NHS
Yorkshire Ambulance Service
NHS Trust

Integrated Performance Report

Jan 2022

Published 18th Feb

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NHS Yorkshire Ambulance Service NHS Trust

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Strategy, Ambitions & Key Priorities

NHS
Yorkshire
Ambulance Service
NHS Trust

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

NHS
Yorkshire
Ambulance Service
NHS Trust

with our core values embedded in all we do

- One Team
- Innovation
- Resilience
- Empowerment
- Integrity
- Compassion

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

- Patients and communities experience fully joined-up care responsive to their needs
- Our people feel empowered, valued and engaged to perform at their best
- We achieve excellence in everything we do
- We use resources wisely to invest in and sustain services

Delivery is directly supported by a range of enabling strategies

- COMMUNITY ENGAGEMENT
- PEOPLE
- QUALITY IMPROVEMENT
- DIGITAL
- FLEET
- ESTATES
- FINANCE

Our Ambitions for 2023

- Patients and communities experience fully joined-up care responsive to their needs
- Our people feel empowered, valued and engaged to perform at their best
- 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.

Programme Dashboard - Jan 21

NHS Yorkshire Ambulance Service NHS Trust

Agile Operations

ProjectName	Overall	Budget/ Costs	Comms	Delivery	KPIs	Resources	Risks & Issues
Asset Management							
Hub & Spoke and AVP							
Hybrid / Agile working					N/A		
Logistics Hub							
Prepacked POM Pouches							
Training Capacity (Morley)							
Trust Demand Workforce & Accommodation Plan							

Trust Demand Workforce & Accommodation Plan - YAS and ORH co-production of a 5-year workforce planning modelling to support understanding of all YAS service lines. Project remains rated Green.

Logistics Hub remains Red rated reflecting delay in lease sign-off impacting fit-out and capital expenditure slippage to 2022/23. Asset Management - Separate capability for stock control and medicine management proposed, rated Green reflecting delivery in 2022/23, with procurement of approved selected system commenced in Jan 2022

Prepacked POM Pouches is rated Amber reflecting the dependency with Logistics Hub, delivery in 2022/23.

Hub & Spoke and AVP continues to be RAG rated Green with no areas of concern. Searches for next hub sites commenced Jan 2022. Scarborough Cluster AVP Station is RAG rated Green with full design team appointed in Jan 2022

Hull Hub & Spoke RAG rated Green Gate 2 approved by Trust Board in January. Design Team established to determine hub design

Hybrid / Agile working – work completed to understand future preference of staff working from home and desk requirements for operational call centres. Commercial agent and external space planner appointed Jan 2022. Green

Training Capacity (Morley)– works complete to provide additional 4 x training room capacity to support additional recruitment. Rated Green

Digital Enablers

ProjectName	Overall	Budget/ Costs	Comms	Delivery	KPIs	Resources	Risks & Issues
A&E Smartphone (Personal Issue)							
ePR Phase 4							
N365 Implementation							
Unified Communications					N/A		

Unified Communications Project Live, Avaya Upgrade scheduled for Q4 2021/22 under BAU. RAG rated Green

N365 Implementation Project fully delivered, ownership of shared areas to data asset owners (over 60% complete, with remainder in Q4 2021/22). RAG rated Green

ePR Phase 4 progress continues but rated Amber from Green due to delays with user testing within both YAS and acute trusts due to operational pressures

A&E Smartphone (Personal Issue) project rated Red from Amber as overall delivery behind schedule (75% against 90% target) due to operational pressures

Programme Dashboard - Jan 21

NHS Yorkshire Ambulance Service NHS Trust

Our Patients

ProjectName	Overall	Budget/ Costs	Comms	Delivery	KPIs	Resources	Risks & Issues
EOC Business Continuity Improvements							
EOC Clinical (Patient Process)							
EOC Performance Improvement Programme							
IUC Sustainability & Improvements							
Mental Health Project							
NEPT review (PTS) - National Pathfinder programme							
Phase 2 – Post Registration Paramedic Career Pathway (SP/AP)							
Priority Patient Pathways & Safer Right Care programme							
Remote Clinical Assessment (RCA) People Plan							
Rotational Paramedics							
Supporting Ambulance Performance							
Supporting UEC Performance							
Team Based Working							

- 999 Sustainability & Culture -Supporting Ambulance Performance – Status remains Green reflecting continued good progress recruiting to EMD, ECA and Paramedic posts. Clinical Navigator recruitment completed. Winter Coordination centres live in all four areas. New vehicles deliveries (41) expected to complete by end Feb 2022.
- 999 Sustainability & Culture -EOC Improvement Programme - the programme has analysed past performance, developed a vision for EOC and established six workstreams to improve performance, progressing well and achieving set milestones. Rated Green
- Team Based Working remains Green as implementation completed. Evaluation to be completed Q4 202122.
- Rotational Paramedics Second cohort has run smoothly over its first 5 weeks with PCN's becoming comfortable with paramedic skill set and supervision needs. Work progressing on identifying 7-10 new PCN's for 2022/23 programme. Green

- Post Registration Paramedic Career Pathway (SP/AP) remains on track with all three work streams, however RAG rated Amber (from Green) reflecting risk of delay to completion of SP/SN Urgent Care realignment staff consultation.
- 999 Sustainability & Culture - EOC Business Continuity Improvements – Status remains Green as approvals received from TEG, TMG and Trust Board to proceed. Detailed project plan finalised and approved by project group end Jan 22
- 999 Sustainability & Culture - EOC Clinical (Patient Process) Remains Amber. System implementation review meeting took place 03.12.21 and key dates for final phase of implementation agreed, project end date amended to March 2022 to reflect this.
- Mental Health Project HER MHRV pilot second phase finished on the 12/12/21 and the third and final phase will now start on the 21/2/22. Phase 2 MH Education & Training content under review due to operational pressure, currently paused. Overall status therefore remains Amber.
- Remote Clinical Assessment (RCA) People Plan (TNA) course commenced. RCA career pathway and Rotational Roles (agile working) work streams also continue to progress. However, the RCA pod is delayed. Rated Green
- NEPT review (PTS) - National Pathfinder programme Project Plan and Risks & Issues agreed, Project meetings established. Project Manager recruited. Funding confirmed. Workshop planned for Feb 2022 to clarify and confirm key required outputs, resources and metrics/Identify key stakeholders/Identify Local Authority Transport established signposting (METRO) & establish baseline measurements, hence status remains Amber.
- Supporting UEC Performance The pressure within UEC remains as highlighted in the H2 plan in terms of call volumes, sickness and turnover. Additional funds have been received via the General Capacity Funding & IUC Investment to help with additional recruitment & retention.
- The recruitment / retention trajectory has been developed for the additional Health Advisors / Clinical Advisors and is being monitored via NHSE/I and TEG. Recruitment / training takes 8-12 weeks and the trajectory extends into March 2022 hence RAG rating of Amber
- IUC Sustainability & Improvements Due to operational pressures throughout December and into January several of the workstreams have been paused. The operational delivery and health and wellbeing workstreams continue to progress, with Rota review identified as a key priority. Project remains Amber to reflect continued pressures.
- NHS Charities/Volunteer Programme - Utilisation of PTS Volunteers PTS to trial the benefits of a dedicated VCS planning desk/scheduler and whether this approach will maximise/increase the utilisation of PTS volunteers on-day and prioritise, where appropriate, standard car (SC) usage above taxi usage. Rated Green
- NHS Charities/Volunteer Programme - Supporting Fallers Outside by CFR colleagues Project consists of 2 workstreams – 1.) buying of equipment & training of volunteers 2.) recruiting specific dispatchers to support our volunteer falls programme. Project delayed due to EOC pressures, hence rated Amber
- NHS Charities/Volunteer Programme - NHS Charities Together - Volunteer Schemes (YAS Charity) 2-year project funded by NHS Charities with three elements: 1.) Expansion of CFR driver response vehicles 2.) - Maximising the use of the CFR driver response vehicles 3.) - Embedding wider volunteer developments -recruitment of VDM & CFR scheduler. Resources are currently being identified, hence rated Amber
- Priority Patient Pathways & Safer Right Care programme Many key milestones achieved and/or on track to progress project delivery. However, several Q3 key milestones have been delayed (e.g. clinical refresher (resus, decision-making), clinical induction for Team Leaders, wider roll-out of individual clinical dashboard) which may impact on the timescales for achievement of overall project aims, hence RAG rating updated to Amber (from Green)

Programme Dashboard - Jan 21 (Hover over projects for more details)

NHS Yorkshire Ambulance Service NHS Trust

Our People

ProjectName	Overall	Budget/ Costs	Comms	Delivery	KPIs	Resources	Risks & Issues
International Recruitment							

- Education and Training - Enabling an effective induction and appraisal programme within YAS. This remains rated Green as the new induction process continues to be rolled out and delivered. Appraisal training is being delivered but paused in some service areas due to current operational pressures.
- Recruitment and Retention In addition to supporting the EOC / 111 Recruitment programme (see Our Patients) work is ongoing to develop career pathways. Current operational pressures will result in some workstreams being paused. This remains rated Amber.

- YAS Culture Work including Health & Wellbeing YAS Culture work remains rated Amber. Despite overall workstream Amber RAG rating – sickness absence KPIs remain high. Work continues to progress HCV programme. The health and wellbeing plan will be aligned with the H&W NHS guidance, AACE guidance and our internal work and this will be worked through with the HWB Group in March.
- International Recruitment International Recruitment – Working collaboratively with HEE to recruit paramedics from Australia. Interviews scheduled to take place for 153 applicants from 25 Feb 22 over 2 weeks. Project status remains rated Amber until outcome of IV process is known. An additional international recruitment project to recruit nurses is currently subject to Gate review.

