



**NHS**  
**Yorkshire  
Ambulance Service**  
NHS Trust



# **Kirklees Health and Adult Social Care Scrutiny Panel 2021**

**John McSorley – Head of Operations,  
West Yorkshire**



# Background information for HOSC members



# Our Purpose, Vision and Values



## 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.



# About Us



- Serve a population of over five million people across Yorkshire and the Humber
- A&E and NHS 111
- Non-emergency Patient Transport Service (PTS)
- Provide a vital 24-hour, seven-days-a-week emergency and urgent healthcare service
- We have a Resilience and Special Services Team (including our Hazardous Area Response Team)
- Provide clinicians to work on the Yorkshire Air Ambulance





# COMMUNITY ENGAGEMENT



Most successful  
Restart a Heart year ever -  
visited a record-breaking  
163 of Yorkshire's schools.

providing free  
CPR training to  
more than



# 46,000 students.



North Yorkshire Telecare  
Pendant scheme live utilising  
CFRs for low acuity falls and  
'Concern for Welfare' calls



Significant contribution from  
CFRs and PTS volunteer  
car drivers during  
COVID-19 response



Launched new  
999 Aspire programme



Achieved the Investing  
in Volunteers UK  
quality standard



# Contribution from Community First Responders (CFRs)

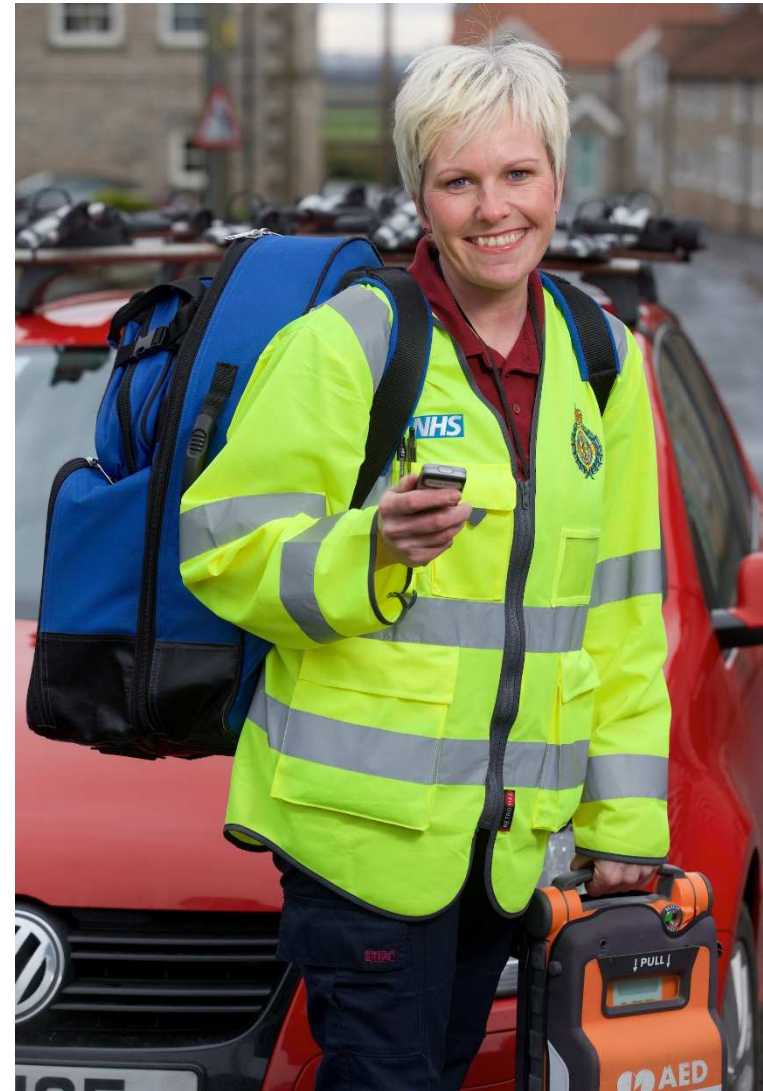


## North Kirklees and Greater Huddersfield

- 20 active schemes with 64 volunteers
- 51 community Public Access Defibrillators (cPADs) in North Kirklees
- 105 cPADs in Greater Huddersfield

