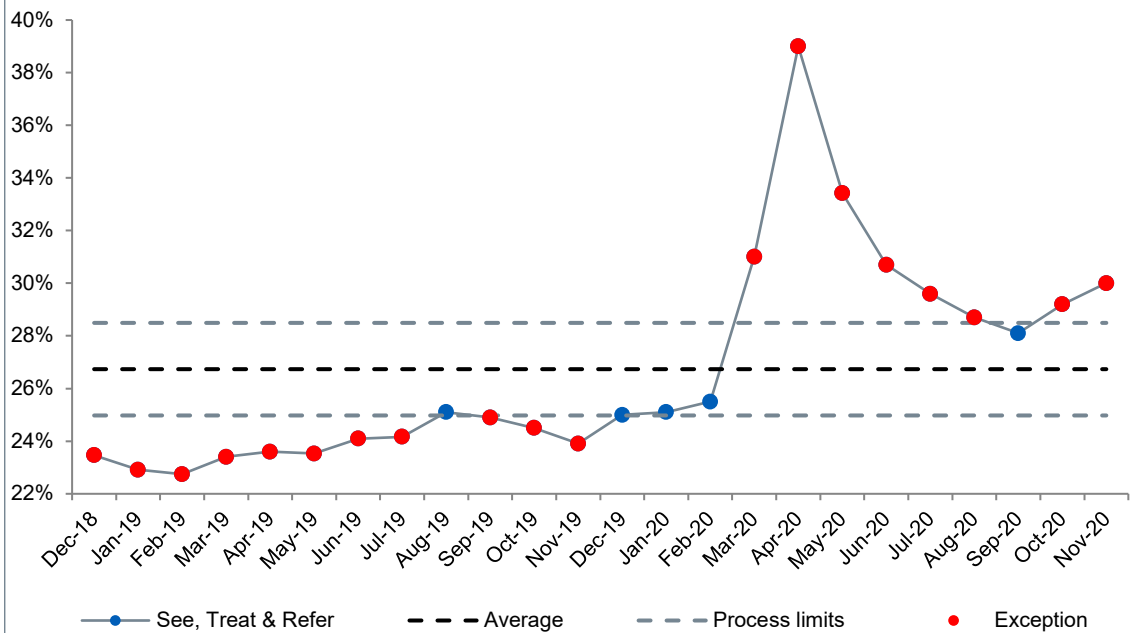
A&E Chart 1: Demand - All Activity (H&T + STR + STC)



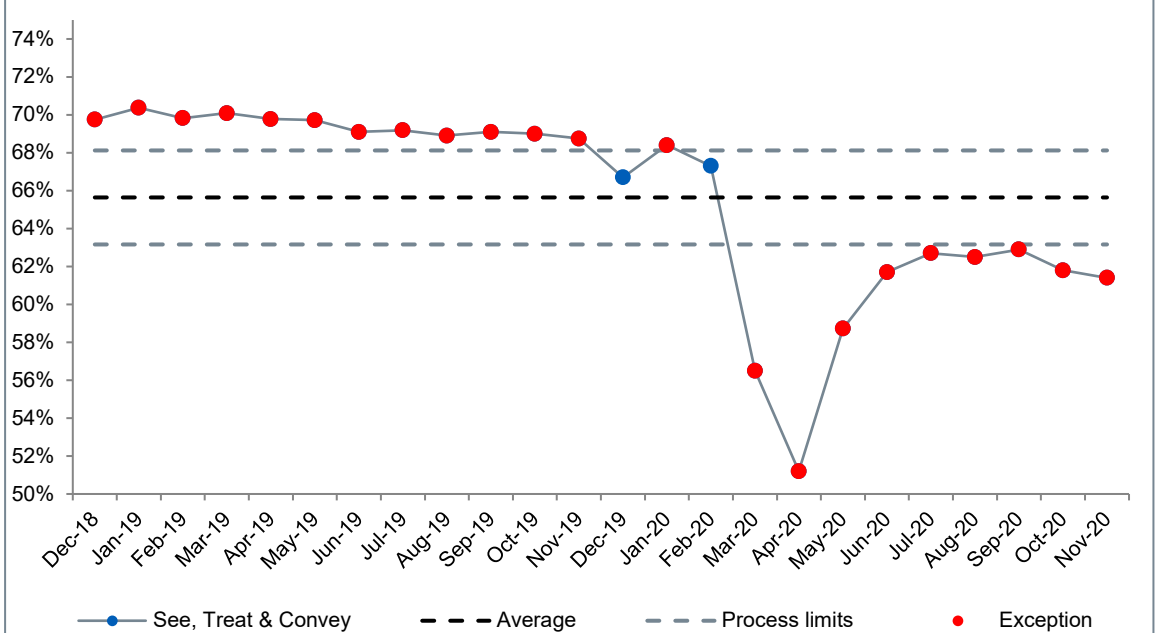
A&E Chart 2: Demand - 999 Responses (STR + STC)



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

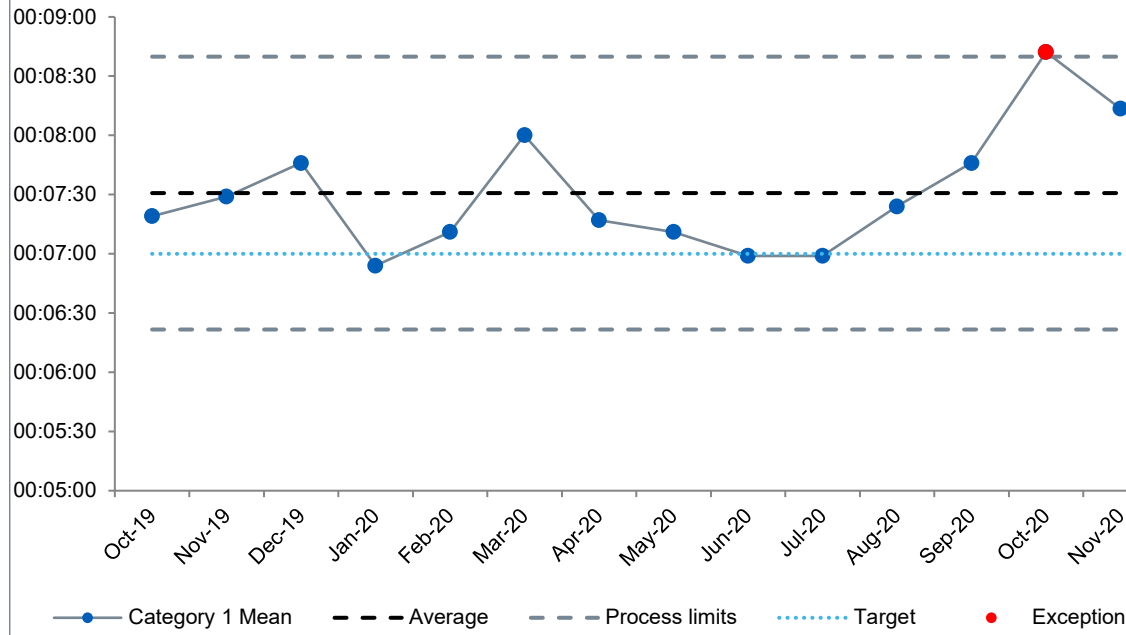


A&E Chart 4: Demand - See, Treat & Convey %



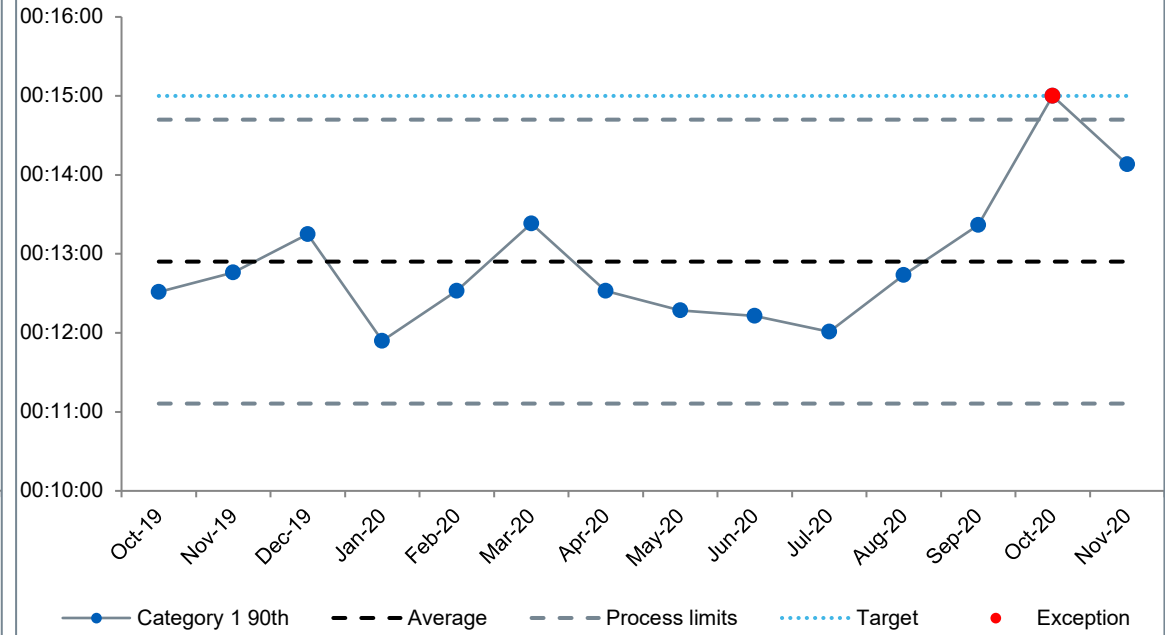
A&E Chart 5: Performance - Category 1 Mean