- Partnership with Trade Unions – Workshops have been rescheduled to support the development of partnership with the trade unions. A formal partnership agreement will be developed. This remains rated Amber and will be monitored through Q4.
- Equality, Diversity & Inclusion This remains rated Amber. Targeted recruitment, staff and community engagement have begun and a more detailed delivery plan has been established to make the recruitment process more inclusive. A dashboard is being developed to monitor recruitment outcomes. Reverse BAME mentoring project is being evaluated and will be broadened to align with other protected characteristics in association with the LGBT and Disability Support networks.

- Vaccination Programme – The roll out of the 2021-22 Flu and Vaccination programme is now complete and rated Green.
- e-Expenses software – This remains rated Green and Phase 1 went live on 10 January 2022 for all staff who do not currently use GRS to submit claims, those on GRS will transfer to this system on 1 April 2022
- Operating Model – This remains rated Amber. Development continues with revised timescales, including broader OD considerations and management of potential interim pressures and development priorities.

- Integrated Commissioning Framework - This remains rated Amber. Phase 2 of the Integrated Commissioning Framework has been initiated to strengthen collaborative working between YAS and ICS, system partners.
- Body worn video – Phase 3 sites confirmed ahead of schedule and project remains rated Green. Engagement drop-in clinics to take place in February to raise awareness and deliver training. Phase 3 Go- Live scheduled for Apr 2022
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999 IPR Key Exceptions - Jan 21

NHS Yorkshire Ambulance Service NHS Trust

Indicator	Target	Actual	Variance	Assurance
999 - Answer Mean		00:00:17	H	
999 - Answer 95th Percentile		00:01:48	H	
999 - C1 Mean (T <7Mins)	00:07:00	00:08:55	H	F
999 - C1 90th (T <15Mins)	00:15:00	00:15:45	H	F
999 - C2 Mean (T <18mins)	00:18:00	00:32:43	H	F
999 - C2 90th (T <40Mins)	00:40:00	01:13:03	H	F
999 - C3 Mean (T - <1Hr)	01:00:00	01:25:51	H	F
999 - C3 90th (T -<2Hrs)	02:00:00	03:31:29	H	F
999 - C4 90th (T < 3Hrs)	03:00:00	03:33:07	H	F
999 - C1 Responses > 15 Mins		815	H	
999 - C2 Responses > 80 Mins		3,120	H	
999 - Job Cycle Time		01:43:57	H	
999 - Avg Hospital Turnaround	00:30:00	00:48:25	H	F
999 - Avg Hospital Handover		00:26:54		
999 - Avg Hospital Crew Clear		00:16:48		
999 - Average Hospital Notify Time		00:05:59		

Exceptions - Comments (Director Responsible - Nick Smith)

Call Answer - The mean Call Answer time decreased in January to 17 seconds which is 19 seconds less than December. The call answer mean for January last year was 6 seconds. Call demand was below forecast for the month by 7.0%. The tail end of call answer times shown in the percentiles decreased by a large amount from peak values seen over the October to December period and the 90th percentile call answer time was zero seconds for the last few weeks of January.

Cat 1-4 Performance - No national performance targets were met in January. Performance times for all categories remain exceptionally high although they have decreased from December. The Category 1 mean and 90th percentile performance times were reduced by 55 seconds and 1 minute 25 seconds, respectively.. Abstractions were 0.9% higher than forecast for January, decreasing 1.3% from December. Weekly staff hours have increased compared to December by approximately 3,500 hours per week. DCA Jobs times have also shortened by 1 second compared to December. This has contributed to overall availability increasing by 3.3% from December and was reflected in improved performance. Compared to January 2021, abstractions are up by 1.1% and availability is up by 0.3%

Responses Tail (C1 and C2) - The number of C1 incidents with a response time greater than 15 minutes in January decreased by 425 to 815 which is 130.2% greater than January 2021. The number of C2 incidents greater than 80 minutes last month decreased from December by 3,524 to 3,120, a 53.0% reduction. In January 2021 there were 1,202 C2 incidents over this threshold.

Job cycle time - Average Job Cycle time remains higher than last year and has been consistently increasing month on month up to December, with January showing the first monthly decrease. Overall, job cycle time is over 6 minutes lower than in December, however, it remains over 5 minutes longer than in January 2021.

Hospital - Average hospital turnaround times for January remain high and similar to December with a 1 minute improvement. Compared to January 2021 this is almost 10 minutes longer. Average Crew Clear has increased since COVID-19 as more processes are undertaken post patient handover such as further cleaning of resources and making resources and crews ready for their next incident, however, this increase appears to remain relative consistent since March 2020.

More recently, the increase in turnaround times have been attributed to long handover times, with January showing around 27 minutes. The number of incidents with conveyance to ED remains similar to last month and the same month last year, down by 1.4% from December but up from January last year by 0.4%.

IUC and PTS IPR Key Indicators - Jan 21

Indicator	Target	Actual	Variance	Assurance
IUC - Call Answered		134,396		
IUC - Calls Abandoned	3.0%	12.3%	H	F
IUC - Answered in 60 Secs	90.0%	50.5%	L	F
IUC - Call back in 1 Hour	60.0%	47.3%		F
IUC - Core Clinical Advice	30.0%	23.8%	L	F
IUC - Booking ED	70.0%	35.1%		F
IUC - ED Validations %	50.0%	43.5%		F
IUC - 999 Validations 30 mins %	50.0%	89.6%		P

Indicator	Target	Actual	Variance	Assurance
PTS - Journeys < 120Mins	90.0%	99.6%		P
PTS - Arrive at Appointment Time	90.0%	90.2%		P
PTS - Answered < 180 Secs	90.0%	90.7%		P
PTS - % Pre Planned - Pickup < 90 Mins	90.4%	94.5%		P
PTS - % Short notice - Pickup < 120 mins	90.8%	91.0%	H	P

IUC Exceptions - Comments (Director Responsible - Karen Owens)

YAS received 153,277 calls in Jan, 6.1% below the Annual Business Plan baseline demand as of the end of the month, year to date offered calls were 10.0% above the baseline. 134,396 offered calls (87.7%) were answered, 7.5% less than were answered in Dec, and 5.1% lower than the number of calls answered in Jan 21. Exceptional demand and limited staff availability have heavily impacted on call performance. Whilst it is no longer a national KPI, we are continuing to monitor the percentage of calls answered in 60 seconds as it is well recognised within the IUC service and operations as a benchmark of overall performance. This measure improved last month, at 50.5% compared with 44.0% in Dec.

Clinician Call Backs made within 1 hour was 47.3%, below the 60% target but higher than 43.7% in December. Core clinical advice was 23.8%, up from 22.2% in December. These figures are calculated based on the new ADC specification, which removes 111 online cases from counting as part of clinical advice, and also locally we are removing cases which come from the DCABS clinical service as we do not receive the initial calls for these cases.
Ambulance validations monitors performance against outcomes validated within 30 minutes, rather than just all outcomes validated, and the target for this is 50% of outcomes, However, YAS is still measured against a local target of 95% of outcomes validated overall. Against the national KPI, performance was 89.6% in January, whilst performance for overall validations was 99.1%, with around 10,700 cases validated overall.

ED validation performance was 43.5% for January, 3.2% higher than December. This was due in part to ED validation services being turned off for several periods of time during the month as a result of demand pressures to the service. ED validation also continues to be driven down since the implementation of 111 First and the prioritisation of UTCs over validation services for cases with an initial ED outcome. Previous analysis showed that if cases now going to UTCs that would have gone to validation previously were no longer included in the denominator for the validation calculation, YAS would have met and exceeded the 50% target every month YTD.

PTS Exceptions - Comments (Director Responsible - Karen Owens)

Total Demand was 57,587 in January; a 20.0% decrease on the previous month (see more on Demand Page). The contractual KPI's remain suspended in line with NHS England Guidance. Focus continues on the 120 Min Discharge KPI and patient care. Despite this, reduced demand levels saw an improvement to all core KPIs, each achieving target.
Short Notice Patients picked up within 120 Mins % was 91.0% in January; above target for the first time since Jul-20. YTD figure is below target at 84.6%. Covid demand saw a 158.0% increase in January, with 2,817 journeys delivered. Covid demand started to surge during the festive period in December, peaking during w.c 10/12/2022. Demand has since started to decrease.

Calls Answered in 180 % saw another improvement in January, performing at 90.7%; achieving target for the first time since Jun-20. Total calls offered saw a slight decrease in January (-6.2%), however telephony demand is still 21.3% higher than the same month last year.

Support Services IPR Key Indicators - Jan 21

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NHS Yorkshire Ambulance Service NHS Trust

Indicator	Target	Actual	Variance	Assurance
All Incidents Reported		702		
Serious		11	H	
Moderate and Above Harm		28		
Service to Service		64		
Adult Safeguarding Referrals		1,757	H	
Child Safeguarding Referrals		737	H	
Safeguarding Adults Level 2 - 3 Years		85.9%		

Indicator	Target	Actual	Variance	Assurance
Turnover (FTE) %		10.7%	H	
Sickness - Total % (T-5%)	5.0%	12.5%	H	F
Special Leave		2.5%	H	
PDR / Staff Appraisals % (T-90%)	90.0%	51.3%	L	F
Stat & Mand Training (Fire & IG) 1Y	90.0%	87.5%		F
Stat & Mand Training (Core) 3Y	90.0%	77.2%	L	F
Stat & Mand Training (Face to Face)	90.0%	72.8%	H	F

Quality and Safety Exceptions - Comments (Director Responsible - Clare Ashby)

Patient Relations – further decrease in service to service from the high levels reported in July/August. Complaints remain stable, but are increasing in complexity. Compliments remain the highest reported element of 4Cs – which is very positive given the operational pressures the trust has been under for a consistent amount of time.

