



Business
Intelligence

Integrated Performance Report

February 2026

Published 18 March 2026



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.

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Our Purpose	To provide and co-ordinate safe, effective, responsive and patient-centred out-of-hospital emergency, urgent and non-emergency care, so all our patients can have the best possible experience and outcomes
Our Vision	What we want to achieve: Great Care Great People Great Partner
Our Values	What do we want to be and what behaviours do we expect? Kindness Respect Teamwork Improvement
YAS Together	A way of working collaboratively to achieve our vision: Care Lead Grow Excel Everyone
Our Enabling Plans	The drivers of success: Clinical and Quality People Partnership Sustainable Services

4 Bold Ambitions

Our Patients

Our ambition is to deliver **exceptional patient-centred out-of-hospital emergency, urgent and non-emergency care**, which is safe, kind and responsive, seamlessly integrating services and utilising technology to deliver a high-quality patient experience.

Our People

Our ambition is to be a **diverse and inclusive organisation** with a culture of continuous improvement, where everyone feels valued, included, proud to work and can thrive.

























Our Partners

Our ambition is to be a **collaborative, integral and influential partner** across a joined-up health and social care network that works preventatively, reduces inequality and improves population health outcomes, supporting all our communities.

Our Planet and Pounds

Our ambition is to be a **responsible and sustainable** organisation in the use of our financial and physical resources, reducing our environmental impact and ensuring the most effective use of all our resources.

999 IPR Key Exceptions - February 26

Indicator	Target	Actual	Variance	Assurance
999 - Answer Mean		00:00:11		
999 - Answer 95th Percentile		00:01:17		
999 - AHT		00:07:23		
999 - Calls Ans in 5 sec	95.0%	78.3%		
999 - C1 Mean (T < 7 Mins)	00:07:00	00:07:48		
999 - C1 90th (T < 15 Mins)	00:15:00	00:13:39		
999 - C2 Mean (T < 18 Mins)	00:18:00	00:25:55		
999 - C2 90th (T < 40 Mins)	00:40:00	00:53:46		
999 - C3 Mean (T < 1 Hour)	01:00:00	01:20:12		
999 - C3 90th (T < 2 Hour)	02:00:00	03:05:55		
999 - C1 Responses > 15 Mins		450		
999 - C2 Responses > 80 Mins		1,117		
999 - Job Cycle Time		01:43:15		
999 - Avg Hospital Handover (ED)	00:15:00	00:18:25		
999 - C1%		10.8%		
999 - C2%		61.1%		

Exceptions - Comments (Director Responsible - Nick Smith)

Call Answer - The call answer figures are for Trust level only and do not change based on the area selection. The mean call answer was 11 seconds for February, no change from the previous month. The median also remained the same, and the 90th increased by 1 second. The 95th decreased from 1 minute 22 seconds in January to 1 minute 17 seconds in February, and the 99th decreased from 2 minutes 28 seconds to 2 minutes 21.

Cat 1-4 Performance - The mean performance time for Cat1 worsened from January by 3 seconds and the 90th percentile worsened by 13 seconds. The mean performance time for Cat2 worsened from January by 1 minute 33 seconds and the 90th percentile worsened by 2 minutes 42 seconds. Compared to February of the previous year, the Cat1 mean improved by 12 seconds, the Cat1 90th percentile improved by 13 seconds, the Cat2 mean improved by 3 minutes 55 seconds and the Cat2 90th percentile improved by 11 minutes 42 seconds.

Call Acuity - The proportion of Cat1 and Cat2 incidents was 71.8% in February (10.8% Cat1, 61.1% Cat2) after a 0.4 percentage point (pp) increase compared to January (0.2 pp increase in Cat1 and 0.1 pp increase in Cat2). Comparing against February for the previous year, Cat1 proportion decreased by 4.9 pp and Cat2 proportion increased by 2.5 pp.

Responses Tail (C1 and C2) -The number of Cat1 responses greater than the 90th percentile target decreased in February, with 450 responses over this target. This is 43 (8.7%) less compared to January. The number for last month was 33.4% lower than February 2025. The number of Cat2 responses greater than 2x 90th percentile target increased from January by 44 responses (4.1%). This is a 44.6% decrease from February 2025.

Hospital & Job Cycle Time - Last month the average handover time decreased by 2 minutes and overall turnaround time decreased by 1 minute 16 seconds. The number of conveyances to ED was 13.2% lower than in January. Overall, the average job cycle time decreased by 1 minute 36 seconds from January.

Demand - On scene response demand was 3.0% below forecasted figures for February. It was 13.3% lower compared to January and 3.4% higher compared to February 2025.

Outcomes - Comparing incident outcome proportions within 999 for February against January, the proportion of hear & treat decreased by 0.1 percentage points (pp), see treat & refer decreased by 0.3 pp and see treat & convey increased by 0.3 pp. The proportion of incidents with conveyance to ED increased by 0.1 pp and the proportion of incidents conveyed to non-ED increased by 0.2 pp.

IUC IPR Key Indicators - February 26

Indicator	Target	Actual	Variance	Assurance
IUC - Calls Answered		130,927		
IUC - Answered vs. Last Month %		-12.7%		
IUC - Answered vs. Last Year %		1.0%		
IUC - Calls Triaged		127,552		
IUC - Calls Abandoned %	3.0%	3.8%		
IUC - Answer Mean	00:00:20	00:01:04		
IUC - Answered in 60 Secs %	90.0%	76.6%		
IUC - Answered in 120 secs %	95.0%	82.8%		
IUC - Callback in 1 Hour %	60.0%	37.4%		
IUC - ED Validations %	50.0%	65.5%		
IUC - 999 Validations %	95.0%	93.9%		
IUC - ED %		11.7%		
IUC - ED Outcome to A&E %		66.6%		
IUC - ED Outcome to UTC %		13.1%		
IUC - Ambulance %		11.8%		












IUC Exceptions - Comments (Director Responsible - Nick Smith)

YAS received 146,276 calls in February, 0.6% below the annual business plan baseline demand. 130,927 (89.5%) of these were answered, 12.7% below last month and 1.0% above the same month last year.

The reporting rules for telephony performance were updated in August 2024 to be in line with the decision paper approved in TEG on 24/07/24. These updated figures have been backdated to March 2023. 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 76.6% from 84.2% in February. Average speed to answer has increased by 20 seconds to 1 minute 4 seconds compared with 44 seconds last month. Abandonment rate increased to 3.8% from 2.5% last month.

Please note, that all measures with the exception of telephony measurements are based on estimates, this is due to the ongoing work to migrate BI systems from Adastra to CAD for clinical data.

PTS IPR Key Indicators - February 26

Indicator	Target	Actual	Variance	Assurance
PTS - Answered < 180 Secs	90.0%	87.2%		
PTS - % Short notice - Vehicle at location < 120 mins	90.8%	84.6%		
PTS - % Pre Planned - Vehicle at location < 90 Mins	90.4%	89.3%		
PTS - Arrive at Appointment Time	90.0%	88.2%		
PTS - Journeys < 120Mins	90.0%	97.2%		
PTS - Same Month Last Year		-17.3%		
PTS - Increase - Previous Month		-7.2%		
PTS - Demand (Journeys)		63,981		

PTS Exceptions - Comments (Director Responsible - Nick Smith)

PTS Total Activity continues to be on a downward trend. February saw 63,981 journeys operated. Compared to February 2025, demand was 17.3% lower. Year to date, Total Activity has seen a reduction of 15.2% compared to 2024-25.

There were 55,580 patient journeys in February. This fell 11.0% below the forecast from the Business Plan. Year to date this takes the forecast position to -7.3%.

The Eligibility Programmes continues to have a positive impact on reducing low acuity demand. Last month saw bookings decreased by 64.6% compared to the previous year. Journeys reduced by 59.6% (c 16,300 journeys). These reductions contributed to Total Activity being 17.3% lower than February 2025.

