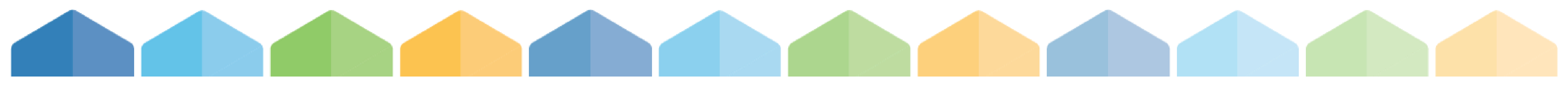# Integrated Performance Report

December 2023

Published 23 January 2024

Icon Guide

Exceptions, Variation and Assurance

Statistical Control Charts (SPC) are used to define variation and targets to provide assurance. Variation that is deemed outside the defined lower and upper limit will be shown as a red dot. Where available variation is defined using weekly data and if its not available monthly charts have been used. Icons are used following best practice from NHS Digital and adapted to YAS. The definitions for these can be found below.

Variation			Assurance		
Common cause No significant change	Special cause of concerning nature or **higher** pressure due to (H)igh or (L)ow values	Special cause of improving nature or **lower** pressure due to (H)igh or (L)ow values	Variation indicates inconsistently passing or falling short of target	Variation indicates consistently (F)alling short of target	Variation indicates consistently (P)assing target

Variation icons: Orange indicates concerning **special cause variation** requiring action.
Blue indicates where improvement appears to lie.
Grey indicates no significant change (**common cause variation**).

Assurance icons: Orange indicates that you would consistently expect to **miss** a target.
Blue indicates that you would consistently expect to **achieve** a target.
Grey indicates that sometimes the target will be achieved and sometimes it will not, due to random variation. In a RAG report, this indicator would flip between red and green.

Table of Contents

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

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

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.

NHS Yorkshire Ambulance Service NHS Trust

December 2023 TEG Portfolio Delivery Dashboard

porting Status Date: 29/12/23

Overall YAS Change Portfolio Status - AMBER

Key: PJ - Project PG - Program B-BAU

Project RAG Status: | 3 (0) RED Projects | 10 (-1) AMBER Projects | 7 (0) GREEN Projects | 3 (0) PAUSED/STOPPED | 7 (+2) Completed Projects | Total Entries = 30

Workforce — Our people

Our People (5) - Portfolio Status - AMBER

| 0 RED | 2 Amber | 3 Green | Pause/Stop | Complete |

Exec Sponsor - Mandy Wilcock/Dave Green

SRO - Nick Smith
International Recruitment
Extended to cover additional round of recruitment. Then Closeout as BAU
OVERALL STATUS — Deliver → Benefit → PJ

SRO - Dawn Adams
Occupational Health Mode
OVERALL STATUS — Deliver → Benefit → PJ

SRO - Mandy Wilcock
YAS Together (Year 1)
OVERALL STATUS — Deliver → Benefit → PJ

SRO - Mandy Wilcock
Operating Model Programme
OVERALL STATUS — Deliver → Benefit → PG

SRO - Clare Ashby
Bodyworn Camera Pilot
OVERALL STATUS — Deliver → Benefit → PJ

Patient Centred — Our patients

Our Patients (13) - Portfolio Status - AMBER

| 1 RED | 6 Amber | 1 Green | Pause/Stop | Complete |

Exec Sponsor - Nick Smith

SRO - Jackie Cole
A&E and EOC Programmes
OVERALL STATUS — Deliver → Benefit → PJ

Rotational Paramedics
Closure Report Being
Closure Report Draft PJ

Enhancement to Career Pathway
Closure Report Draft PJ

Phase 2 – Post Registration Paramedic Career Pathway
RAG Closed 'Subject

EOC Bus Continuity Imps (Fairfields)
Closure Report Draft PJ

SRO - Lesley Butterworth
Mental Health Programme
OVERALL STATUS — Deliver → Benefit → PG

SRO - Chris Dexter
NEPTS Eligibility Implementation
OVERALL STATUS — Deliver → Benefit → PG

SRO - David Beet
IUC Improvement Programme Phs 1
OVERALL STATUS — Deliver → Benefit → PG
 1. Rota Review — Delivery → Benefits → PJ
 2. Clinical Career Pathway IUC — Delivery → Benefits → PJ
 3. Marketing & Recruitment Campaign — Delivery → Benefits → PJ
 4. IUC Leadership Apprenticeships — Delivery → Benefits → PJ
 5. IUC Uniforms — Delivery → Benefits → PJ

SRO - Liz Eastwood
NHS Charities Together-V
OVERALL STATUS — Deliver → Benefit → PJ

Yorkshire Air Ambulance Review
OVERALL STATUS — Deliver → Benefit → PG

Mass Communications Tool
To inform GATE 2 Business
OVERALL STATUS — Deliver → Benefit → PJ

SRO - Dr Steven Dykes
Priority Patient Pathways & Safer Right Care
OVERALL STATUS — Deliver → Benefit → PJ

Stroke Video Triage Pilot
Completed Sept 23
Waiting Closure Sign From TEG/TEG+ PJ

Agile Operations — Our places

Our Places (8) - Portfolio Status - RED

| 2 RED | 1 Amber | 1 Green | Pause/Stop | Complete |

Exec Sponsor - Kathryn Vause

SRO - Glen Adams
Trust Demand Wforce & Accom (ORH)
Closed - Now Part of PJ

Logistics Hub
OVERALL STATUS — Deliver | . Benefit → PG

Asset Management System
OVERALL STATUS — Deliver → Benefit → PJ

Pre-Packed POM Pouches
OVERALL STATUS — Deliver → Benefit → PJ

Hub & Spoke and AVP Programme
(Planning & Business Cases Only)
OVERALL STATUS — Deliver → Benefit → PJ

Scarborough Cluster AVP Station
PAUSE — Deliver → Benefit → PJ

Hull Hub & Spoke
Project Paused
PAUSE — PAUSE → PAUSE → PJ

Hybrid / Agile Working
(Phases 1 & 2)
Closure Report Draft Awaiting SRO Signo

Digital Enablers

Digital Enablers (2) - Portfolio Status - AMBER

| 0 RED | 1 Amber | 1 Green | Pause/Stop | Completed |

TEG Sponsor - Simon Marsh

SRO - Simon Marsh
Clinical Systems Developm
OVERALL STATUS — Deliver → Benefit PG

ESMCP-Mobile Data Vehicle Solution
OVERALL STATUS — Deliver → Benefit → PJ

Northern Ambulance Alliance

NAA (2) - Portfolio Status - AMBER

| 0 RED | 0 Amber | 1 Green | Pause/Stop | Completed |

Exec Sponsor - NAA Board

SRO - Graham Norton
Integrated CAD
PROJECT STOPPED
Closure Report Recei PJ

Robotic Process Automation
OVERALL STATUS — Deliver → Benefit → PG

New Projects Pending
GRS Replacement (GR165) – Due to commence reporting in February 24
EOC Improvement – Due to commence reporting in February 24
Pathways - Due to go to Board in February 24 for approval
PTS Fleet Replacement – Due to commence reporting in February 24

Other Projects 'In Closure'
FY22/23 Project: Supporting Fallers Outside by CFRs (Clo
FY22/23 Project: E-Expenses Software (Gate 4 TMG 21 J

999 IPR Key Exceptions - December 23

Indicator	Target	Actual	Variance	Assurance
999 - Answer Mean		00:00:07	⟳	
999 - Answer 95th Percentile		00:01:01	⟳	
999 - AHT		385	(H)	
999 - Calls Ans in 5 sec	95.0%	84.3%	⟳	(F)
999 - C1 90th (T <15Mins)	00:15:00	00:15:19	(L)	(F)
999 - C2 Mean (T <18mins)	00:18:00	00:45:56	(H)	(F)
999 - C2 90th (T <40Mins)	00:40:00	01:44:33	(H)	(F)
999 - C3 Mean (T - <1Hr)	01:00:00	02:22:02	(H)	(F)
999 - C3 90th (T -<2Hrs)	02:00:00	05:26:41	(H)	(F)
999 - C1 Responses > 15 Mins		1,231	⟳	
999 - C2 Responses > 80 Mins		7,147	(H)	
999 - Job Cycle Time		01:57:57	(H)	
999 - Avg Hospital Turnaround	00:30:00	00:54:36	(H)	(F)
999 - Avg Hospital Handover	00:15:00	00:32:26	(H)	(F)
999 - Avg Hospital Crew Clear	00:15:00	00:22:00	⟳	(F)
999 - C1 Mean (T <7Mins)	00:07:00	00:08:46	(L)	(F)
999 - Total lost handover time		8,322	(H)	
999 - Crew clear over 30 mins %		24.2%	⟳	
999 - C1%		17.2%	(H)	
999 - C2%		63.3%	⟳	

Exceptions - Comments (Director Responsible - Nick Smith)

Call Answer - The mean call answer was 7 seconds for December, a decrease from November of 1 second. The median remained the same at zero seconds while the 90th and 95th and 99th percentiles all decreased. The 90th decreased from 38 seconds in November to 31 seconds in December, 95th decreased from 67 seconds to 61 seconds and 99th decreased from 98 seconds to 96 seconds. This indicates that there was an overall decrease in the call answer times for December as well as fewer calls waiting to be answered for very long periods of time at the tail end.

