



Report Title	Operational Performance Assurance – M9 December Update
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Previous committees/groups	<ul style="list-style-type: none"> • Quality Committee – 15 January 2026 • Finance & Performance Committee – 22 January 2026 • Trust Board – 29 January 2026
Recommended action(s)	Assurance
Purpose of the paper	To provide update on performance across all service lines and provide assurance that improvement actions are in place.

Executive Summary

This paper provides an update on performance across all service lines and provides assurance that improvement actions are in place.

All the performance measures and improvement actions were presented and reviewed at Performance Review and Improvement Group on 25 November 2025, which reviewed the most recent data available which was up to the end of October 2025. The December reviews were stood down. The data included in the report is the most recent data (December 2025)¹.

The report discusses exceptions, focusing on areas off track. Those on track or less impactful are not presented, to enable focus on improvement action.

The key areas are below, with the action plans to address which were discussed at the performance meetings detailed later in the paper:

A&E Operations

- Average Category 2 mean performance improved to 26 minutes 53 seconds, which was 4 minutes 27 seconds better than trajectory. This was the best level of performance since August 2025. The key drivers for Category 2 response times (with current position, actions and forecast in the body of the paper), are summarised as follows:
 - Responses were below plan by 6.1%.
 - Hear and Treat rate was substantially below the trajectory by 4.5%.
 - Crew clear – 1 min, 20 seconds above trajectory.
 - Deployed hours – above plan.
 - Sickness absence – above trajectory.
 - Arrival to handover – 9 mins, 31 seconds below December trajectory.
 - Total FTE above plan (+82)
 - Staff turnover on track for 5.6% year-end target.

¹ Data downloaded on 8/1/26

Remote Patient Care

- Recruitment of EMD's is off track with actions in place to recover position by the end of Q4.
- 999 call demand was 8.1% below plan.
- 111 call demand was above plan by 6.6% above plan (11,665 calls)
- 111 call answer continues to perform well at 1.3pp above plan.

PTS

- The introduction of eligibility criteria has maintained a reduced level of demand across all areas
- PTS call answer time remains good with more than 90% of calls answered within 180 seconds.

Recommendation(s)

You are asked to note the contents of this paper for assurance purposes.

Link to Board Assurance Framework Risks (board and level 2 committees only)

1. Deliver a timely response to patients.
2. Provide access to appropriate care.
3. Support patient flow across the urgent and emergency care system.

OPERATIONAL PERFORMANCE ASSURANCE

1. INTRODUCTION

- 1.1 This report presents the key exceptions in operational performance to support focused improvement action. It provides assurance on the delivery of performance across all service lines and reflects the discussions and agreed actions from the monthly Executive led Performance Review and Improvement meetings, currently chaired by the Deputy Chief Executive and, in future, by the Chief Paramedic. These meetings form a core part of the Performance Management Framework (PMF), which supports the Trust to plan, monitor and deliver high quality patient care. Each operational area presents its operational, financial and workforce performance, and the resulting updates and exception commentary inform both ongoing improvement work and quarterly Business Plan reporting.
- 1.2 Data is provided from the [Operational Trajectory](#)² and [Integrated Performance Report](#)² dashboards which are part of a suite of performance and assurance reports to support monitoring processes, identify performance challenges and improvement opportunities and assess the effectiveness of recovery actions. These reports include both key outputs (eg call demand, Cat 2 performance) and inputs (eg deployed ambulance hours, workforce numbers).
- 1.3 The latest available [NHS Oversight Framework metrics table](#) is also included as an appendix (see Table 3).

2. KEY PERFORMANCE MONITORING

- 2.1 The performance overview in this report is broken into the three operational areas of: 999 Operations, Remote Patient Care (EOC and IUC) and PTS. The measures cover the agreed metrics and targets from the Trust business plan.