Safeguarding adult and child – adult safeguarding referrals continue to climb, while child referrals remain static and within normal variation.

Safeguarding training – level 2 training is below the expected range of 85%. Increasing operational demands are affecting time for training and eLearning time provision has not been replaced since face to face training has been suspended. Trust managers, supported by the communications team, are working to ensure all staff are up to date with their eLearning.

Workforce Exceptions - Comments (Director Responsible - Mandy Wilcock)

Sickness - Sickness has increased significantly to 12.5% causing performance concerns across the Trust. Covid is having a significant impact but both short- and long-term absence have seen an increase. The EOC/111 transformation teams have specific work streams regarding health and wellbeing. Special Leave - Special Leave has decreased slightly and stands at 2.5% as the number of staff self-isolating increases due to infection rates increasing. The sickness taskforce work is now focusing on PTS where long term absence has been steadily increasing since October 2021.

PDR -rates at 51.3%. This has dropped slightly from December to January in most areas given the extreme pressures. Support continues to be provided to all areas, and managers are receiving update briefings and workshops (for new managers) on how to conduct the appraisals achieving a quality conversation – when possible.

Statutory and Mandatory Training - Compliance figures have improved slightly for all categories, albeit all being below the compliance targets. Staff are being encouraged to get all eLearning completed and to prioritise Fire and IG which has resulted in a small increase. The TMG approved 3-year phased approach to achieve full compliance is built into the Training Plan for 2022/23 which was approved at TMG 15 December 2021. Further work is underway to determine how the Trust might be able to achieve compliance sooner.

Workforce Summary

A&E | IUC | PTS | EOC | Other | Trust

NHS Yorkshire Ambulance Service NHS Trust

Key KPIs

Name	Jan 21	Dec 21	Jan 22
FTE in Post %	98.8%	90.6%	89.4%
Turnover (FTE) %	8.3%	10.5%	10.7%
Vacancy Rate %	1.2%	9.4%	10.6%
Apprentice %	4.8%	7.0%	7.8%
BME %	6.0%	6.3%	6.2%
Disabled %	3.1%	3.9%	4.0%
Sickness - Total % (T-5%)	8.9%	12.1%	12.5%
Special Leave	4.8%	2.7%	2.5%
PDR / Staff Appraisals % (T-90%)	70.9%	52.1%	51.3%
Stat & Mand Training (Fire & IG) 1Y	85.3%	87.0%	87.5%
Stat & Mand Training (Core) 3Y	96.6%	75.2%	77.2%
Stat & Mand Training (Face to Face)	67.4%	72.6%	72.8%
Stat & Mand Training (Safeguarding L2 +)	86.3%	86.8%	87.9%

YAS Commentary

FTE, Turnover, Vacancies and BME - The vacancy rate shown is based on the budget position against current FTE establishment with vacancies at 10.6% a significant increase from 6.1% in October 2021; this reflects the increase in turnover to now 10.7%. Turnover remains a concern in our call centres. Dedicated recruitment and retention work within our call centres continues and is progressing well.

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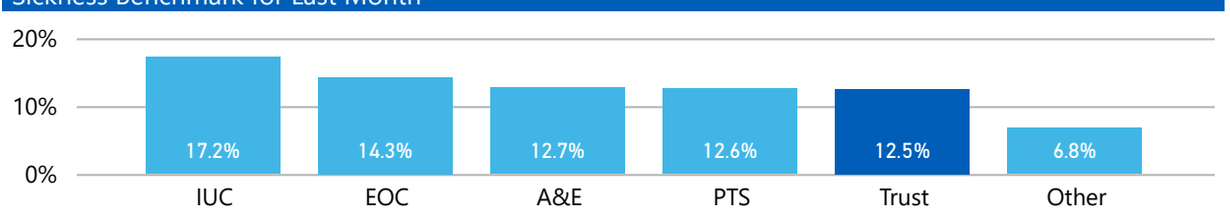
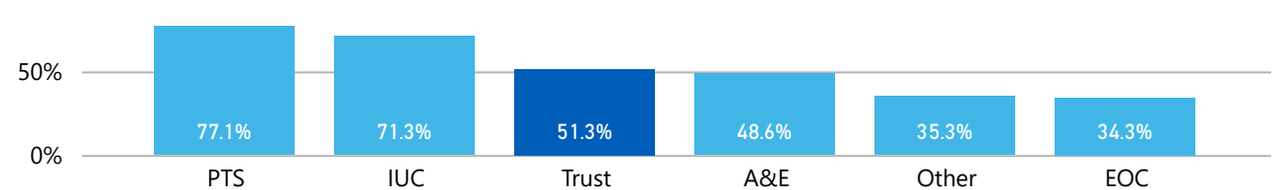
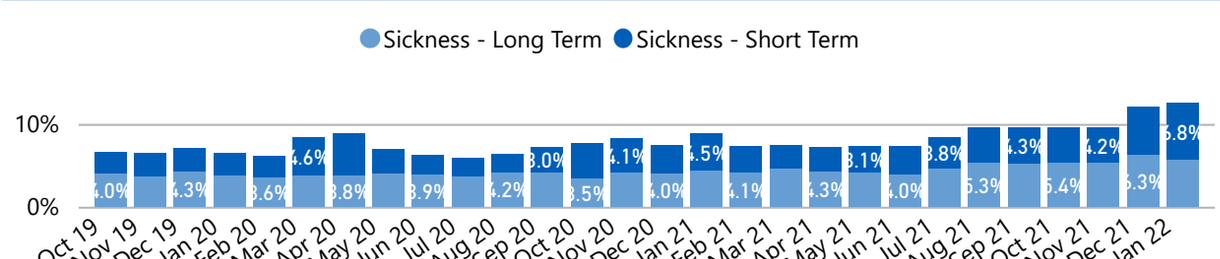
Sickness Benchmark for Last Month



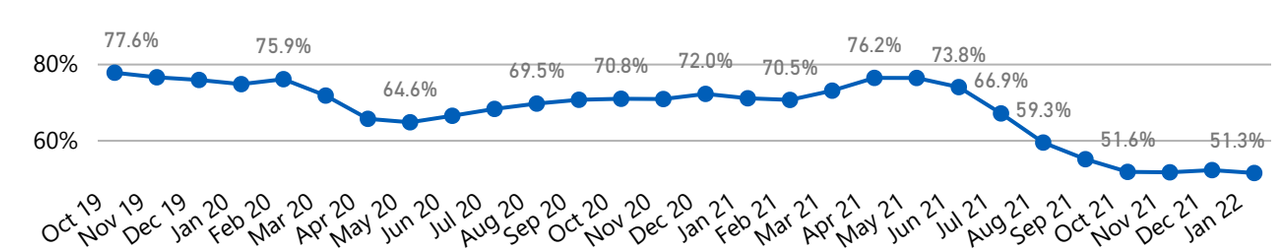
PDR Benchmark for Last Month



Sickness



PDR - Target 90%



YAS Finance Summary (Director Responsible Kathryn Vause- Jan 21)

NHS Yorkshire Ambulance Service NHS Trust

Overview - Unaudited Position

Overall - The Trust has a year to date surplus at month 10 of £8.2m (£7.8m for ICS reporting after the gains on disposals are removed), reflecting the revised full year forecast.

Capital - YTD expenditure continues behind plan, some expenditure has been rephased in Estates, Fleet and IT together with unavoidable production and delivery delays in 2021/22. Work is ongoing to ensure the full year capital spend is as close to plan as possible.

Cash - As at the end of December the Trust had £79.0m cash at bank. (£64m at the end of 20-21).

Risk Rating - There is currently no risk rating measure reporting for 2021/22.

Full Year Position (£000s)

Name	YTD Plan	YTD Actual	YTD Plan v Actual
Surplus/ (Deficit)	£1,128	£8,189	£7,061
Cash	£0	£78,963	£78,963
Capital	£10,187	£3,390	-£6,797

Monthly View (£000s)

Indicator Name	2021-05	2021-06	2021-07	2021-08	2021-09	2021-10	2021-11	2021-12	2022-01
Surplus/ (Deficit)	£637	£7	-£392	-£7	-£104	£75	£1,208	£118	£6,647
Cash	£66,696	£67,971	£69,166	£72,812	£72,787	£74,752	£75,312	£78,557	£78,963
Capital	£107	£140	£267	£266	£205	£63	£296	£1,195	£851

Patient Demand Summary

NHS Yorkshire Ambulance Service NHS Trust

Demand Summary

ShortName	Jan 21	Dec 21	Jan 22
999 - Incidents (HT+STR+STC)	69,696	69,557	67,986
999 - Increase - Previous Month	1.7%		
999 - Increase - Same Month Last Year	-2.8%		
IUC - Call Answered	142,334	144,432	134,396
IUC - Increase - Previous Month	-5.5%	8.2%	-6.9%
IUC - Increase Same Month Last Year	5.1%	-4.1%	-5.6%
IUC - Calls Answered Above Ceiling	-14.9%	-23.2%	-19.3%
PTS - Demand (Journeys)	58,012	72,028	57,587
PTS - Increase - Previous Month	-3.5%	-4.8%	-20.0%
PTS - Same Month Last Year	-26.2%	19.8%	-0.7%