Call activity and AHT saw reductions in February, contributing to Call Performance being 1.7% higher than January. 87.2% of calls were answered in 180 seconds, missing target by 2.8%. Year to date, service level stands 3.8% higher than 2024-25.

Short Notice Outwards has been on an upward trend for the third month running. 84.6% of patients were picked up in 120 minutes. This is the highest KPI achieved since March 2024. Performance compared to February 2025 was 2.8% higher.

All other KPI's fell in line with recent trends.

Workforce Summary

A&E	IUC	PTS
EOC	Other	Trust



Key KPIs

Name	Feb-25	Jan-26	Feb-26
FTE in Post %	93.3%	98.3%	99.0%
Turnover (FTE) %	9.5%	8.3%	8.2%
Vacancy Rate %	6.7%	1.7%	1.0%
Apprentice %	9.4%	9.2%	8.9%
BME %	8.6%	8.9%	9.0%
Disabled %	9.6%	10.8%	10.9%
Sickness - Total % (T-5%)	7.8%	8.8%	8.2%
PDR / Staff Appraisals % (T-90%)	78.4%	79.3%	82.6%
Essential Learning	87.7%	89.9%	89.9%

YAS Commentary

FTE, Turnover, Vacancies and BME – Compared to January 2026, vacancy rate has improved by 0.7% showing that the Trust, on average, is nearly at full establishment. In comparison to the same month last year (February 2025) the vacancy rate has improved by 5.7 percentage points. Turnover remains stable at 8.2% although IUC has remained high at 23.1%, with vacancies of 6.8% (Note: IUC figures are for those employed staff leaving the Trust only). The numbers of BME and staff living with disabilities is steadily improving i.e. BME has steadily improved since July 2024. 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.

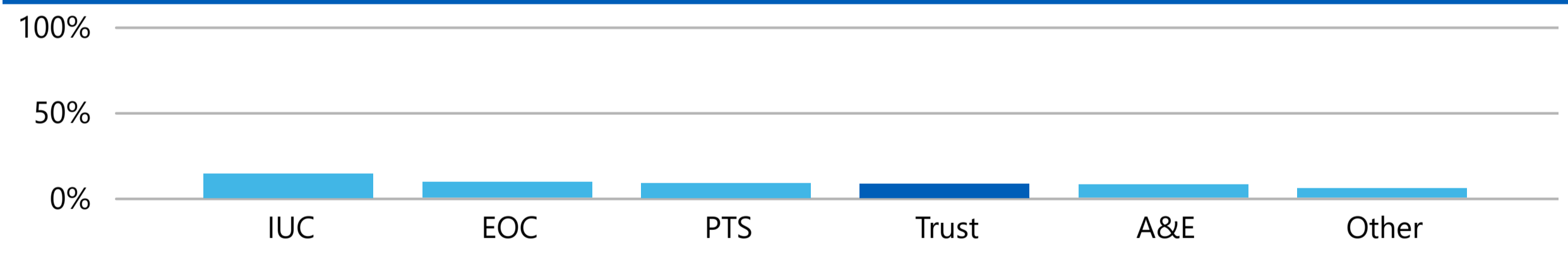
Sickness – Sickness has improved slightly, decreasing from 8.8% to 8.2%, from the previous month. Although the Trust's absence rates in February are typical for the Ambulance Sector, they remain concerning. Ongoing investigations are focusing on 12 key data points with comparisons of the three most challenged stations to the three with the lowest rates to identify potential underlying causes, where changes could prevent absence or reduce longevity. Discovery work is near completion and interventions are planned to begin in April 2026 as part of the 2026-27 project plan. Updates are provided to the People & Culture Group.

PDR / Appraisals – The overall compliance rate of 82.6% shows a steady improvement trajectory since June 25 with a 3.3%-point increase since Jan 2026. A&E and IUC are the highest performing areas (86.5% & 83.9% respectively) with EOC as the lowest (69.6%). All areas have improved. The Senior Leadership Community compliance rate increased to 93.9% from 85.7% (12 outstanding).

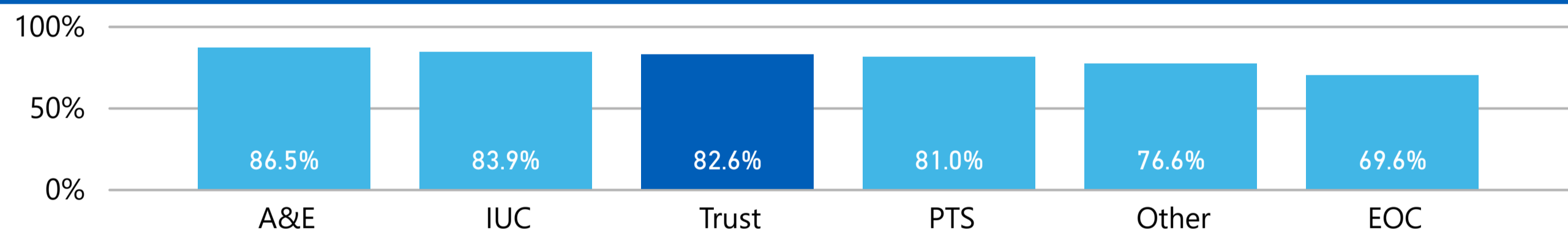
Essential Learning – The overall compliance rate remains stable at 89.9% after a steady increase to the 90% target from Mar 2025. PTS and Other are the highest performing areas (95.8% & 94.1% respectively) with EOC as the lowest at 83.6% (a drop of 14.2% points since Nov 2025). The compliance dashboard is available to all managers and refreshed twice weekly. Safeguarding Level 3 is now included as part of Essential Learning. YAS is an active participant in the national review of Statutory and Mandatory training.

Assurance: All data displayed has been checked and verified

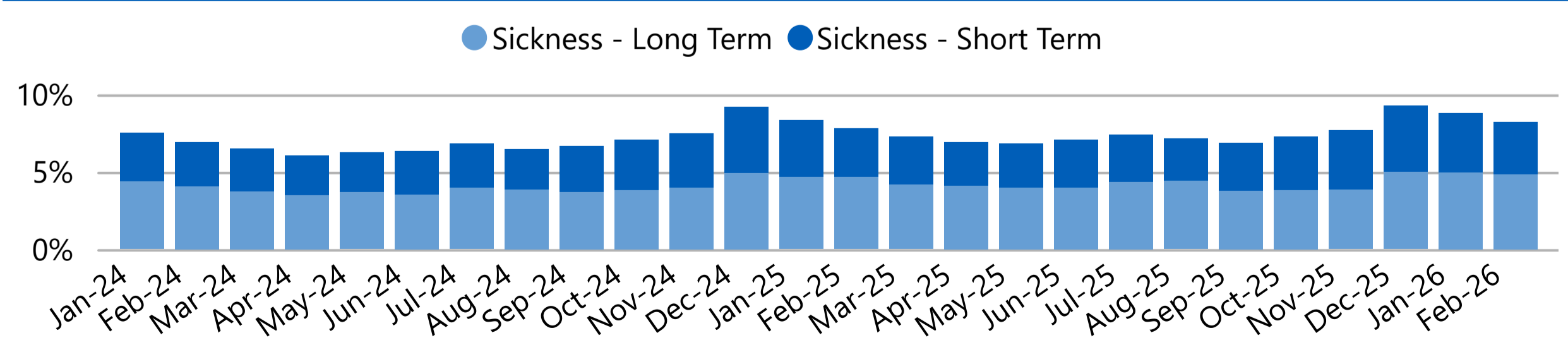
Sickness Benchmark for Last Month (Trust)