3. 999 OPERATIONS

- 3.1 **Category 2 mean** response time in December was 26 minutes and 53 seconds. This was an improvement on the previous month and is 4 minutes and 27 seconds below the trajectory target. Demand was 6.1% lower than forecast (5,288 fewer responses), and responses at scene were 1.0% lower than plan (732 fewer responses) breaking the trend observed over the past four months. The Resident Doctors industrial action is likely to have contributed to this lower demand.
 - 3.1.1 The key drivers and improvement actions for Category 2 response times are as follows:
 - **Crew clear** time in December decreased slightly to 21 minutes and 20 seconds; narrowing the gap with the operating plan trajectory to 1 minute and 20 seconds above target. Actions completed and in progress are focused on achieving the 20-minute target. Further improvement was expected in Q3 with the implementation of an auto-alert module that had been successful at other Trusts. However, this was delayed due to issues during testing and could not be completed prior to the system freeze in December. This will now progress in Q4.

² Links to most recently published Power BI dashboard/report

- **Arrive to handover** increased for the third consecutive month in line with usual seasonal patterns to 19 minutes and 3 seconds, however still remaining well below the operating plan target of 28 minutes and 34 seconds. South Yorkshire continues to lead performance, recording 16 minutes and 29 seconds in December.
- In December, **Hear and Treat** performance remained below the planned level, achieving 12.8% against the target of 17.3%. The underlying causes and the actions being implemented to improve Hear and Treat are set out in Section 4.1.2 (Remote Care).
- **Deployed average daily hours** on DCA's were 6,141 hours in December which was 252 (+4.3%) hours above plan. RRV hours were at 655 which was 76 (+13.1%) above plan. Our average daily staff hours stood at 12,937 hours in December which was 581 (+4.7%) hours above plan. This is the most hours we have put out in the last 12 months.
- **Sickness** in A&E increased by 1.6pp to 8.7% in December and remains above the 8.5% operating plan trajectory for the month.
- **Excessive responses (twice the 90th percentile)**
Cat 2 excessive responses decreased by 359 (17.6%) to 1,678 in December, but this is 20.5% lower than last year and represented 3.8% of all Category 2 demand.
 - South had the lowest rate at 3.4% (422) of category 2 responses
 - HNY stood at 3.6% (432) of category 2 responses
 - West had the highest rate at 4.2% (824) of category 2 responses

999 Workforce position was above plan in December.

	Year End		Dec 25				
	Total FTE Operating Plan	Substantive FTE Forecast	Substantive FTE Actual	Overtime FTE	Total FTE	Planned Total FTE	Total FTE Variance
999 OPERATIONS	3,352	3,342	3,356	62	3,417	3,335	82

3.2 **Appraisal compliance** improved for the fifth consecutive month, rising by 1.2pp to 82.1% against a target of 90%. Plans presented in Q2 to improve completion rates have been effective with an increase of 10.7pp since July.

3.3 **Budget** position at month 9 is £82k underspent as workforce numbers remained close to plan.

4. REMOTE CARE

4.1 EOC

4.1.1 **Mean call answer** remained at 12 seconds in December, which is 7 seconds below plan. Demand was 8.1% lower than plan, which equates to 8,517 calls. Call handler numbers were behind plan by 64 FTE. However, due to a number of management

actions as detailed in November's update call answering performance was maintained.

- **Call handler workforce** is behind plan in December.

	Year End		Dec 25				
	Total FTE Operating Plan	Substantive FTE Forecast	Substantive FTE Actual	Overtime FTE	Total FTE	Planned Total FTE	Total FTE Variance
EOC CALL HANDLING	256	203	218	11	228	292	-64

- The **Hear and Treat** rate was 12.8% which was 4.5pp below the 17.3% target, remaining low for year to date and forecast and is related to NHS Pathways implementation driven by:
 - changes to how calls are coded and count towards H&T rate in NHS Pathways vs AMPDS, which equates to around a 2% reduction.
 - lower than expected call handler Hear and Treat, which isn't yet fully understood and will require work to optimise as NHS Pathways is fully embedded.
 - more validation of Cat 3 dispositions in NHS 111, meaning fewer available to Hear and Treat in EOC.
 - the additional clinical requirements of NHS Pathways, which reduces the volume of clinicians available to do Hear and Treat.
- **Clinical workforce** is on plan with numbers continuing to grow in line with plan. Substantive staffing has increased by 20 FTE since the start of the year with increased rotation and remote clinical hub use delivering a further 16 FTE.

