

Board of Directors (in Public)
22 May 2025
Agenda Item: 3.6



Report Title	Quality and Clinical Highlight Report	
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Accountable Director	Dave Green, Executive Director of Quality and Chief Paramedic Steven Dykes, Acting Medical Director	
Previous committees/groups	Individual subjects discussed at: TEG, Quality Committee, Clinical Governance Group	
Recommended action(s)	For Information	
Purpose of the paper	To update on highlights, lowlights, issues, actions and next steps in relation to Quality and Clinical areas.	
Executive Summary		
The report is a highlight/lowlight summary report.		
Recommendation(s)	Provide oversight on the clinical effectiveness and quality of care delivered, including the areas of improvement identified.	
Link to Board Assurance Framework Risks (board and level 2 committees only)	4. Strengthen quality governance and medicines management to develop a culture of improvement, safety, and learning. 11. Collaborate effectively to improve population health and reduce health inequalities.	

Highlights	Lowlights
<p><u>Patient Safety</u></p> <ul style="list-style-type: none"> Achievement of all 4 local theme improvement targets as part of PSIRF plan for 24/25 leading to improved patient safety. <p><u>Patient Experience</u></p> <ul style="list-style-type: none"> Patient Experience and Involvement Framework signed off for use in 25/26. Regional Heart Attack consensus: Out of Hospital Cardiac Arrest (OHCA) pathway, health inequalities in ST elevation Myocardial Infarction (STeMI), Interfacility Transfer (IFT) improvements and a Leeds mutual aid SOP proposal. Key points for YAS are the OHCA pathway and health inequalities <ul style="list-style-type: none"> OHCA pathway: Improved pathway for all patients following out of hospital resuscitation. Health inequalities: YAS data highlights significant regional variation in STEMI presentations as well as variation by gender. Other literature highlights that women are less likely to be diagnosed with STEMI and more likely to have poor outcomes than men, and the Yorkshire data suggests this is reflected in our care also. <p><u>Clinical Effectiveness and research</u></p> <ul style="list-style-type: none"> Reviews have been conducted in response to HSSIB reports relating to paramedic ECG interpretation in the context of ACS and 'Recognition of the acutely ill infant'. Internally YAS training meets the nationally recommended guidance with HEI engagement work underway to continue drive up standards of education in this area. Qualitative and quantitative data collected from the recent NQP development days and clinical supervision Q4 data showcase high levels of engagement with 1338 staff receiving clinical supervision between January and April 2025, and widely positive feedback received following the NQP development days. YASRI received its highest ever level of funding from the NIHR Research Delivery Network for 2025-26, at £571,171.09 to support research delivery. YASRI has received £10,000 of funding for the delivery of an undergraduate research placement/internship to be delivered before end March 2026. Dr Caitlin Wilson, YASRI Senior Research Fellow has been successful in gaining a grant of £199,00 to deliver the PERIPHERAL study to understand how best to support patients who have incidental clinical findings when attended by ambulance clinicians. This project will begin in October 2025 and complete in 2027 working in partnership with the University of York, University of Sheffield and Northumbria University. YAS surpassed its NIHR Research Delivery Network for the completion of Patient Research Experience Surveys in 2024-25. Three YAS audit Posters are being displayed at the National Audit Management and Tracking conferencing Public Health Lead invited to present YAS work on health inequalities at the Seacole Group Symposium at the House of Lords alongside senior leaders from DHSC, NHSE and CQC. <p><u>Compliance, quality assurance and quality improvement</u></p> <ul style="list-style-type: none"> The Quality Improvement Group (QIG) has commenced, with local teams and QI Leads working together to prioritise initiatives for QI support and to enhance a culture of continuous improvement across the organisation. 	<p><u>Patient Safety</u></p> <ul style="list-style-type: none"> A Controlled Drug Internal Audit was conducted, resulting in a limited assurance rating. The audit recognised significant improvements in adherence to policy and compliance with the Controlled Drug (CD) process. However, it highlighted key areas of concern, including the absence of the new app process in the policy. An action plan has been agreed upon to address these issues. <p><u>Patient Experience</u></p> <ul style="list-style-type: none"> The time to respond to complaints needs to be improved and this has been identified as a business priority for this year. This will be monitored through the governance structures. <p><u>Clinical Effectiveness and research</u></p> <ul style="list-style-type: none"> YAS did not achieve its NIHR Research Delivery Network target for the number of participants recruited into research (269/780). Waiting for the recruitment of a dedicated research finance business partner. Delays with the approval of an updated Job Description for research paramedic is delaying the recruitment of additional research paramedic staff. Continued restrictions in resource and capacity due to current financial position alongside lack of Senior Public Health Analyst post.

<ul style="list-style-type: none"> • A revised Quality Impact Assessment (QIA) process has been implemented, streamlining governance and improving support for project teams. A new QIA Review Forum has also been established to provide advice and assurance, ensuring that QIAs are robust and well-aligned with Trust priorities. • Controlled Drugs app rolled out across 17 stations in the North and West region. Work on going to roll out to East and South. The CD assurance programme to improve the witness and incident number documentation adherence will continue until all stations have moved to the electronic system 		
Key Issues to Address	Action Implemented	Further Actions to be Made
<ul style="list-style-type: none"> • Continued work with HEI colleagues to influence the curriculum for undergraduate paramedic programmes. 	<ul style="list-style-type: none"> • Continue to work with Health and Wellbeing Team to establish knowledge of staff vaccination and immunisation status to ensure safe response following exposure. 	