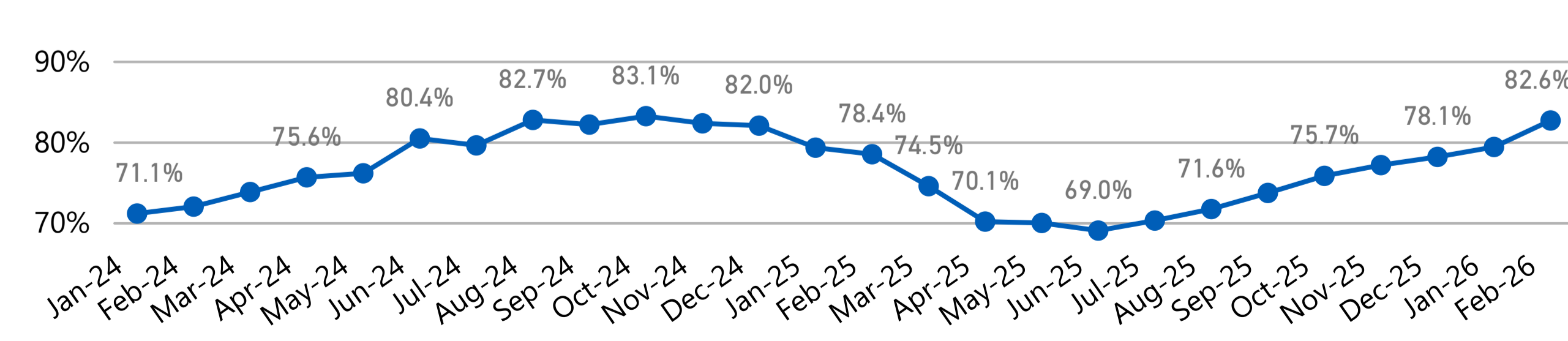
PDR Benchmark for Last Month (Trust)



Sickness



PDR - Target 90%



YAS Finance Summary (Director Responsible Kathryn Vause) - February 26

Overview - Unaudited Position

Overall -

The Trust has a month 11 Surplus position of £2,907k as shown below. The Trust plan is to achieve a £2.5m Surplus for 2025/26.

Capital -

The outturn expenditure is behind plan but forecast to be within the allocation provided.

Cash -

As at the end of February, the Trust had £65.5m cash at bank. (£44.1m at the end of 24/25).

Risk Rating -

There is currently no risk rating measure reporting for 2025/26.

Full Year Position (£000s)

Name	YTD Plan	YTD Actual	YTD Plan v Actual
Surplus/ (Deficit)	-£313	£2,594	£2,907
Cash	£50,519	£65,477	£14,958
Capital	£14,913	£8,753	-£6,160

Monthly View (£000s)

Indicator Name	2025-04	2025-05	2025-06	2025-07	2025-08	2025-09	2025-10	2025-11	2025-12	2026-01	2026-02
Surplus/ (Deficit)	-£24	£191	£209	£441	£547	£86	-£238	£558	£188	£64	£572
Cash	£44,480	£42,692	£41,487	£42,707	£53,196	£53,193	£58,063	£64,797	£63,604	£68,627	£65,477
Capital	£1,566	£148	£1,029	-£1,153	£298	£1,117	-£74	£827	£1,677	£2,203	£1,115

Patient Demand Summary

Demand Summary

Indicator	Feb-25	Jan-26	Feb-26
999 - Incidents (HT+STR+STC)	70,125	80,226	69,501
999 - Calls Answered	80,525	91,507	82,000
IUC - Calls Answered	129,594	150,026	130,927
IUC - Calls Answered vs. Ceiling %	-16.2%	-10.9%	-12.8%
PTS - Demand (Journeys)	77,366	68,978	63,981
PTS - Increase - Previous Month	-6.1%	4.9%	-7.2%
PTS - Same Month Last Year	0.9%	-16.3%	-17.3%
PTS - Calls Answered	38,786	34,484	30,118

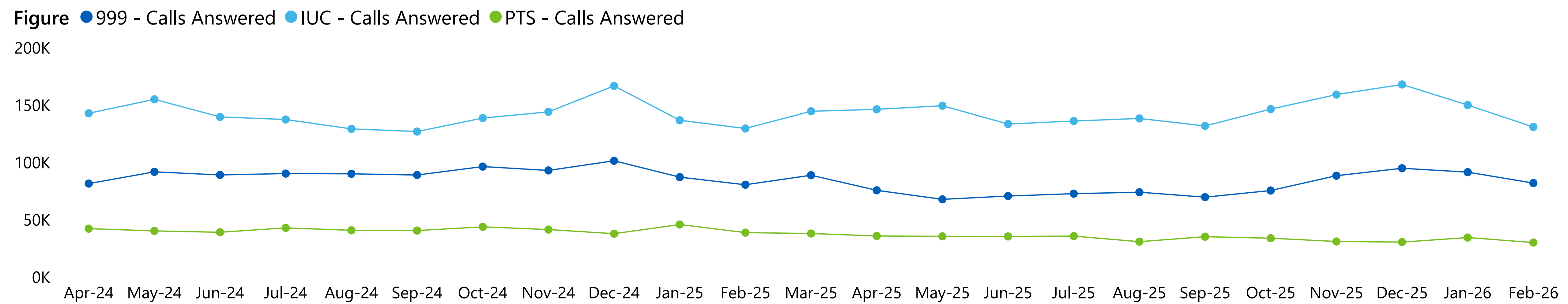
Commentary

999 - On scene response demand was 3.0% below forecasted figures for February. It was 13.3% lower compared to January and 3.4% higher compared to February 2025.

IUC - YAS received 146,276 calls in February, 0.6% below the annual business plan baseline demand. 130,927 (89.5%) of these were answered, 12.7% below last month and 1.0% above the same month last year.

PTS - PTS Total Activity continues to be on a downward trend. February saw 63,981 journeys operated. Compared to February 2025, demand was 17.3% lower. Year to date, Total Activity has seen a reduction of 15.2% compared to 2024-25.