	Year End		Dec 25				
	Total FTE Operating Plan	Substantive FTE Forecast	Substantive FTE Actual	Overtime FTE	Total FTE	Planned Total FTE	Total FTE Variance
EOC CLINICAL	128	123	128	8	136	136	0

4.1.2 People Measures

- **Appraisal compliance** in EOC fell slightly by 1.1pp to 76.3% in December against the 90% target. As mentioned in last month's report, increasing compliance will remain a focus in 25/26 but will be challenging over winter months due to capacity. Actions to improve are in place and beginning to increase compliance
- **Sickness** increased by 2.8pp in December to 10.6% which is 0.1pp below the 10.7% trajectory. Existing support for colleagues continues from the wellbeing team in EOC.

- #### 4.1.3 Budget:
- The month 9 position was £1.55m underspent vs budget plan which continues to be driven by vacancies in the EMD role and some planned NR CIP plans.

4.2 IUC

4.2.1 Call answer performance in December improved slightly by 0.8pp to 85.9% of calls answered in 120 seconds which is 5.9pp above the 80% trajectory plan. This was a good level of performance given demand was 6.6% above plan (11,665 calls). The key drivers and actions that impact on call answer are as follows:

- **Not Ready Reason Codes (NRRC)** fell by 2pp in December to 26% against plan of 25%. This impacts the availability and number of deployed hours we have available to take calls. Focussed work to reduce NRRC continues in 25/26 to achieve a rate of 25% for year end.
- **Workforce** call handler numbers have been reduced for 25/26 to achieve Trust efficiency targets:

	Year End		Dec 25				
	Total FTE Operating Plan	Substantive FTE Forecast	Substantive FTE Actual	Overtime FTE	Total FTE	Planned Total FTE	Total FTE Variance
IUC Health Advisors	440	422	406	27	433	438	-5
IUC Clinical Advisors	98	98	97	12	109	99	10

4.2.2 People Measures

- **Sickness** in IUC rose by 3.7pp to 16.3% in December which was 2.8pp above trajectory. Sickness remains a focus of the team to reduce further over 25/26, with a plan in place to share the sickness reduction actions in EOC into IUC.
- **Appraisal** compliance improved by 0.2pp to 83.3% in December against the 90% Trust end of year target.

4.2.3 **Budget** IUC position at month 9 is £1.93m underspent against plan, driven by vacancies and planned non-recurrent Cost Improvement Plan actions.

4.3 PTS

4.3.1 PTS continues to perform well. Drop off within 120mins improved by 0.9pp on the previous month and is back above trajectory after falling below last month. Drop off at short notice improved 1.6pp on the previous month.

Metric	Average actual Dec 25	Average target
KPI 1 deliver journey times less than 120 mins	97.1%	90.0%
KPI 2 drop off within 120 mins before appointment	88.4%	90.0%
KPI 3 deliver pre planned pick up within 90 mins	89.7%	90.4%
KPI 4 deliver short notice pick up within 120 mins	80.7%	90.8%

4.3.2 The drivers and actions to improve are as follows:

- **Demand:** A total of 65,742 journeys were completed in December which was 9.8% (7,104) journeys) below the Business Plan trajectory.
 - In West journeys were 9.3% (2,954 journeys) below trajectory with saloon car journeys falling 63.6% vs December 24 against a trajectory reduction of 30%.
 - In South journeys were 17.3% (2,661 journeys) below trajectory with saloon car journeys falling 57.4% vs December 24 against a trajectory reduction of 30.0%.
 - In HNY journeys were 5.8% (1,491 journeys) below trajectory with saloon car journeys falling 46.2% vs December 24 against a trajectory reduction of 29.9%.
- **Patients per vehicle (PPV)** remained at 1.4 in December. PPV is being closely monitored since eligibility go live as we aim to maximise the efficiency of our own vehicles to achieve planned savings.
- **Sickness** increased by 1.4pp in December to 8.5%, which is 0.4pp below trajectory and in line with sickness increases seen at Trust level. Support measures remain in place and work is underway to identify suitable alternative duties for PTS staff.