Cat 1-4 Performance - No national targets were achieved for December and performance times worsened across all categories, although Cat1 performance times were similar to what they were in November. The mean performance time for Cat1 worsened from November by 2 seconds and the 90th percentile worsened by 18 seconds. The mean performance time for Cat2 worsened from November by 8 minutes 42 seconds and the 90th percentile worsened by 21 minutes 14 seconds. Abstractions were 1.8% lower than forecast for December, falling 1.2% from November. Weekly Net staff hours have risen compared to November by over 1,000 hours per week. Overall availability decreased by 2.7% from November. Compared to December 2022, abstractions are down by 2.7% and availability is up by 10.3%.

Call Acuity - The proportion of Cat1 and Cat2 incidents was 80.5% in December (17.2% Cat1, 63.3% Cat2) after a 2.2% increase compared to November (1.4% increase in Cat1 and 0.8% increase in Cat2). Comparing against December for the previous year, Cat1 proportion decreased by 1.9% and Cat2 proportion decreased by 0.0%.

Responses Tail (C1 and C2) - The number of Cat1 responses greater than the 90th percentile target increased in December, with 1,231 responses over this target. This is 237 (23.8%) more compared to November. The number for last month was 51.4% less compared to December 2022. The number of Cat2 responses greater than 2x 90th percentile target increased from November by 2,843 responses (66.1%). This is a 42.7% decrease from December 2022.

Job cycle time - Overall, the average job cycle time increased by 5 minutes 39 seconds from November and was 13 minutes 13 seconds less than December 2022.

Hospital - From October, the way handover times are reported changed and following the new national guidance the average handover time has increased across the Trust. Turnaround and crew clear times remain unchanged by the new guidance. Last month the average handover time increased by 3 minutes 41 seconds and overall turnaround time increased by 7 minutes 10 seconds. The number of conveyances to ED was 5.6% higher than in November and 13.5% higher than in December 2022.

Demand- On scene response demand was 0.1% below forecasted figures for December and was 7.0% more than in November. All response demand (HT + STR + STC) was 12.8% higher than November and 19.8% higher than December 2022. This is in part due to changes made in December to the recording of Hear & Treat incidents, whereby more Cat5 incidents are transferred to IUC and closed as H&T when they would previously have been closed as no response and not be counted as an incident.

Outcomes - Comparing incident outcomes proportions within 999 for December 2023 against December 2022, the proportion of hear & treat increased by 5.7%, see treat & refer decreased by 2.4% and see treat & convey decreased by 3.3%. The proportion of incidents with conveyance to ED decreased by 3.0% from December 2022 and the proportion of incidents conveyed to non-ED decreased by 0.4%. Please note that changes mentioned above around the recording of H&T incidents means that there has been a relative increase in the proportion of H&T incidents and a decrease in on scene responses because of this.

IUC IPR Key Indicators - December 23

Indicator	Target	Actual	Variance	Assurance
IUC - Calls Answered		152,783	⟳	
IUC - Answered vs. Last Month %		21.9%		
IUC - Answered vs. Last Year %		5.7%		
IUC - Calls Triaged		146,665		
IUC - Calls Abandoned %	3.0%	8.6%	⟳	F
IUC - Answer Mean	00:00:20	00:01:50	⟳	F
IUC - Answered in 60 Secs %	90.0%	66.2%	⟳	F
IUC - Callback in 1 Hour %	60.0%	44.3%	⟳	F
IUC - ED Validations %	50.0%	41.4%	⟳	F
IUC - 999 Validations %	75.0%	99.6%	⟳	P
IUC - ED %		14.5%		
IUC - ED Outcome to A&E %		74.6%		
IUC - ED Outcome to UTC %		7.9%		
IUC - Ambulance %		12.5%		

IUC Exceptions - Comments (Director Responsible - Nick Smith)

YAS received 167,142 calls in December, 15.2% below the annual business plan baseline demand. 152,783 (91.4%) of these were answered, 0.8% below last month and 20.0% above the same month last year.

Due to continued high numbers of new starters going through the training process and experienced staff assisting with coaching, call performance metrics are being impacted and not at target levels as expected. 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 decreased to 66.2% from 72.1% in December. Average speed to answer has increased by 33 seconds to 1 minute 50 seconds compared with 1 minute 17 seconds last month. Abandonment rate increased to 8.6% from 7.8% last month.

The proportion of clinician call backs made within 1 hour decreased to 44.3% from 49.5% last month. This is 15.7% below the national target of 60%. Core clinical advice decreased to 18.5% from 22.6% last month. 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.

The national KPI for ambulance validations monitors performance against outcomes validated within 30 minutes, rather than just all outcomes validated, and the target for this is 75% of outcomes. However, YAS is still measured against a local target of 95% of outcomes validated overall. Against the National KPI, performance was 91.9% in December, whilst performance for overall validations was 99.6%, with 13,837 cases validated overall.

ED validation performance decreased to 41.4% from 53.4% last month. The target for this KPI is 50%. This figure being lower than the target is due in part to ED validation services being closed on DoS (in the out of hours periods) for several periods of time during the month as a result of clinical demand and capacity pressures to the service. ED validation 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 this year.

Amongst booking KPIs, bookings to UTCs decreased to 43.1% from 44.2% last month and ED bookings decreased to 25.6% from 26.5%. Referrals to IUC Treatments Centres have stayed consistent, however an issue with the booking system is causing the bookings figure for this KPI to appear very low.

PTS IPR Key Indicators - December 23

Indicator	Target	Actual	Variance	Assurance
PTS - Answered < 180 Secs	90.0%	76.7%	(icon)	(F)
PTS - Arrive at Appointment Time	90.0%	85.9%	(icon)	(F)
PTS - Journeys < 120Mins	90.0%	99.0%	(icon)	(P)
PTS - Same Month Last Year		8.0%		
PTS - Increase - Previous Month		-8.5%		
PTS - Demand (Journeys)		73,822	(icon)	(?)

PTS Exceptions - Comments (Director Responsible - Nick Smith)

PTS Total Activity for December was 73,822 in December. Demand continued to increase following November's high demand up until w.c 18th December, however demand during Christmas week was significantly lower, meaning demand for the month as a whole was 8.5% lower than November. This is 8.0% above the same month last year however, equivalent to c5,500 extra journeys and continuing the trend of increased demand in recent months. Delivered journeys were 2.0% above the annual business plan.

Focus continues on the 120 Min Discharge KPI and patient flow.

The average Patients Per Vehicle was 1.27 during December; -0.01 on the previous month. Private provider hours have seen an increase in recent months, with another slight increase in December (+0.5% on November). KPI 3 and KPI 4 target measure(s) have been aligned with the South Yorkshire contract from May and performance has increased since then. In December, KPI 4 was a positive exception for the third consecutive month despite a 2.5% decrease at 85.1%, which is 5.7% below target. Note that performance outside of contractual KPI does provide context and assurance around discharge and arrival for appointment time.

Call volume saw a decrease of 13.5% on the previous month, however was 16.6% above last December, equivalent to c5,100 additional calls offered. Telephony performance saw a significant increase (+23.1%) once again: 76.7% for the month of December. Current modelling demonstrates that Reservations were in line with requirement for the month as a whole, however looking by week, w.c 4th and w.c 11th of December were under requirement, whereas the following 2 weeks were over requirement. Recent recruitment and improvements in Call Handler Wrap time seems to have had a positive effect as this was the highest monthly telephony performance since January 2022.

Workforce Summary

NHS Yorkshire Ambulance Service NHS Trust

Key KPIs

Name	Dec 22	Nov 23	Dec 23
Turnover (FTE) %	12.0%	10.3%	10.4%
Vacancy Rate %	13.2%	13.3%	13.1%
Apprentice %	9.5%	9.9%	9.8%
BME %	6.0%	6.8%	6.8%
Disabled %	5.1%	7.2%	7.2%
Sickness - Total % (T-5%)	8.9%	6.5%	7.7%
PDR / Staff Appraisals % (T-90%)	69.2%	72.1%	72.7%
Stat & Mand Training (Fire & IG) 1Y	88.0%	95.2%	95.1%
Stat & Mand Training (Core) 3Y	91.3%	96.1%	96.5%
Stat & Mand Training (Face to Face)	80.7%	88.2%	88.2%
Stat & Mand Training (Safeguarding L2 +)	94.6%	95.4%	95.5%

Assurance: All data displayed has been checked and verified

YAS Commentary

FTE, Turnover, Vacancies and BME - The Turnover and Vacancy Rate have remained stable compared to November 2023; whilst the turnover has reduced by 1.6 percentage points compared with 12 months ago, vacancy rates have remained high but stable. Both vacancies and turnover remain high for IUC with 38.1% and 30.7% respectively (Note: IUC figures are for those employed staff leaving the Trust only). A business case for change in IUC has been approved with staff consultation pending. The YAS Together programme continues to progress with the aim of addressing some cultural concerns. The numbers of BME and staff living with disabilities is steadily increasing. Note: The vacancy rate shown is based on the budget position against current FTE establishment with some vacancies being covered by planned overtime or bank.

Sickness – Sickness has increased from the previous month by 1.2 percentage points from 6.5% to 7.7%. A sub-group of the Operational Efficiency Group is working to actively reduce absence through a review of absence management processes, reasonable workplace adjustments, MSK/injuries at work. The People & Culture Group receives updates on this work. The new Supporting Attendance policy has been approved and is to be implemented in the new year.

PDR / Appraisals – The overall compliance rate has increased marginally compared to November 2023 and is 4.6pp higher than December 2022. PTS remains the highest performing area (77.9%) albeit is a decreasing trend, with Other improving by 7pp (mainly P&OD). Targeted support is being provided to areas with lower compliance in addition to the Trust-wide update briefings and workshops on how to conduct quality appraisals and career conversations. A monthly email to all Managers highlights use of the Compliance Dashboard, encouraging data cleanse and setting clear 90% compliance targets for appraisal completion and training.