## Achievements and Developments in 2021

- Since April 2020 CFRs have provided over 21,000 hours on call
- Also provided over 2,446 hours to patient transport
- Supported various roles across the Trust including NHS 111, EOC, Fleet, Procurement and YAS Vaccination Centres
- cPADs on ambulance stations' initiative
- Trialled volunteers providing a falls service with further development planned with support from NHS Charities Together
- Plans to increase the number and variety of volunteer roles we support
- Huddersfield University CFR Scheme



# Clinical Quality Indicators



All ambulance services in England are measured by, and report against, the clinical quality indicators (CQIs). This allows a comparison of data with other ambulance services across the country.

The CQIs are:

- **ST-elevation myocardial infarction (STEMI)**  
ST-elevation myocardial infarction is a type of heart attack resulting from a blockage in a coronary artery. This monitors the number of patients who receive best practice care in the management of a heart attack.
- **Return of Spontaneous Circulation (ROSC)**  
This indicator monitors the number of patients who suffer a cardiac arrest (heart stopped), and who are subsequently resuscitated and the heart restarts prior to their arrival at hospital.
- **Cardiac arrest - Survival to discharge (StD)**  
Following on from the second indicator, this monitors the number of patients who leave hospital alive after they have had an out-of-hospital cardiac arrest.
- **Management of Stroke**  
This requires ambulance services to measure the time it takes from the 999 call, to the time it takes to convey FAST-positive patients to a specialist stroke centre.
- **Proportion of calls closed with telephone advice or managed without transport to A&E (where clinically appropriate)**  
This focuses on how the whole urgent care system is working, rather than simply the ambulance service or A&E, as it will reflect the availability of alternative urgent care destinations (for example, walk-in centres) and providing treatment to patients in their home.



# Clinical Quality Indicators cont'd



- **Re-contact rate following discharge of care (i.e. closure with telephone advice or following treatment at the scene)**  
If patients have to call 999 a second time, it is usually because they are anxious about receiving an ambulance response or have not got better as expected. Occasionally it may be due to an unexpected or a new problem. To ensure ambulance services are providing safe and effective care the first time, every time, this measures how many callers or patients call us back within 24 hours of the initial call being made.
- **Call abandonment rate**  
This indicator ensures that we and other ambulance services are not having problems with people phoning 999 and not being able to get through.
- **Time taken to answer calls**  
It equally important that if people/patients dial 999 that they get call answered quickly. This indicator therefore measures how quickly all 999 calls that we receive get answered.
- **Service experience**  
All ambulance services need to demonstrate how they find out what people think of the service they offer (including the results of focus groups and interviews) and how we are acting on that information to continuously improve patient care.
- **Ambulance response time**  
This measures the speed of all ambulance responses to a patient and is recorded as a mean target.







# Presentation



# Service challenges – COVID-19



The COVID-19 pandemic provided multiple challenges for the organisation across our 999, NHS 111 and non-emergency patient transport services both internally and externally across the health economies we serve.

The challenges also created opportunities for new ways of working and as a learning organisation we were keen to operationalise the lessons learned.

## **Workforce and staff welfare**

Throughout 2020/21 we have experienced high COVID-related staff absence on our frontline and in our 999 and 111 call centres.

- Alternative clinical roles for vulnerable staff.
- Lower acuity support for the 999 service was successfully developed.
- Remote home-working for clinicians to support 999 and 111 call triage.
- Senior clinicians were redeployed from support and management roles to support frontline services. Clinical decision-making support gave paramedics more resilience to divert some responses to other providers.
- Developed community first responder staff to perform non-emergency patient transport roles.





## Managing demand

YAS experienced exceptionally high demand during the peaks of infection, creating significant challenges to ensure we maintained a response to the most seriously ill.

- NHS 111 was used as a gateway to manage demand appropriately.
- Increased clinical capacity in NHS 111 and 999 call centres, resulting in improvements to 'hear and treat' and 'see, treat and refer' outcomes.
- The Emergency Operations Centre increased clinical support which increased clinical triage and enabled greater numbers to be resolved at the telephone triage stage without the need to dispatch an ambulance.
- Video-assisted remote clinical assessment was introduced with video technology to supplement remote 'hear and treat' consultations – during the first peak of the pandemic over 600 video consultations were performed to support care closer to home.