Year to Date **00:07:36**



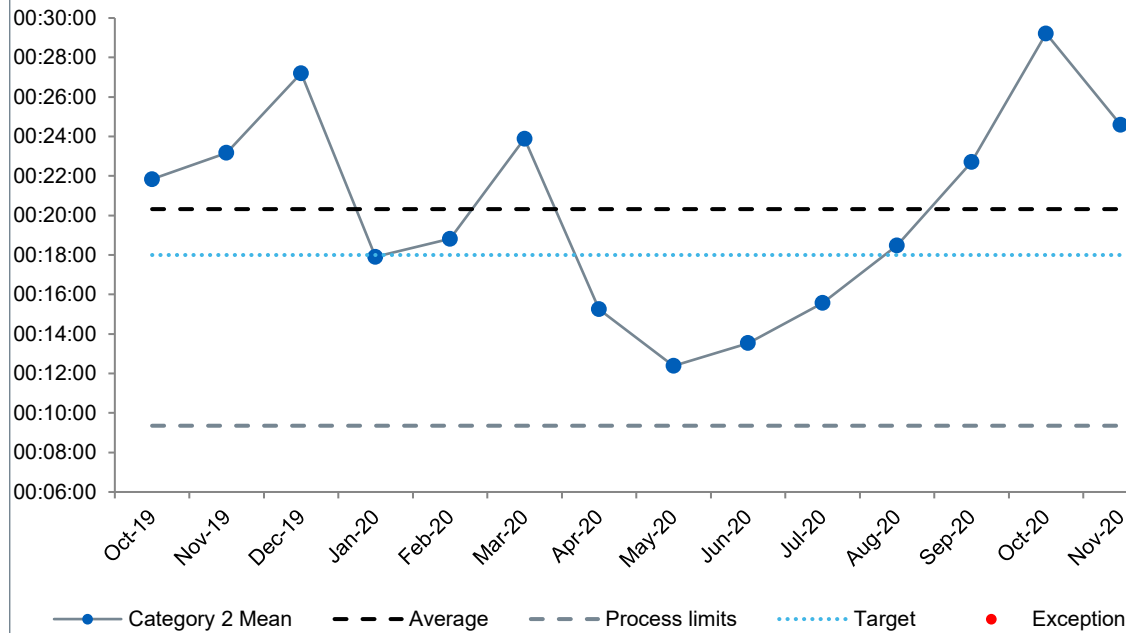
A&E Chart 6: Performance - Category 1 90th Percentile

Year to Date **00:13:10**



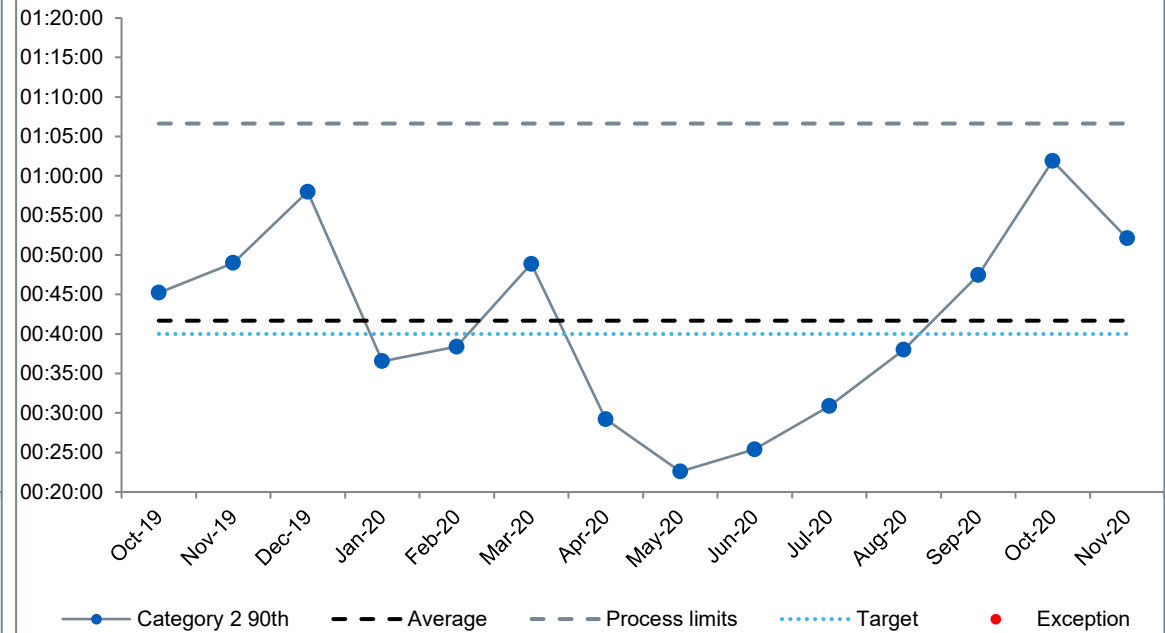
A&E Chart 7: Performance - Category 2 Mean

Year to Date **00:19:26**



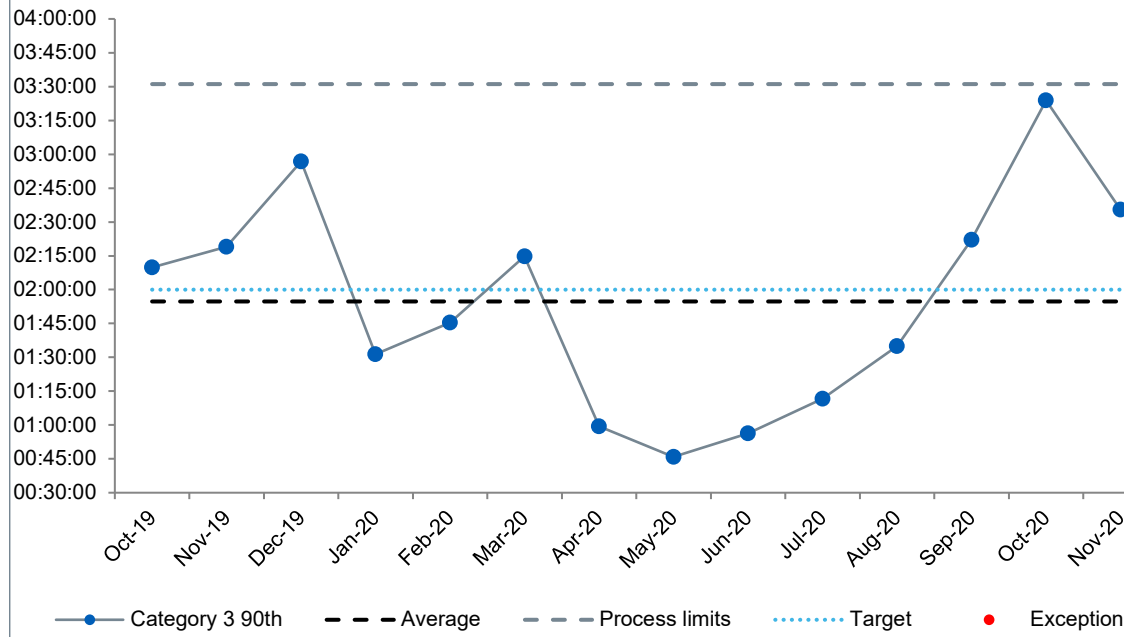
A&E Chart 8: Performance - Category 2 90th Percentile

Year to Date **00:40:45**



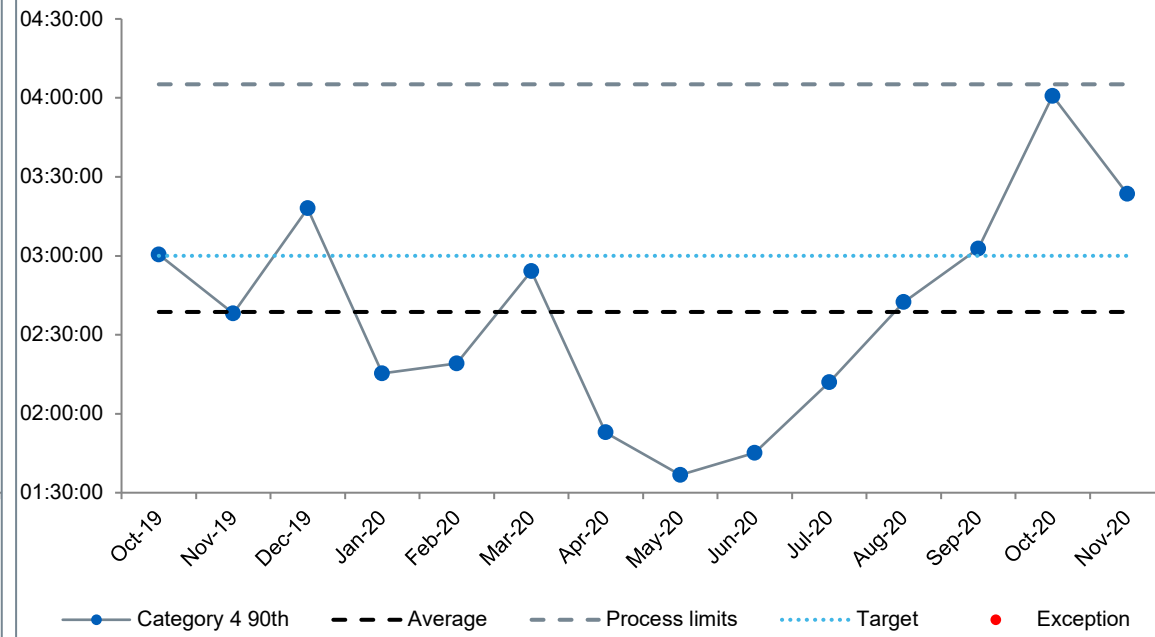
A&E Chart 9: Performance - Category 3 90th Percentile