Commentary

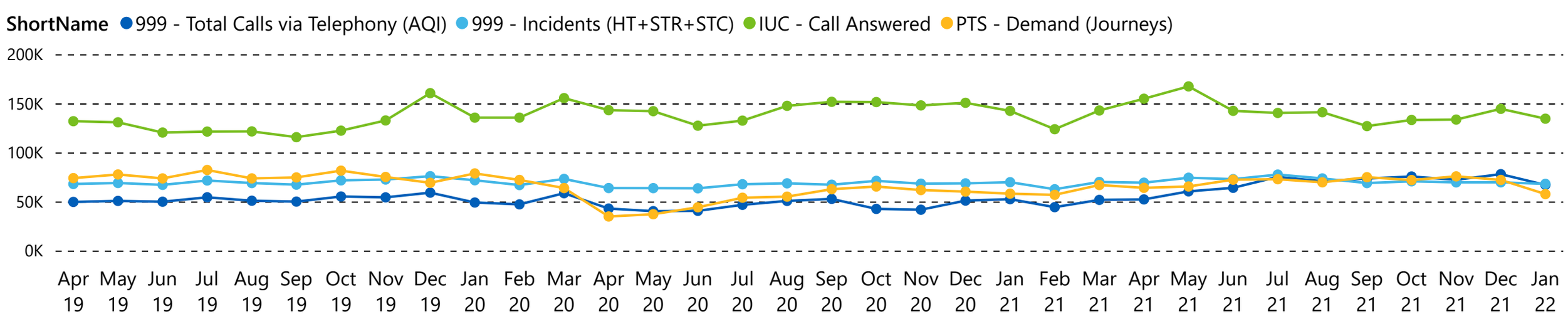
999 - At Scene Response demand is 15.1% lower than forecasted levels for January. All Response Demand (STR + STC +HT) is 2.3% down on last month and 2.5% down on January 2021.

IUC - YAS received 153,277 calls in January, 6.1% below the Annual Business Plan baseline demand as of the end of the month, year to date offered calls were 10.0% above the baseline. Of calls offered in January, 134,396 calls (87.7%) were answered, 7.5% less than were answered in December, and 5.1% lower than the number of calls answered in January 2021.

PTS - Total Demand was 57,587 in January; a 20.0% decrease on the previous month. Due to the "omicron" staffing shortage impacting 999 emergency ambulance response to life threatening calls, the Trust took mitigating actions including cancelling majority of patient journeys to routine/general outpatient appointments and clinics. We deployed our resources to support our emergency ambulance service, to provide transport for our most vulnerable patients, and to continue to support NHS Acute Trusts in discharging medically fit patients.

Routine journeys to planned care clinics will be suspended from Wednesday 12 January 2022 until 23rd January 2022.. Demand has also been down on forecast following this, although signs are that it will return to forecast as call volumes for prebooking transport remain higher than usual

Overall Calls and Demand



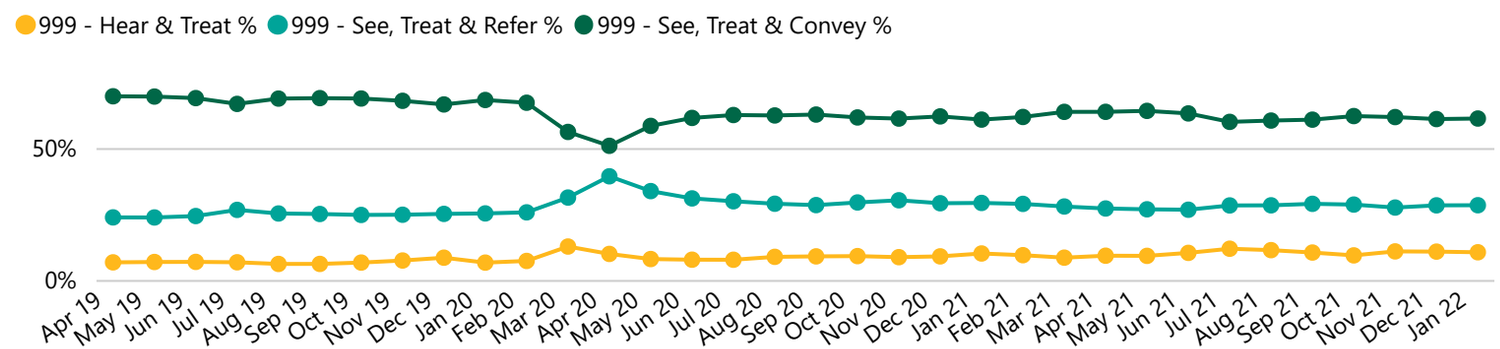
Patient Outcomes Summary

NHS Yorkshire Ambulance Service NHS Trust

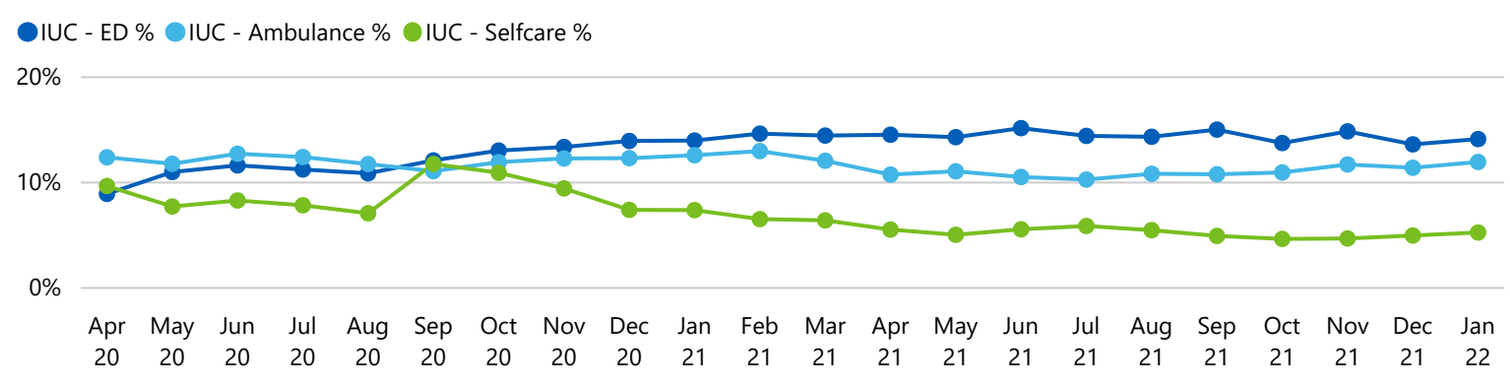
Outcomes Summary

ShortName	Jan 21	Dec 21	Jan 22
999 - Incidents (HT+STR+STC)	69,696	69,557	67,986
999 - Hear & Treat %	10.0%	10.7%	10.5%
999 - See, Treat & Refer %	29.2%	28.3%	28.3%
999 - See, Treat & Convey %	60.8%	61.0%	61.2%
999 - Conveyance to ED %	52.9%	53.9%	54.4%
999 - Conveyance to Non ED %	7.9%	7.1%	6.8%
IUC - Calls Triaged	135,719		
IUC - ED %	13.9%	13.5%	14.0%
IUC - ED outcome to A&E	80.6%	77.5%	79.6%
IUC - ED outcome to UTC	7.6%	10.3%	11.0%
IUC - Ambulance %	12.5%	11.3%	11.9%
IUC - Selfcare %	7.3%	4.9%	5.2%
IUC - Other Outcome %	11.7%	11.8%	11.5%
IUC - Primary Care %	53.7%	57.1%	55.9%
PTS - Demand (Journeys)	58,012	72,028	57,587

999 Outcomes



IUC Outcomes



Commentary

999 - When comparing January 2022 against January 2021 in terms of incident outcome proportions within 999, the proportion of See, Treat & Refer has decreased by 0.9%, Hear & Treat has increased by 0.5% and See, Treat & Convey has increased by 0.4%. The proportion of incidents with conveyance to ED has increased by 1.5% from last year although the number of incidents conveyed to ED is increased by 0.4%. In contrast, the number of incidents conveyed to non ED has decreased by 16.2%.

