



Update from Yorkshire Ambulance Service

Date	16 June 2023
Forum	North Yorkshire Council Scrutiny of Health Committee

1.0 Purpose

The purpose of this paper is to provide an update for the committee on the delivery of services and current challenges from Yorkshire Ambulance Service (YAS) within the North Yorkshire Council area, and an update on recent developments.

2.0 Demand and performance

- 2.1 As a key part of the urgent and emergency care system, YAS continues to see high levels of operational pressures. However, whilst the service has experienced some challenges, we have seen some positive improvements in response times in A&E Operations, particularly for category 1 and 2 patients, the most seriously ill. A national target has been set for 2023/24 for all English ambulance services to achieve a category 2 mean response time of under 30 minutes and YAS met this target for April and May 2023.
- 2.2 Patient handover delays at Emergency Departments continue to be significantly above the national target of 15 minutes. Pressures across the health and social care system contribute to the hospital handover delays, and the Trust remains concerned about the significant impact this has on the availability of emergency ambulances and on patient care. We have some challenges at a number of hospitals and are working closely with our partners to resolve them. Average handover times throughout April and May 2023 at Scarborough was 36.55 minutes and York 32.11 minutes. Harrogate was 12.51 minutes which is within the agreed target time.
- 2.3 Initiatives to support the achievement of this 30 minute target include:
- Working with partners to reduce hospital handover times thereby freeing up resources to respond to patients.
 - Increase Hear and Treat rates (i.e., no ambulance response sent to the patient and an alternative, more appropriate resource identified) including additional recruitment to Senior Clinical Advisor roles based across our operational sites.
 - Increase in staffing including international paramedics, university students and Ambulance Support Workers (ASW).
 - Utilising alternative patient care pathways and specialist responses for patients, such as our Mental Health Response Vehicle, in partnership with the wider system.
- 2.4 In 2022/23, our Emergency Operations Centre (EOC) staff received 1,208,907 emergency calls; an average of 3,312 calls a day and a 7% decrease in calls during 2021/22. Clinicians and call handlers based in our clinical hub triaged and helped 146,238 callers with their health care needs over the phone.

- 2.5 Our Integrated Urgent Care (IUC) service, which provides our NHS 111 service, has seen improvements in call response times, although the service experienced recent pressure during May's bank holidays, with limited availability of primary care services. Calls into NHS 111 were close to 20% higher during the first week of May than the week before.
- 2.6 NHS 111 demand patterns have remained significantly different from previous years despite the end of the COVID-19 pandemic which triggered the change, with demand now experienced throughout the day, rather than peaking at key times (such as evening and weekends). The increases are reflective of primary care challenges as patients find it difficult to access other parts of the health system. Recruitment into IUC has therefore been adjusted in line with the changes seen.
- 2.7 Our Patient Transport Service (PTS) also continues to be busy as hospitals continue to address their waiting lists for planned operations.
- 2.8 Although the government and health unions have now agreed a pay deal, and we are not experiencing the large-scale industrial action of recent months, we do still have strikes taking place, with Unite the Union. This mainly affects our control rooms within NHS 111 service and A&E Operations. We will also be stepping up our command and resilience arrangements in preparation for industrial action elsewhere in the health sector.

3.0 Developments

Clinical Pathways

- 3.1 Our area and clinical pathways teams continue to work in partnership across the region with areas of key focus aligned to the NHS England Urgent and Emergency Care (UEC) Recovery Plan for 2023/24 including:
- Frailty and Urgent Community Response (UCR) integration – improving access for paramedics. Current services vary significantly across the region and a key priority is to improve consistency and access.
 - Single Points of Access – consistent and rapid access to clinical advice and alternative services to reduce unnecessary conveyances and provide a single simple route for referrals.
 - Referrals to alternative falls response services ensuring the patient receives the right response at the right time and prevents long lies and deterioration, which reduces the need for hospital admissions.
 - Improved direct access to Same Day Emergency Care (SDEC) services.
 - Continue developing access to other alternative clinical pathways.
- 3.2 Reducing avoidable conveyances by optimising alternative pathways improves hospital flow by ensuring only those patients who need hospital care are treated there. Improved flow in turn improves hospital handover times, releasing further ambulance capacity. Accessing alternative clinical pathways further improves ambulance availability by ensuring the right community service is sent to patients, freeing up ambulances to respond to blue-light emergencies. By improving access to the appropriate clinical pathways, performance will be improved, and patient care enhanced. Converting just 5% of YAS' A&E conveyances to alternative pathways could directly release 14,500 hours a year of ambulance availability.