Statutory and Mandatory Training – At Trust level, 3 out of 4 training measures are compliant (90%+). IUC, PTS and Other are all compliant (green) for all categories. The year 2 target on the 3-year recovery plan for face-to-face training has been met, with compliance rates remaining static as one-day Refresher courses cancelled in support of the December Initiative. Managers continue to receive monthly Compliance Dashboard updates with key messages regarding priorities for action, supported by local Essential Learning Champions.

Sickness Benchmark for Last Month

	IUC	EOC	PTS	Trust	A&E	Other
	13.2%	9.9%	9.1%	7.7%	6.9%	5.2%

PDR Benchmark for Last Month

	PTS	A&E	IUC	Trust	Other	EOC
	77.9%	74.5%	73.9%	72.7%	66.2%	61.4%

Sickness

Legend: ● Sickness - Long Term ● Sickness - Short Term

(Chart shows monthly sickness Nov 21 through Dec 23)

PDR - Target 90%

(Line chart): 51.5%, 51.3%, 48.7%, 53.1%, 59.7%, 66.5%, 69.4%, 72.4%, 71.5%, 71.4%, 72.0%, 73.1%, 72.7%
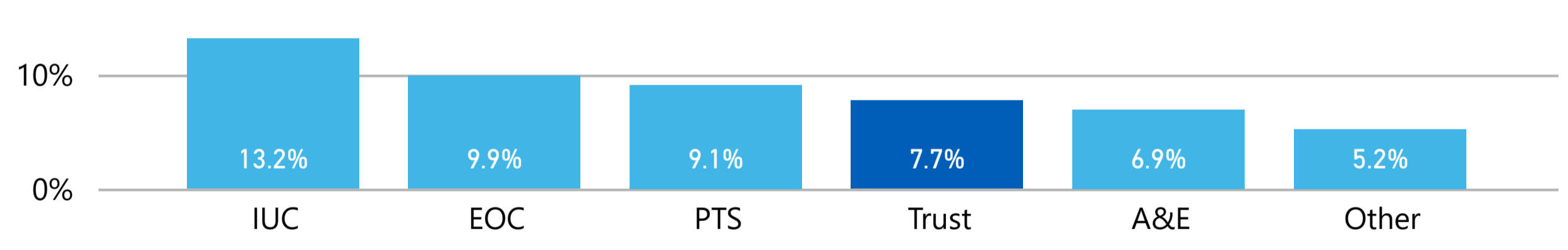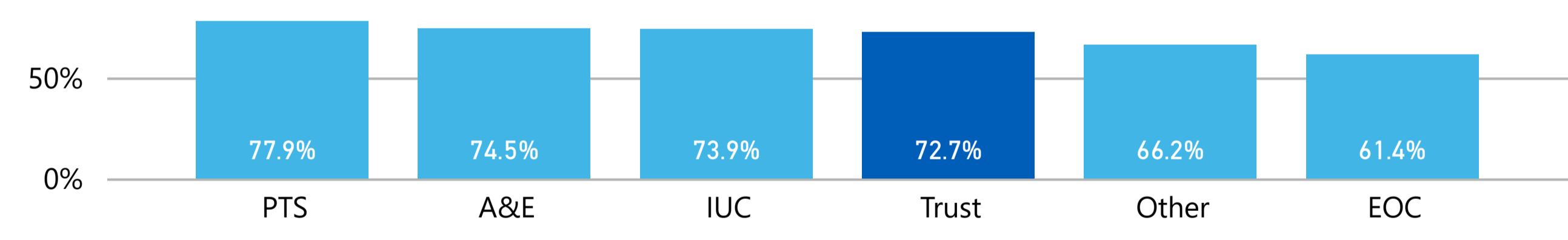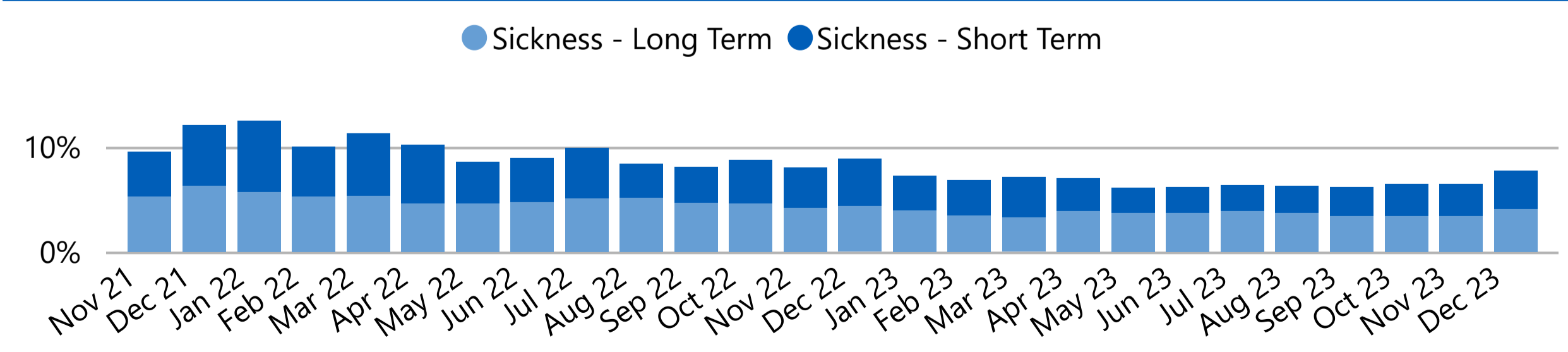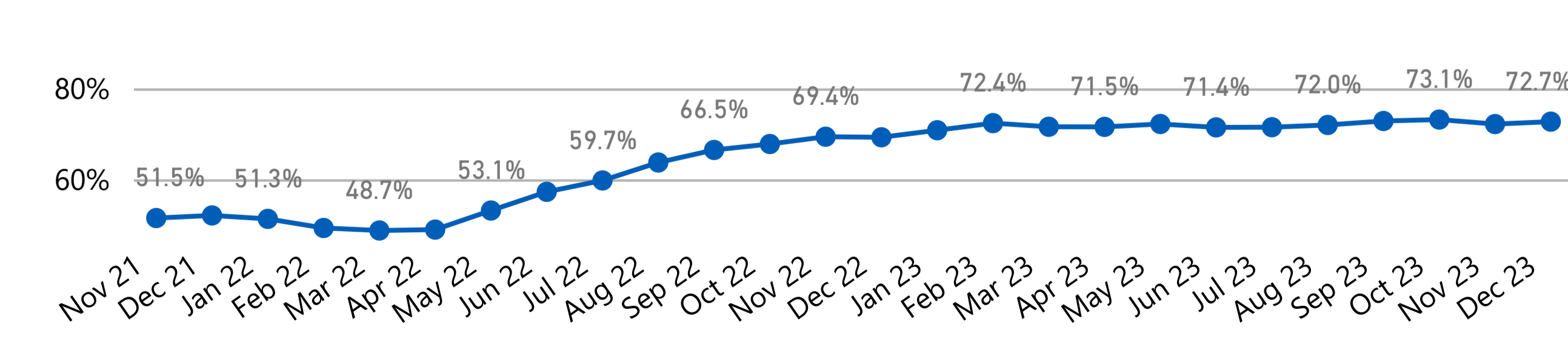
YAS Finance Summary (Director Responsible Kathryn Vause) - December 23

Overview - Unaudited Position

Overall

The Trust has a year end surplus position at month 9 of £6.4m as shown below. This position is as a result of slippage in pay vacancies and phasing into the later part of the year.

Capital

The expenditure is lower than plan due in the main to delays on Fleet DCA deliveries and the recovery of VAT re 22//23 Major refurbs of EOC & Bradford AS together with some dropped 22/23 accruals no longer required.

Cash

As at the end of December, the Trust had £68.7m cash at bank. (£61.9m at the end of 22/23).

Risk Rating

There is currently no risk rating measure reporting for 2023/24.

Full Year Position (£000s)

Name ▼	YTD Plan	YTD Actual	YTD Plan v Actual
Surplus/ (Deficit)	£0	£6,382	£6,382
Cash	£67,750	£68,668	£918
Capital	£8,184	£4,533	-£3,651

Monthly View (£000s)

Indicator Name ▼	2023-06	2023-07	2023-08	2023-09	2023-10	2023-11	2023-12
Surplus/ (Deficit)	£0	£485	£6,015	£800	£1,200	-£1,605	-£513
Cash	£76,347	£75,413	£77,377	£78,100	£80,280	£79,769	£68,668
Capital	£258	£0	£175	£76	£574	£2,873	£368

Patient Demand Summary

NHS Yorkshire Ambulance Service NHS Trust

Demand Summary

Indicator	Dec 22	Nov 23	Dec 23
999 - Incidents (HT+STR+STC)	64,527	68,538	77,326
999 - Calls Answered	99,733	85,039	97,819
IUC - Calls Answered	144,537	125,338	152,783
IUC - Calls Answered vs. Ceiling %	-23.5%	-20.8%	-24.0%
PTS - Demand (Journeys)	68,336	80,702	73,822
PTS - Increase - Previous Month	-13.4%	3.8%	-8.5%
PTS - Same Month Last Year	-5.1%	2.3%	8.0%
PTS - Calls Answered	26,559	33,893	31,958

Commentary

999 - On scene response demand was 0.1% below forecasted figures for December and was 7.0% more than in November. All response demand (HT + STR + STC) was 12.8% higher than November and 19.8% higher than December 2022. This is in part due to changes made in December to the recording of Hear & Treat incidents, whereby more Cat5 incidents are transferred to IUC and closed as H&T when they would previously have been closed as no response and not be counted as an incident.

