Board of Directors (in Public)
23 July 2026

NHS Yorkshire Ambulance Service NHS Trust

Report Title	Operational Performance Assurance – M3 June Update
Author	Gavin Austin, Senior Programme Lead
Accountable Director	Carol Weir, Director of Strategy, Planning and Performance
Previous committees/groups	• Trust Executive Group (15 July 2026) • Finance and Performance Committee (16 July 2026) • Trust Board (23 July 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 report provides assurance on Trust-wide operational performance for June 2026, focusing on key exceptions across 999 Operations, Remote Patient Care (EOC and IUC) and PTS, and reflecting the Performance Management Framework approach to monitoring improvement actions.

In 999 Operations, Category 2 mean response time deteriorated to **25 minutes 29 seconds**, which was **1 minute 39 seconds worse than plan**, with all areas below trajectory during a period affected by adverse operating conditions in the June heatwave. Key drivers included crew clear remaining materially above plan, deployed DCA and staff hours below planned levels and sickness at **7.2%**, partly offset by arrival-to-handover remaining better than trajectory and the workforce position being **59 FTE above plan**. The A&E budget position was **£549k underspent** at month 3.

In EOC, mean call answer performance worsened from **13 to 15 seconds**, below the planned level of 9 seconds, despite demand being 3.0% below forecast. The deterioration was linked to peaks in demand, call handler downtime and staffing levels. EOC appraisal compliance improved to **89.9%**, but sickness rose to **9.2%**. The budget position was **£293k underspent**.

In IUC, call answer performance reduced to **88.0%** of calls answered within 120 seconds but remained **21.6 percentage points above plan**. Clinical assessment within the agreed timeframe remained low at **9%**, with actions progressing following TEG and ELB consideration. Workforce was on plan, appraisal compliance improved to **90.1%**, and sickness remained high at **11.6%**. IUC was **£200k overspent**.

PTS activity was **5.4% below forecast**, with mixed KPI delivery: KPI 1 exceeded plan, while KPI 2, KPI 3 and KPI 4 were below plan. Call answering improved to **98.8%**. Appraisal compliance remained below target at **88.1%**, sickness increased to **7.8%**, and the service was **£133k underspent**. Overall, the report identifies continuing risks around EOC responsiveness, Hear and Treat, IUC clinical callbacks, workforce resilience and adverse operating conditions, with mitigation managed through established performance arrangements.

Recommendation(s)	The Board 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 acces to appropriate care. 3. Support patient flow across the urgent and emergency care system.

1.0 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, chaired 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.

2.0 BACKGROUND

2.1 Data is provided from the Operational Trajectory[1] and Integrated Performance Report[1] 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 (e.g. call demand, Cat 2 performance) and inputs (e.g. deployed ambulance hours, workforce numbers.

2.2 The latest available NHS Oversight Framework metrics table (Q4 2025-26 published 11/6/26) is also included as an appendix (see Table 3).

3.0 OPERATIONAL PERFORMANCE ASSURANCE

3.1 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.

3.2 999 OPERATIONS

3.2.1 **Category 2 mean** response time in June was 25 minutes 29 seconds, an increase on the previous month and 1 minute 39 seconds worse than trajectory target. June performance coincided with a significant national heatwave between 22 and 26 June 2026, during which England experienced record-breaking temperatures and health service providers operated under elevated heat-health alerts. YAS activated adverse weather arrangements and increased escalation measures in response to the forecast pressures, which may have contributed to increased demand and operational pressures affecting response times.

3.2.2 All areas performed below plan during June, reflecting the impact of challenging operating conditions, although variation across regions remained evident. HNY and the West remained relatively close to trajectory at 6 seconds and 34 seconds worse than plan respectively, while performance in the South was further from plan, with response times 2 minutes and 13 seconds slower than expected.

3.2.3 The key drivers and improvement actions for Category 2 response times are as follows:

- **Crew clear** time was up marginally in June, rising by 9 seconds to 22 minutes 13 seconds. Performance remains worse than planned trajectory at 3 minutes 17 seconds higher than plan. It should be noted the target was established in

[1] Links to most recently published Power BI dashboard/report

November based on the level of improvement seen earlier in 2025/26. Performance deteriorated during Q4, ending the year worse than plan, resulting in a requirement for a significant improvement of approximately three minutes between Q4 and Q1 to return to trajectory.