Year to Date **01:40:37**

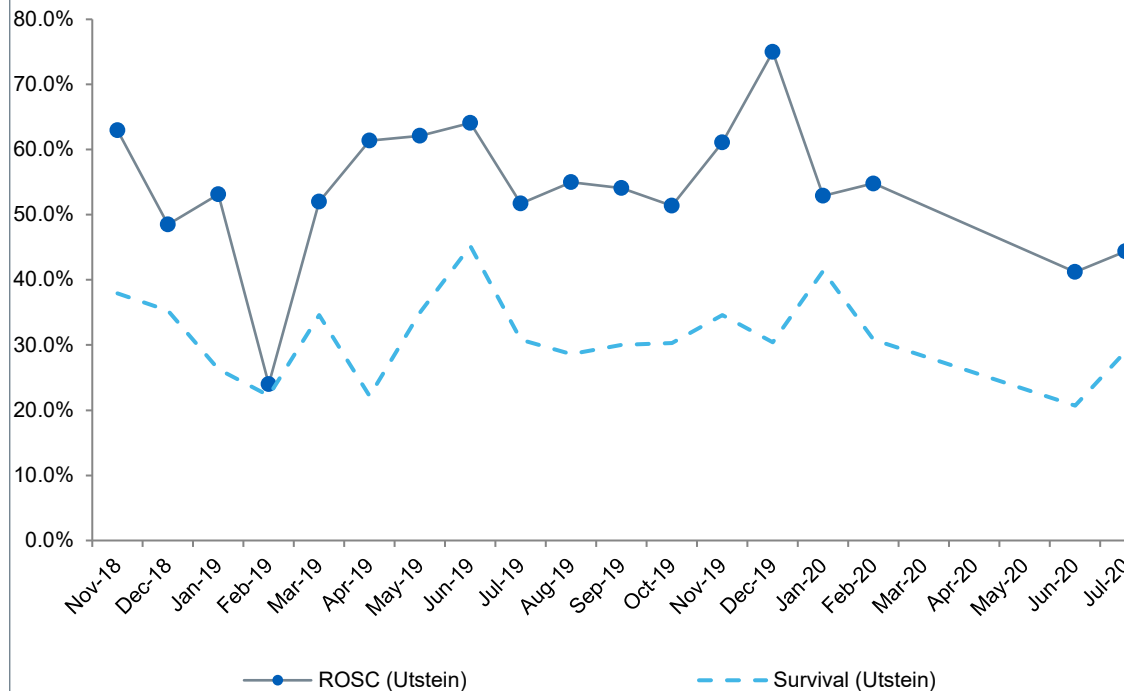


A&E Chart 10: Performance - Category 4 90th Percentile

Year to Date **02:19:14**



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



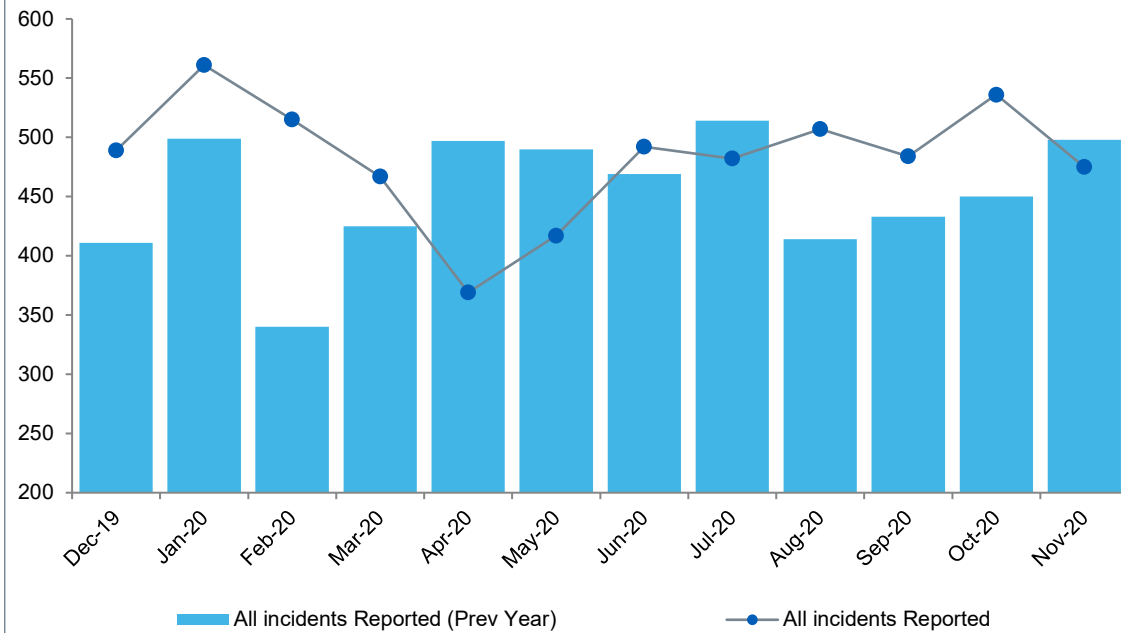
Performance Commentary:

Throughout November there was a slight increase in demand but volumes were in expected levels.

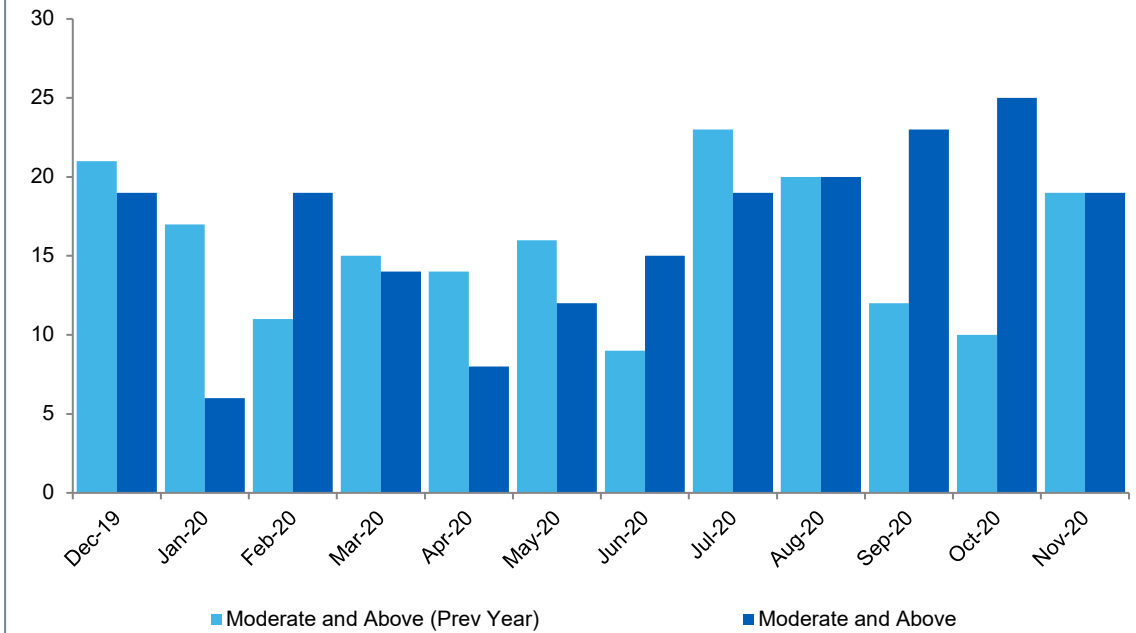
The level of STR and STC was similar to October. It remains a significant positive exception throughout the COVID period compared to BAU. Work continues with local health partners to understand the services available to crews to avoid emergency department attendance.

Against the background of a slight fall in demand we had an increased level of total abstraction due to the second wave. An increase of handover delays at Hospitals were also experienced.