	Year End		Dec 25				
	Total FTE Operating Plan	Substantive FTE Forecast	Substantive FTE Actual	Overtime FTE	Total FTE	Planned Total FTE	Total FTE Variance
PTS	469	436	424	37	462	468	-6

4.3.3 **Call answering** performance (within 180 seconds) dipped slightly to 91.5% in December. Performance has remained positive since July as eligibility criteria became BAU.

4.3.4 **People Measures**

Appraisal compliance improved by 1.4pp to 77.5% in December with work ongoing to increase compliance towards the Trust target of 90%.

4.3.5 **Budget** position at month 9 is £737k underspent

5. **COMMUNICATION AND INVOLVEMENT**

5.1 This report is presented for assurance and has been produced from the information presented and discussed at the Performance Review and Improvement Groups in October.

6. **EQUALITY ANALYSIS**

6.1 There is no requirement for an Equality or Quality Impact Assessment in relation to this paper.

7. PUBLICATION UNDER FREEDOM OF INFORMATION ACT

- 7.1 This paper is available for publication under the Freedom of Information Act 2000.

8. NEXT STEPS

- 8.1 This document will be shared with the Finance and Performance Committee for assurance purposes.

9. RECOMMENDATION

- 9.1 You are asked to note the contents of this paper for assurance purposes.

APPENDIX 1 – PERFORMANCE TRAJECTORIES

TABLE 1: WORKFORCE POSITION

	Total FTE Operating Plan ³	Substantive FTE Year End Forecast ⁴	Substantive FTE Actual (Dec 25)	Overtime FTE (Dec 25)	Total FTE (Dec 25)	Planned Total FTE (Dec25)	Total FTE Variance ⁵
A&E OPERATIONS	3,352	3,342	3,356	62	3,417	3,335	82
EOC CALL HANDLING	256	203	218	11	228	292	-64
EOC DISPATCH	137	122	123	4	128	144	-16
EOC CLINICAL	128	123	128	8	136	136	0
IUC HA	440	422	406	27	433	438	-5
IUC CA	98	98	97	12	109	99	10
PTS	469	436	424	37	462	468	-6
TOTAL	4,880	4,746	4,752	161	4,913	4,912	1

Source: Trajectory Report, YAS BI Portal, data downloaded on 8/12/26

³ Business Plan year-end target is static but can change if there are adjustments to funding.

⁴ Year-end forecast figures change throughout the year due to dynamic business environments, operational performance variations, external factors, internal adjustments, and data quality improvements