IUC - The proportion of callers given an ambulance outcome continues to be slightly lower than historical levels. Meanwhile, primary care outcomes remain at a higher level than in the early stages of the Covid-19 pandemic. The proportion of callers given an ED outcome is now consistently around 14-15%, several percentage points higher than historic levels, however within that there has been a shift. The proportion of ED outcomes where the patient was referred to a UTC is now consistently over 10%, compared with only around 2-3% historically. Correspondingly, the proportion of ED outcomes where the patient was referred to an A&E has fallen from nearly 90% historically to 80% now. This was a key goal of the 111 First programme aiming to reduce the burden on Emergency Departments by directing patients to more appropriate care settings

Patient Experience
(Director Responsible - Clare Ashby)

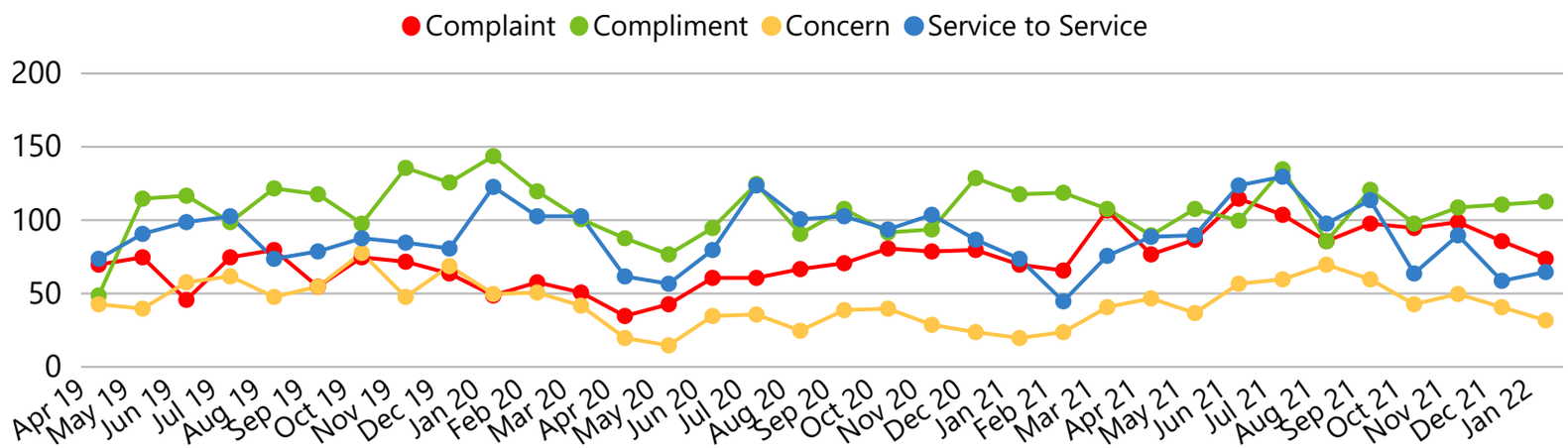
A&E | EOC | IUC | PTS | YAS

NHS Yorkshire Ambulance Service NHS Trust

Patient Relations

Indicator	Jan 21	Dec 21	Jan 22
Service to Service	73	58	64
Concern	19	40	31
Compliment	117	110	112
Complaint	69	85	73

Complaints, Compliments, Concerns and Service to Service



YAS Compliance

Indicator	Jan 21	Dec 21	Jan 22
% FOI Request Compliance	96.3%	100.0%	94.7%

YAS Comments

Patient Relations – further decrease in service to service from the high levels reported in July/August. Complaints remain stable, but are increasing in complexity. Compliments remain the highest reported element of 4Cs – which is very positive given the operational pressures the trust has been under for a consistent amount of time.

FOI Compliance is consistently remaining above the target of 90%

Patient Safety - Quality (Director Responsible - Clare Ashby)

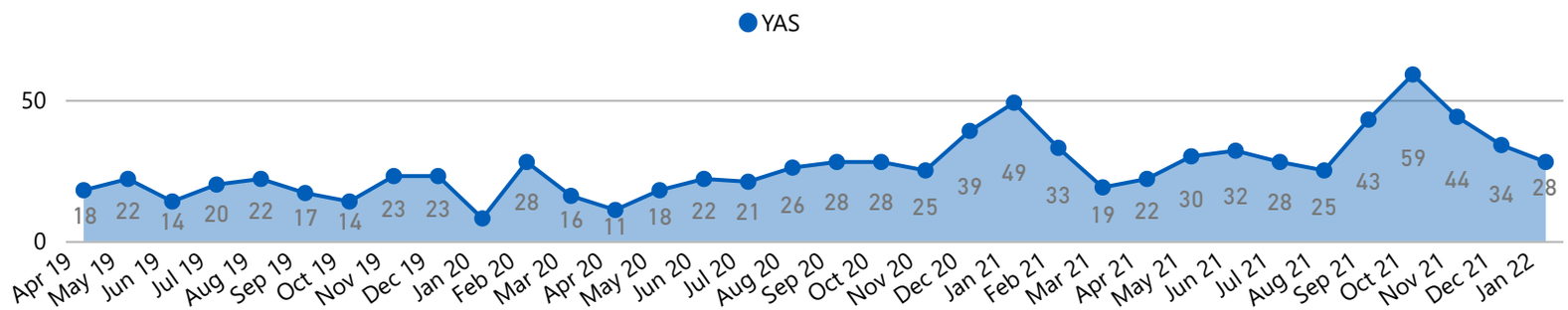
A&E | EOC | IUC | PTS | YAS

NHS Yorkshire Ambulance Service NHS Trust

Incidents

Indicator	Jan 21	Dec 21	Jan 22
All Incidents Reported	995	724	702
Medication Related	63	95	
Moderate & Above Harm - Total	49	34	28
Number of duty of candour contacts	6	6	10
Number of RIDDORs Submitted		2	1
Serious	5	7	11

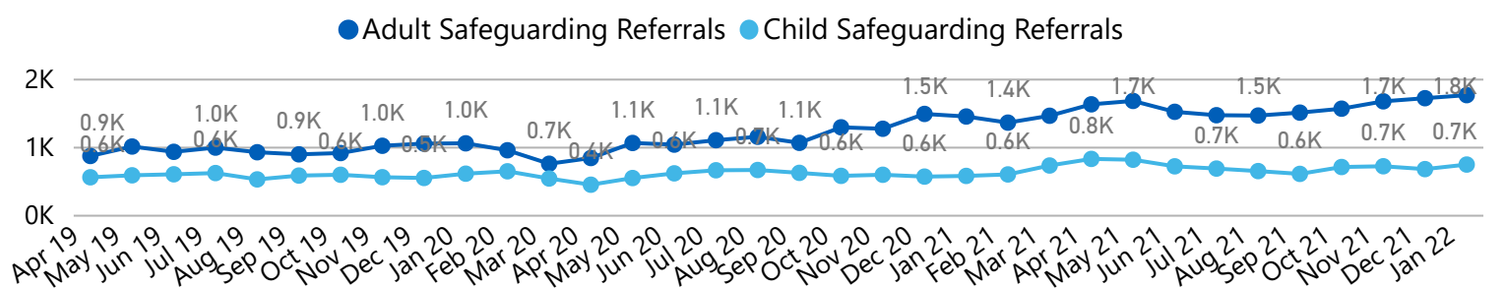
Incidents - Moderate and Above Harm



YAS Child and Adult Safeguarding

Indicator	Jan 21	Dec 21	Jan 22
Adult Safeguarding Referrals	1,443	1,712	1,757
Child Safeguarding Referrals	570	670	737
% Trained Safeguarding for Children (L1)	96.8%	73.4%	73.6%
% Trained Safeguarding for Children (L2)	86.3%	79.9%	85.2%
% Trained Safeguarding for Adults (L1)	95.9%	71.9%	72.1%

Safeguarding Training



A&E Long Responses

Indicator	Jan 21	Dec 21	Jan 22
999 - C1 Responses > 15 Mins	354	1,240	815
999 - C2 Responses > 80 Mins	1,202	6,644	3,120

YAS IPC Compliance

Indicator	Jan 21	Dec 21	Jan 22
% Compliance with Hand Hygiene	99.1%	98.8%	98.0%
% Compliance with Premise	95.4%	99.0%	99.0%
% Compliance with Vehicle	97.3%	99.3%	99.0%

YAS Comments

Safeguarding adult and child – child and adult safeguarding referrals have risen in Jan 22.

Safeguarding training – level 2 training is above the expected range of 85%. Increasing operational demands are affecting time for training and eLearning time provision has not been replaced since face to face training has been suspended. Trust managers, supported by the communications team, are working to ensure all staff are up to date with their eLearning.

Patient Safety (Harm)

Yorkshire Ambulance Service NHS Trust

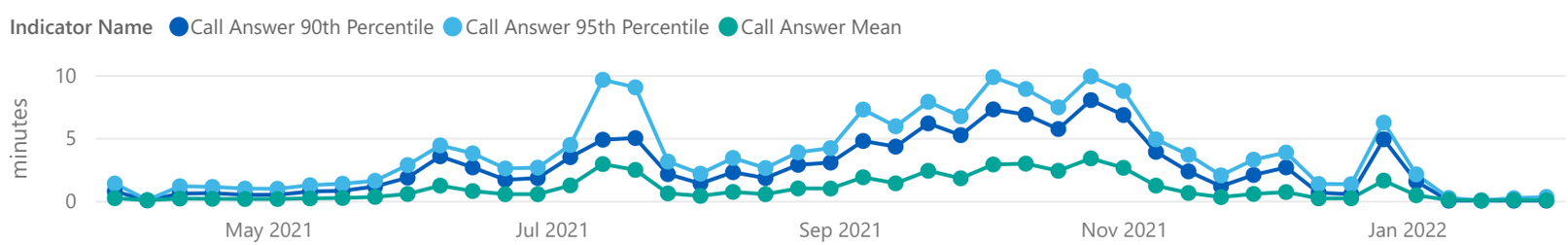
Commentary:

Yorkshire Ambulance Service NHS Trust are looking into three areas of the patient's journey which could cause harm. These have been highlighted as call to answer, delayed responses and hospital turnaround. Looking at these three areas can help the Trust triangulate data to identify areas of potential harm and improvement. These areas highlighted are monitored through the Trust Management Group. If a patient experiences more than one of the areas of potential harm this then generates a flag seen in the "instances where a call appears in more than 1 top 10 list". A clinical review is then undertaken. 1 exceptions was highlighted for this IPR period of time but with no clinical harm.