## Infection prevention and control (IP&C)

Maintaining strict discipline around IP&C procedures was key to protecting our staff and patients:

- COVID-secure ambulance stations.
- Changes to clinical practice to ensure staff safety.
- Procurement of gold standard personal protective equipment (PPE).
- Introduction of cleaning and welfare teams at all hospital emergency departments to ensure all vehicles were cleaned after every patient journey.



# Ambulance Response Performance Standards



To deliver the response standards, YAS forecasts activity based on historical data and matches resource to demand. This chart details the patient response standards for UK ambulance services.

Categories	National Standard	How long does the ambulance service have to make a decision?
Category 1	7 minutes mean response time 15 minutes 90 <sup>th</sup> centile response time	The earliest of: •The problem is identified •An ambulance response is dispatched •30 seconds from the call being connected
Category 2	18 minutes mean response time 40 minutes 90 <sup>th</sup> centile response time	The earliest of: •The problem is identified •An ambulance response is dispatched •240 seconds from the call being connected
Category 3	120 minutes 90 <sup>th</sup> centile response time	The earliest of: •The problem is identified •An ambulance response is dispatched •240 seconds from the call being connected
Category 4	180 minutes 90 <sup>th</sup> centile response time	The earliest of: •The problem is identified •An ambulance response is dispatched •240 seconds from the call being connected



# YAS 2020-21 Patient Response Times – previous year comparison



The demand pattern has been unprecedented this year. We have experienced dips in expected activity associated with lockdown, as well as two significant periods where YAS and the wider health system have dealt with peaks in infections. The winter is always a challenge for all health systems; this year all emergency departments and hospitals were operating at high capacity and this created delays in handover across all sites.

	Mean Performance	Target	90 <sup>th</sup> Centile Performance	Target
<b>Category 1</b>	7 minutes and 37 seconds (7 minutes and 12 seconds in 2019-20)	7 minutes	13 minutes and 9 seconds (12 minutes and 26 seconds in 2019-20)	15 minutes
<b>Category 2</b>	20 minutes and 36 seconds (20 minutes and 33 seconds in 2019-20)	18 minutes	43 minutes and 33 seconds (42 minutes and 41 seconds in 2019-20)	40 minutes
<b>Category 3</b>	47 minutes and 24 seconds (40 minutes and 44 seconds in 2019-20)	1 hour	1 hour, 58 minutes and 25 seconds (1 hour, 54 minutes and 36 seconds in 2019-20)	2 hours
<b>Category 4</b>			2 hours, 32 minutes and 16 seconds (3 hours, 1 minute and 10 seconds in 2019-20)	3 hours



# Ambulance Response Performance standards across Huddersfield and Kirklees postcodes



The following slides document the response times and demand for the Cat 1 and Cat 2 calls for the postcode areas requested, presented in a heat map format for ease of interpretation.

As requested, we have included the postcode areas for North Kirklees:

- Dewsbury
- Batley
- Birstall
- Birkenshaw
- Cleckheaton
- Heckmondwike
- Liversedge
- Gomersal
- Mirfield



