



**Board of Directors (held in Public)**  
**26 October 2023**  
**Chief Executive's Report**

**Item 1.8**

<b>Presented for:</b>	Information/assurance
<b>Accountable Director:</b>	Peter Reading, Interim Chief Executive
<b>Presented by:</b>	Peter Reading, Interim Chief Executive
<b>Author:</b>	Peter Reading, Interim Chief Executive
<b>Previous Committees:</b>	None
<b>Legal / Regulatory:</b>	No

<b>Key Priorities/Goals</b>	All
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<b>Strategic Ambition</b>	(✓)	<b>BAF Strategic Risk</b>
1. Patients and communities experience fully joined-up care responsive to their needs	✓	All
2. Our people feel empowered, valued and engaged to perform at their best	✓	All
3. We achieve excellence in everything we do	✓	All
4. We use resources wisely to invest in and sustain services	✓	All

<b>Key points</b>	
To brief Board members on some important matters for the Trust, some of which may be covered in more detail elsewhere in the Public or Private meetings of the Board.	For information

**Board of Directors (held in Public)**  
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**Report of the Interim Chief Executive**

**1. Summary**

- 1.1 This paper briefs Board members on some important matters for the Trust, some of which may be covered in more detail elsewhere in the Public or Private meetings of the Board. Board members are invited to discuss any of these items, as they choose, and to note them for information.

**2. Operational Update**

- 2.1 The overall demand for our A&E Operations service to early October is 9% higher when compared to the same period last year and is 16% higher for category 1 calls (the most serious conditions).
- 2.2 Our performance in category 1 response is at 8.5 minutes, with an average response time of 15 minutes. Our response to category 2 calls, which have a target response time of 30 minutes this year, are currently at an average of 32 minutes and 24 seconds for the whole Trust but vary significantly within each ICB area. For West Yorkshire it is 25 minutes; for South Yorkshire it is 27 minutes; and for Humber and North Yorkshire it is 49 minutes.
- 2.3 For 999 call answering in our Emergency Operations Centre, the average time was 17 seconds in July and 12 seconds in August which is an improvement on 27 seconds in June.
- 2.4 Hospital patient handover delays have been reducing, but August saw an increase due to some pressures back in the wider system.
- 2.5 In our Integrated Urgent Care/NHS 111 service, demand remains stable and 70% of calls are answered within one minute.
- 2.6 Our non-emergency Patient Transport Service (PTS) has remained busy and continues to perform well.

**3. Operating Model**

- 3.1 Following Phase 3 Consultation, several appointments have been made to the posts of Exec Director of Quality and Chief Paramedic; Director of Corporate Services and Trust Secretary and Director of Strategy and Performance. Interviews have been held for the Deputy CEO, and Dr Julian Mark has returned from his secondment at NHSE to his substantive post as Executive Medical Director.

#### **4. A first for the country in mental health care**

- 4.1 We have introduced two new advanced paramedic roles specialising in mental health - a first for the country. The development is part of our Mental Health Programme, which focuses on new and innovative ways to support patients with mental health problems.
- 4.2 Lesley Butterworth, Lead Nurse Urgent Care, said: "We are delighted to implement this latest development in our programme to support people in mental health crisis. These exciting new advanced paramedic roles come ahead of recruitment to 15 specialist paramedic roles - a team that will help us provide the care and support people need, however they access our services. They will also work closely with colleagues in our emergency ambulance service, and 999 and NHS 111 call centres, providing them with clinical advice and support."

#### **5. New system to ensure rapid response**

- 5.1 A new auto-allocation process for our Community First Responders (CFRs) has now been successfully implemented throughout Yorkshire. CFRs are trained to attend certain types of emergencies within their local communities, often providing life-saving treatment and support to patients before our ambulance crew arrives. The new auto-allocation system means that volunteers now receive information about our most serious category 1 patients at the same time as an ambulance is dispatched to the same emergency.
- 5.2 Volunteer Kerry Redmond was 'auto allocated' to an incident. Kerry received the details at the same time as two ambulances were dispatched. Living closer to the address, Kerry was first on scene and identified that the patient was unconscious and not breathing. Kerry immediately began resuscitation and, with the help of her defibrillator, was successful in restarting the patient's heart. "The results after implementing auto-allocation have shown a 50% increase in the number of volunteer attendances to category 1 emergencies. It has also led to volunteers arriving a minute or two earlier to the patient to provide lifesaving skills and reassurance," said Neil Marsay, Community Defibrillation Officer.