- **Arrival to handover** increased by 1 minute 4 seconds compared to the previous month, to 18 minutes 1 second, which is better than the trajectory plan. South Yorkshire continues to deliver the strongest performance, recording an average of 15 minutes 29 seconds in June.

- **Deployed average daily hours** on DCA's were 5,687 hours in June, 1.0% below plan, and average daily staff hours were 11,956, 0.6% below plan; both measures are below planned levels, indicating reduced operational capacity which can impact response times. Action is being taken to address this in June through use of targeted overtime.

- **Sickness** absence in A&E increased slightly from 7.1% to 7.2% in June and was 1.2pp above plan. Sickness above plan is the main contributing factor to deployed hours being below plan. The June heatwave may also have been a contributory factor to the increase in sickness absence, placing additional strain on staff working in challenging operational conditions.

- **Excessive responses (twice the 90th percentile)**
  Cat 2 excessive responses rose by 340 (40.7%) vs last month but fell by 126 (-9.7%) vs May 2025. They accounted for 3.3% of Category 2 responses on scene in 2026 (3.9% last year).
  - HNY had the lowest rate at 2.9% (300) of Category 2 responses
  - SY had the highest rate stood at 3.2% (339) of Category 2 responses
  - West rate was 3.1% (537) of Category 2 responses

3.2.4 **999 Workforce** position was above plan in June by 59 FTE (1.7% above trajectory). The current year end position is forecast to be 9 FTE above plan.

A&E											
JUNE 2026						YEAR END FORECAST @ 8/7/26					
TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE	TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE
OPERATING PLAN	ACTUAL	FTE Variance against this month's Plan		Variance against this month's Plan		OPERATING PLAN	FORECAST	FTE Variance against Year End Plan		Variance against Year End Plan	
		No	%	%	%			No	%	%	%
3,374	3,433	59	1.7	+1.2%	+39.6%	3,403	3,411	8	0.24	+1.10%	-31.2%

3.2.5 **Appraisal compliance** fell slightly from 89.6% to 89.0% in June which is slightly under the 90% planned target.

3.2.6 **Budget** position at month 3 is £549k underspent.

3.3 **REMOTE CARE**

3.3.1 **EOC**

3.3.2 **Mean call answer** performance worsened from 13 to 15 seconds in June, underperforming against the planned level of 9 seconds. Demand was below plan at

3.0% lower than the forecasted daily average (96 fewer calls) However significant peaks on day which exceeded capacity along with call handler downtime being higher than optimum levels contributed to the drop in performance. While call handler workforce was above plan, staffing levels within EOC dispatch and clinical teams remained slightly below plan.

The current year end position is forecast to be slightly below plan.

EOC											
JUNE 2026						YEAR END FORECAST @ 8/7/26					
TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE	TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE
OPERATING PLAN	ACTUAL	FTE Variance against this month's Plan		Variance against this month's Plan		OPERATING PLAN	FORECAST	FTE Variance against Year End Plan		Variance against Year End Plan	
		No	%	%	%			No	%	%	%
EOC CALL HANDLING											
243	254	11	4.3	+2.20%	83.5%	264	263	-1	-0.38	-0.30%	+57.1%
EOC DESPATCH											
142	130	-12	-9.2	-8.10%	-25.0%	139	137	-2	-1.46	-1.60%	-14.3%
EOC CLINICAL											
151	144	-7	-4.9	-2.2%	-14.3%	167	163	-4	-2.45	-2.5%	-12.5%

3.3.3 **People Measures**

- **Appraisal compliance** in EOC improved from 88.2% to 89.9% in June which is almost in line with the 90.0% year-end target and requires continued focus to improve compliance.
- **Sickness** increased from 8.6% to 9.2% which was 3.2 pp above the 6.0% trajectory for June. Existing support for colleagues continues from the wellbeing team in EOC.

3.3.4 **Budget** position was £293k underspent at month 3.

3.4 **IUC**

3.4.1 Call answer performance in June worsened on the previous month from 92.6% of calls answered in 120 seconds to 88.0% but was 21.6 pp above plan for June. Demand in June was 3.7% below plan (197 calls). The key drivers and actions that impact on call answer are as follows:

- **Proportion of calls assessed by a clinician within agreed timeframe** remained low at 9%. A paper on reporting options went to TEG in June and then onto ELB at the end of June detailing what codes are included in reporting and actions continue to be progressed to improve performance.
- **Workforce position** was exactly on plan in June for both Health and Clinical Advisors.