# Category 1 Response Times



Postcode District	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	YTD
BD11	00:09:48	00:08:07	00:08:19	00:09:28	00:07:54	00:10:44	00:10:51	00:08:01	00:06:56	00:11:36	00:07:59	00:09:39	00:09:07
BD19	00:10:39	00:06:47	00:08:51	00:08:25	00:08:13	00:08:58	00:09:14	00:09:29	00:09:29	00:08:15	00:07:40	00:07:37	00:08:38
HD1	00:05:33	00:04:57	00:04:42	00:05:09	00:05:58	00:06:41	00:05:03	00:06:05	00:07:04	00:05:40	00:04:41	00:04:56	00:05:32
HD2	00:05:58	00:05:02	00:05:38	00:06:07	00:07:21	00:06:13	00:07:29	00:07:07	00:07:04	00:07:08	00:06:12	00:06:55	00:06:31
HD3	00:04:49	00:06:00	00:04:57	00:05:47	00:07:36	00:06:10	00:07:05	00:07:09	00:06:50	00:06:04	00:06:01	00:06:04	00:06:13
HD4	00:06:54	00:07:58	00:06:19	00:07:04	00:07:22	00:07:53	00:08:48	00:07:00	00:07:59	00:07:12	00:06:03	00:06:09	00:07:13
HD5	00:05:29	00:06:56	00:07:01	00:06:54	00:07:03	00:07:21	00:08:44	00:07:48	00:08:06	00:08:05	00:08:24	00:07:08	00:07:25
HD6	00:06:23	00:04:26	00:07:00	00:07:08	00:07:43	00:08:10	00:08:51	00:07:25	00:06:57	00:08:05	00:07:36	00:07:15	00:07:15
HD7	00:08:39	00:07:27	00:11:10	00:07:59	00:11:02	00:11:19	00:10:48	00:12:10	00:11:49	00:10:47	00:09:51	00:12:10	00:10:26
HD8	00:11:37	00:11:30	00:11:18	00:10:55	00:13:48	00:10:28	00:14:05	00:10:17	00:12:00	00:12:11	00:10:16	00:10:11	00:11:33
HD9	00:11:17	00:08:17	00:06:46	00:09:38	00:10:25	00:09:04	00:11:13	00:10:41	00:10:23	00:10:17	00:08:31	00:10:32	00:09:45
WF12	00:08:35	00:08:54	00:06:53	00:07:42	00:08:31	00:07:55	00:08:45	00:09:12	00:09:24	00:09:36	00:07:13	00:06:33	00:08:16
WF13	00:06:22	00:06:47	00:06:13	00:08:13	00:07:43	00:09:18	00:10:20	00:08:38	00:07:46	00:09:08	00:08:38	00:08:04	00:08:06
WF15	00:09:07	00:06:06	00:09:45	00:06:44	00:08:41	00:08:44	00:09:09	00:10:22	00:08:50	00:08:20	00:06:20	00:08:42	00:08:24
WF17	00:07:24	00:07:44	00:07:48	00:06:55	00:07:44	00:08:45	00:09:39	00:08:32	00:08:01	00:08:54	00:07:17	00:08:20	00:08:05

Postcode District	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	YTD
BD11	6	5	11	7	8	5	7	5	6	7	3	8	78
BD19	14	21	19	26	13	19	23	20	18	18	11	23	225
HD1	37	22	33	49	47	51	45	34	33	36	42	46	475
HD2	24	17	23	25	30	26	37	36	34	33	21	39	345
HD3	35	20	23	41	25	42	34	44	32	22	24	34	376
HD4	21	23	33	28	39	35	31	27	25	35	26	31	354
HD5	20	29	16	21	41	30	29	25	33	21	21	26	312
HD6	27	16	15	28	20	20	28	27	34	29	17	30	291
HD7	7	13	6	11	14	13	14	10	19	17	15	15	154
HD8	16	23	19	12	21	20	15	20	24	18	16	19	223
HD9	11	12	17	18	21	14	24	21	21	24	15	15	213
WF12	28	32	14	24	26	26	40	25	34	30	23	23	325
WF13	49	38	29	33	43	41	42	46	45	47	42	59	514
WF15	17	13	14	14	15	8	17	16	18	13	12	14	171
WF17	33	30	26	29	30	29	44	42	47	36	33	28	407