IUC - YAS received 167,142 calls in December, 15.2% below the annual business plan baseline demand. 152,783 (91.4%) of these were answered, 0.8% below last month and 20.0% above the same month last year.

PTS - PTS Total Activity for December was 73,822 in December. Demand continued to increase following November's high demand up until w.c 18th December, however demand during Christmas week was significantly lower, meaning demand for the month as a whole was 8.5% lower than November. This is 8.0% above the same month last year however, equivalent to c5,500 extra journeys and continuing the trend of increased demand in recent months. Delivered journeys were 2.0% above the annual business plan.

Overall Calls and Demand

Figure ● 999 - Total Calls via Telephony (AQI) ● 999 - Incidents (HT+STR+STC) ● 999 - Calls Answered ● IUC - Calls Answered ● PTS - Demand (Journeys) ● PTS - Calls Answered
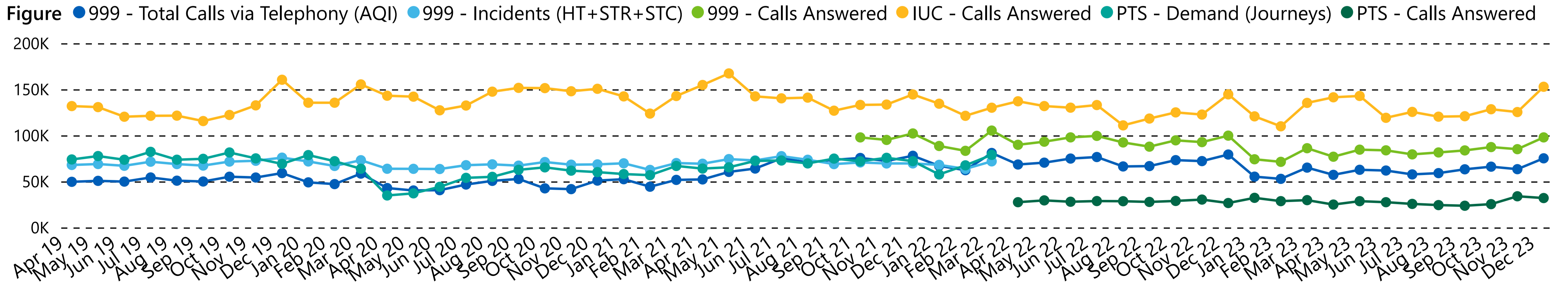
999 and IUC Historic Demand

999 and IUC call demand broken down by calls forecast, calls offered and calls abandoned.

NHS
Yorkshire
Ambulance Service
NHS Trust

999 Historic Call Demand

- - - Calls Forecast ——— Calls Offered ——— Calls Abandoned
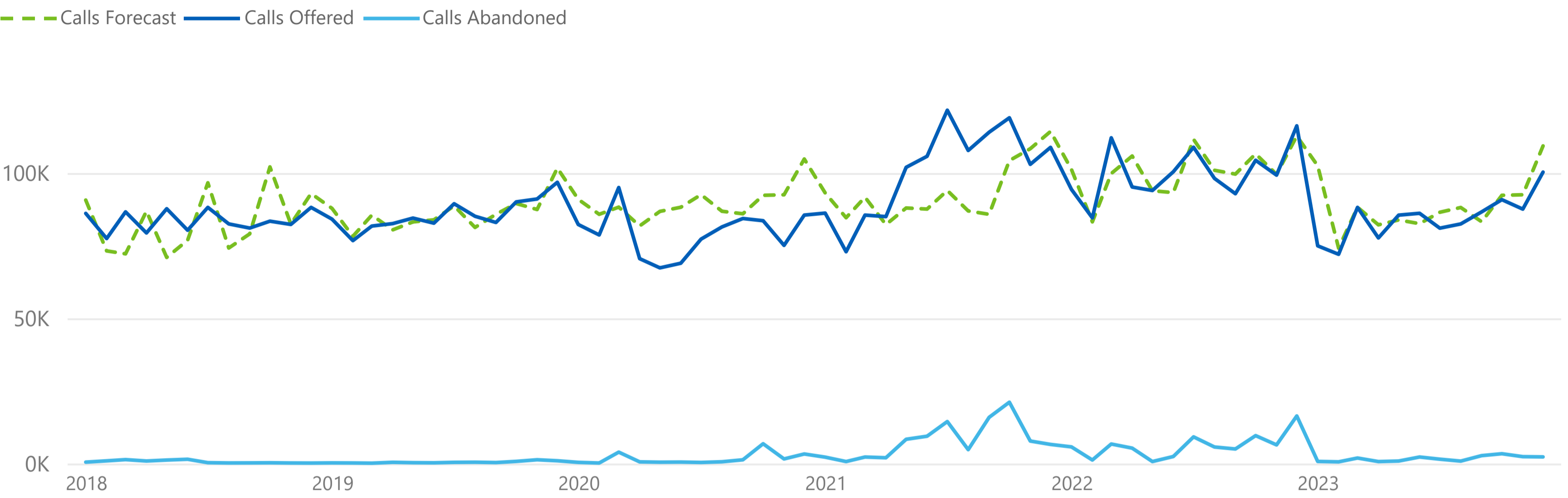
999

999 data on this page differs from elsewhere within the IPR because this includes calls on both the emergency and non-emergency applications within EOC, whereas the main IPR includes emergency only. The forecast relates to the expected volume of calls offered in EOC, which is the total volume of calls answered and abandoned. The difference between calls offered and abandoned is calls answered.

In December 2023, there were 100,336 calls offered which was 8.2% below forecast, with 98,039 calls answered and 2,297 calls abandoned (2.3%). There were 14.6% more calls offered compared with the previous month and 13.7% fewer calls offered compared with the same month the previous year. Historically, the number of abandoned calls has been very low, however, this has increased since April 2021 and remains relatively high, fluctuating each month. There was a 3.5% reduction in abandoned calls compared with the previous month.

IUC Historic Demand
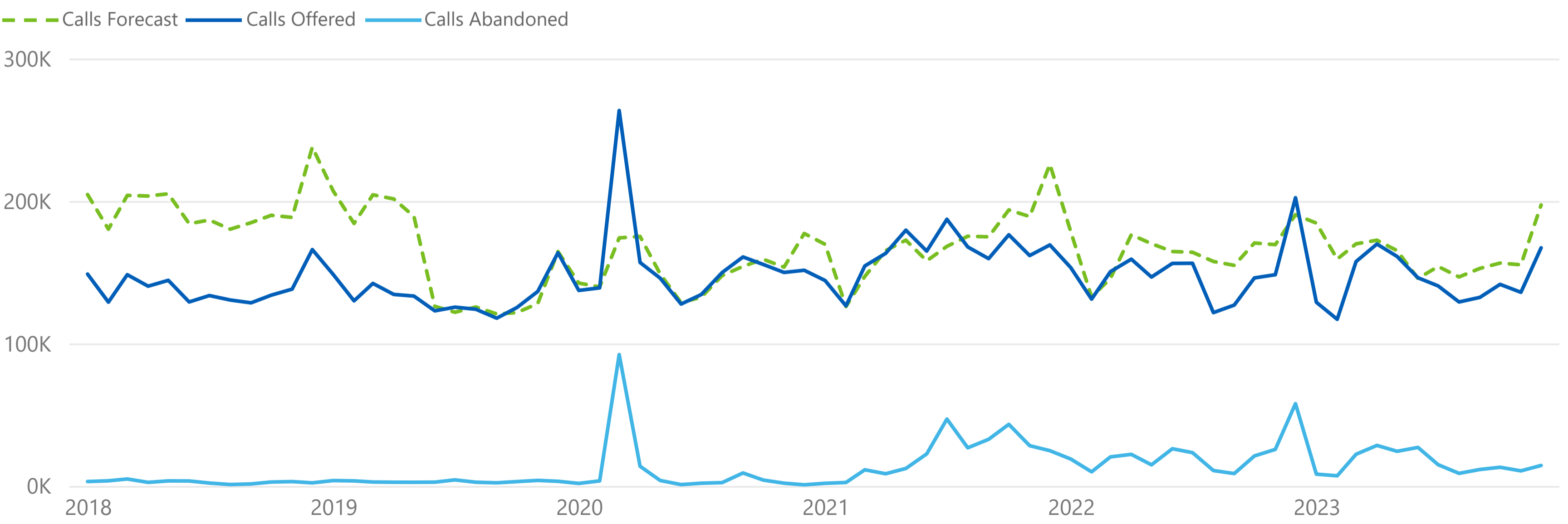
- - - Calls Forecast ——— Calls Offered ——— Calls Abandoned

IUC

YAS received 167,142 calls in December, 15.2% below the annual business plan baseline demand. 152,783 (91.4%) of these were answered, 0.8% below last month and 20.0% above the same month last year.

Calls abandoned increased to 8.6% from 7.8% last month and was 20.0% below last year.