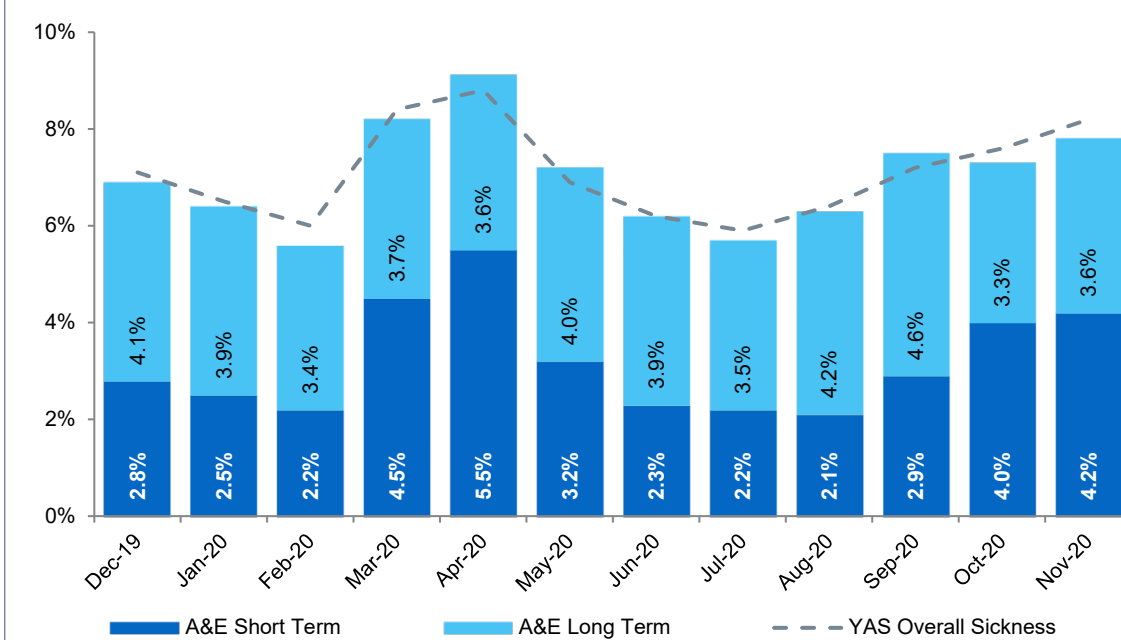
A&E Cht12: Quality - Reported Incidents



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



A&E Cht14: Workforce - Sickness



Quality Commentary:

Reported incidents increased in November. Delays in response were particularly noted towards the end of the month due to the capacity challenges.

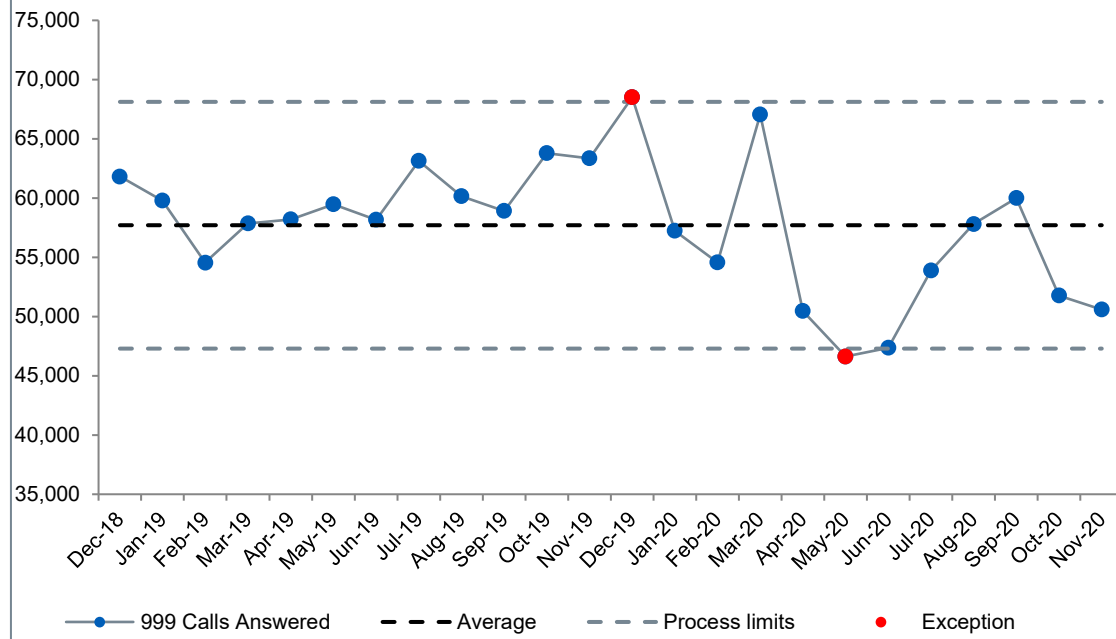
Workforce Commentary:

The overall sickness rate increased in November as we entered a second wave of COVID.

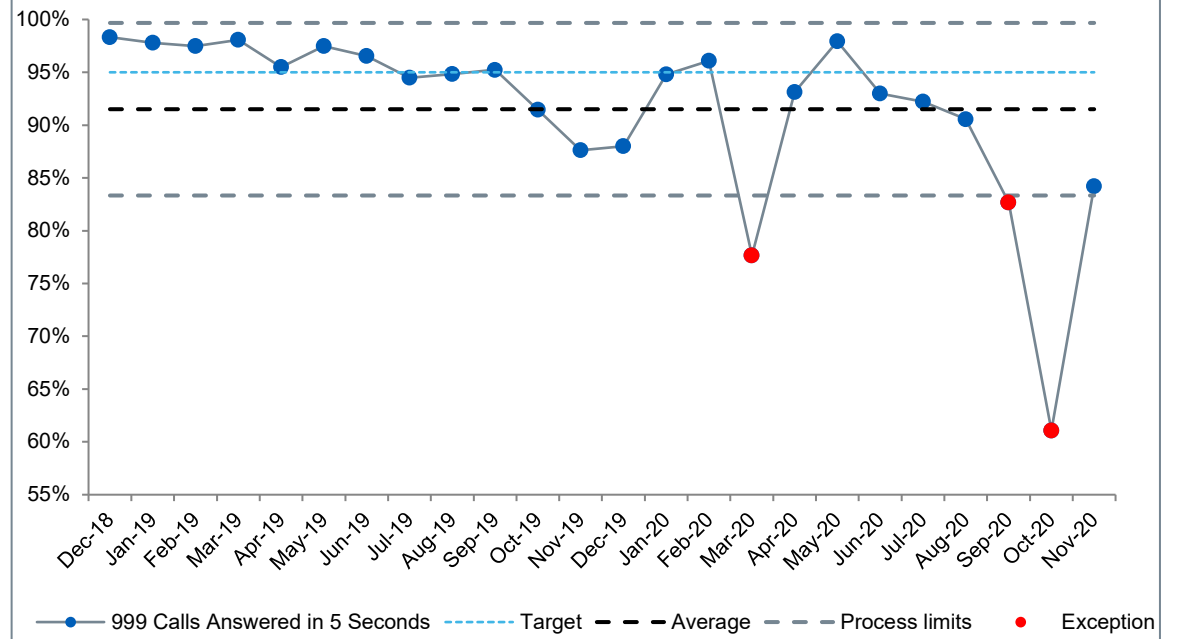
The COVID-19 pandemic has caused higher levels of sickness absence and abstraction due to those in isolation and quarantine. COVID-19 cases increased regionally through November and is impacting staff numbers. A number of actions have been taken to mitigate sickness absence and the impact of national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

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

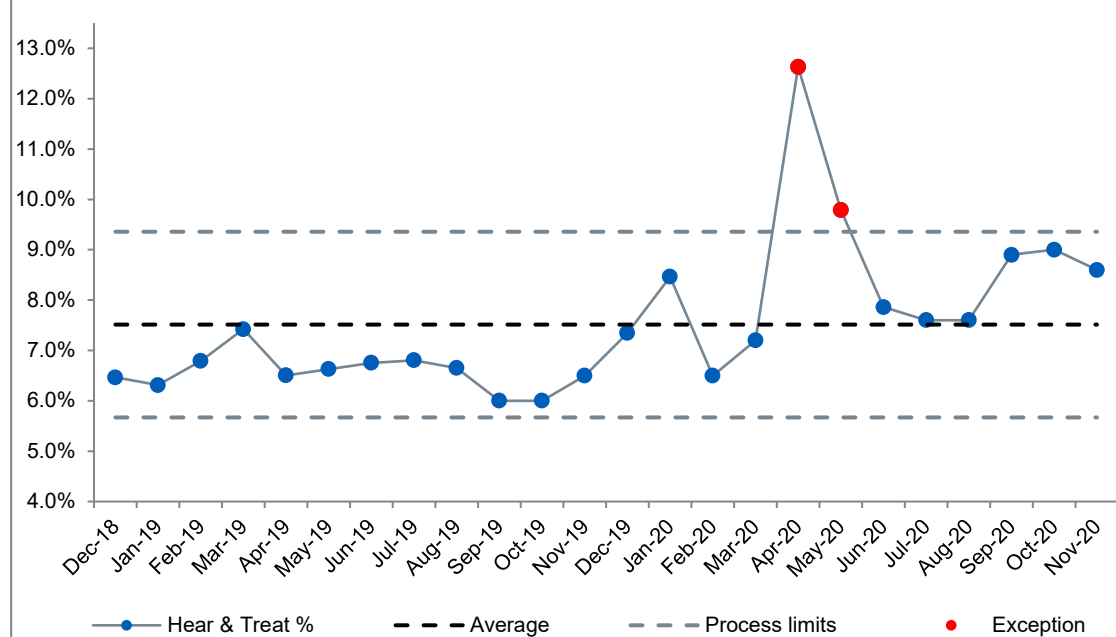
EOC Chart 1: Demand - 999 Calls Answered