Instances where a call appears in more than 1 top 10 list

Date	Handover	Response	Telephony
31 July 2020	■	■	■
18 November 2021		■	■
01 February 2022	■	■	■

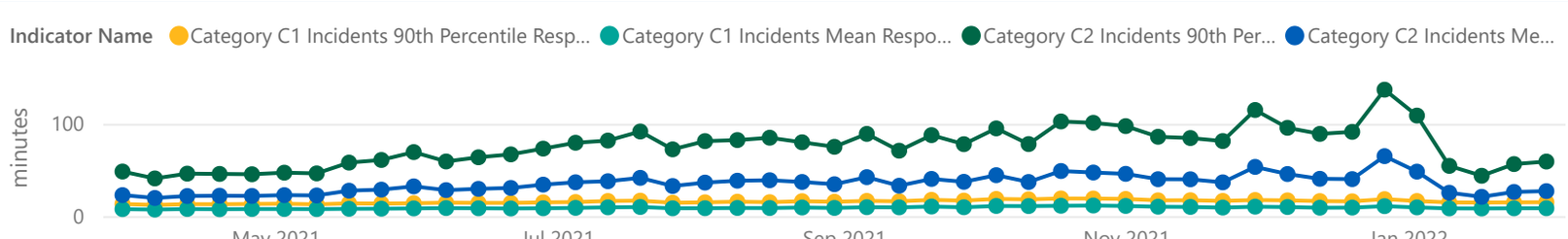
Call Answer Metrics (call data available from 7th September onwards)



Call Answer Metrics

Indicator Name	Jan 21	Dec 21	Jan 22
Call Answer 90th Percentile	00:00:29	00:02:12	00:00:44
Call Answer 95th Percentile	00:01:13	00:03:41	00:01:48
Call Answer Mean	00:00:11	00:00:36	00:00:17

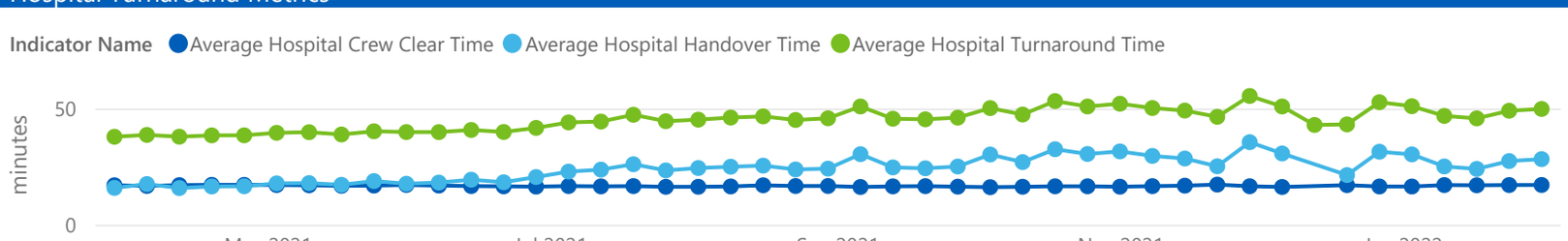
Response Metrics



Response Metrics

Indicator Name	Jan 21	Dec 21	Jan 22
Category C1 Incidents 90th Percentile Response Time	00:13:43	00:17:10	00:15:45
Category C1 Incidents Mean Response Time	00:08:00	00:09:49	00:08:55
Category C2 Incidents 90th Percentile Response Time	00:52:00	01:42:23	01:13:03
Category C2 Incidents Mean Response Time	00:24:30	00:46:56	00:32:43

Hospital Turnaround Metrics



Hospital Turnaround Metrics

Indicator Name	Jan 21	Dec 21	Jan 22
Average Hospital Crew Clear Time	00:16:11	00:16:37	00:16:48
Average Hospital Handover Time	00:17:10	00:28:26	00:26:54
Average Hospital Turnaround Time	00:38:39	00:49:25	00:48:25

Patient Clinical Effectiveness (Director Responsible Julian Mark)

NHS Yorkshire Ambulance Service NHS Trust

Care Bundles (Last 3 Results)

Indicator	Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21	Sep 21	Oct 21	Nov 21
Sepsis %			84.0%			85.0%			87.0%		
STEMI %	61.0%			68.0%			66.0%			73.0%	
Stroke %		96.0%			96.0%			97.0%			93.0%

Myocardial Ischaemia National Audit Project (MINAP)

Indicator	Jun 21	Jul 21	Aug 21	Sep 21
Number of STEMI Patients	101	132	128	118
Call to Balloon Mins for STEMI Patients (Mean)	136	144	150	151
Call to Balloon Mins for STEMI Patients (90th Percentile)	194	197	215	212

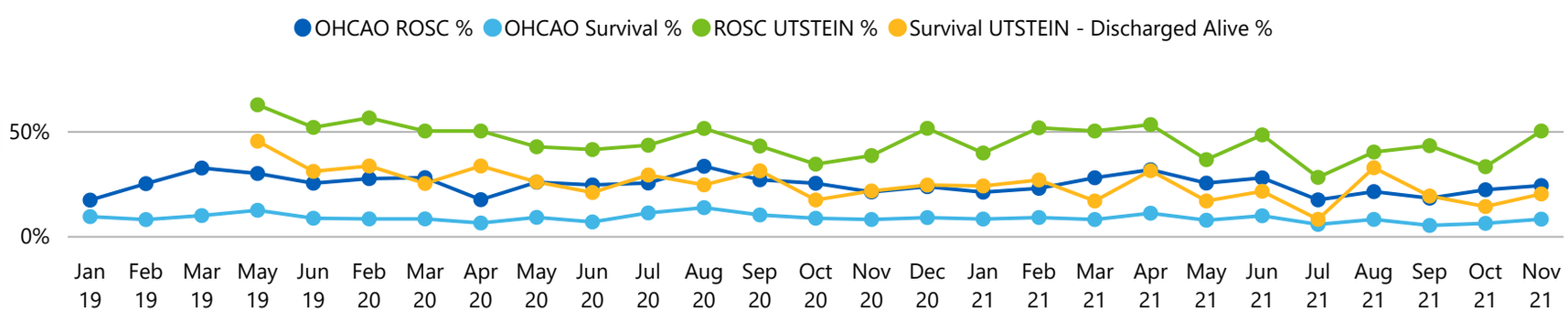
Sentinal Stroke National Audit Programme (SSNAP)

Indicator	Jul 21	Aug 21	Sep 21	Oct
Avg Time from call to hospital	104	91	96	1(
Total Patients	407	398	422	4(

Re-contacts as Proportion of Incident Category

Indicator	Jun 21	Jul 21	Aug 21
Re-contacts - H&T (%)	5.9%	4.9%	5.2%
Re-contacts - S&T (%)	5.2%	4.6%	4.6%
Re-contacts - Conveyed (%)	6.1%	5.6%	5.8%

ROSC and Survival



Sepsis Care Bundle –Data evidences increase in care bundle compliance from 78% in December 2019 to 85% in June 2021. Hospital pre- alert remains largely responsible for the majority of failures. The ePR has updated to trigger sepsis warning flags when the observations are inputted and pre-alert will become a mandatory field in the next release of the ePR. An updated sepsis decision tool and 10/10/10 campaign aims to increase awareness of the care bundle and reduce on scene time with Red Flag Sepsis.

STEMI Care Bundle – Care bundle compliance currently demonstrates an upward trend in 2021 when compared with previous years. In April 2021 YAS achieved 68% compliance up from 61% in January 2021, July 2021 demonstrated 66%. Analgesia administration has been identified as the main cause of this variability with GTN lowering patient pain score on scene, negating analgesia requirement. A review of the Acute Coronary Syndrome pathway is underway as well as the technical guidance under which this measure is audited. Recording of two pain scores (pre & post analgesia) is also an contributing factor to care bundle failures. Further work is currently being undertaken by YAS clinicial informatics & audit team to circulate these findings to front- line clinicians. Further review of the ACQIs by the national audit group also suggests that this element of the care bundle may be amended in the near future. **Stroke Care Bundle** –Consistently performing in the 90% range, compliance could be improved with better documentation of patient blood sugar. The revised 10/10/10 and FASTO campaign was launched in Q3 2019/20. February & May 2021 both demonstrated 96% compliance. Blood pressure & FAST test recording compliance sits at above 99%, whilst the recording of blood sugar is currently at 93% across the trust. Communication of this trend to front- line clinicians has taken place.

Cardiac Arrest Outcomes – YAS perform well in both Survival to discharge and ROSC against the national average. The highest number of patients to survive for one month was 38 out of 270 during Nov 16. Analysis from Apr 16 to Mar 20 depicts normal variation with proportion of YAS patients who survive to discharge following OHCA, therefore no special causes need to be investigated at this point of analysis. Analysis for ROSC demonstrates special cause variation in April 2020 & July 2021; further investigation demonstrates worsened patient acuity during these months due to the current pandemic.

MINAP - This data shows the mean and 90th percentile time from call to cardiac catheter lab for intervention. Early access to reperfusion (the restoration of blood flow) and other assessment and care interventions are associated with reductions in STEMI mortality and morbidity. The time to angiography reflects the speed and effectiveness of both the ambulance service, and the team which provides emergency primary percutaenous angiography in the hospital.

SSNAP – This data shows the call to hospital arrival time for patients with a stroke. Measures will be developed of the overall times from call to CT scan and from call to thrombolysis, which will reflect the speed and effectiveness of both the ambulance service and the team which provides emergency and specialist stroke treatment in the hospital. The health outcomes of patients who suffer an acute stroke can be improved by recognising the symptoms of a stroke or transient ischaemic attack (TIA), making a diagnosis quickly, and by early transport of a patient to a stroke centre capable of providing further tests, treatment and care, including an early CT scan of the brain and "clot-busting" drugs (thrombolysis) for those who are eligible.