Patient Outcomes Summary

Outcomes Summary

ShortName	Dec 22	Nov 23	Dec 23
999 - Incidents (HT+STR+STC)	64,527	68,538	77,326
999 - Hear & Treat %	7.9%	8.9%	13.6%
999 - See, Treat & Refer %	29.4%	27.4%	27.0%
999 - See, Treat & Convey %	62.7%	63.7%	59.3%
999 - Conveyance to ED %	56.4%	57.1%	53.4%
999 - Conveyance to Non ED %	6.3%	6.6%	5.9%
IUC - Calls Triaged	146,348	117,582	146,665
IUC - ED %	13.9%	16.2%	14.5%
IUC - Ambulance %	8.2%	13.1%	12.5%
IUC - Selfcare %	3.8%	4.3%	4.0%
IUC - Other Outcome %	13.6%	15.6%	16.2%
IUC - Primary Care %	57.3%	49.8%	51.8%
PTS - Demand (Journeys)	68,336	80,702	73,822

999 Outcomes

● 999 - Hear & Treat % ● 999 - See, Treat & Refer % ● 999 - See, Treat & Convey %

IUC Outcomes

● IUC - ED % ● IUC - Ambulance % ● IUC - Selfcare %
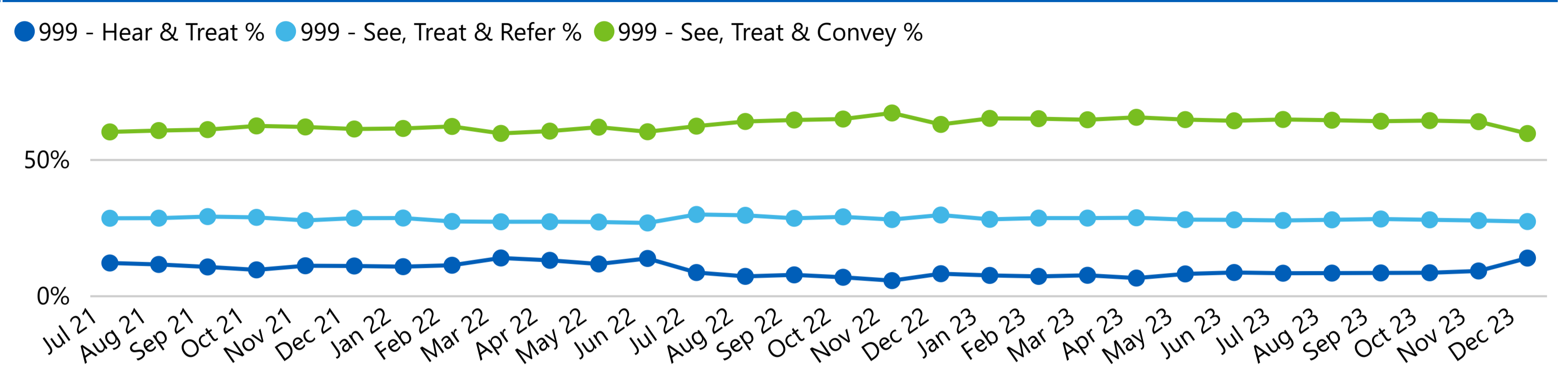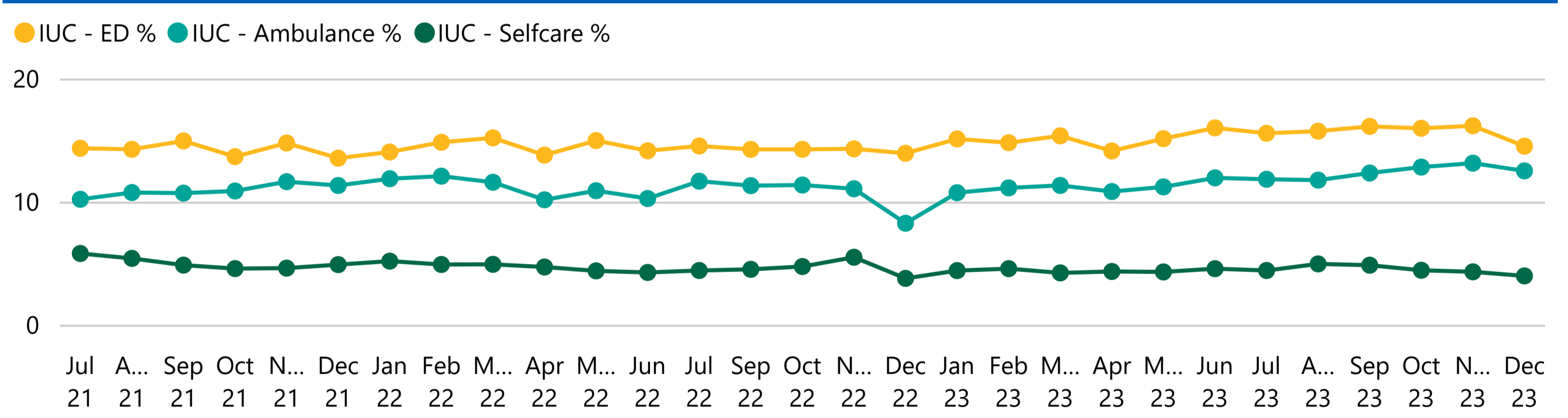
Commentary

999 - Comparing incident outcomes proportions within 999 for December 2023 against December 2022, the proportion of hear & treat increased by 5.7%, see treat & refer decreased by 2.4% and see treat & convey decreased by 3.3%. The proportion of incidents with conveyance to ED decreased by 3.0% from December 2022 and the proportion of incidents conveyed to non-ED decreased by 0.4%. Please note that changes mentioned above around the recording of H&T incidents means that there has been a relative increase in the proportion of H&T incidents and a decrease in on scene responses because of this.

IUC - The proportion of callers given an Ambulance outcome was 12.5%, with Primary Care outcomes at 51.8%. The proportion of callers given an ED outcome was 14.5%. The percentage of ED outcomes where a patient was referred to a UTC was 7.9%, a figure that historically has been as low as 2-3%. A key goal of the 111 first programme was to reduce the burden on emergency departments by directing patient to more appropriate care settings.

Patient Experience (Director Responsible - Dave Green)

NHS
Yorkshire
Ambulance Service
NHS Trust

Patient Relations

Indicator	Dec 22	Nov 23	Dec 23
Service to Service	47	90	72
Concern	32	53	52
Compliment	143	110	84
Complaint	69	78	77

