



Quality Account 2017-18

Summary

Version 1.0



Our Purpose

To save lives and ensure everyone in our communities receives the right care, whenever and wherever they need it.

Our Vision

To be trusted as the best urgent and emergency care provider, with the best people and partnerships, delivering the best outcomes for patients.

Welcome

Welcome to our NHS Trust Quality Account 2017-18. Against the backdrop of a challenging year for the NHS, and specifically for ambulance services, I am proud to present the significant improvements we have made to the quality of care we provide for people within Yorkshire and the Humber. We remain amongst the best in the country for a number of areas across both the 999 emergency service and NHS 111, specifically in relation to our care for patients who suffer cardiac arrest or heart attacks, as well as for those with urgent but not emergency health needs. We will strive to maintain such excellence in the coming year.



Rod Barnes
Chief Executive

During the last year, and especially during the winter period, much publicity has been focused on the health service as a whole, I am incredibly proud of our staff, both the support teams and those caring directly for patients, who work tirelessly to ensure that care is delivered at point of need to our local population.

An Introduction to Yorkshire Ambulance Service NHS Trust (YAS)

People we serve and the area we cover



YAS serves a population of more than five million people and covers 6,000 square miles of varied terrain from the isolated Yorkshire Dales and North York Moors to urban areas including Bradford, Hull, Leeds, Sheffield, Wakefield and York.

Our Services

We are ideally placed to support joined-up care for patients and provide the gateway into 24-hour urgent and emergency care services.

We employ over 5,737 staff and have over 1,150 volunteers.

For everyone working at YAS, providing high quality patient care is our key priority. This applies to our ambulance clinicians responding to emergency calls, to our Patient Transport Service (PTS) crews taking patients to and from their planned hospital appointments, our call handlers and clinicians handling 999 and 111 calls, to our managers developing new care pathways or ways of working, and to our Trust Board making decisions about the future of our Trust.

In 2017-18 we:

- received 922,328 emergency and routine calls
- responded to a total of 780,383 emergency calls
- undertook 944,403 non-emergency journeys
- received 1,647,270 NHS 111 urgent calls.

2017-18: How did we do?



Care Quality Commission (CQC)

The Care Quality Commission (CQC) is the independent regulator of health and social care in England with the aim of ensuring better care is provided for everyone, be that in hospital, in care homes, in people's own homes, or elsewhere.

As part of its routine programme of scheduled inspections, the CQC inspectors visited the Trust in September 2016, to carry out detailed assessments of the quality and safety of our services. Their overall judgement was that quality and safety was 'Good', and this represented an improvement from our previous inspection.

Performance against Priorities for Improvement 2017-18

<p>Priority One</p> <p><i>Patient Safety:</i> Improving emergency ambulance response times for patients</p>	<p>A new call prioritisation system was introduced in 2017 which sets standards for all 999 calls. The new standards give us more time to assess if the patient has a life-threatening condition which requires an emergency response, or if an alternative type of care would be better for the patient.</p> <p>Whilst we always strive to reach our patients as quickly and as safely as we can, the new standards mean we have more time to get to the patients and deliver the right care, in the right place.</p>	
<p>Priority Two</p> <p><i>Patient Safety:</i> Development of the Trust's role in care coordination across the urgent and emergency care system, with a particular focus on care closer to home and improved information sharing across care boundaries</p>	<p>During the year we have worked with lots of our partners to understand their ambitions for the future and to support with projects and changes which will have a positive impact on patient care.</p>	
<p>Priority Three</p> <p><i>Patient Experience:</i> Maintain effective patient feedback to ensure learning from the patient experience is identified and shared. To develop methodology that ensures robust investigation and clear learning is gained from adverse events; ensuring patient and staff feedback from this process informs organisational learning going forward</p>	<p>The Trust seeks every opportunity to learn and has developed both systems and practice to ensure learning and service developments are identified. This includes involving families, service users and our Critical Friends Network.</p>	
<p>Priority Four</p> <p><i>Clinical Effectiveness:</i> Develop a patient-centred pathway which enables best practice for patients who have suffered a stroke</p>	<p>Clinical pathways advisors have been working with the region's stroke services to create more direct referrals to acute stroke teams for patients who suffer a stroke. This brings many benefits to patients including early diagnosis and treatment which leads to better long- term outcomes and rehabilitation.</p>	

What our staff tell us:

The Staff Friends and Family Test (FFT) tells us how many of our staff would recommend our care to a friend or relative.