Overall Calls and Demand

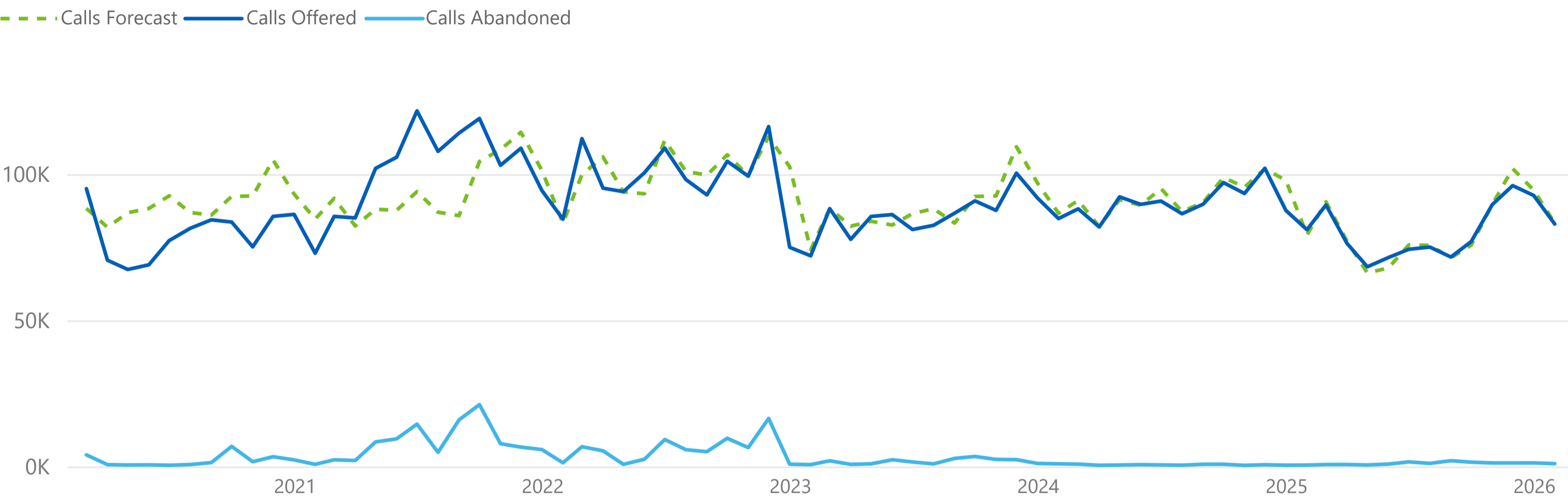


999 and IUC Historic Demand

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



999 Historic Call Demand



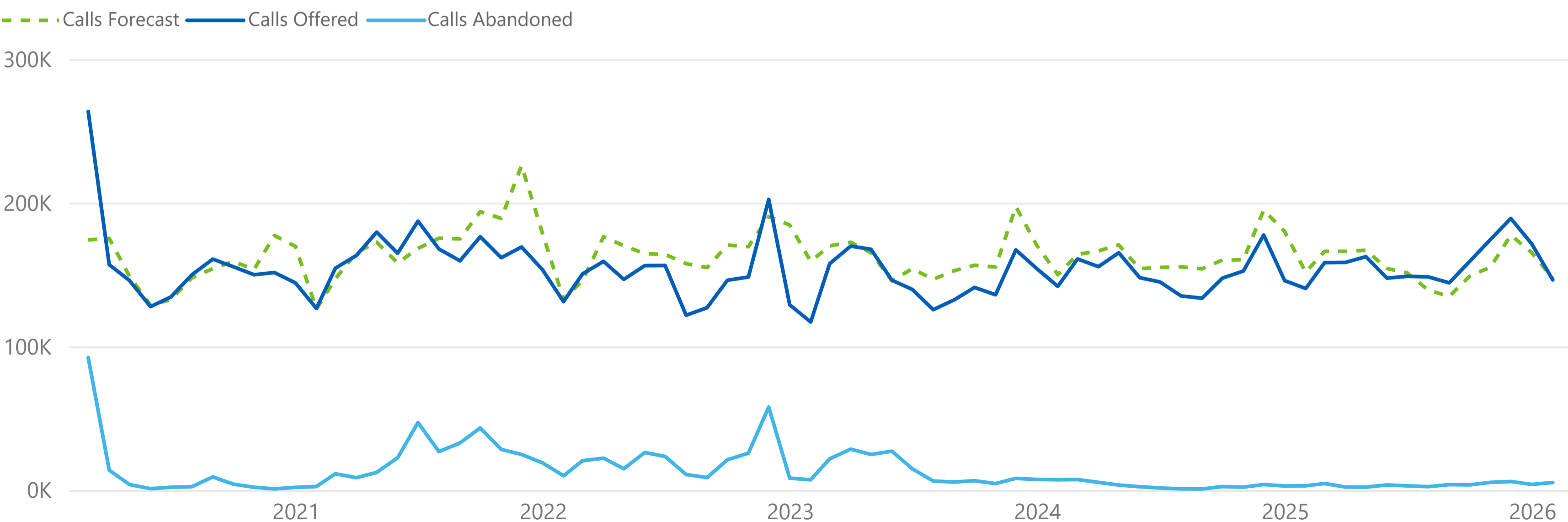
999

999 data on this page includes calls on both the emergency and non-emergency applications within EOC. 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 February 2026, there were 82,922 calls offered which was 0.4% below forecast, with 82,000 calls answered and 922 calls abandoned (1.1%). There were 10.6% fewer calls offered compared with the previous month and 2.4% more 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 22.5% reduction in abandoned calls compared with the previous month.

IUC Historic Demand



IUC

YAS received 146,276 calls in February, 0.6% below the annual business plan baseline demand. 130,927 (89.5%) of these were answered, 12.7% below last month and 1.0% above the same month last year.

Calls abandoned increased to 3.8% from 2.5% last month and was 1.6% above last year.

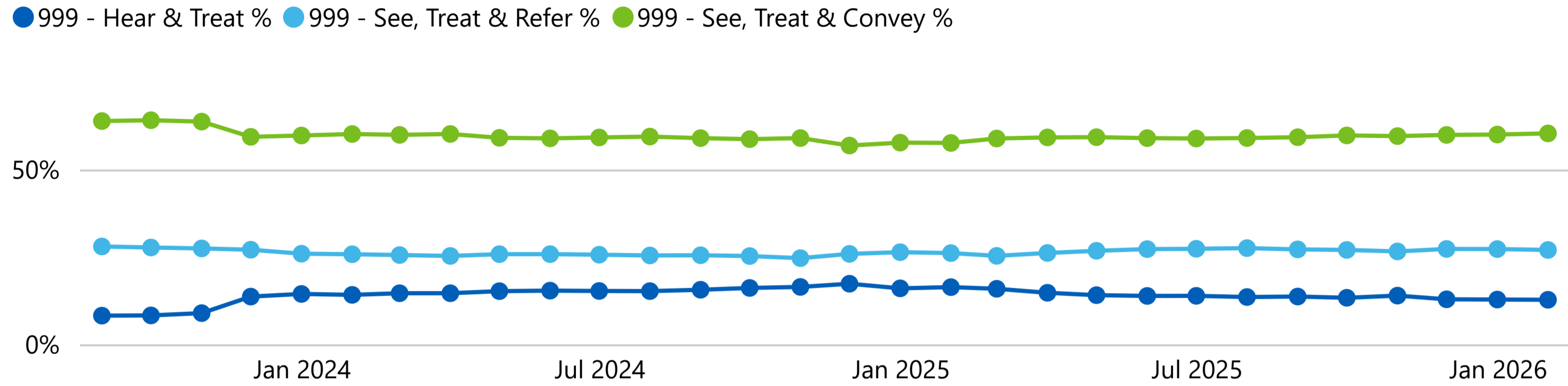
Patient Outcomes Summary



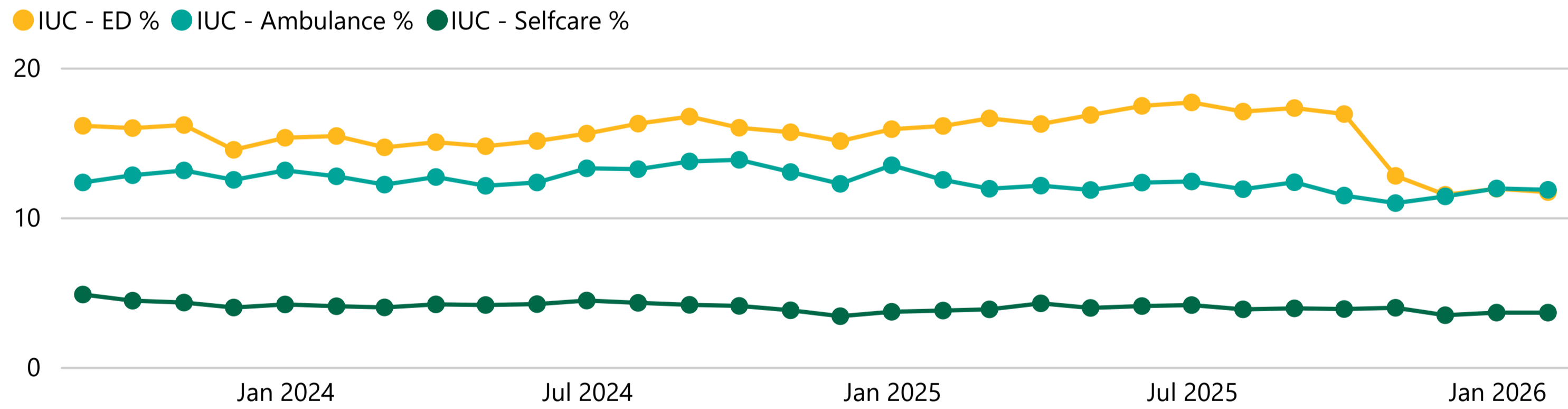
Outcomes Summary

ShortName	Feb-25	Jan-26	Feb-26
999 - Incidents (HT+STR+STC)	70,125	80,226	69,501
999 - Hear & Treat %	16.3%	12.8%	12.7%
999 - See, Treat & Refer %	26.1%	27.2%	27.0%
999 - See, Treat & Convey %	57.6%	60.0%	60.3%
999 - Conveyance to ED %	51.1%	53.5%	53.6%
999 - Conveyance to Non ED %	6.5%	6.5%	6.8%
IUC - Calls Triaged	127,327	138,379	127,552
IUC - ED %	16.1%	11.9%	11.7%
IUC - Ambulance %	12.5%	11.9%	11.8%
IUC - Selfcare %	3.8%	3.6%	3.6%
IUC - Other Outcome %	13.7%	18.7%	18.7%
IUC - Primary Care %	52.4%	46.8%	47.4%
PTS - Demand (Journeys)	77,366	68,978	63,981