Complaint
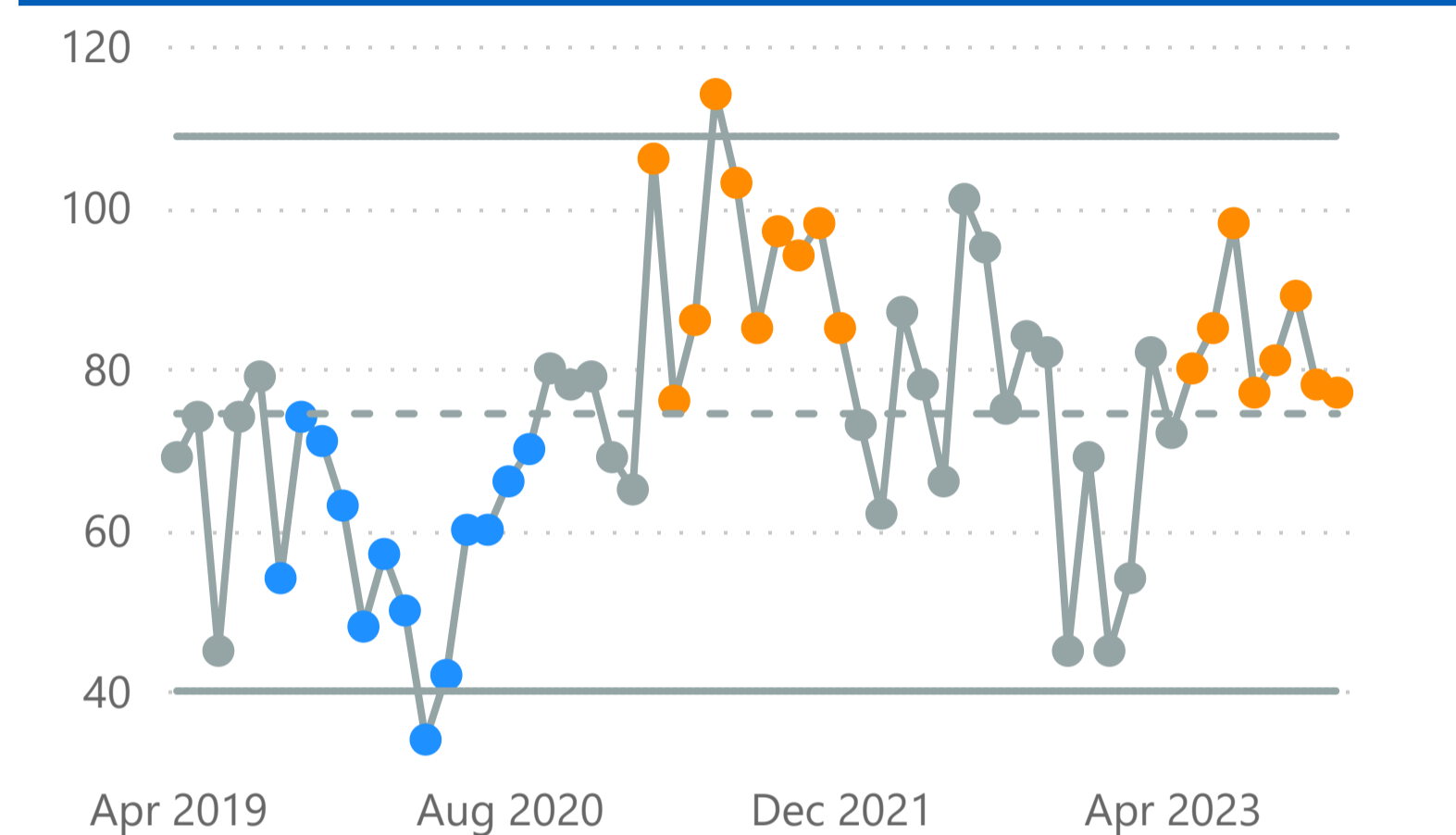
Compliment
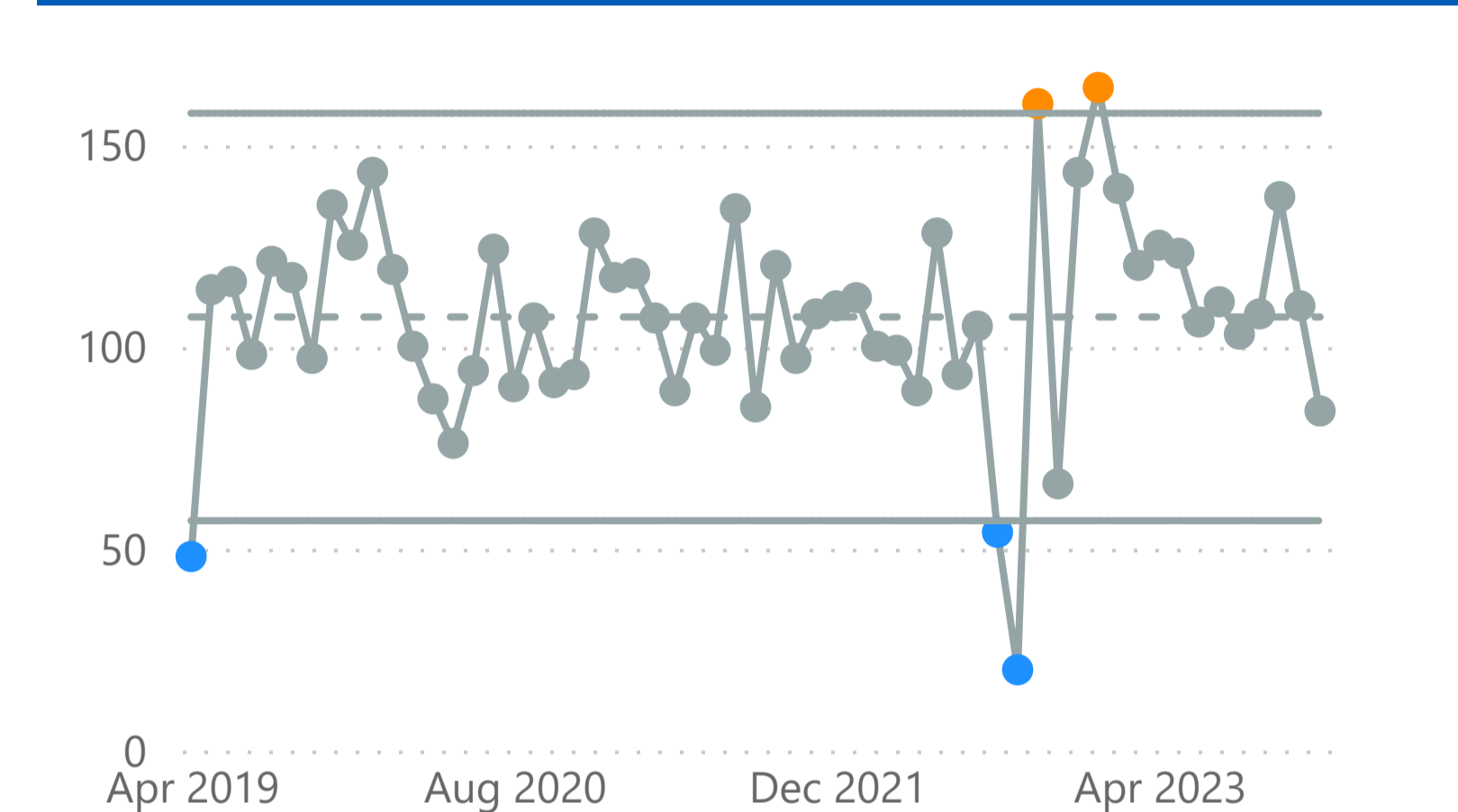
YAS Comments

There has been an increase in Service to Service cases for EOC during the month whilst Concerns and Complaints have remained at the same level as last month. A&E complaints and concerns have remained the same as November whilst Service to Service cases have decreased significantly and PTS have seen a decrease in complaints and concerns, whilst IUC complaints and concerns have increased.

Concern

Service to Service

Patient Safety - Quality (Director Responsible - Dave Green)

NHS Yorkshire Ambulance Service NHS Trust
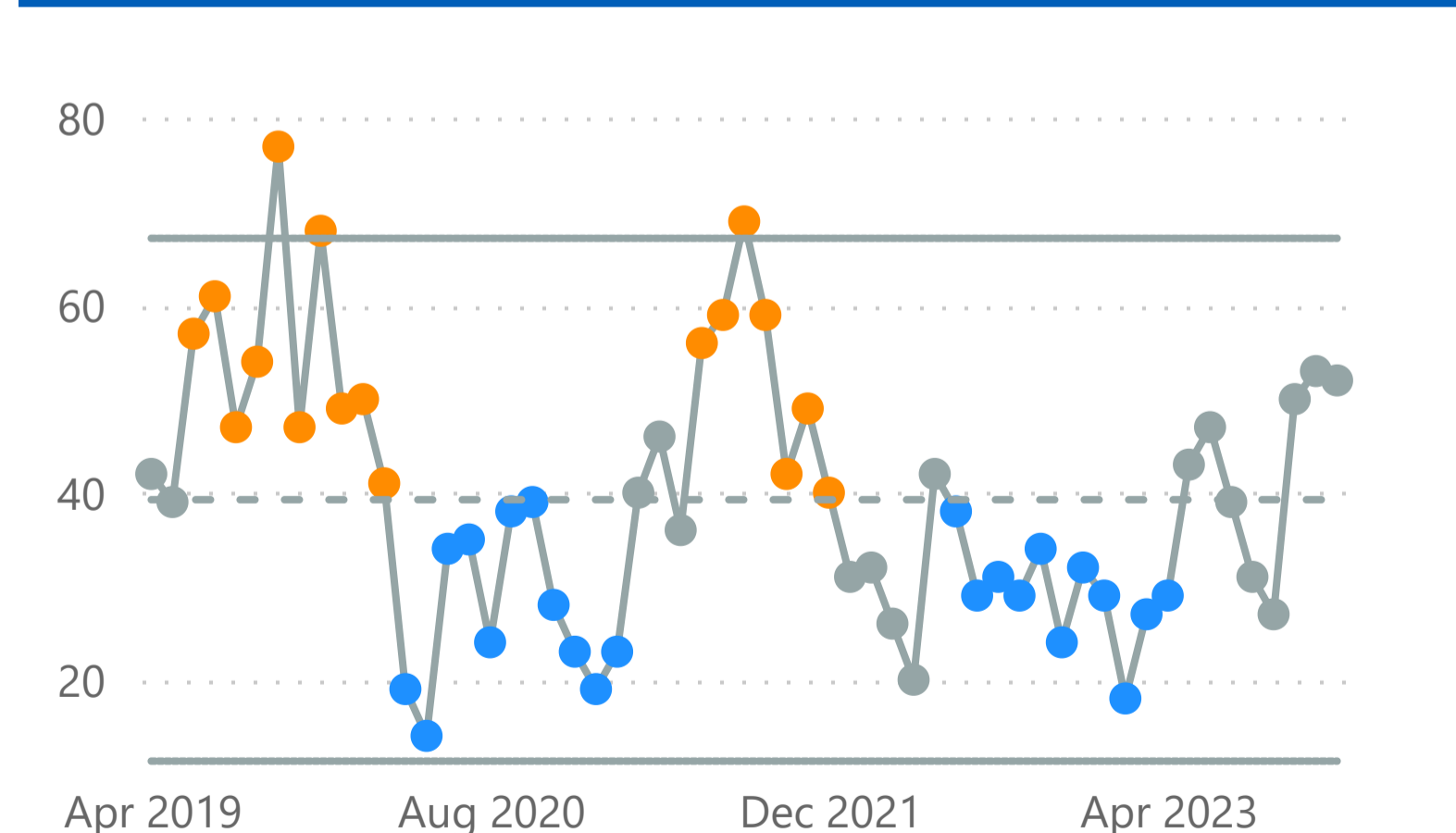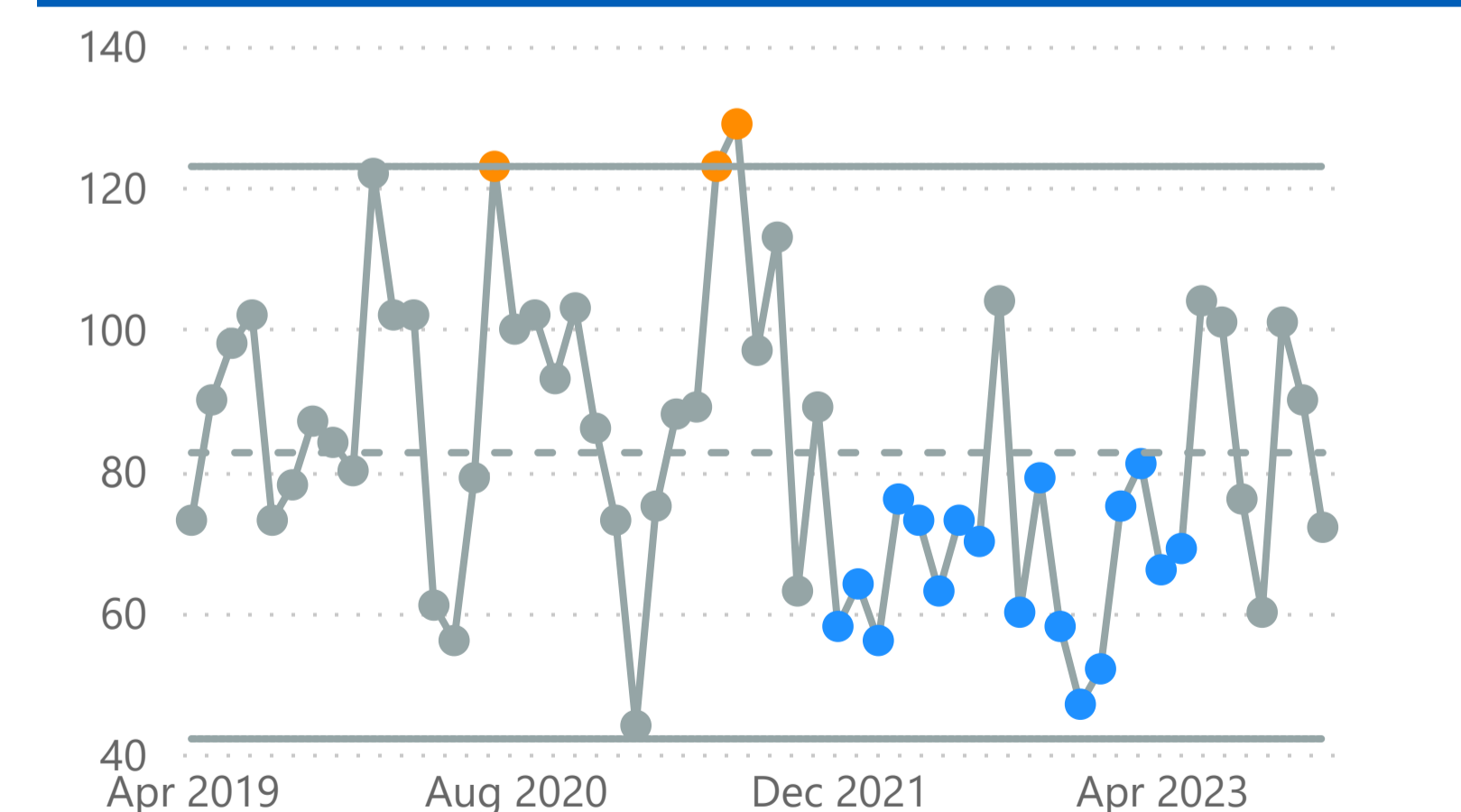
Incidents