# Category 2 Response Times



Postcode District	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	YTD
BD11	00:15:59	00:13:57	00:13:48	00:15:46	00:18:55	00:28:46	00:35:43	00:34:58	00:30:14	00:22:35	00:22:43	00:23:11	00:23:03
BD19	00:15:11	00:14:23	00:14:30	00:18:25	00:21:14	00:22:31	00:31:09	00:32:40	00:33:28	00:28:49	00:26:54	00:24:50	00:23:40
HD1	00:11:13	00:08:51	00:09:44	00:12:21	00:16:20	00:21:48	00:26:43	00:29:16	00:25:46	00:26:50	00:17:31	00:21:01	00:18:57
HD2	00:13:36	00:10:05	00:12:48	00:15:06	00:19:20	00:22:52	00:28:03	00:31:33	00:28:46	00:26:22	00:21:26	00:21:51	00:20:59
HD3	00:12:47	00:09:51	00:12:22	00:13:59	00:19:33	00:22:38	00:28:54	00:27:07	00:29:46	00:26:42	00:23:06	00:21:55	00:20:43
HD4	00:13:59	00:09:35	00:12:04	00:18:17	00:21:01	00:25:15	00:27:06	00:32:18	00:30:47	00:31:21	00:21:48	00:25:01	00:22:23
HD5	00:13:24	00:11:07	00:14:19	00:17:27	00:19:32	00:25:56	00:30:49	00:31:40	00:33:17	00:31:41	00:23:15	00:24:33	00:23:05
HD6	00:12:33	00:11:03	00:12:23	00:15:45	00:18:01	00:23:46	00:28:20	00:29:45	00:26:59	00:26:15	00:27:09	00:20:29	00:21:02
HD7	00:17:39	00:13:48	00:15:06	00:19:59	00:24:48	00:26:58	00:33:02	00:32:05	00:37:14	00:30:23	00:27:20	00:30:14	00:25:43
HD8	00:21:19	00:14:48	00:17:10	00:23:04	00:26:56	00:27:43	00:37:39	00:35:06	00:37:58	00:32:01	00:30:23	00:31:08	00:27:56
HD9	00:18:10	00:13:49	00:15:19	00:19:49	00:25:08	00:30:33	00:36:03	00:33:40	00:43:59	00:34:14	00:28:22	00:31:44	00:27:34
WF12	00:16:43	00:13:07	00:14:20	00:16:41	00:22:51	00:29:18	00:33:28	00:30:00	00:30:41	00:33:50	00:28:52	00:27:05	00:24:45
WF13	00:14:38	00:11:55	00:13:44	00:16:11	00:23:15	00:26:36	00:34:41	00:32:18	00:29:01	00:31:24	00:25:31	00:28:01	00:23:56
WF15	00:16:42	00:12:23	00:12:58	00:16:55	00:23:20	00:25:09	00:33:15	00:32:30	00:34:01	00:32:27	00:23:27	00:25:04	00:24:01
WF17	00:16:29	00:11:30	00:13:26	00:16:03	00:19:54	00:26:22	00:36:03	00:31:58	00:29:28	00:30:45	00:25:11	00:26:51	00:23:40

Postcode District	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	YTD
BD11	65	67	54	83	72	68	70	77	72	54	59	57	798
BD19	161	126	132	127	134	142	136	172	147	165	134	151	1727
HD1	200	211	205	251	252	266	259	224	234	209	232	229	2772
HD2	207	174	198	189	197	213	213	234	218	232	198	213	2486
HD3	197	206	222	220	213	234	270	269	282	271	235	263	2882
HD4	188	171	190	193	229	199	224	222	223	232	209	218	2498
HD5	184	207	182	201	221	216	250	231	235	239	225	220	2611
HD6	158	167	174	189	162	199	237	229	212	212	171	207	2317
HD7	91	96	101	117	117	101	127	125	135	123	114	106	1353
HD8	154	156	169	173	151	151	194	222	192	205	183	189	2139
HD9	129	122	123	163	191	184	191	175	185	168	170	166	1967
WF12	193	182	184	198	229	200	243	258	222	192	213	236	2550
WF13	215	191	207	223	218	260	265	318	231	283	226	226	2863
WF15	103	106	113	112	103	108	136	115	135	103	92	112	1338
WF17	247	211	186	221	201	228	245	282	265	240	230	225	2781



# Local initiatives



## Reconfiguration of services

The current CHFT reconfiguration model will result in all ambulance patients being conveyed to Calderdale Royal Hospital. This change which will result in:

- An increased incident cycle time for patients being conveyed from Huddersfield.
- An increased number of inter-facility transfers.

YAS continues to work collaboratively with CHFT to develop a quality impact assessment (QIA) for the planned reconfiguration of services to ensure mitigation will be in place to ensure a smooth transition.

## Ambulance Vehicle Preparation (AVP)

- Investment at Huddersfield station has provided a full upgrade of the facilities to include a full AVP hub service for the surrounding stations.
- The AVP service is operated 24/7 to ensure that ambulance crews are able to access fully equipped, re-fuelled, cleaned and re-stocked ambulances at the beginning of every shift.





**Thank you**