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



EOC Chart 3: Performance - % Hear & Treat



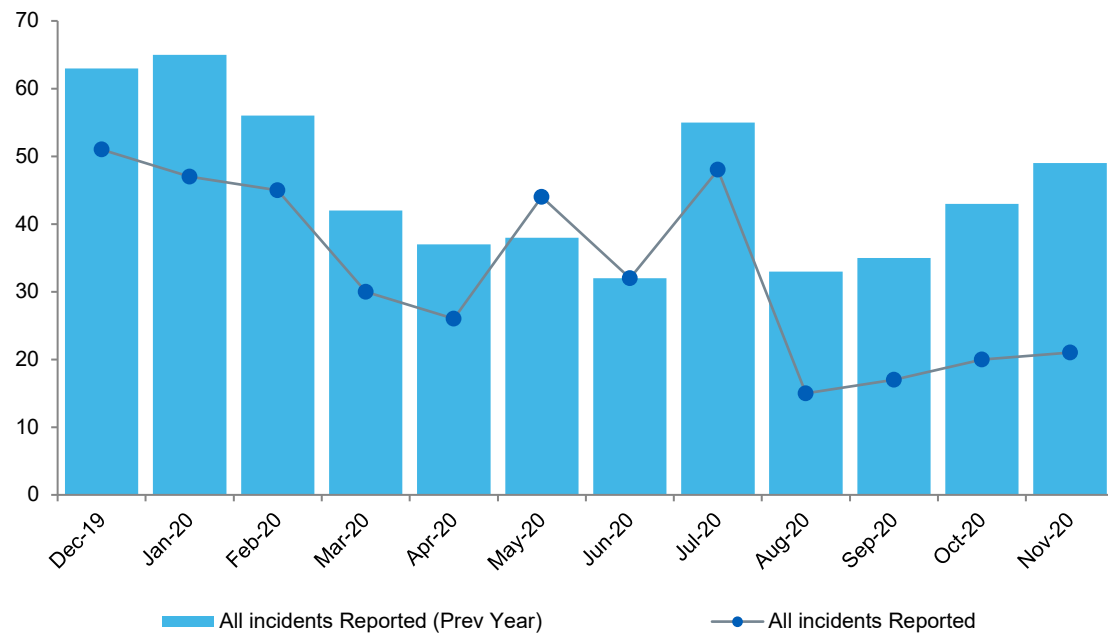
Performance Commentary:

With the pandemic card 36 nationally in place at level 1 call demand and categorisation return to normal levels increasing pressure on operational response.

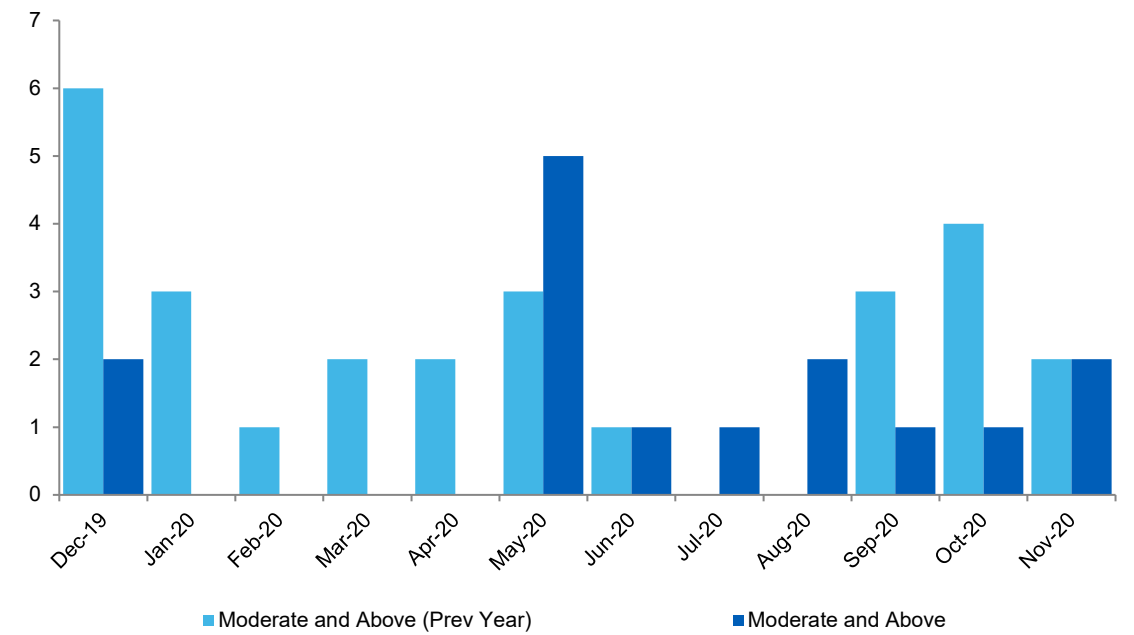
Call handling performance saw a significant downward trend in November as additional absence rates resulted in call handling capacity much lower than was required. Call handling times have extended which has increased pressure. Concerns around EOC capacity and staffing volumes were highlighted and additional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

Hear and Treat performance saw further improvements in November 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.

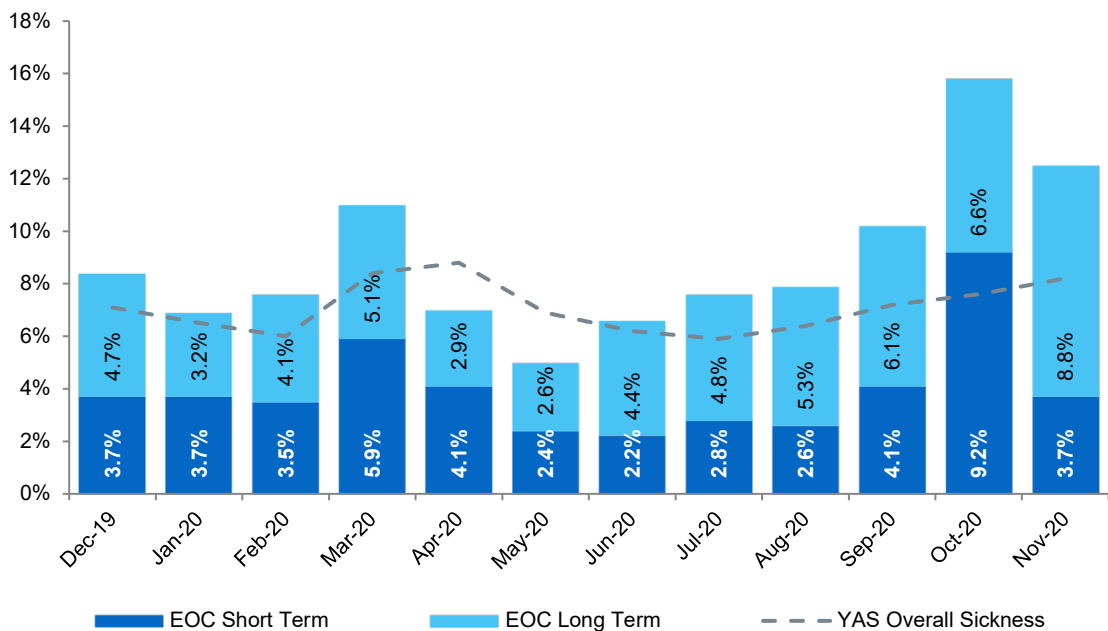
EOC Chart 4: Quality - Reported Incidents



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



EOC Chart 6: Workforce - Sickness



Quality Commentary:

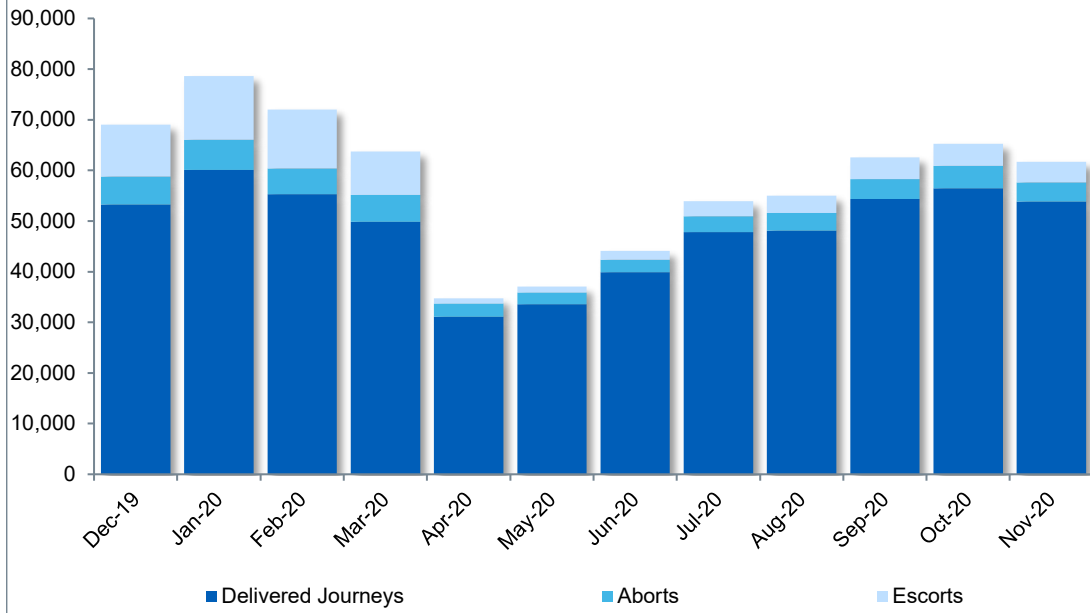
The total number of reported incidents saw a decrease in November.