#### **6. Advanced Life Support Training Accreditation**

- 6.1 We are delighted to announce that YAS is one of the first ambulance services in the UK to become a fully accredited Resuscitation Council (UK) Advanced Life Support (ALS) training centre, and planning is underway to deliver our first ALS provider course this autumn. Mark Millins, Associate Director Paramedic Practice, said: "Providing RC(UK) ALS courses in-house is a great way to focus on developing the skills of our frontline A&E colleagues across the Trust and inevitably has a positive impact on the skill set of our clinicians and the care they are able to provide to patients."

#### **7. Keeping people #Safe in the back**

- 7.1 We're proud to be part of The Association of Ambulance Chief Executives (AACE) new #Safe in the Back campaign, to improve safety inside ambulances. The campaign is designed to highlight the serious implications of not wearing seatbelts or harnessing patients properly in the back of ambulance vehicles. On average, at

least one road traffic collision that happens each day will involve an ambulance – resulting in minor bumps and scrapes, to major accidents including fatalities.

## **8. Launch of YAS Research Institute**

- 8.1 We are pleased to report that on 3 October 2023, we launched the YAS Research Institute. This will enable the Trust not only to continue our involvement in research with a variety of partners, but to also position us to deliver and carry out research that meets the needs, priorities and realities of everyday business at YAS. By working differently with our partners in a more collaborative way, we aim to use research to benefit the population we serve and improve the health and wellbeing of the Yorkshire region.
- 8.2 We have a great track record of undertaking and supporting research and continue to play an integral role in pushing the boundaries of the healthcare system across the region and beyond. The Research Institute builds on our well-established and successful research activities that already take place across the Trust and it will allow us to build our contribution to world-class research that will improve future health and care practice.

## **9. Category 2 Segmentation Implementation**

- 9.1 The Trust has implemented the segmentation of category 2 calls within our Emergency Operations Centre, as required by NHS England by 30 September 2023.
- 9.2 With increased demand for ambulance services and extended response time delays, the clinical oversight of these ‘stacking’ category 2 calls comprises the combination of rapid clinical navigation of those patients not identified as requiring immediate dispatch in the non-clinician element of the triage process, and clinical validation of those patients who are suitable for an alternative disposition following clinical assessment which is most appropriate for their needs. Both navigation and validation may include escalating an incident to a higher responding priority or identifying that they are suitable for an alternative to an ambulance dispatch.
- 9.3 In order to ensure the focused immediate dispatch to those patients who have a potential time dependant element to their condition/problem, a set of nationally agreed codes have been identified as requiring immediate dispatch and all other category 2 codes can be subject to clinical navigation.
- 9.4 There are no changes to current practices within the Trust, as all category 2 calls remain on our dispatch stack and our systems (Computer Aided Dispatch, CAD) already has the functionality to meet the requirements and we have clinical navigators operating in our EOC.

## **10. Launch of Patient Safety Incident Response Framework, PSIRF**

- 10.1 On 29 September, the Trust has launched the new Patient Safety Incident Response Framework. This is a new national approach to patient safety and marks a considerable change in the way we deal with patient safety incidents (PSIs).
- 10.2 The PSIRF replaces the Serious Incident Framework (SIF) and makes no distinction between ‘patient safety incidents’ and ‘Serious Incidents’. As such it removes the ‘Serious Incidents’ classification and the threshold for it. Instead, the PSIRF promotes a proportionate approach to responding to patient safety incidents

by ensuring resources allocated to learning are balanced with those needed to deliver improvement.