IUC											
JUNE 2026						YEAR END FORECAST @ 8/7/26					
TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE	TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE
OPERATING PLAN	ACTUAL	FTE Variance against this month's Plan		Variance against this month's Plan		OPERATING PLAN	FORECAST	FTE Variance against Year End Plan		Variance against Year End Plan	
		No	%	%	%			No	%	%	%

HEALTH ADVISERS											
408	408	0	0.0	-18.8%	-49.3%	424	426	2	0.47	+1.2%	NA
CLINICAL ADVISERS											
116	116	0	0.0	-0.90%	-20.0%	125	125	0	0.00	0.0%	-14.3%

3.4.2 **People Measures**

- **Sickness** in IUC rose slightly from 11.4% to 11.6% in June and is 1 pp above plan. Sickness reduction continues to be a key focus, with plans to implement actions successfully applied within EOC to support further improvement in 2026/27.
- **Appraisal** compliance improved in June from 89.1% to 90.1% and is above the 90% Trust target.

3.4.3 **Budget** IUC position at month 3 is £200k overspent

3.5 **PTS**

3.5.1 Patient Transport Service (PTS) activity in June was below forecast by 5.4%, falling marginally out of the 5.0% threshold. 8,268 extra contractual journeys (ECJ) were delivered against a plan of 8,631, representing a 4.2% reduction against plan. Category F (non-eligible patient travelling to systemic anti-cancer treatment or radiotherapy) journeys accounted for 48.9% of total Extra Contractual Referrals (chargeable journey not in the core contract), this was consistent with the with April and May.

Metric	Actual June 26	Variance against Plan
KPI 1 – Pickup / Journey Time	97.2%	+5.9 pp
KPI 2 – Dropoff / Arrival Time	85.4%	-2.2pp
KPI 3 – Pre-Planned: At Location in 90m %	90.2%	-0.3pp
KPI 4 – Short Notice: At Location in 120m %	81.5%	-6.8pp

3.5.2 The drivers and actions to improve are as follows:

- **Demand** averaged 2,230 journeys per day in June, 5.4% below plan. Regionally, activity remained below trajectory across all areas, with South 3.6%, HNY 3.5% and WY 7.8% below plan, indicating lower-than-expected demand.
- **Patients per vehicle (PPV)** decreased to 1.36 in June and is being closely monitored since eligibility go live as we aim to maximise the efficiency of our own vehicles to achieve planned savings.
- **Workforce position** was slightly above plan in June and is forecast to be 1.5% below operating plan forecast at the year end.

PTS											
JUNE 2026						YEAR END FORECAST @ 8/7/26					
TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE	TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE
OPERATING PLAN	ACTUAL	FTE Variance against this month's Plan		Variance against this month's Plan		OPERATING PLAN	FORECAST	FTE Variance against Year End Plan		Variance against Year End Plan	
		No	%	%	%			No	%	%	%
465	470	5	1.1	+0.60%	+6.20%	465	458	-7	-1.53	-0.90%	-9.90%

3.5.3 **Call answering** performance (within 180 seconds) was up from 96.0% to 98.8% in June.

3.5.4 **People Measures**

- **Appraisal** compliance stood at 88.1% in June which was below the target of 90%.
- **Sickness** rose by 1pp to 7.8%, which was 2.4pp worse than the June operating plan trajectory. Support measures remain in place, and work is underway to identify suitable alternative duties for PTS staff.

3.5.5 **Budget** position is £133k underspent at month 3

4.0 FINANCIAL IMPLICATIONS

4.1 Overall, operation budgets are £775k underspent against plan at month 3, but remain forecast at break even for the year.

5.0 RISKS

5.1 Key risks arising from this report are:

- **EOC mean call answer:** Forecasted shortfalls in recruitment numbers in July and August are likely to further impact call performance over coming months.
- **Risk to patient experience and system confidence (Hear and Treat):** Even though we have seen a marked improvement, there continues to be an underperformance in Hear and Treat, linked to NHS Pathways implementation, this may increase responses at scene as has been seen through the last 12 months.
- **Risk to patient experience and system confidence (IUC clinical callbacks):** low performance in IUC clinical callbacks (KPI4), driven by increased demand and constrained clinical capacity, may continue without additional investment and could adversely impact patient experience.
- **Workforce resilience risk:** elevated sickness levels in some operational areas may reduce resilience, increase pressure on available staff, and impact the Trust's ability to sustain operational performance.
- **Sustained periods of adverse operating conditions**, including extreme weather events, may further impact operational performance, workforce wellbeing and service resilience.