Workforce Commentary:

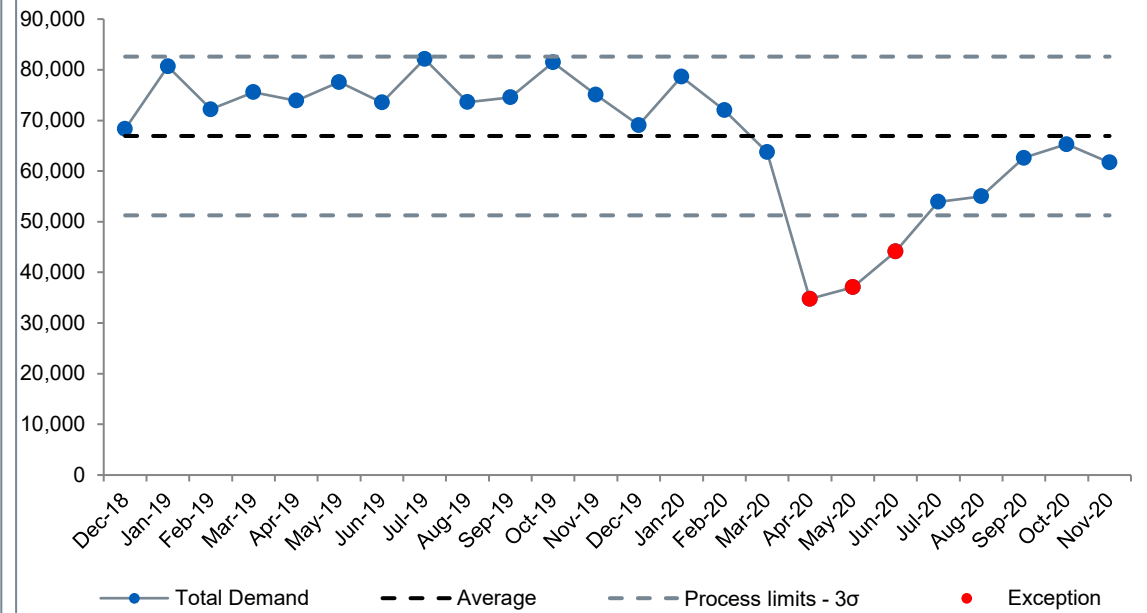
Long term sickness rates saw significant increase in November due to levels of COVID related absence. This has significantly impacted upon overall abstraction numbers and has had a negative impact on KPI achievement, This represents a concern around the resilience of staff groups and an ability to continue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