The results for 2017-18 are:

Staff Views on Standards of Care	Proportion of staff who agree or strongly agree that if a friend or relative needed treatment they would be happy with the standard of care provided by the Trust
YAS 2015-16	65%
National Average 2015-16	64%
YAS 2016-17	71%
National Average 2016-17	67%
YAS 2017-18	70%
National Average 2017-18	70%

"I am an Emergency Care Assistant. I love that the job is different every single day. The interaction with patients and feeling like I've helped to make a difference, no matter how big or small, is the part I enjoy the most. I feel the support I have in our area from colleagues and management is fantastic. I look forward to hopefully a long career with the Trust."
Natalie Norman

"My role as a Quality and Risk Administrator consists of the day to day running of how the organisation learns. This includes call handling, quality checking and general help and support to staff. The part of the job I enjoy most is the unpredictable workload and never knowing what will come next."
Kirsty Scott

Ambulance Response Programme (ARP)

Following the largest clinical ambulance trials in the world, NHS England has implemented new ambulance standards across the country. The changes have focused on making sure the best, highest quality, and most appropriate response is provided for each patient first time.

Call handlers are now given more time to assess 999 calls that are not immediately life-threatening, which enables them to identify patients' needs better and arrange the most appropriate response.

The ARP has been designed to change the way ambulance services respond to 999 calls in terms of both response times (performance) and the prioritisation (clinical coding) of patient conditions.

Now there are four categories of call:

Category 1 – Calls from people with life-threatening illnesses or injuries

Category 2 – Emergency calls

Category 3 – Urgent calls

Category 4 – Less urgent calls

Under the new system early recognition of life-threatening conditions, particularly cardiac arrest will increase. A new set of pre-triage questions identifies those patients in need of the fastest response.

The new targets will also free up more vehicles and staff to respond to emergencies.

For a stroke patient this means that the ambulance service will be able to send an ambulance to convey them to hospital, when previously a motorbike or rapid response vehicle would 'stop the clock' but could not transport them to A&E. From now on stroke patients will get to hospital or a specialist stroke unit quicker because the most appropriate vehicle can be sent first time.

Patient safety is paramount. Academics at Sheffield University monitored more than 14 million ambulance calls under the trial and found no patient safety incidents.

Patient Transport Service

Our Patient Transport Service (PTS) is one of the largest ambulance providers of non-emergency transport in the UK.

- During 2017-18 we made 944,403 journeys to transport people between their home and hospital/clinics for treatment and care.
- Our volunteer car service has completed more than 111,000 of these journeys and covered more than 2.1 million miles.
- We have more than 60 sub-contractors on the PTS framework who contribute to the successful delivery of our service in the most flexible manner. They made 17% of our journeys.

PTS is looking to the future and has also made improvements in the following areas:

- Developing the booking system to improve the information flow, recording individual transport requirements and optimising staff and resources to move people safely.
- Increasing the number of volunteer car drivers and sub-contractors to provide greater flexibility in delivering the service.
- Increasing the operational management and logistics team to provide better support to staff and improve the quality of the service.

NHS 111

The NHS 111 service continues to see more people using the service year-on-year.

During 2017-18 our NHS 111 service answered 1,647,270 calls and 91% of callers would recommend NHS 111 to their friends and family.

Yorkshire Air Ambulance (YAA)



YAA attended over 1,500 incidents from its two bases at Nostell and Topcliffe.

The Critical Care Team (CCT) is now established across Yorkshire and is proving valuable in the provision of both critical care to patients and support to our staff.

Blood products are now available on the aircraft, and YAS paramedics are among only a handful of paramedics in the country to be able to provide this potentially life-saving treatment.

Inspections for Improvement

The Inspections for Improvement programme is an annual inspection programme of all our estate and vehicles to ensure they meet key standards of quality and safety.

The inspection programme has been supported locally by managers and by key support services such



as Estates and Medical Equipment. Improvements have been seen year-on-year with 2017-18 focusing on upgrades to facilities for cleaning and decontamination.

Quality Improvement (QI)



The need to continually improve the services we provide, and to actively seek new and innovative ways of working for the benefit of our patients is one of the cornerstones of QI. This year, we have focused on establishing a QI approach with the aim of utilising the expertise and experience of all our colleagues. QI allows all members of our team to be able to contribute to improving everything we do.