Integrated Urgent Care / NHS 111

- 3.3 In NHS 111, the Trust continues to recruit into our control rooms for both clinical and non-clinical positions. Work is ongoing to address challenges with staff retention. Investment in wellbeing support roles for front line staff alongside reviewing potential longer-term changes (e.g., support structures/staff rotas) are being undertaken to help retain staff.
- 3.4 In May 2023, IUC began training our first cohort of international nurses, an exciting opportunity to expand our clinical workforce with highly experienced nurses from India and Dubai. The first cohort of nurses arrived this month and are settling in whilst preparing for an intensive training programme to quality in their new roles as Senior Clinical Advisors.

Non-Emergency Patient Transport Service

- 3.5 Following a national review in 2021 NHS England has launched a new national framework for non-emergency Patient Transport Services requiring them to become consistently more responsive, fair, and sustainable. The key priorities for implementation by systems are:
- Implementation of the revised national eligibility criteria.
 - Develop and promote wider transport support options, including voluntary services and reimbursement (Healthcare Travel Costs Scheme)
 - Provide a universal commitment to transport support for all patients requiring in-centre haemodialysis.
- 3.6 YAS and Commissioners are currently scoping a regional project to deliver these priorities in collaboration with local stakeholders. The project is expected to commence shortly and aims to deliver recommendations within the 2023/24 year.
- 3.7 PTS are also trialling new a software solution for patients designed to help reduce distress, agitation, isolation, and improve their wellbeing. It focuses on people living with dementia, mental health, learning disabilities and those who are neurodivergent, have acute brain injuries or other complex needs. Tablet devices with RITA - Reminiscence Interactive Therapy Activities - will be used by staff on the ambulances, to encourage communication and help their patients to feel more comfortable and at ease.

Estates strategy

- 3.7 To further support our staff to deliver excellent patient care, our estates strategy includes developing our Ambulance Vehicle Preparation (AVP) programme. This is where a dedicated team prepares vehicles ready for clinicians when they arrive at work to start their shift, giving them more time to treat our patients with the care that they need. This work includes the development of a new, modern, environmentally friendly, AVP ambulance station in Scarborough.
- 3.8 The Trust has invested significantly in a £2.4m expansion of our Emergency Operations Centre (EOC) at York. This strengthens our business continuity contingency plans and now provides a fifty-seater EOC on the first floor, meeting rooms, welfare facilities, training suites and a new incident room. Upgrades to the building include installation of a lift along with state-of-the-art heating and air conditioning systems. Work to improve the car park includes the addition of electrical vehicle charging points.

- 3.9 We have taken another small but important step to a net zero NHS at our Bainbridge ambulance station. The old oil system has been replaced with solar photovoltaics (PV), supporting a thermodynamic heating system which will provide solar heating to the ambulance station. Compared to oil, the thermodynamic heating system provides the same thermal output at half the running cost and with an 84% reduction in carbon emissions.

New technology

- 3.10 We continue to embrace technology with the implementation of the latest medicines management systems and robotic automation to do repetitive back-office processes. We are working as part of the Northern Ambulance Alliance to develop a Common Computer Aided Dispatch system. The CAD is the software used within the EOC to triage calls and deploy ambulance resources. One of the benefits of a common CAD would be improved patient experience and outcomes through cross-boundary collaboration across the four ambulance services, including North East Ambulance Service.

4.0 Recommendation

This paper provides an update for the Scrutiny committee on the current challenges faced by YAS and the steps that it is taking to address them. It is recommended that the update is noted for comment and consideration.