999 Outcomes



IUC Outcomes



Commentary

999 - Comparing incident outcome proportions within 999 for February against January, the proportion of hear & treat decreased by 0.1 percentage points (pp), see treat & refer decreased by 0.3 pp and see treat & convey increased by 0.3 pp. The proportion of incidents with conveyance to ED increased by 0.1 pp and the proportion of incidents conveyed to non-ED increased by 0.2 pp.

IUC - Please note, that all measures with the exception of telephony measurements are based on estimates, this is due to the ongoing work to migrate BI systems from Adastra to CAD for clinical data.

Patient Experience (Director Responsible - Dave Green)

A&E

EOC

IUC

PTS

YAS



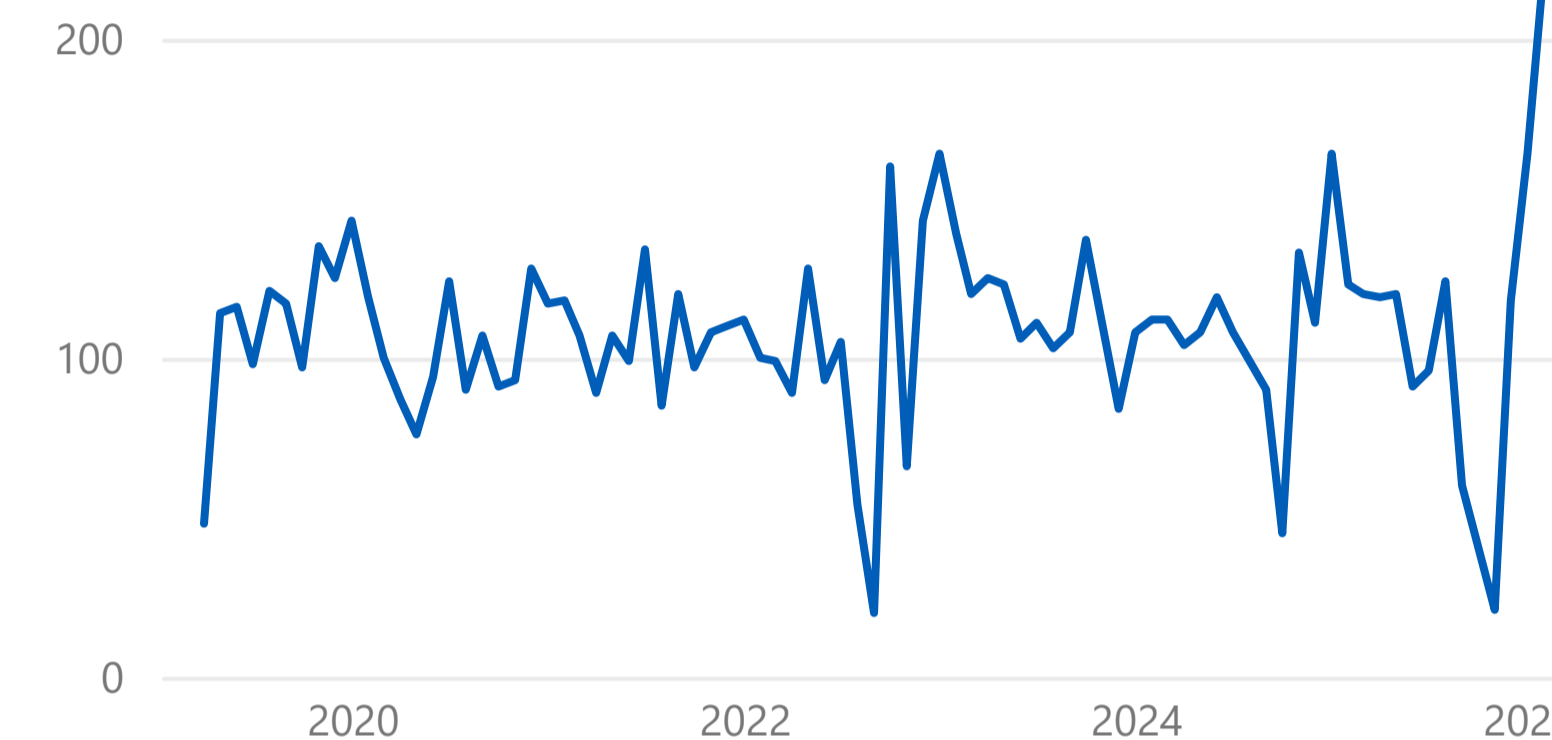
Patient Relations

Indicator	Feb-25	Jan-26	Feb-26
Service to Service	120	126	86
Concern	25	33	20
Compliment	123	164	223
Complaint	58	48	40
Total	123	164	223