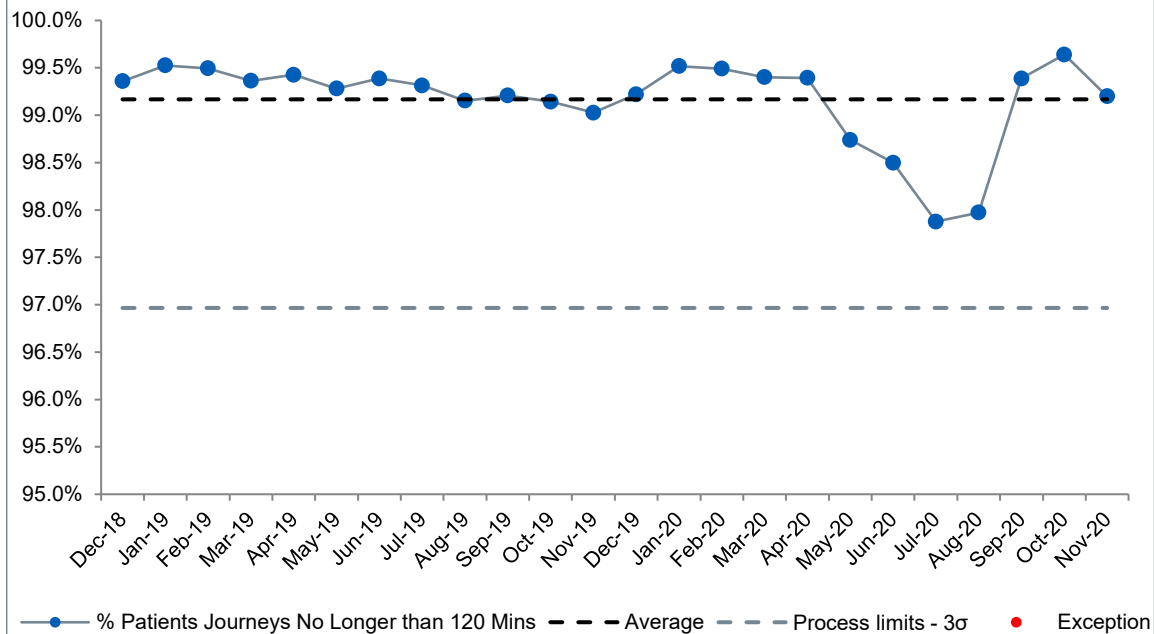
PTS Chart 1: Demand - Journeys



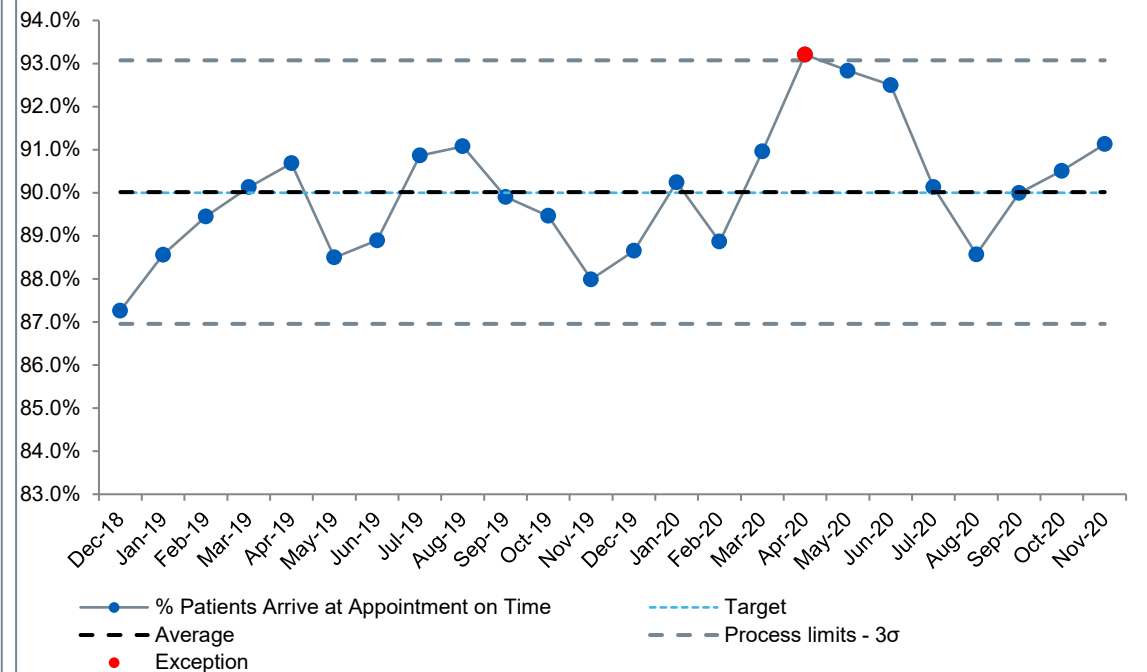
PTS Chart 2: Demand - Total Demand



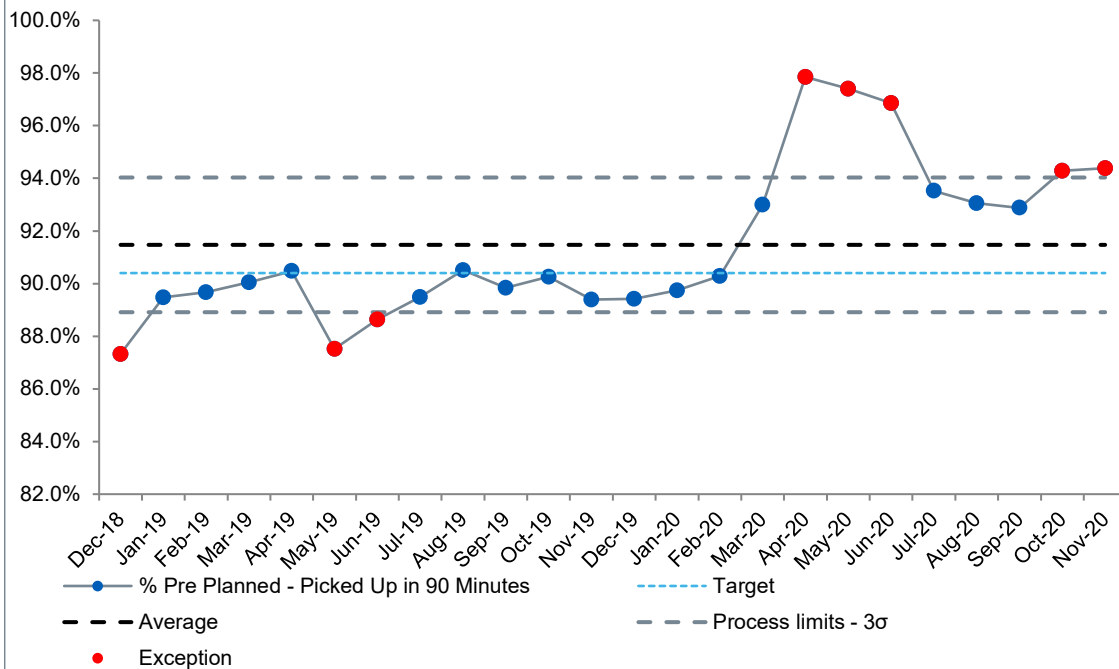
PTS Chart 3: % Patients Journeys to be no longer than 120 Minutes



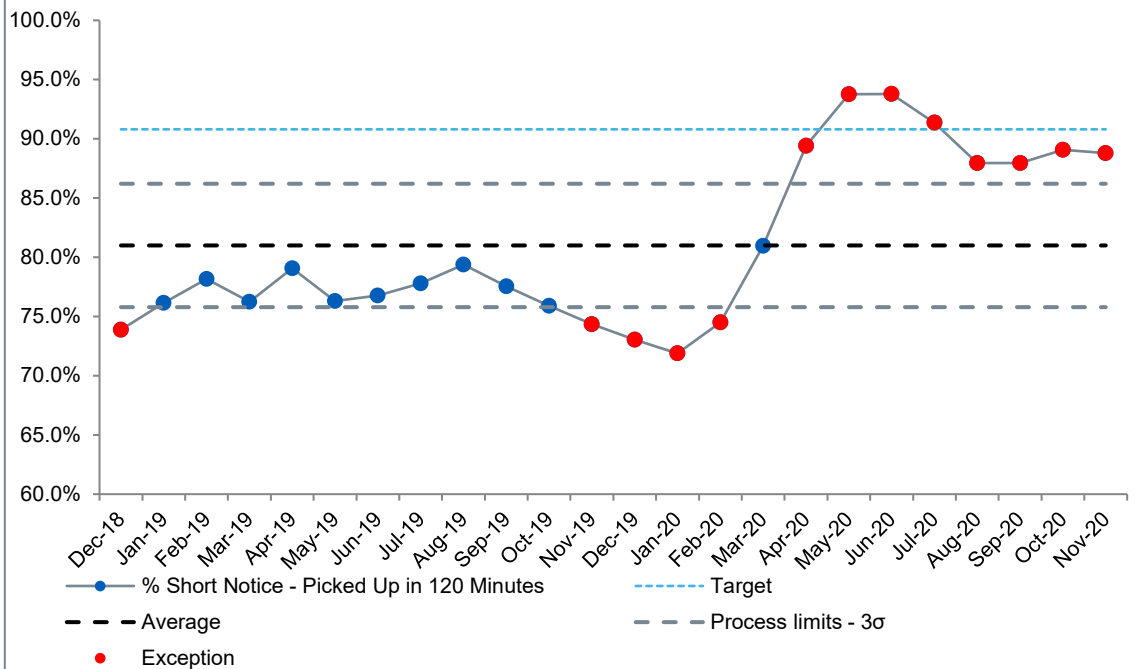
PTS Chart 4: % Patients Arrive at Appointment on Time



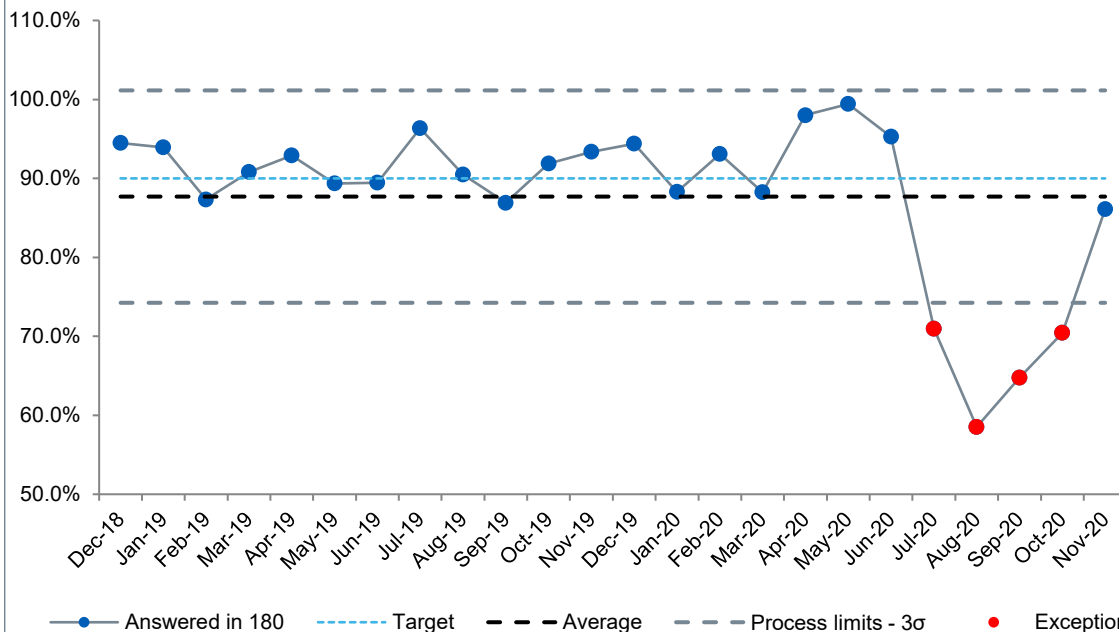
PTS Chart 5: Performance - % Pre Planned - Picked Up in 90 Minutes



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



PTS Chart 7: Telephony - Calls Answered within 180 Seconds



Performance Commentary:

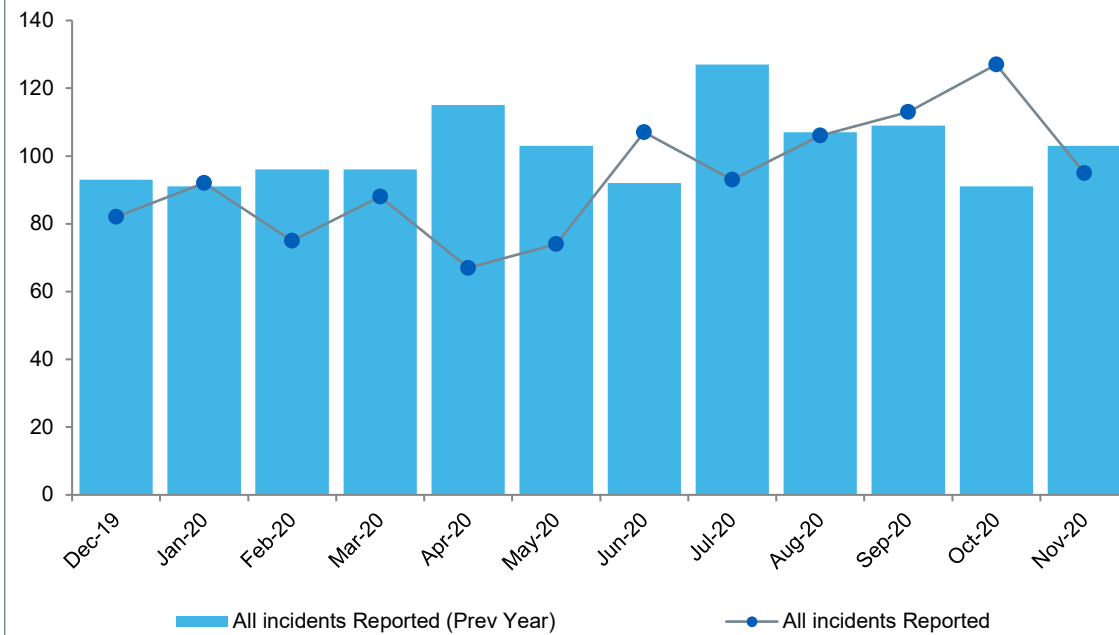
October PTS activity is at 81% (w/c 02/11) of pre-COVID BAU including discharge activity. Pre-planned activity is at 76%, same day discharge activity is at 120% of the same month last year. Some PTS contract areas are as high as 97% pre-COVID pre-planned BAU and 180% for on-day discharge. Additional resources from our YAS managed alternate provider framework is 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.