5.2 **Mitigation and oversight:** these risks are recognised and are being actively managed through targeted improvement actions, workforce planning and financial controls, with ongoing monitoring and escalation through the established performance management arrangements.

6.0 RECOMMENDATIONS

6.1 The Board are asked to note the contents of this paper for assurance purposes.

APPENDIX 1 – WORKFORCE PERFORMANCE TRAJECTORIES

TABLE 1: WORKFORCE POSITION – JUNE 2026 AND 2026/27 YEAR END FORECAST

OPERATIONAL SERVICE AREA	JUNE 2026						YEAR END FORECAST @ 8/7/26					
	TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE	TOTAL FTE				SUBSTANTIVE FTE	OVERTIME FTE
	OPERATING PLAN	ACTUAL	FTE Variance against this month's Plan		Variance against this month's Plan		OPERATING PLAN	FORECAST	FTE Variance against Year End Plan		Variance against Year End Plan	
			No	%	%	%			No	%	%	%
A&E Operations	3,374	3,433	59	1.7	+1.2%	+39.6%	3,403	3,411	8	0.24	+1.10%	-31.2%
EOC Call Handling	243	254	11	4.3	+2.20%	83.5%	264	263	-1	-0.38	-0.30%	+57.1%
EOC Despatch	142	130	-12	-9.2	-8.10%	-25.0%	139	137	-2	-1.46	-1.60%	-14.3%
EOC Clinical	151	144	-7	-4.9	-2.2%	-14.3%	167	163	-4	-2.45	-2.5%	-12.5%
IUC HA	408	408	0	0.0	-18.8%	-49.3%	424	426	2	0.47	+1.2%	NA
IUC CA	116	116	0	0.0	-0.90%	-20.0%	125	125	0	0.00	0.0%	-14.3%
PTS	465	470	5	1.1	+0.60%	+6.20%	465	458	-7	-1.53	-0.90%	-9.90%
Total	**4,899**	**4,955**	56	1.1			**4,987**	**4,983**	-4	-0.08		