Complaint



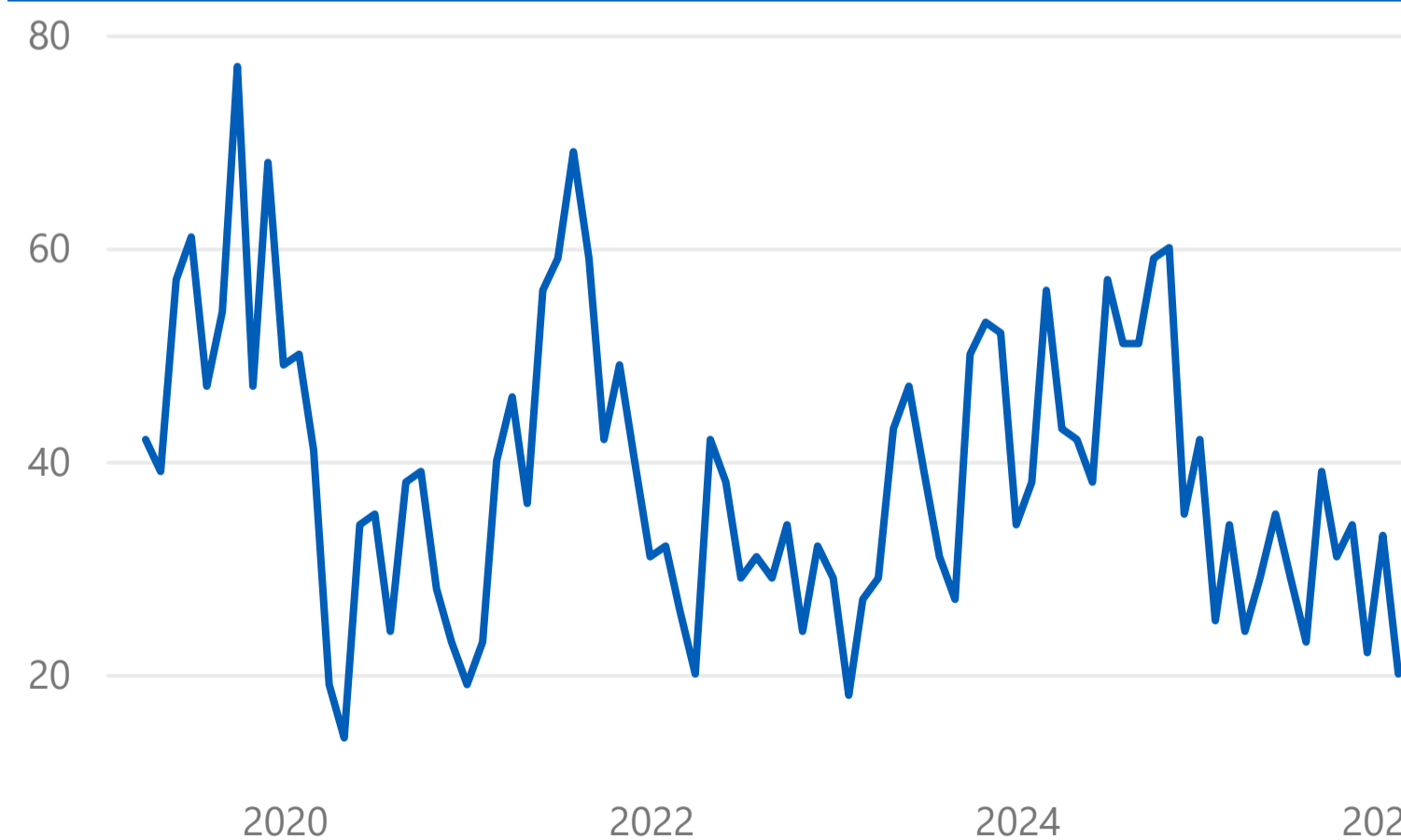
Compliment



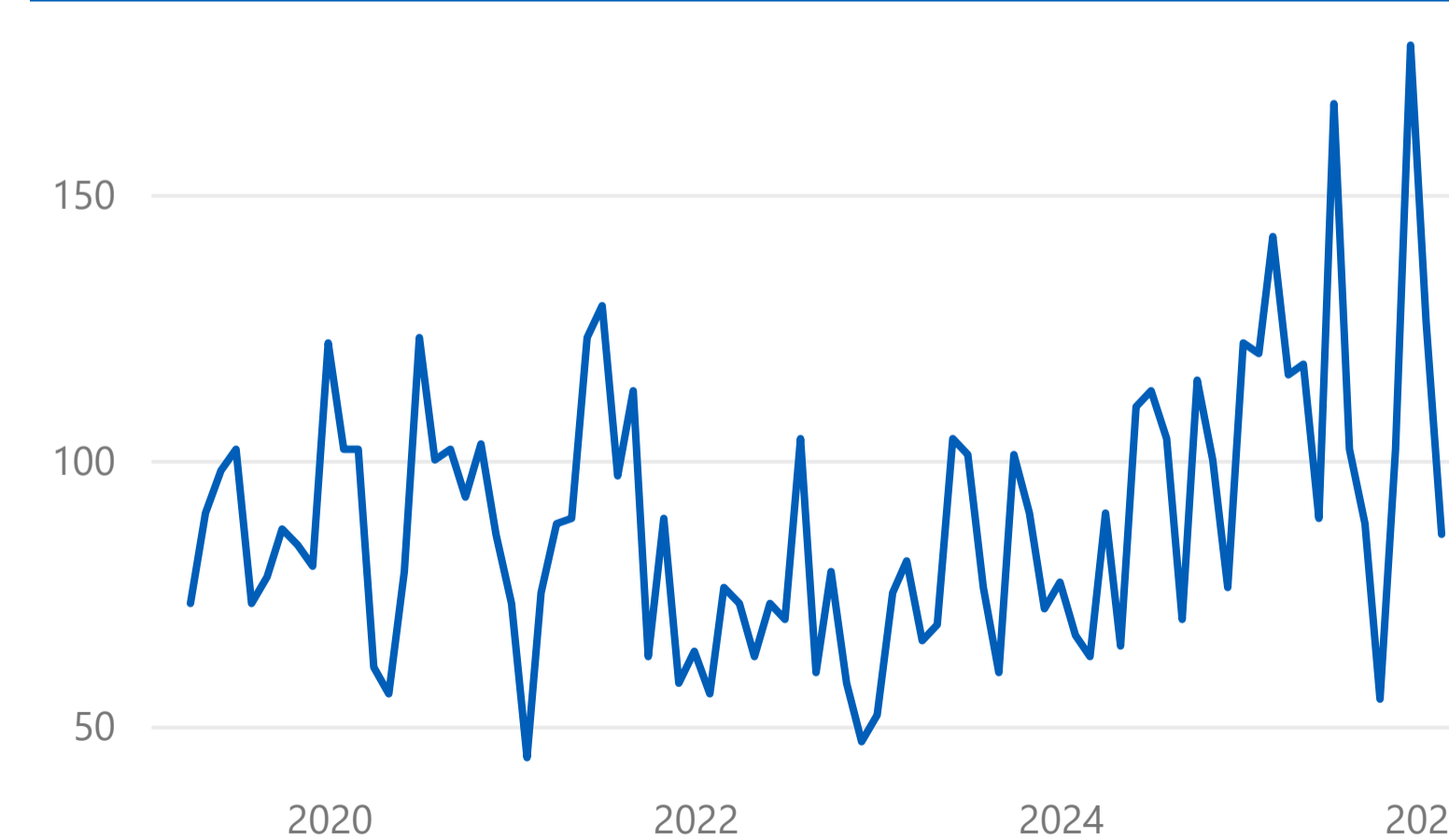
YAS Comments

Service-to-service feedback decreased in February, with 86 cases recorded compared to 126 in January, representing a 32% reduction, primarily within 999 Operations. Concerns also fell by 39%, from 33 in January to 20 in February, across 999 Operations and PTS, while EOC recorded no concerns, a 100% reduction month-on-month. Compliments increased significantly, reaching a record 223, compared with 123 at the same time last year (81% increase). Of these, 205 (92%) were for 999 Operations staff, highlighting strong recognition of frontline performance. Complaints reduced slightly overall, with the most notable improvement in EOC, where numbers fell from 11 in January to 1 in February (91% reduction). The low level of complaints and concerns within EOC supports the planned transition to local resolution, aligning EOC with the Stage 1 model used across other YAS services. This approach has already contributed to a 20% reduction in complaint response times across YAS this financial year.

Concern



Service to Service



Incidents

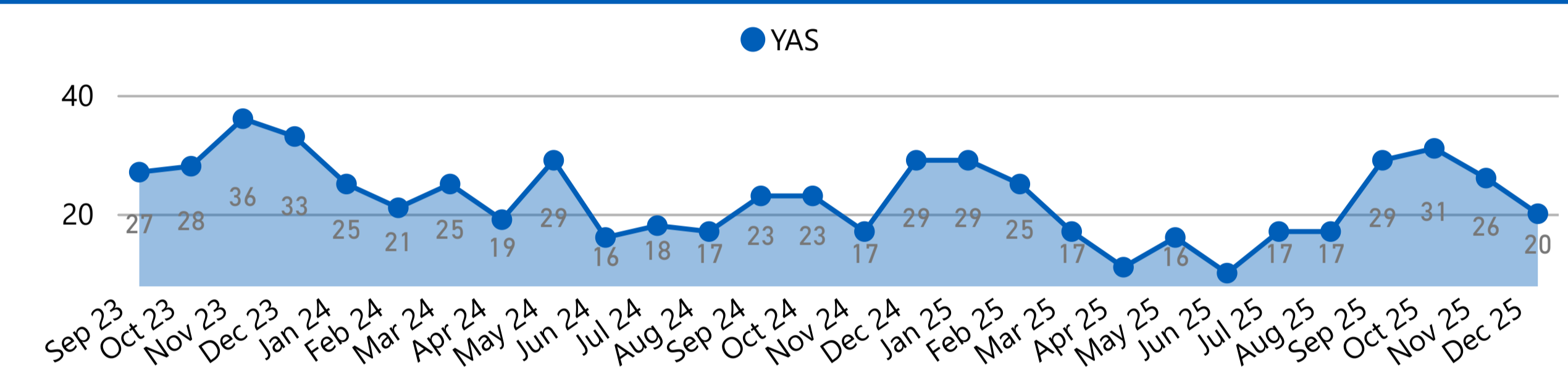
Indicator	Feb-25	Jan-26	Feb-26
All Incidents Reported	892	1,088	972
Number of duty of candour contacts	10	12	14
Number of RIDDORs Submitted	5	6	4
Patient Safety Indicator Incident Investigation		2	