- 10.3 It supports the key principles of a patient safety culture, focusing on understanding how incidents happen, rather than apportioning blame. It supports effective learning, which will in turn lead to safety improvements for our patients. We already use 'Just Culture' principles across our investigation functions, this will continue and be enhanced as we embed PSIRF. It will help us achieve and deliver safer care for our patients, a better-quality experience for patients and families and safer systems and environments for colleagues.

## **11. Launch of the NHS Staff Survey**

- 11.1 The NHS Staff Survey 2023 went live on 2 October and is open until 24 November and we have been emphasising to staff that it is more important than ever to share your feedback about your experience of working at the Trust over the last year.
- 11.2 The survey questions are once again aligned to seven 'themes' in the NHS People Promise. Our frontline staff have been provided with time to complete the survey, standing them down for 15 minutes to complete it. For the first time, staff will have a chance of winning a range of prizes for successfully completing the survey.
- 11.3 As part of our operational objectives this year, we have a target of 50% response rate and after 2 weeks our response rate was 17% (the equivalent rate at week two last year was 14%). We continue to promote completion of the survey and communicate the differences made as a result of feedback last year.

## **12. Launch of our Sexual Safety charter**

- 12.1 This week, we are launching our own Sexual Safety Charter which sets out the standards of behaviour we expect from all colleagues. Sexual safety in public services including ambulance services is a high-profile issue with an increase in concerns being reported across the country. As a large employer with a diverse workforce, and we recognise the seriousness of this issue and the absolute necessity to address sexual misconduct in the workplace.
- 12.2 Following the launch by NHS England of its first ever sexual safety charter in collaboration with key partners in September, we are a signatory to this charter and will not tolerate any unwanted, inappropriate and/or harmful sexual behaviours within the workplace.
- 12.3 October has also seen three new publications launched by the Association of Ambulance Chief Executives (AACE) and the Office of the Chief Allied Health Professions Officer (CAHPO), aimed at reducing misogyny and improving sexual safety in the ambulance service. These publications include the findings of a research project looking at the prevalence of sexual harassment in the ambulance sector. As part of these publications, the Trust is signed up to a consensus statement from ambulance leaders, which sets out a shared commitment to change and a series of recommendations to reduce and prevent sexual harassment in the sector.

### **13. Freedom to Speak Up month**

- 13.1 As October is 'Speak Up' month, we are taking the opportunity to raise awareness of how much the Trust values speaking up and how we see Freedom to Speak Up as fundamental to how we work and that we want to be part of making speaking up business as usual across healthcare.
- 13.2 The theme for 'Speak Up' month in 2023 is 'Breaking Barriers'. We have focused on identifying the obstacles which people feel stop them from speaking up and our Freedom to Speak Up Guardians, Sam Bentley and Kirsty Holt have been out across the Trust, visiting stations, talking to staff and volunteers and also joined our monthly Teambrief live to talk about their roles. The Freedom to Speak Up ambassadors have also been holding drop-in sessions across the Trust during October.

### **14. Restart a Heart tenth anniversary**

- 14.1 We celebrated ten years of Restart a Heart on 16 October with another hugely successful day. With 700 of our staff and volunteers, alongside other partners, we were able to teach around 35,000 students CPR at 166 secondary schools across the region.
- 14.2 The Restart a Heart campaign featured across the local and regional television and radio, with some incredible case studies of those who....
- 14.3 There has also been extensive coverage on social media which has helped to push out our message about the importance of bystander CPR.
- 14.4 We're proud to be part of The Association of Ambulance Chief Executives (AACE) new #Safe in the Back campaign, to improve safety inside ambulances. The campaign is designed to highlight the serious implications of not wearing seatbelts or harnessing patients properly in the back of ambulance vehicles. On average, at least one road traffic collision that happens each day will involve an ambulance – resulting in minor bumps and scrapes, to major accidents including fatalities.

### **15. Multi Agency Exercise – Leeds Arena**

- 15.1 On the 12 October YAS participated with the colleagues from police fire and rescue, and other relevant agencies, in an exercise testing preparedness for a possible major incident at a major public event.

### **16. Recommendation**

- 16.1 It is recommended that the Board:
- Note the update from the Chief Executive's Report

### **17. Supporting Information**

- 17.1 Not applicable