Source: Trajectory Report, YAS BI Portal, data 8/7/26

TABLE 2: KEY METRICS – ANNUAL BUSINESS PLAN 2026/27

		ACTUAL			FORECAST											
Metric	BASELINE (25/26 YE ave)	Apr-26	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan-26	Feb	Mar	26/27 YE Forecast	YE Operating Plan	YE BP Target
STRATEGIC PRIORITY 1 – RIGHT RESPONSE: Increase Hear and Treat and reduce ED Conveyance																
Hear & Treat %	13.4%	12.1%	13.1%	14.0%	12.6%	13.2%	14.8%	15.9%	18.6%	16.1%	20.5%	20.0%	19.4%	15.9%	15.5%	15.4%
ED Conveyance Rate	52.8%	53.4%	52.3%	51.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			51.5%
Conveyance Rate		60.3%	59.0%	58.5%	60.0%	59.7%	58.6%	57.8%	55.9%	57.7%	54.4%	54.8%	55.3%	57.6%	58.30%	
Average Daily Responses at Scene	2,157	2,159	2,173	2,172	2,233	2,067	2,080	2,128	2,136	2,315	2,120	2,083	2,066	2,144	2,180	
STRATEGIC PRIORITY 2 – IMPROVE OPERATIONAL PRODUTIVITY & PERFORMANCE: Improve Performance including Category 2																
Category 2 Mean	00:26:14	00:22:27	00:23:57	00:25:29	00:29:40	00:22:40	00:27:25	00:29:13	00:27:13	00:25:31	00:18:52	00:28:41	00:31:20	00:26:02	00:24:44	00:24:44
Handover to Clear	00:21:53	00:22:11	00:22:04	00:22:13	00:22:21	00:22:21	00:22:21	00:22:21	00:22:21	00:22:21	00:22:21	00:22:21	00:22:21	00:22:18	00:19:03	00:19:05
Arrive to Handover	00:19:14	00:17:28	00:17:57	00:18:01	00:19:35	00:17:20	00:18:09	00:18:04	00:20:10	00:21:13	00:20:58	00:19:45	00:18:44	00:19:03	00:19:23	
Vehicle Availability: DCA	80.2%	81.8%	79.6%	81.6%												
IUC Not Ready Reason Codes – Health Advisor	28.00%	28.20%	28.20%	28.00%	28.00%	28.00%	28.00%	28.00%	28.00%	28.00%	28.00%	28.00%	29.00%	28.00%		
IUC Clinical Call Backs in 1 hour	41.30%	27.40%	26.60%	24.90%	27.4%	26.6%	24.9%	25.5%	26.5%	26.4%	27.0%	26.3%	24.6%	23.0%		
PTS KPI 1 deliver journey times less than 120 mins	97.10%	96.80%	97.40%	97.2%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	97.20%	91.30%	
PTS KPI 3 deliver pre planned pick up within 90 mins	89.50%	90.0%	90.4%	90.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	90.2%	90.50%	
PTS KPI 4 Deliver short notice pick up within 120 mins	80.10%	82.4%	80.7%	81.5%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	81.50%	88.30%	
PTS patients per vehicle	1.38	1.37	1.37	1.36	1.39	1.41	1.39	1.37	1.41	1.44	1.39	1.41	1.43	1.37	1.36	
PTS Call Handling - answered in 180 seconds	88.00%	88.01%	96.00%	98.8%											90%	
STRATEGIC PRIORITY 3 – SUPPORT OUR PEOPLE: Reduce Sickness																
Sickness (Total)	7.6%	7.6%	7.2%	7.7%	6.7%	6.6%	6.3%	6.6%	7.2%	8.8%	8.3%	7.7%	7.6%	7.5%	7.1%	7.1%
Sickness - A&E	7.2%	7.4%	7.1%	7.2%	6.4%	6.4%	5.8%	5.9%	6.6%	8.2%	8.0%	7.2%	7.2%	7.2%	7.2%	
Sickness - EOC	7.9%	8.8%	8.5%	9.2%	6.5%	6.6%	6.0%	7.0%	7.3%	10.0%	9.6%	8.6%	9.1%	8.9%	7.5%	
Sickness - IUC	12.7%	12.0%	11.2%	11.6%	11.7%	12.0%	11.6%	10.4%	12.1%	15.9%	14.0%	13.8%	13.1%	11.7%	12.2%	
Sickness - PTS	8.0%	8.6%	7.7%	8.8%	7.5%	6.2%	6.7%	8.5%	8.0%	9.4%	7.9%	7.9%	8.7%	8.4%	7.5%	
Long Term Sickness (%)	4.21%	4.76%	4.39%	4.57%												3.96%
Short Term Sickness (%)	3.3%	2.83%	2.86%	3.09%												3.05%

Source: Yorkshire Ambulance Service BI Portal. All business plan performance metrics were extracted on 7-8 July 2026 and represent the latest available position at the time of reporting. Data is subject to routine validation through the Trust's performance management framework

TABLE 3: NHS OVERSIGHT FRAMEWORK METRICS TABLE

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).
- Response times they remain better than the average (rank 3/10).
- Sickness absence increased slightly in Q4 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?
Q4 2025/26	1 - High performing	No

Domain	Sub-domain	Metric description	Release Frequency	Metric Value	Q4 2025/26					
					Reporting Date	Metric Value	Average value	Metric value change	Metric score	Rank out of 10
Access to services	Urgent and emergency care	Average Category 2 ambulance response time	Monthly	mins	To Mar 2026	26.25	28.93	-0.33 ↑	1.00	3
Effectiveness and experience	Effective out of hospital care	Percentage of ambulance patients conveyed to emergency departments	Monthly	%	To Mar 2026	52.9	48.70	0.20 ↓	3.40	9
	Patient experience	NHS staff survey advocacy score	Annual	out of 10	2025	6.67	6.1	0.09 ↑	1.00	1
Finance and Productivity	Finance	Planned surplus/deficit	Annual plan	%	2025/26	0.00	0.00	0.00 →	1.00	2
		Variance year-to-date to financial plan	Year to date	%	Month 12 2025/26	0.54	0.59	-0.14 ↓	1.00	6
		Combined finance	Year to date	score	Q3 2025/26				1.00	
	Productivity	Relative difference in costs	Annual	%	2024/25	96.71	96.16	0.00 ↓	1.99	6
Patient safety	Patient safety	NHS Staff survey – raising concerns sub-score	Annual	out of 10	2025	6.27	5.94	0.14 ↑	1.00	1
People and workforce	Retention and culture	Sickness absence rate	available monthly - Quarterly aggregated monthly figures	%	Q3 2025/26	8.03	7.74	0.99 ↓	3.91	7
		NHS staff survey engagement theme	Annual	out of 10	2025	6.29	5.91	0.06 ↑	1.00	1

Source: NHS England, 11/06/26