



Yorkshire Ambulance Service NHS Trust

Performance and Quality Update

September 2015



Our Communities

YAS is the only NHS provider serving the whole Yorkshire region

- Provides: A&E ambulance service; non-emergency Patient Transport Service; NHS 111 service; resilience and special services
- Covers the whole of Yorkshire and the Humber (over 6,000 square miles)
- Commissioned by 23 clinical commissioning groups
- Ideally placed to support joined-up care for patients and provide the gateway into urgent and emergency services



The Demand Challenge

- Demand for emergency ambulances is increasing year-on-year across the whole country
- In Yorkshire and the Humber demand for the most seriously ill and injured patients (Red incidents) was up by 11% in 2014-15 compared to 2013-14



Strategic Priorities

- Improve clinical outcomes: cardiac arrest and major trauma
 - take a national lead on cardiac arrest survival
- Sustain and improve against emergency response standards
- Develop timely urgent and emergency care
 - community-based urgent care practitioners
 - NHS 111 and care coordination
 - Care pathways for specialist groups: frequent callers, mental health, palliative care
- Work with health and care partner organisations to contribute to local integration
- Create, attract and retain a skilled workforce
- Be at the forefront of healthcare resilience and emergency preparedness

What this means for York

- Urgent care practitioner schemes in York help to keep more patients at home
 - reduces demand for double-crew ambulances
 - helps keep resources in rural areas and reduce the pull into city areas
- Rolling out Paramedic Pathfinder clinical decision support tool across North Yorkshire from autumn
 - supporting clinical decision making
 - up-to-the minute access to local care pathways
 - more patients can stay at home with referrals to GP or other primary care services
- Increasing access to patient information
 - electronic ambulance patient report forms
 - access to primary care information
 - supporting clinical decision-making and integrated care



Partnership with Staff

Partnership working is critical to the development and progression of our organisation

Following extensive and on-going staff consultation which began in 2015 we plan to:

- Increase ambulance resources in North Yorkshire to ensure we have the resources to match demand
- A clear career and development pathway to become a paramedic for all staff to assist in the national shortage of paramedic staff
- Introduction of new clinical roles provides skill development for staff
- All rapid response vehicles will be staffed by paramedics as a minimum



A&E Performance

- The national performance target for ambulance services is to reach 75% of patients with life threatening conditions (Red calls) within 8 minutes
- In 2014-15 the average performance for Vale of York was 73.9%
- So far this year (April-August 2015) performance is **74.84%** (compared to 74.02% in same period 2014)

Ambulance Clinical Quality Indicators

Indicator	National Average March 2015	North Yorkshire Actual April 2015	Vale of York Actual April 2015
Unit	%	%	%
Return of spontaneous circulation after an out of hospital cardiac arrest	27.4	35.4	21.4
STEMI Care Bundle delivered in full	87.7	75.0	60.0
Stroke patients being transported to a specialist stroke unit within 60 minutes	57.6	56.2	64.3
Stroke Care Bundle delivered in full	97.3	98.4	100
Survival to discharge from hospital after an out of hospital cardiac arrest	8.8	12.2	15.4

Key:

STEMI: ST-elevation myocardial infarction – a type of heart attack suitable for primary angioplasty treatment

Care bundle: between three and five specific interventions or processes of care that have a greater effect on patient outcomes if done together in given time period, rather than separately.

Community Resilience

- We have three Community First Responder Schemes in York
- Fleetways Taxis signed up to the CFR scheme in February 2014 and has since expanded, with 15 drivers now trained
- Additional community Public Access Defibrillators (cPADs) including most recently on exterior wall of Haxby Ambulance Station



A&E Recovery and Development

- In the long-term, we know we need more staff and vehicles on the frontline:
 - With smart deployment to make best use of these ambulance resources
 - And excellent support services so clinician time is spent caring for patients
- We have a three-phase performance improvement plan:
 1. Short-term actions to support areas of greatest demand pressure
 2. Improve systems for ambulance deployment; review support service infrastructure; engage staff and healthcare partners
 3. Learn from phases 1 and 2 to develop sustainable delivery model



Yorkshire Ambulance Service NHS Trust

Care Quality Commission Report (August 2015)



Care Quality Commission Report

- Inspection in January 2015
- Larger CQC team - approximately 75 inspectors with majority of time spent with frontline staff
- Specialist advisors inspectors/clinical experts
- Experts by Experience
- Focus on our five domains – safety, effectiveness, caring, responsiveness, well-led
- Inspection included Urgent and Emergency Care, Emergency Operations Centre, Patient Transport Service (PTS), Resilience, but not NHS 111
- Ratings to help compare services and highlight where care is outstanding, good, requires improvement or inadequate
- YAS was the first ambulance trust to be rated
- Some areas of methodology still in pilot phase - Resilience

Our ratings for Yorkshire Ambulance Service

	Safe	Effective	Caring	Responsive	Well-led	Overall
Emergency and urgent care	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement
Patient transport services (PTS)	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement
Emergency operations centre (EOC)	Requires improvement	Good	Good	Good	Requires improvement	Requires improvement
Resilience	Inadequate	Not rated	Not rated	Good	Requires improvement	Requires improvement
Overall	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement

Care Quality Commission Report

- ‘Good’ in caring and aspects of effective and responsive
- One ‘Inadequate’ rating - safety domain for Resilience services
- Overall, rating ‘Requires Improvement’, but ‘just a short distance from being ‘Good’”
- Acknowledgement that many areas highlighted are already being actioned
- Acknowledgement of the pressures on our service
- Confidence that YAS can implement and deliver improvement plan
- Many examples of good practice highlighted in the Trust

Summary of Key Messages and Next Steps

- Quality Summit with stakeholders - 18 August 2015; Publication - 21 August
- Trust's action plan to CQC and NHS Trust Development Authority - 15 September
- Lots of good practice, but variability of processes and standards
- Focus on system and process in a number of areas, and on alignment of support services to operations
- Emphasis on role of all managers and staff in delivering action plan and consistent standards
- Increased audit in key areas; locality/department reviews to consider detail of the report
- Re-inspection - possible on specific areas of improvement over coming months. Full re-inspection not likely before June 2016