Quality Improvement (QI) Fellows

We have taken the first steps of the QI plan by developing QI Fellows. The new role provides the opportunity for colleagues from across the Trust to make a real difference in the quality of care and services they can offer to our patients. The role involves the development of their skills through training and hands-on opportunities to lead and deliver improvement projects.

Bright Ideas Scheme



The Bright Ideas scheme is an opportunity for all YAS staff to submit ideas which could, potentially, make a positive difference to patients, staff and services. The objective of the scheme is to contribute to the delivery of YAS's vision and values as well as encouraging innovation, show efficiencies or greater effectiveness, or improved morale with an emphasis on quality and patient care and encouraging staff participation. The idea could be something new, a change to a working practice or something that YAS should stop doing. The scheme received 387 ideas during 2017-18.

Learning from Incidents

The Trust recognises and values the importance of incident reporting to enable learning and improvement to take place. We encourage all of our staff to report incidents through the 24/7 incident reporting telephone line or via web-based reporting.

Keeping our staff and patients safe is the primary focus across the organisation as well as ensuring that the highest quality of care is delivered to patients consistently. Learning from incidents enables us to do this and a number of initiatives have taken place and continue to be strengthened to improve the quality of the investigations. This includes:

- A re-launch of the incident reporting system. This enabled more streamlined feedback to be provided to staff on the incidents they report.
- A re-refresh of the investigation skills training across the organisation, including embedding “root cause analysis” (RCA) tools and techniques, and an understanding of human factors.

Patient Safety Incidents

2,403 patient-safety incidents were reported in 2017-18. These are all proportionately investigated for harm levels and learning.

Identification and Investigation of Serious Incidents (SIs)

All incidents which have resulted in moderate harm or above are considered for serious incident (SI) investigation. The definition of a SI includes any event which causes death or serious injury, a hazard to the public, causes serious disruption to services, involves fraud or has the potential to cause significant reputational damage. These are the main categories, but there may also be other causes.

YAS has declared 36 SI investigations in 2017-18 which makes up less than 0.43% of all incidents reported.

Learning from SIs has led to:

- strengthening of processes to effectively manage road closures in a timely manner
- further education for our call handlers to recognise when a patient is not breathing effectively and get the most appropriate response to them
- enhanced supervision and training for our clinicians.

Timeliness of Responding to Complaints

Patients’ concerns and complaints are resolved in line with the Complaints Procedure Regulations and Parliamentary and Health

Service Ombudsman Principles. We aim to achieve 85% of agreed timescales which has been mostly met this year.

Patients' Friends and Family Test

A&E

How likely is it that you would recommend Yorkshire Ambulance Service to friends and family? – 2017-18					
Extremely likely/Likely	Qtr 1	Qtr 2	Qtr 3	Qtr 4	YTD
YAS	85.9%	81.7%	83.2%	Not available	82.5%

PTS

Would you recommend the Patient Transport Service (PTS) to friends and family if they required transport to hospital? – 2017-18					
Extremely likely/likely	Qtr 1	Qtr 2	Qtr 3	Qtr 4	YTD
PTS (inc unknown area)	91.2%	93.2%	87.4%	84.7%	89.1%

Patient feedback

"An ambulance was called for me three times in two months with the same illness. Ambulance staff were brilliant. The first crew acted above and beyond what I expected."

Patient feedback

"I felt absolutely safe and secure and enjoyed chatting to the driver which helped take my mind off the length of journey and my treatment, I am so grateful I couldn't have done it without them."

Safeguarding

A number of key achievements have been made during 2017-18 including:

- the Safeguarding Children and Adult referral process has been strengthened, to ensure information is shared with other partners in a timely and appropriate way
- a single Trust-wide Safeguarding Children, Adult and Prevent basic awareness eLearning product was launched.
- increased engagement with Local Safeguarding Adult and Children's Boards.

Looking Ahead: Our Priorities for Improvement 2018-19

Priority One: Patient Safety

Assurance on the delivery of safe ambulance response through implementation of the Ambulance Response Programme and introducing new models of urgent care.

Priority Two: Patient Experience

Embed and integrate the Critical Friends Network (CFN) and strengthen the Patient Experience Programme.

Priority Three: Clinical Effectiveness

Improvement in patient outcomes with key conditions such as cardiac arrest, paediatrics, patients at the end-of-life.

This is a summary of our Quality Account which can be read on our website www.yas.nhs.uk

If you would prefer this document in another language or format, such as large print, braille or audio file, please contact our Corporate Communications Department at Trust headquarters to discuss your requirements.

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