Indicator	Dec 22	Nov 23	Dec 23
All Incidents Reported	788	937	925
Number of duty of candour contacts	27	1	7
Number of RIDDORs Submitted	5	3	5
Patient Safety Indicator Incident Investigation		3	

	Oct 22	Sep 23	Oct 23
Moderate & Above Harm (verified)	45	27	28
Patient Incidents - Major, Catastrophic, Catastrophic (death) (verified)	6	4	5
Serious incidents (verified)	18	5	2

Hygeine

Indicator	Dec 22	Nov 23	Dec 23
% Compliance with Hand Hygiene	99.4%	99.1%	83.7%
% Compliance with Premise	98.5%	95.1%	90.5%
% Compliance with Vehicle	97.5%	97.9%	92.4%

Incidents - Verified Moderate and Above Harm

● YAS

Jul 21: 28, Aug 21: 30, Sep 21: 35, Oct 21: 27, Nov 21: 35, Dec 21: 27, Jan 22: 21, Feb 22: 18, Mar 22: 18, Apr 22: 20, May 22: 24, Jun 22: 24, Jul 22: 24, Aug 22: 44, Sep 22: 19, Oct 22: 45, Nov 22: 50, Dec 22: 45, Jan 23: 34, Feb 23: 40, Mar 23: 30, Apr 23: 33, May 23: 24, Jun 23: 36, Jul 23: 33, Aug 23: 34, Sep 23: 27, Oct 23: 28
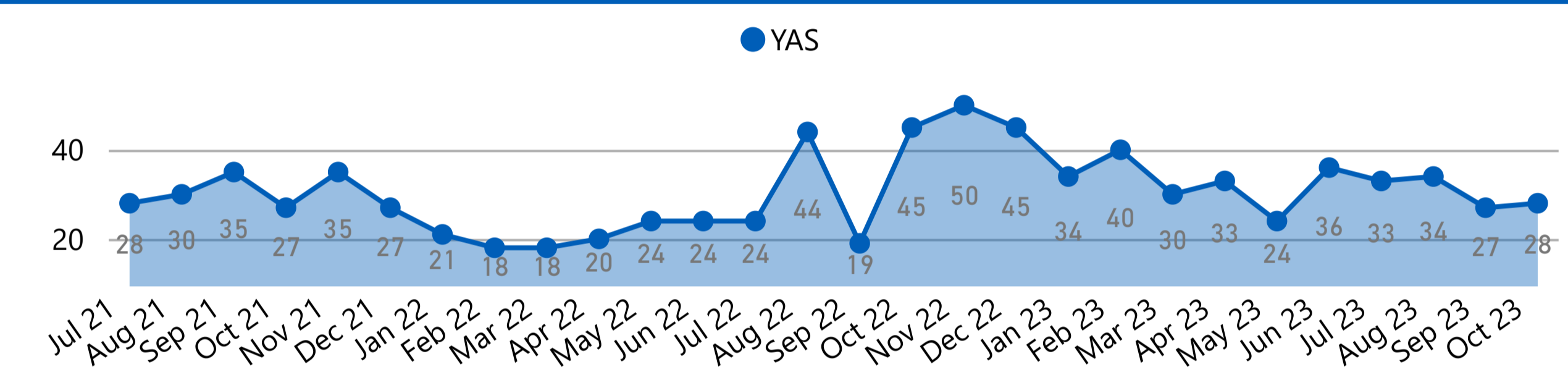
Safeguarding

Indicator	Dec 22	Nov 23	Dec 23
Domestic Homicide Review (DHR)	3	2	4
Safeguarding Adult Review (SAR)	2	6	2
Child Safeguarding Practice Review/Rapid Review (CSPR/RR)	3	1	1
Child Death	21	18	21

A&E Long Responses

Indicator	Dec 22	Nov 23	Dec 23
999 - C1 Responses > 15 Mins	2,533	994	1,231
999 - C2 Responses > 80 Mins	12,483	4,304	7,147

YAS Comments

Domestic Homicide Reviews (DHR) – Four requests for information in relation to DHR's were received in December, this number has doubled compared to November. 3 requests for information were from South Yorkshire with the other coming from North Yorkshire. Age ranges were from 25-53 with prominent themes being suicide following domestic abuse.

Safeguarding Adult Review (SAR) – Two requests for information in relation to SAR's were received in December. Self-neglect and isolation/cuckooing were the associated themes seen.

Child Safeguarding Practice Review / Rapid Review (CSPR/RR) – Zero requests in relation to CSPR's were received in December. One request for information in relation to a rapid review was received in December. This was in relation to a baby under 1 with non-accidental injuries.

Child death - The Safeguarding team contributed information in relation to 21 children who died in December. Prominent themes included road traffic collisions, prematurity, Sudden infant death, planned palliative care.

Fleet and Estates

Estates

Indicator	Nov 23	Dec 23
P1 Emergency (2 HRS)	50.0%	100.0%
P1 Emergency – Complete (<24Hrs)		100.0%
P2 Emergency (4 HRS)	91.9%	96.4%
P2 Emergency – Complete (<24Hrs)	67.7%	78.2%
Planned Maintenance Complete	96.7%	62.3%
P6 Non Emergency - Attend within 2 weeks	77.6%	95.0%
P6 Non Emergency - Complete within 4 weeks	69.0%	81.3%
P5 Non Emergency - Logged to Wrong Category	50.0%	100.0%

Estates Comments

Requests for reactive work/repairs on the Estate totalled 309 jobs for the month of December. This is representative of an average 300 repairs requests within month. As usual, Springhill remains the largest requester for service at 26 requests followed by HART at 15 and Doncaster at 12 requests for reactive works. SLA figures are relatively high with at an overall attendance KPI at 94% however, completion KPI is slightly lower than usual at 81%. The other categories aside the P1 & P2 emergency works are - P3 attend within 24 hours and P4 which is attend within 2 days. The P3 category accounts for just under a third of request with attendance KPI at 94% against a target of 98%. P4 category account for just over a quarter of requests with attendance KPI at 97% against a target of 90%. Planned Maintenance activity on the Estate carried out by our service provider to attended to Statutory, mandatory and routine maintenance is recorded at 97% for December with a completion of 62%.