Indicator	Dec 24	Nov 25	Dec 25
Moderate & Above Harm (verified)	29	26	20
Patient Incidents - Major, Catastrophic, Catastrophic (death) (verified)	5	3	3

Hygiene

Indicator	Feb-25	Jan-26	Feb-26
% Compliance with Hand Hygiene	98.6%	92.6%	87.5%
% Compliance with Premise	99.9%	99.0%	99.0%
% Compliance with Vehicle	97.1%	92.9%	87.5%

Incidents - Verified Moderate and Above Harm



Safeguarding

Indicator	Feb-25	Jan-26	Feb-26
Rapid Review	2	2	1
Child Safeguarding Practice Review	1		
Domestic Homicide Review (DHR)	1	1	1
Safeguarding Adult Review (SAR)	9	13	13
Child Death	19	14	16

A&E Long Responses

Indicator	Feb-25	Jan-26	Feb-26
999 - C1 Responses > 15 Mins	676	493	450
999 - C2 Responses > 80 Mins	2,017	1,073	1,117

YAS Comments

- Domestic Homicide Reviews (DHR)** – 1 request for information in relation to a DHR was received this month.
- Safeguarding Adult Review (SAR)** – 13 requests for information in relation to SAR's were received this month.
- Child Safeguarding Practice Review (CSPR)** - 0 requests were received to support a CSPR this month.
- Rapid Review (RR)** – The team contributed information in relation to 1 Rapid Review this month.
- Child death** - The Safeguarding team contributed information in relation to 16 children who died this month.

Patient Clinical Effectiveness

YAS HC&V SYB WY



Cardiac Arrest

No. Cardiac Arrests
Nov-25

282



Bystander CPR
Nov-25

57.8%



ROSC
Nov-25

36.6%



ROSC Care Bundle
Nov-25

60.5%



Survival to Discharge
Nov-25

8.1%



Cardiac Survivors
Nov-25

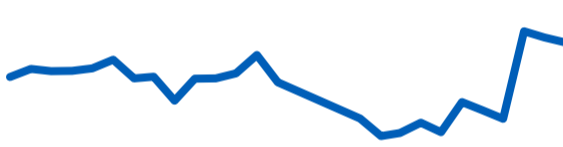
23



Stroke

No. of Patients
Nov-25

568



Avg Call to Door Minutes
Nov-25

92



Heart Attack

No. of Patients
Oct-25

199



Avg Call to Door Minutes
Oct-25

43



Care Bundle Compliance
Oct-25

63.8%



Recontacts

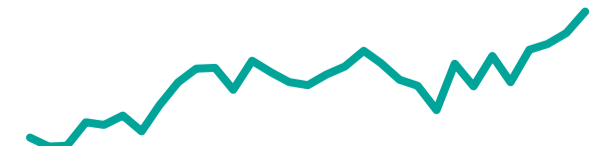
Total Calls %
Feb-26

8.8%



STR %
Feb-26

13.8%



STC %
Feb-26

5.5%



Cardiac Arrest - In November, YAS continued or commenced resuscitation for 282 patients who were in cardiac arrest. The post ROSC care bundle has remained on an upward trajectory at 60.5%. However, this is still lower than the 68.8% seen in July and the national average for the sector. Survival to discharge rate is recorded at 8.1% for the month of November and this equates to 23 patients who have been discharged from hospital following a cardiac arrest. The AmbCo plan continues with stakeholders to improve local reporting and promote awareness amongst all staff. A BI dashboard has been developed specifically for clinical outcome data relating to the national audits and this is still on track to be available in Q1 26/27. This will include benchmarking for comparison with the rest of the ambulance sector.

STEMI care (ST segment elevation myocardial infarction) (Heart Attack) - 199 patients were recorded as having a STEMI in October. Care bundle compliance has continued to improve since the last data collected in July (60.7%) and is 63.8%. There is still improvement required and this will also be part of the AmbCo plan to improve the care delivered and the correct documentation of that care. A pain management service evaluation is underway which includes patients with a presenting complaint of chest pain. It is expected this will identify gaps in care delivery of analgesia across several patient groups including those with chest pain.

Stroke - The number of stroke patients in November is recorded at 568. The call to door time has seen an increase to that seen in previous month from 79 to 92 minutes. The significant change (increase) in patient numbers could be linked to the national issue with SSNAP data which has since been fixed.

Recontacts- January shows recontacts to be at 8.8% across the trust. With STR at 13.8% and STC at 5.5%.

Fleet and Estates

Estates

Indicator	Feb-25	Jan-26	Feb-26
P2 Emergency (<4 Hrs) - Attendance	95.5%	84.0%	95.0%
P2 Emergency (<24 Hrs) – Completed	79.6%	82.0%	92.7%
P3 Non Emergency (<24Hrs) - Attendance	92.1%	80.9%	92.0%
P3 Non Emergency (<72 Hrs) – Completed	77.8%	79.8%	97.4%
P4 Non Emergency (<2 Working Days) - Attendance	95.3%	82.8%	93.8%
P4 Non Emergency (<14 Days) – Completed	79.7%	77.0%	100.0%
P6 Non Emergency (<2 Weeks) - Attendance	86.7%	78.3%	100.0%
P6 Non Emergency (4 Weeks) - Completed	62.2%	69.6%	100.0%
Planned Maintenance Complete	99.0%	98.0%	97.8%

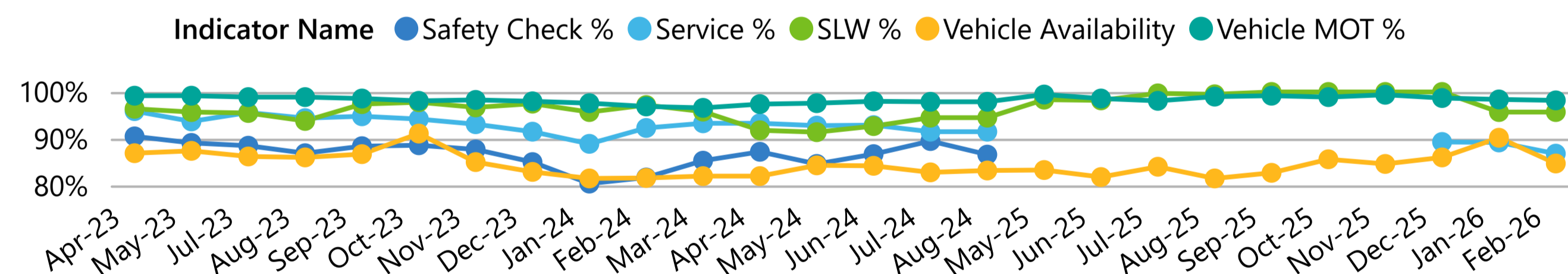
Estates Comments

Requests for reactive work/repairs on the Estate totalled 223 jobs for the month of February. This is lower than the representative average of 300 repairs requests within month. As usual, Springhill remains the largest requester for service at 17 requests followed by Callflex at 12 and Keighley at 11 requests for reactive works. SLA figures are average with an overall attendance KPI at 98% and completion KPI at 97.76%

The other categories aside the P1 & P2 emergency works are – P3 attend within 3 working days and P4 which is attend within 7 days. The P2 category accounts for just under a fifth of requests with attendance KPI at 95% against a target of 100%, P3 category account for just under a third of requests with attendance KPI at 92% against a target of 98% and P4 category account for just over a third of requests with attendance KPI at 93.8% against a target of 90%.