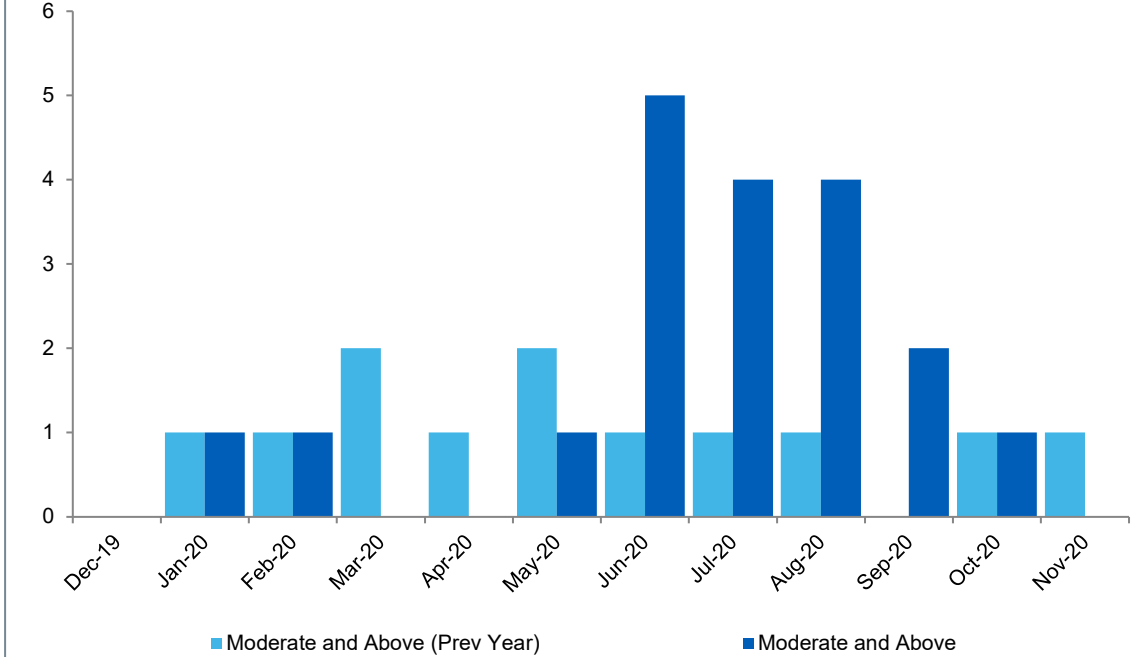
The contractual KPI performance measures have been suspended in line with NHS England Guidance due to COVID 19. PTS is maintaining a good level of service for our renal patients. On Day discharge performance for the whole region is broadly 90% within 120 minute target.

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%.

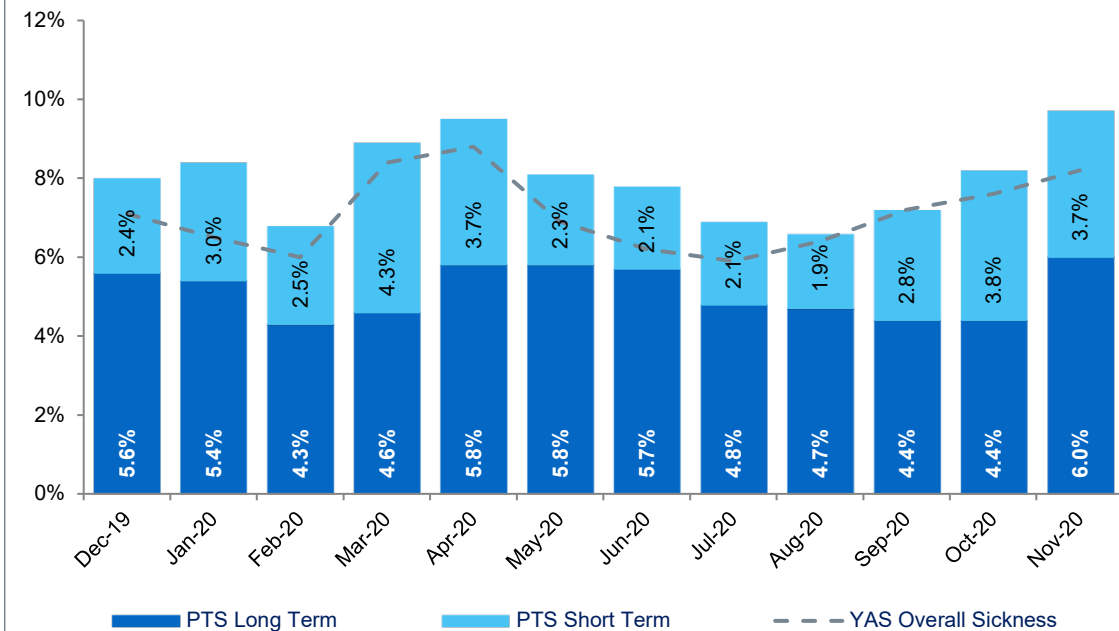
PTS Chart 8: Quality - Reported Incidents



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

November 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)	68,192	103,312	93,951	66,165	74,991	72,486	34,838	93,149	62,332	49,237
Incident Proportions%	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1 and C2 Incidents	62.6%	61.3%	60.3%	65.9%	61.6%	61.2%	62.8%	53.0%	56.0%	50.3%
C1 Incidents	7.5%	6.3%	8.5%	8.6%	7.4%	10.4%	6.9%	7.2%	6.1%	7.0%
C2 Incidents	55.1%	55.0%	51.8%	57.2%	54.1%	50.8%	56.0%	45.8%	49.9%	43.3%
C3 Incidents	19.1%	24.2%	18.2%	19.8%	20.2%	24.7%	19.1%	33.7%	32.8%	32.7%
C4 Incidents	0.4%	1.2%	2.5%	0.2%	0.4%	0.5%	1.2%	1.8%	0.6%	2.2%
C5 Incidents	0.2%	1.3%	1.4%	0.9%	4.6%	3.8%	0.0%	0.1%	0.0%	0.2%
HCP/IFT 1-4 Hour Incidents	9.1%	3.4%	7.4%	4.1%	3.7%	5.0%	7.4%	5.7%	4.4%	7.5%
Hear and Treat	8.6%	8.5%	10.2%	9.1%	9.4%	4.8%	9.5%	4.8%	6.6%	8.4%
Performance	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
C1-Mean response time (Target 00:07:00)	00:08:14	00:06:03	00:07:51	00:07:28	00:06:41	00:08:02	00:06:41	00:06:48	00:07:35	00:06:09
C1-90th centile response time (Target 00:15:00)	00:14:08	00:10:07	00:12:57	00:13:06	00:12:26	00:14:45	00:11:35	00:11:50	00:13:49	00:11:09
C2-Mean response time (Target 00:18:00)	00:24:36	00:14:16	00:28:57	00:27:48	00:19:54	00:23:51	00:31:18	00:13:39	00:17:34	00:14:34
C2-90th centile response time (Target 00:40:00)	00:52:07	00:27:08	01:01:20	00:57:42	00:40:31	00:47:29	01:03:01	00:25:29	00:32:19	00:27:54
C3-Mean centile response time (Target 01:00:00)	01:03:38	00:36:07	01:23:30	01:21:30	00:49:28	01:00:49	01:43:25	00:42:49	01:14:25	00:41:57
C3-90th centile response time (Target 02:00:00)	02:35:25	01:21:35	03:16:03	03:18:28	02:03:28	02:25:18	04:16:46	01:39:02	02:52:45	01:35:51
C4-90th centile response time (Target 03:00:00)	03:23:35	02:27:05	04:48:41	03:15:02	02:33:33	03:25:45	03:40:16	02:14:41	03:56:04	02:16:55
Proportion of All incidents	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
Incidents with transport to ED	53.7%	54.8%	53.0%	51.9%	55.1%	51.6%	54.3%	50.2%	58.0%	50.8%
Incidents with transport not to ED	7.5%	4.9%	6.9%	5.9%	2.6%	4.5%	8.3%	5.9%	1.7%	5.7%
Incidents with face to face response	30.2%	31.8%	30.0%	33.1%	32.8%	39.1%	27.9%	39.1%	33.8%	35.1%
Clinical - July 2020	YAS	LOND	NWAS	EMAS	EEAS	SWAS	NEAS	WMAS	SECAMB	SCAS
	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	AMPDS	Pathways	Pathways	Pathways	Pathways
ROSC	25.3%	26.5%	27.3%	20.7%	25.6%	33.3%	26.1%	29.0%	15.6%	24.6%
ROSC - Utstein	44.4%	62.2%	52.3%	57.1%	51.7%	51.4%	71.4%	44.7%	31.6%	43.6%
Cardiac - Survival To Discharge	11.0%	4.5%	3.9%	4.3%	9.5%	15.3%	6.0%	10.3%	3.9%	6.8%
Cardiac - Survival To Discharge Utstein	29.0%	14.8%	18.9%	25.0%	35.7%	29.4%	27.8%	23.3%	8.6%	23.1%