999 Fleet

Indicator Name ● Safety Check % ● Service % ● SLW % ● Vehicle Availability ● Vehicle MOT %
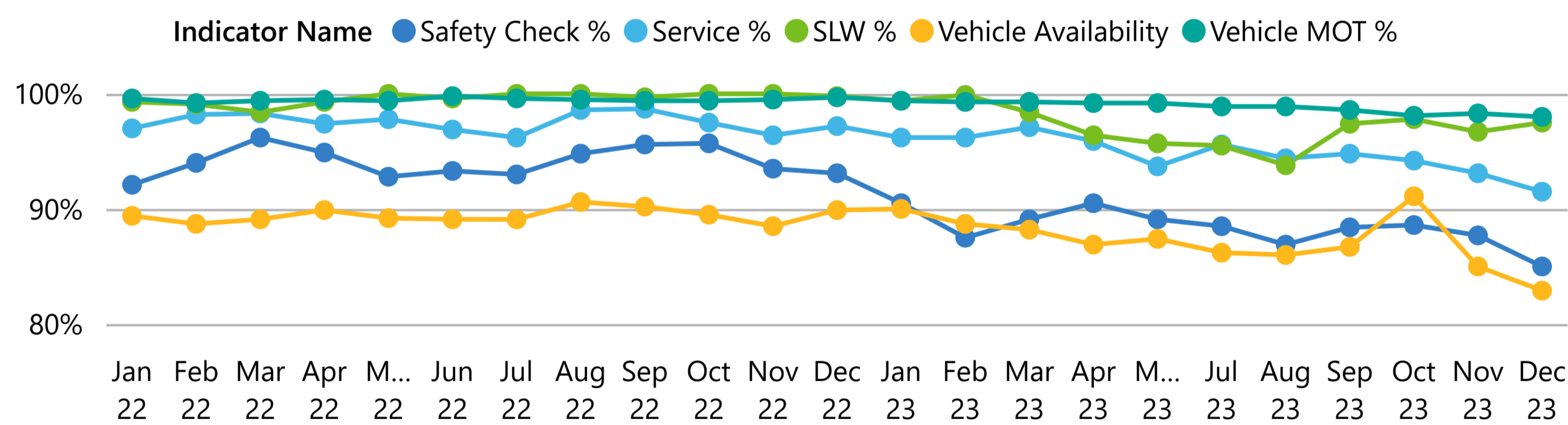
999 Fleet Age

IndicatorName	Dec 22	Dec 23
Vehicle age +7	10.7%	13.0%
Vehicle age +10	1.6%	2.0%

PTS Age

IndicatorName	Dec 22	Dec 23
Vehicle age +7	21.1%	28.2%
Vehicle age +10	1.0%	4.8%

Fleet Comments

A&E availability has dropped by 2.1% to 82.9% in December this is due to an increased number of engine faults on the 2.3 litre Fiat Ducato which are lengthy repairs, fleet are investigating the cause of the engine problems with the intent to implement preventative changes to stop the number of engine faults. Due to the impact of vehicle availability December has seen a small drop in Routine maintenance with overall compliance dropping by 1% to 93%. PTS compliance remains high but has dropped by 1.4% to 93.9% overall, this is due to resource allocated to the improved A&E availability. Fleet are working with operational colleagues to ensure rotas have the required vehicle availability.
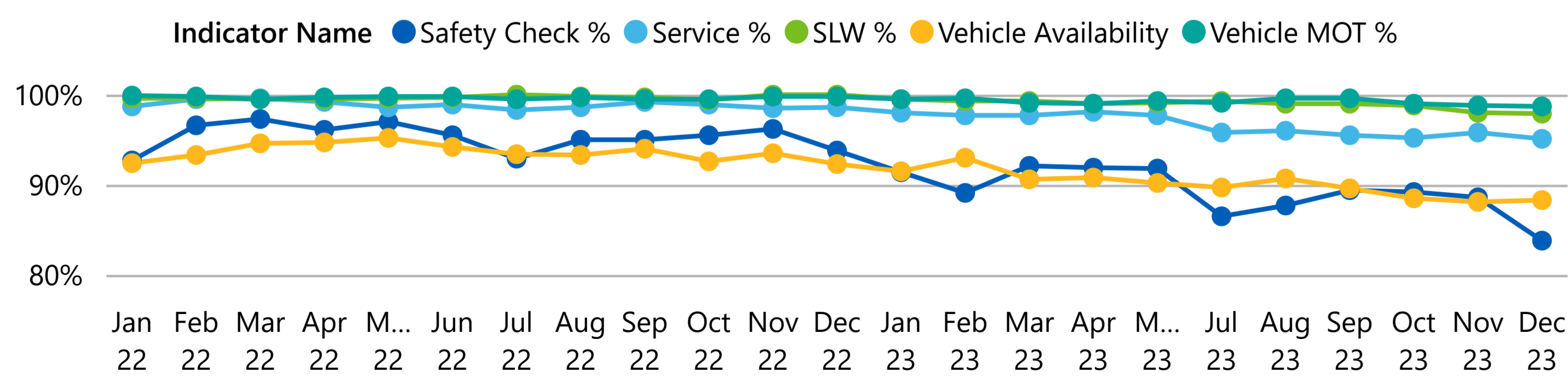
A&E age profile has increased as planned to accommodate for additional vehicles. DCA deliver has now started with vehicle commissioning underway with 16 vehicles in service. PTS vehicles over 7 years and 10 years has remained stable in December, with vehicle orders proceeding.

PTS Fleet

Indicator Name ● Safety Check % ● Service % ● SLW % ● Vehicle Availability ● Vehicle MOT %

Glossary - Indicator Descriptions (A&E)

A&E			
mID	ShortName	IndicatorType	AQIDescription ▲
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.
AMB54	999 - Conveyance to Non ED	int	Count of incidents with any patients transported to any facility other than an Emergency Department.
AMB55	999 - See, Treat and Refer (STR)	int	Count of incidents with face-to-face response, but no patients transported.
AMB75	999 - Calls Abandoned	int	Number of calls abandoned
AMB74	999 - Calls Answered	int	Number of calls answered
AMB72	999 - Calls Expected	int	Number of calls expected
AMB76	999 - Duplicate Calls	int	Number of calls for the same issue
AMB73	999 - Calls Offered	int	Number of calls offered
AMB99	999 - AHT	int	The average handling time, in seconds, for 999 EMDs in EOC
AMB00	999 - Total Number of Calls	int	The count of all ambulance control room contacts.
AMB94	999 - Total lost handover time	int	The total lost handover time over 30 minutes

Glossary - Indicator Descriptions (IUC and PTS)

mID	ShortName	IndicatorType	AQIDescription
IUC12	IUC - ED Validations %	percent	Proportion of calls initially given an ED disposition that are 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
PTS06	PTS - Answered < 180 Secs	percent	The percentage of calls answered within 180 seconds via the telephony system

IUC and PTS

Glossary - Indicator Descriptions (Quality and Safety)

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	
QS26	Moderate and Above Harm (Per 1K Incidents)	int	
QS28	Moderate & Above Harm (Verified)	int	
QS29	Patient Incidents - Major, Catastrophic, Catastrophic (death)	int	
QS30	Patient Incidents - Major, Catastrophic, Catastrophic (death) (verified)	int	
QS31	Domestic Homicide Review (DHR)	int	
QS32	Safeguarding Adult Review (SAR)	int	
QS33	Child Safeguarding Practice Review/Rapid Review (CSPR/RR)	int	
QS34	Child Death	int	
QS35	Patient Safety Indicator Incident Investigation	int	
QS24	Staff survey improvement question	int	(TBC, yearly)
QS21	Number of RIDDORs Submitted	int	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations

Glossary - Indicator Descriptions (Workforce)

mID	ShortName	IndicatorType	AQIDescription
WF37	Fire Safety - 2 Years	percent	Percentage of staff with an in date competency in Fire Safety - 2 Years
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 Fixed Term/ Permanent Employees leaving FTE (all reasons) relative to the average FTE in post in a 12 Months rolling period

Glossary - Indicator Descriptions (Clinical)

mID	ShortName	IndicatorType	Description
CLN56	999 Subsequent Call Backs Within 72 Hours See, Treat, and Convey	percent	999 Subsequent Call Backs Within 72 Hours See, Treat, and Convey
CLN55	999 Subsequent Call Backs Within 72 Hours See, Treat, and Refer	percent	999 Subsequent Call Backs Within 72 Hours See, Treat, and Refer
CLN54	999 Subsequent Call Backs Within 72 Hours Heart Treat	percent	999 Subsequent Call Backs Within 72 Hours Heart Treat
CLN52	Falls Conveyance Rate	percent	Falls Conveyance Rate
CLN51	Falls Care Bundle Compliance	percent	Falls Care Bundle Compliance
CLN50	Number of Fall Patients	int	Number of Fall Patients
CLN49	Heart Attack Care Bundle Compliance	percent	Heart Attack Care Bundle Compliance
CLN48	Average Heart Attack Call to Door Minutes	int	Average Heart Attack Call to Door Minutes
CLN47	Average Stroke On Scene Time Minutes	int	Average Stroke On Scene Time Minutes
CLN46	Cardiac ROSC Care Bundle	percent	Cardiac ROSC Care Bundle
CLN45	Bystander CPR	percent	Bystander CPR
CLN44	Number of Cardiac Arrests	int	Number of Cardiac Arrests
CLN43	STEMI Pre & Post Pain Score %	percent	Proportion of patients with a pre-hospital clinical working impression of STEMI who had a pre & post analgesia pain score recorded as part of their patient record
CLN42	STEMI Pre & Post Pain Score	int	Number of patients with a pre-hospital clinical working impression of STEMI who had a pre & post analgesia pain score recorded as part of their patient record
CLN41	STEMI Analgesia %	percent	Proportion of patients with a pre-hospital clinical working impression of STEMI who received the appropriate analgesia
CLN40	Number of patients who received appropriate analgesia (STEMI)	int	Number of patients with a pre- hospital clinical working impression of STEMI who received the appropriate analgesia
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.

Glossary - Indicator Descriptions (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
EST15	P5 Non Emergency - Logged to Wrong Category	percent	P5 Non Emergency - Logged to Wrong Category
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