Re-contacts with 72 hours - there has been a small but steady increase in the number of patients being referred to alternative providers following the increase in non-conveyance pathways and with the exception of the peak of the pandemic, there has been no change in re-contact. The Safer Right Care, Right Place project aims to improve the safety of decision making and reduce avoidable conveyances.

Fleet and Estates

NHS Yorkshire Ambulance Service NHS Trust

Estates

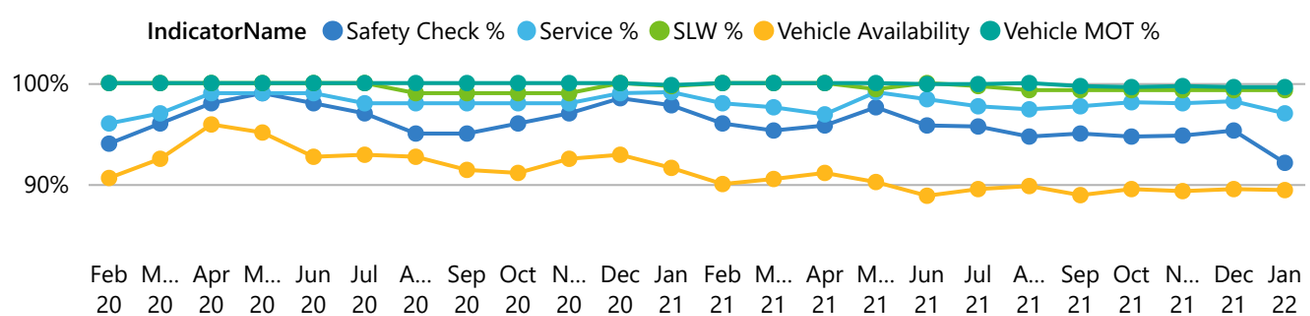
Indicator	Jan 21	Dec 21	Jan 22
P1 Emergency (2 HRS)	100.0%	100.0%	
P1 Emergency – Complete (<24Hrs)	85.7%	100.0%	100.0%
P2 Emergency (4 HRS)	100.0%	88.6%	91.1%
P2 Emergency – Complete (<24Hrs)	72.6%	86.4%	84.4%
Planned Maintenance Complete	99.0%	97.4%	99.1%
P6 Non Emergency - Attend within 2 weeks	76.9%	90.0%	82.4%
P6 Non Emergency - Complete within 4 weeks	68.0%	76.1%	79.4%

Estates Comments

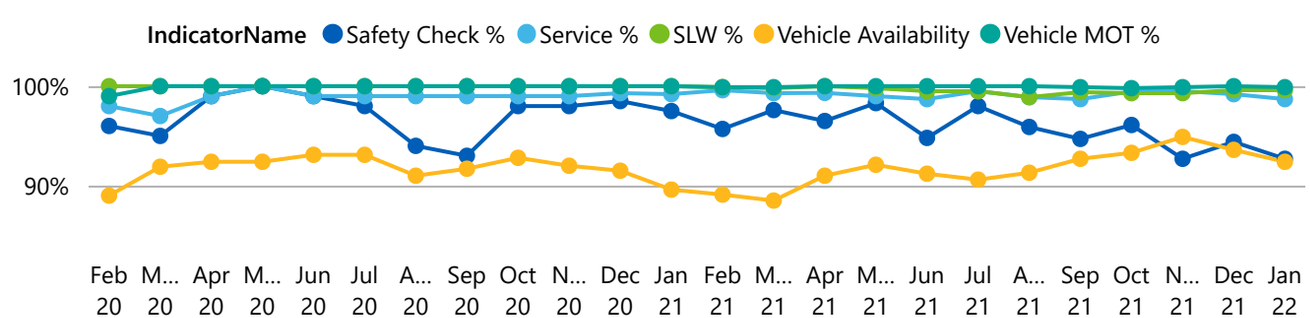
Requests for reactive repairs on the estate totalled 307 jobs for the month (January 2022), with a completion rate of 100% for all priority one work. This compares to requests for repairs in December 2021 of 307 jobs with a completion rate of 78.95% within the <24 hour SLA window. Springhill remains highest originator of requests for reactive repair with 27 in total which has increased from 18 in December 2021.

There were 543 planned maintenance tasks completed in month of which 445 were mandatory, 9 statutory and 89 routine with a completion rate of 99.07%. This completion rate has improved from 97.4% in December 2021.

999 Fleet



PTS Fleet



999 Fleet Age

IndicatorName	Dec 21	Jan 22
Vehicle age +7	10.8%	9.9%
Vehicle age +10	0.4%	0.4%

PTS Age

IndicatorName	Dec 21	Jan 22
Vehicle age +7	8.6%	8.6%
Vehicle age +10	2.4%	2.2%

Fleet Comments

Focus continues to be centred on the reduction in age profile of our PTS fleet with vehicle age +10 reducing from 2.4% in December 2021 to 2.2% in January 2022. During the same period our 999 fleet vehicle age +7 has reduced from 10.8% to 9.9%.

Vehicle availability for both PTS and 999 fleet has remained consistent at around 90% during this challenging operational period.

Glossary - Indicator Descriptions (A&E)

NHS Yorkshire Ambulance Service NHS Trust

A&E

mID	ShortName	IndicatorType	AQIDescription
AMB26	999 - C1 90th (T <15Mins)	time	Across all C1 incidents, the 90th percentile response time.
AMB25	999 - C1 Mean (T <7Mins)	time	Across all C1 incidents, the mean response time.
AMB32	999 - C2 90th (T <40Mins)	time	Across all C2 incidents, the 90th percentile response time.
AMB31	999 - C2 Mean (T <18mins)	time	Across all C2 incidents, the mean response time.
AMB35	999 - C3 90th (T -<2Hrs)	time	Across all C3 incidents, the 90th percentile response time.
AMB34	999 - C3 Mean (T - <1Hr)	time	Across all C3 incidents, the mean response time.
AMB38	999 - C4 90th (T < 3Hrs)	time	Across all C4 incidents, the 90th percentile response time.
AMB37	999 - C4 Mean	time	Across all C4 incidents, the mean response time.
AMB78	999 - C1 90th (Trajectory)	time	C1 Incidents 90th Percentile Response Time (Trajectory)
AMB77	999 - C1 Mean (Trajectory)	time	C1 Incidents Mean Response Time (Trajectory)
AMB80	999 - C2 90th (Trajectory)	time	C2 Incidents 90th Percentile Response Time (Trajectory)
AMB79	999 - C2 Mean (Trajectory)	time	C2 Incidents Mean Response Time (Trajectory)
AMB82	999 - C3 90th (Trajectory)	time	C3 Incidents 90th Percentile Response Time (Trajectory)
AMB81	999 - C3 Mean (Trajectory)	time	C3 Incidents Mean Response Time (Trajectory)
AMB83	999 - C4 90th (Trajectory)	time	C4 Incidents 90th Percentile Response Time (Trajectory)
AMB84	999 - Call Answer Mean (Trajectory)	time	Call Answer Mean (Trajectory)
AMB01	999 - Total Calls via Telephony (AQI)	int	Count of all calls answered.
AMB07	999 - Incidents (HT+STR+STC)	int	Count of all incidents.
AMB59	999 - C1 Responses > 15 Mins	int	Count of Cat 1 incidents with a response time greater than the 90th percentile target.
AMB60	999 - C2 Responses > 80 Mins	int	Count of Cat 2 incidents with a response time greater than 2 x the 90th percentile target.
AMB56	999 - Face to Face Incidents (STR + STC)	int	Count of incidents dealt with face to face.
AMB17	999 - Hear and Treat (HT)	int	Count of incidents not receiving a face-to-face response.
AMB53	999 - Conveyance to ED	int	Count of incidents with any patients transported to an Emergency Department (ED), including incidents where the department transported to is not specified.

Glossary - Indicator Descriptions (IUC and PTS)

NHS Yorkshire Ambulance Service NHS Trust

IUC and PTS

mID	ShortName	IndicatorType	AQIDescription
IUC01	IUC - Call Answered	int	Number of calls answered
IUC03	IUC - Calls Answered Above Ceiling	percent	Percentage difference between actual number of calls answered and the contract ceiling level
IUC02	IUC - Calls Abandoned	percent	Percentage of calls offered that were abandoned
IUC07	IUC - Call back in 1 Hour	percent	Percentage of patients that were offered a call back by a clinician that were called within 1 hour
IUC31	IUC - Core Clinical Advice	percent	Proportion of calls assessed by a clinician or Clinical Advisor
IUC08	IUC - Direct Bookings	percent	Percentage of calls where the patient was recommended to contact a primary care service that had an appointment directly booked. This indicator includes system bookings made by external providers
IUC12	IUC - ED Validations %	percent	Proportion of calls initially given an ED disposition that are validated
IUC13	IUC - Ambulance validations %	percent	Percentage of initial Category 3 or 4 ambulance outcomes that were clinically validated
IUC14	IUC - ED %	percent	Percentage of triaged calls that reached an Emergency Department outcome
IUC15	IUC - Ambulance %	percent	Percentage of triaged calls that reached an ambulance dispatch outcome
IUC16	IUC - Selfcare %	percent	Percentage of triaged calls that reached an self care outcome
IUC17	IUC - Other Outcome %	percent	Percentage of triaged calls that reached any other outcome
IUC18	IUC - Primary Care %	percent	Percentage of triaged calls that reached a Primary Care outcome
PTS01	PTS - Demand (Journeys)	int	Count of delivered journeys, aborted journeys and escorts on journeys
PTS02	PTS - Journeys < 120Mins	percent	Patients picked up and dropped off within 120 minutes
PTS03	PTS - Arrive at Appointment Time	percent	Patients dropped off at hospital before Appointment Time
PTS04	PTS - % Pre Planned - Pickup < 90 Mins	percent	Pre Planned patients to be picked up within 90 minutes of being marked 'Ready' by the hospital
PTS05	PTS - % Short notice - Pickup < 120 mins	percent	Short Notice patients to be picked up within 120 minutes of being marked 'Ready' by the hospital
PTS06	PTS - Answered < 180 Secs	percent	The percentage of calls answered within 180 seconds via the telephony system