⁵ Total FTE - Planned Total FTE

TABLE 2: KEY METRICS PERFORMANCE TABLE

Metric	Dec	Jan	Feb	Mar	Apr 25	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YE Forecas t	YE Operatin g Plan
Category 2 Mean	00:41:18	00:28:27	00:29:55	00:28:32	00:24:56	00:25:19	00:26:33	00:25:28	00:24:12	00:27:54	00:28:01	00:29:24	00:26:53	00:27:17	00:28:48
Demand (Responses)	82,617	78,309	70,368	76,001	73,833	74,902	74,495	75,885	74,241	73,441	78,003	77,385	81,447	913,239	942,136
Hear & Treat %	17.2%	16.0%	16.3%	15.8%	14.7%	14.0%	13.8%	13.8%	13.5%	13.6%	13.2%	13.9%	12.8%	13.9%	17.9%
Crew Clear	00:24:03	00:24:17	00:24:07	00:23:44	00:24:08	00:23:47	00:22:00	00:20:24	00:20:48	00:21:24	00:21:46	00:21:39	00:21:19	00:21:31	00:21:12
Vehicle Availability: DCA	83.7%	81.8%	82.9%		80.1%	79.7%	78.7%	80.7%	78.2%	80.4%	84.0%	82.5%	84.1%	82.0%	82.0%
Sickness (A&E)	8.2%	7.8%	7.3%	7.1%	6.5%	6.9%	6.9%	6.9%	6.9%	6.3%	6.4%	7.1%	8.7%	6.7%	6.1%
Arrive to Handover	00:37:14	00:31:21	00:25:29	00:22:57	00:23:40	00:20:59	00:19:50	00:19:18	00:17:47	00:17:44	00:18:00	00:18:21	00:19:03	00:20:49	00:25:12
Appraisal Compliance (A&E Ops)	84.4%	81.0%	78.3%	74.3%	70.3%	72.0%	71.5%	71.4%	72.9%	75.9%	78.7%	80.9%	82.1%	0.0%	90.0%
Not Ready Reason Codes – Health Advisor	29.4%	28.6%	29.8%	28.6%	28.8%	27.4%	30.6%	28.9%	26.4%	28.5%	26.9%	27.9%	25.9%	25.0%	25.0%
PTS KPI 1 deliver journey times less than 120 mins	98.1%	98.6%	99.1%	98.9%	96.8%	97.1%	96.9%	97.1%	97.2%	97.1%	97.3%	97.2%	97.1%	97.6%	91.3%
PTS KPI 3 deliver pre planned pick up within 90 mins	88.9%	88.9%	89.0%	90.1%	88.5%	88.3%	89.0%	88.9%	90.8%	89.6%	91.2%	89.5%	89.7%	89.9%	90.5%
PTS KPI 4 Deliver short notice pick up within 120 mins	80.5%	82.1%	81.8%	81.5%	79.8%	75.9%	76.3%	77.2%	81.5%	79.5%	81.9%	79.1%	80.7%	79.9%	88.3%
PTS patients per vehicle	1.36	1.39	1.38	1.38	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4
PTS Call Handling - answered in 180 seconds	84.2%	71.7%	80.4%	72.7%	71.1%	68.4%	80.2%	89.6%	84.6%	91.2%	87.0%	92.4%	91.5%		

Note blue shaded cells (Nov 24 to Mar 25) are for 24/25 and are not used to calculate year end forecast.

Source: Trajectory Report, YAS BI Portal, data downloaded 8/1/26

TABLE 3: NHS OVERSIGHT FRAMEWORK METRICS TABLE – 3/11/25

This table presents a set of key performance metrics used to assess the Trust's performance across several domains, as required by the NHS Oversight Framework. Each metric is reported with its value, unit, score, rank (out of 10), and the average value for comparison. Key insights:

- The Trust performs well in staff engagement and advocacy (ranked 1 out of 10).
- Despite a slight increase in response times they remain better than the average (rank 4/10).
- Sickness absence improved in Q2 but remains a key focus for improvement.
- Financial metrics are stable, with no planned deficit and minimal variance to plan.

Quarter	Segment	Trust in financial deficit?
Q2 2025/26	1 - High performing	No

Domain	Sub-domain	Metric description	Reporting Date	Metric Value	Metric Units	Metric value change	Metric score	Rank out of 10	Median
Access to services	Urgent and emergency care	Average Category 2 ambulance response time	To Sep 2025	25.77	mins	0.10 ↓	1.00	4	28.60
Effectiveness and experience	Effective out of hospital care	Percentage of ambulance patients conveyed to emergency departments	YTD 25/26	52.40	%	-0.20 ↑	3.10	8	49.35
	Patient experience	NHS staff survey advocacy score	2024	6.58	out of 10	0.00 →	1.00	1	6.20
Finance and productivity	Finance	Planned surplus/deficit	2025/26	0.00	%	0.00 →	1.00	2	0.00
		Variance year-to-date to financial plan	Month 6 2025	0.33	%	0.10 ↑	1.00	4	0.27
		Combined finance	Q2 2025/26		score		1.00		
	Productivity	Relative difference in costs	2024/25	96.71	%	-1.84 ↑	1.99	6	96.16
Patient safety	Patient safety	NHS Staff survey – raising concerns sub-score	2024	6.13	out of 10	0.00 →	1.67	3	6.02
People and workforce	Retention and culture	Sickness absence rate	Q1 2025/26	6.85	%	-0.79 ↑	3.97	9	6.28
		NHS staff survey engagement theme sub-score	2024	6.22	out of 10	0.00 →	1.00	1	6.00

Source: [NHS England](#), 17/12/25