Planned Maintenance activity on the Estate carried out by our service provider to attend to Statutory, mandatory and routine maintenance is recorded at 87.3% for February with a completion of 97.76%.

999 Fleet



999 Fleet Age

Indicator	Jan-26	Feb-26
Vehicle age +7	18.8%	23.3%
Vehicle age +10	0.6%	0.6%

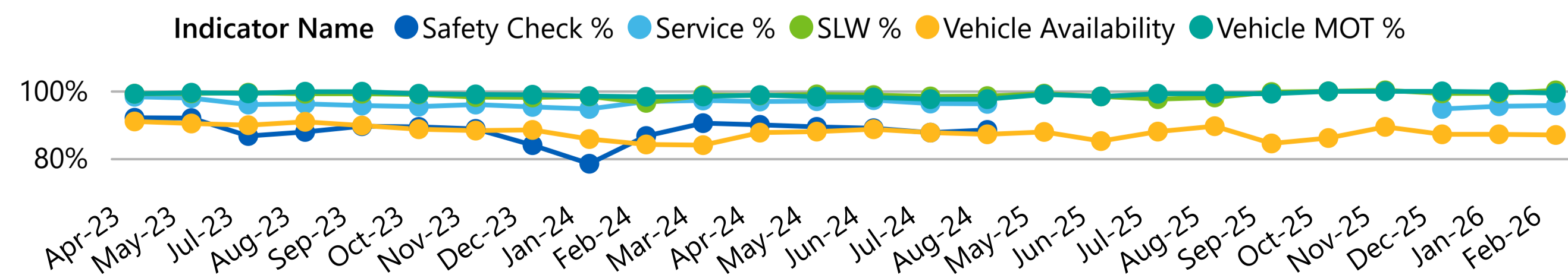
PTS Age

Indicator	Jan-26	Feb-26
Vehicle age +7	0.3%	0.3%
Vehicle age +10	1.0%	1.0%

Fleet Comments

Due to an issue with the system, the safety check figures for this month will be delayed.

PTS Fleet



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
AMB00	999 - Total Number of Calls	int	The count of all ambulance control room contacts.
AMB88	999 - Calls Answered over 2 mins	int	The number of calls answered after more than 2 minutes
AMB147	999 - Total lost handover time (ED and non ED)	int	The total lost handover time over 30 minutes (ED and non ED)
AMB94	999 - Total lost handover time (ED)	int	The total lost handover time over 30 minutes (ED only)
AMB102	999 - Total Hospital Lost Time (TA) (ED and non ED)	int	The total lost time for hospital turnarounds (time over 30 minutes) (ED and non ED)
AMB90	999 - Total Hospital Lost Time (TA) (ED)	int	The total lost time for hospital turnarounds (time over 30 minutes) (ED only)

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

Glossary - Indicator Descriptions (Quality and Safety)

Quality and Safety

mID	ShortName	IndicatorType	AQIDescription
QS24	Staff survey improvement question	int	(TBC, yearly)
QS75	Child Safeguarding Practice Review	int	Child Safeguarding Practice Review
QS74	Rapid Review	int	Rapid Review
QS21	Number of RIDDORs Submitted	int	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
QS27	Serious incidents (verified)	int	The number of verified Serious Incidents reported on DATIX

Glossary - Indicator Descriptions (Workforce)

Workforce

mID	ShortName	IndicatorType	AQIDescription
WF40	Essential Learning	percent	Essential Learning to Replace Bundles
WF05	PDR / Staff Appraisals % (T-90%)	percent	Percentage of staff with an in date Personal Development Review, also known as an Appraisal
WF35	Special Leave	percent	Special Leave (eg: Carers leave, compassionate leave) as a percentage of FTE days in the period.
WF07	Sickness - Total % (T-5%)	percent	All Sickness as a percentage of FTE days in the period
WF16	Disabled %	percent	The percentage of staff who identify as being disabled
WF02	BME %	percent	The percentage of staff who identify as belonging to a Black or Minority Ethnic background
WF17	Apprentice %	percent	The percentage of staff who are on an apprenticeship
WF19	Vacancy Rate %	percent	Full Time Equivalent Staff required to fill the budgeted amount as a percentage
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
WF36	Headcount in Post	int	Headcount of primary assignments
WF18	FTE in Post %	percent	Full Time Equivalent Staff in post, calculated as a percentage of the budgeted amount

Clinical

mID	ShortName	IndicatorType	Description
CLN59	Re-contacts - STC	int	Total number of conveyed calls which resulted in a re-contact to YAS within 72 hours. Managed frequent callers removed.
CLN57	Re-contacts - ST	int	Total number of see and treat calls which resulted in a re-contact to YAS within 72 hours. Managed frequent callers removed.
CLN55	Re-contacts - HT	int	Total number of hear and treat calls which resulted in a re-contact to YAS within 72 hours. Managed frequent callers removed.
CLN53	Re-contacts - Total Calls	int	Total number of calls which resulted in a re-contact to YAS within 72 hours. Managed frequent callers removed.
CLN50	Number of Fall Patients	int	Number of Fall Patients
CLN48	Average Time From Call to Catheter Insertion For Angiography (STEMI)	int	Average Heart Attack Call to Door Minutes
CLN47	Average Stroke On Scene Time Minutes	int	Average Stroke On Scene Time Minutes
CLN44	Number of Cardiac Arrests	int	Number of Cardiac Arrests
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
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
CLN32	Survival UTSTEIN - Patients Discharged Alive	int	Survival UTSTEIN - Of R4n, patients discharged from hospital alive.
CLN28	ROSC UTSTEIN Patients	int	ROSC UTSTEIN - Patients with resuscitation commenced / continued by Ambulance Service.
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	Average Stroke Call to Door Minutes (SSNAP)	int	SSNAP - Avg Time from call to hospital.
CLN16	Number of Stroke Patients (SSNAP)	int	Total number of patients included in the SSNAP hospital data sample.
CLN08	Number of STEMI Patients	int	Number of patients with a pre-hospital clinical working impression of STEMI
CLN04	Number of Patients Surviving to Discharge	int	Number 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

Glossary - Indicator Descriptions (Fleet and Estates)

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
EST10	Planned Maintenance Complete	percent	Planned maintenance completion compliance
EST15	P5 Non Emergency - Logged to Wrong Category	percent	P5 Non Emergency - Logged to Wrong Category
EST14	P6 Non Emergency (4 Weeks) - Completed	percent	P6 Non Emergency - Complete within 4 weeks
EST13	P6 Non Emergency (<2 Weeks) - Attendance	percent	P6 Non Emergency - Attend within 2 weeks
EST05	Planned Maintenance Attendance	percent	Average attendance compliance across all calls
EST09	All calls (Completion) - average	percent	Average completion compliance across all calls
EST04	All calls (Attendance) - average	percent	All calls (Attendance) - average
EST08	P4 Non Emergency (<14 Days) – Completed	percent	P4 Non Emergency completed within 14 working days compliance
EST03	P4 Non Emergency (<2 Working Days) - Attendance	percent	P4 Non Emergency attended within 2 working days compliance
EST07	P3 Non Emergency (<72 Hrs) – Completed	percent	P3 Non Emergency completed within 72 hours compliance
EST02	P3 Non Emergency (<24Hrs) - Attendance	percent	P3 Non Emergency attended within 24 hours compliance
EST12	P2 Emergency (<24 Hrs) – Completed	percent	P2 Emergency – Complete within 24 hrs compliance
EST11	P2 Emergency (<4 Hrs) - Attendance	percent	P2 Emergency – attend within 4 hrs compliance
EST06	P1 Emergency (<24 Hrs) - Completed	percent	P1 Emergency completed within 24 hours compliance
EST01	P1 Emergency (<2Hrs) – Attendance	percent	P1 Emergency attended within 2 hours compliance