Glossary - Indicator Descriptions (Quality and Safety)

NHS Yorkshire Ambulance Service NHS Trust

Quality and Safety

mID	ShortName	IndicatorType	AQIDescription
QS01	All Incidents Reported	int	
QS02	Serious	int	
QS03	Moderate & Above Harm	int	
QS04	Medication Related	int	
QS05	Number of duty of candour contacts	int	
QS06	Duty of candour contacts exceptions	int	
QS07	Complaint	int	
QS08	Compliment	int	
QS09	Concern	int	
QS10	Service to Service	int	
QS11	Adult Safeguarding Referrals	int	
QS12	Child Safeguarding Referrals	int	
QS13	% Trained Safeguarding for Children (L1)	percent	
QS14	% Trained Safeguarding for Children (L2)	percent	
QS15	% Trained Safeguarding for Adults (L1)	percent	
QS17	% FOI Request Compliance	percent	
QS18	% Compliance with Hand Hygiene	percent	
QS19	% Compliance with Premise	percent	
QS20	% Compliance with Vehicle	percent	
QS26	Moderate and Above Harm (Per 1K Incidents)	int	
QS24	Staff survey improvement question	int	(TBC, yearly)
QS21	Number of RIDDORs Submitted	int	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013

Glossary - Indicator Descriptions (Workforce)

NHS Yorkshire Ambulance Service NHS Trust

Workforce

mID	ShortName	IndicatorType	AQIDescription
WF36	Headcount in Post	int	Headcount of primary assignments
WF35	Special Leave	percent	Special Leave (eg: Carers leave, compassionate leave) as a percentage of FTE days in the period.
WF34	Fire Safety & Awareness - 1 Year	percent	Percentage of staff with an in date competency in Fire Safety & Awareness - 1 Year
WF33	Information Governance - 1 Year	percent	Percentage of staff with an in date competency in Information Governance - 1 Year
WF28	Safeguarding Adults Level 2 - 3 Years	percent	Percentage of staff with an in date competency in Safeguarding Adults Level 2 - 3 Years
WF24	Safeguarding Adults Level 1 - 3 Years	percent	Percentage of staff with an in date competency in Safeguarding Adults Level 1 - 3 Years
WF19	Vacancy Rate %	percent	Full Time Equivalent Staff required to fill the budgeted amount as a percentage
WF18	FTE in Post %	percent	Full Time Equivalent Staff in post, calculated as a percentage of the budgeted amount
WF17	Apprentice %	percent	The percentage of staff who are on an apprenticeship
WF16	Disabled %	percent	The percentage of staff who identify as being disabled
WF14	Stat & Mand Training (Face to Face)	percent	Percentage of staff with an in date competency for "Basic Life Support" , "Moving and Handling Patients" and "Conflict Resolution" as required by the competency requirements set in ESR
WF13	Stat & Mand Training (Safeguarding L2 +)	percent	Percentage of staff with an in date competency for "Safeguarding Children Level 2" , "Safeguarding Adults Level 2" and "Prevent WRAP" as required by the competency requirements set in ESR
WF12	Stat & Mand Training (Core) 3Y	percent	Percentage of staff with an in date competency for "Health Risk & Safety Awareness" , "Moving and Handling Loads" , "Infection Control" , "Safeguarding Children Level 1" , "Safeguarding Adults Level 1" , "Prevent Awareness" and "Equality, Diversity and Human Rights" as required by the competency requirements set in ESR
WF11	Stat & Mand Training (Fire & IG) 1Y	percent	Percentage of staff with an in date competency for both "Information Governance" and "Fire Safety & Awareness"
WF07	Sickness - Total % (T-5%)	percent	All Sickness as a percentage of FTE days in the period
WF05	PDR / Staff Appraisals % (T-90%)	percent	Percentage of staff with an in date Personal Development Review, also known as an Appraisal
WF04	Turnover (FTE) %	percent	The number of staff leaving (FTE) in the period relative to the average FTE in post for the period
WF02	BME %	percent	The percentage of staff who identify as belonging to a Black or Minority Ethnic background

Glossary - Indicator Descriptions (Clinical)

NHS Yorkshire Ambulance Service NHS Trust

Clinical

mID	ShortName	IndicatorType	Description
CLN39	Re-contacts - Conveyed (%)	percent	Proportion of patients contacting YAS within 72 hours of initial contact.
CLN37	Re-contacts - S&T (%)	percent	Proportion of patients contacting YAS within 72 hours of initial contact.
CLN35	Re-contacts - H&T (%)	percent	Proportion of patients contacting YAS within 72 hours of initial contact.
CLN32	Survival UTSTEIN - Patients Discharged Alive	int	Survival UTSTEIN - Of R4n, patients discharged from hospital alive.
CLN30	ROSC UTSTEIN %	percent	ROSC UTSTEIN - Proportion who had ROSC on arrival at hospital.
CLN28	ROSC UTSTEIN Patients	int	ROSC UTSTEIN - Patients with resuscitation commenced / continued by Ambulance Service.
CLN27	ePR Referrals (%)	percent	Proportion of ePR referrals made by YAS crews at scene.
CLN24	Re-contacts (%)	percent	Proportion of patients contacting YAS within 72 hours of initial contact.
CLN21	Call to Balloon Mins for STEMI Patients (90th Percentile)	int	MINAP - For M3n, 90th centile time from call to catheter insertion for angiography.
CLN20	Call to Balloon Mins for STEMI Patients (Mean)	int	MINAP - For M3n, mean average time from call to catheter insertion for angiography.
CLN18	Number of STEMI Patients	int	Number of patients in the MINAP dataset an initial diagnosis of myocardial infarction.
CLN17	Avg Time from call to hospital	int	SSNAP - Avg Time from call to hospital.
CLN15	Stroke %	percent	Proportion of adult patients with a pre-hospital impression of suspected stroke who received the appropriate best practice care bundle.
CLN12	Sepsis %	percent	Proportion of adult patients with a pre- hospital impression of suspected sepsis with a NEWs2 score of 7 and above who received the appropriate best practice care bundle
CLN09	STEMI %	percent	Proportion of patients with a pre-hospital clinical working impression of STEMI who received the appropriate best practice care bundle
CLN06	OHCAO Survival %	percent	Proportion of patients who survived to discharge or were alive in hospital after 30 days following an out of hospital cardiac arrest during which YAS continued or commenced resuscitation
CLN03	OHCAO ROSC %	percent	Proportion of patients who had return of spontaneous circulation upon hospital arrival following an out of hospital cardiac arrest during which YAS continued or commenced BLS/ALS

Glossary - Indicator Descriptions (Fleet and Estates)

NHS Yorkshire Ambulance Service NHS Trust

Fleet and Estates

mID	ShortName	IndicatorType	Description
FLE07	Service %	percent	Service level compliance
FLE06	Safety Check %	percent	Safety check compliance
FLE05	SLW %	percent	Service LOLER (Lifting Operations and Lifting Equipment Regulations) and weight test compliance
FLE04	Vehicle MOT %	percent	MOT compliance
FLE03	Vehicle Availability	percent	Availability of fleet across the trust
FLE02	Vehicle age +10	percent	Vehicles across the fleet of 10 years or more
FLE01	Vehicle age 7-10	percent	Vehicles across the fleet of 7 years or more
EST14	P6 Non Emergency - Complete within 4 weeks	percent	P6 Non Emergency - Complete within 4 weeks
EST13	P6 Non Emergency - Attend within 2 weeks	percent	P6 Non Emergency - Attend within 2 weeks
EST12	P2 Emergency – Complete (<24Hrs)	percent	P2 Emergency – Complete within 24 hrs compliance
EST11	P2 Emergency (4 HRS)	percent	P2 Emergency – attend within 4 hrs compliance
EST10	Planned Maintenance Complete	percent	Planned maintenance completion compliance
EST09	All calls (Completion) - average	percent	Average completion compliance across all calls
EST08	P4 Non Emergency – Complete (<14 Days)	percent	P4 Non Emergency completed within 14 working days compliance
EST07	P3 Non Emergency – Complete (<72rs)	percent	P3 Non Emergency completed within 72 hours compliance
EST06	P1 Emergency – Complete (<24Hrs)	percent	P1 Emergency completed within 24 hours compliance
EST05	Planned Maintenance Attendance	percent	Average attendance compliance across all calls
EST04	All calls (Attendance) - average	percent	All calls (Attendance) - average
EST03	P4 Non Emergency (<24Hrs)	percent	P4 Non Emergency attended within 2 working days compliance
EST02	P3 Non Emergency (<24Hrs)	percent	P3 Non Emergency attended within 24 hours compliance
EST01	P1 Emergency (2 HRS)	percent	P1 Emergency attended within 2 hours compliance