

# **Shaping our Vision**

Will Legge, Director of Strategy and Transformation



Involving you in setting our future, ambitions and aims

## Why we need to define a vision for EMAS

- Give EMAS a clear sense of direction, purpose and focus (funding)
- Enthuse and energise staff and stakeholders and unite everyone towards achieving a common set of goals, which can be translated easily into individual roles and objectives
- Build trust and confidence in EMAS and our people, and improve the organisation's reputation (as a provider and an employer)
- Demonstrate organisational leadership at a system level, and move away from a more inward, operational focus
- Enable us to prioritise and deprioritise accordingly
- Align our strategic priorities with those of the system, and vice versa (where appropriate)
- Manage expectations where we are not prioritising activities
- Accelerate improvements in our performance and quality of care
- Enhance staff satisfaction and morale

# Introducing the draft vision

Assume we have met our standards

- what next...?

Vision Statement - TBC

"Responding to patient needs in the right way, developing our organisation to become outstanding for patients and staff, and collaborating to improve wider healthcare"

Our vision as strategic priorities -'The Big 3'

Respond | Develop | Collaborate

Priority operational & transformation programmes

Programmes and projects which support improvements in current performance as well as prepare us for the future

National standards & commissioned outcomes

Licence to operate

EMAS Values: Respect | Integrity | Contribution | Teamwork | Competence

## Revised values

Our values have been updated to reflect our commitment to encouraging innovation, team and partnership working, and looking outwards as well as inwards

(The text in red/italics shows where updates have been made)

EMAS has five values which underpin everything we do, including the way we deliver our services and how we all work with others. By living these values and supporting others to do the same, we will help to make sure that EMAS is an organisation we can all be proud of.

Respect: Respect for our patients and each other

Integrity: Acting with integrity by doing the right thing for the right reasons

**Contribution**: Respecting and valuing *everyone's contribution, and encouraging innovation* 

**Teamwork**: Working together, supporting each other, *and collaborating with other organisations* 

Competence: Continually developing and improving our competence

# The Big 3: Respond | Develop | Collaborate

"Together, we will respond to patient needs in the right way"

### We will know we have achieved this when:

- We are making full use of the care pathways available and maximising the number of patients treated at home or close to home
- We have the right number of staff in post with the right mix of skills, knowledge and training to respond flexibly to all patient needs
- We have the right number, type and age of vehicles on the road
- We have access to the right equipment, ambulances and staff to meet patient demand and need

# The Big 3: Respond | Develop | Collaborate

# "We will develop our organisation to become outstanding for patients and staff"

### We will know we have achieved this when:

- Our patients report consistently high levels of satisfaction
- Our staff and volunteers report that they are proud to work for EMAS
- We are consistently delivering the Ambulance System Indicators (including patient quality measures), and the NHS Oversight Framework
- Our workforce is well, healthy, engaged and satisfied, and everyone exemplifies the EMAS values in all that we do
- Our staff and volunteers have access to opportunities, education and training to support their career development
- We have realised benefits from developing and modernising our estate
- We have achieved a CQC rating of 'outstanding' and are consistently meeting our financial targets

# The Big 3: Respond | Develop | Collaborate

"We will collaborate with partners and other organisations to reduce healthcare demand and improve wider healthcare"

### We will know we have achieved this when:

- We have led and contributed to improvements in key areas of healthcare that matter most to EMAS, our patients and our partners across the area we serve. We will insert specific areas of focus to be determined with system partners during engagement, e.g.
  - More patients treated at home or closer to home (non-conveyance)
  - Closer collaboration between the two regional clinical hubs (999 and 111)
  - Mental health (prevention and demand management)
  - Improve pathways (but which ones?)
  - Reduce the number of 111 referrals into 999
- Our local communities are accessing emergency and urgent care services in a way that reflects their clinical needs

# What do we want to become leaders of in five+ years' time? (We may not have even started this yet). Suggestions:

- Our use of technological solutions to address wider healthcare issues and drive improvement
- Our proactive work on mental health patients (prevention and management with partners), and staff (health and wellbeing)
- Becoming national leaders for our work on patient safety?
- Achieving equality and diversity within our workforce?
- Demonstrating international best practice for our clinical outcomes for patients with cardiac arrest?
- Developing and embedding the paramedic skillset in multidisciplinary team approaches across wider healthcare (led by EMAS)?
- Developing a positive organisational culture that means staff want to work here and have high levels of satisfaction?
- Identifying and managing sepsis (across all geographies), building on the success of our pilot within Lincolnshire?

# Shaping our vision: Who we plan to engage with

- Our staff and volunteers
- Health Overview and Scrutiny Committees
- All Healthwatch organisations across the East Midlands
- Our healthcare partners and commissioners including local authorities and social care and our Sustainability and Transformation Plan partners (STPs)
- MPs
- Police, Police and Crime Commissioners and fire service partners
- More than 3,000 patients who have chosen to become members of our Trust
- Our patient voice group which is a representative group of patients from across the East Midlands

Do you feel that these parties are the right stakeholders for us to engage with on this strategic piece of work?

# **Key Questions**

- What would members of the OSC like to see within our vision for the future?
- What feedback you have on the emerging vision?
  - What do you like?
  - What would you change?
- Do you feel that the parties listed on the previous slide are the right stakeholders for us to engage with in developing our vision?



# **Engagement Programme**



## Sequencing - Engagement Programme

Development through engagement - July to September

#### **Partners and Public**

- Share emergent direction of travel
- Check and challenge
- Discuss and agree top system priority(ies)
- Align respective strategies and priorities

#### Sept/Oct 2018

#### **Board sign off**

- Discuss feedback and agree changes
- Finalise vision, strategic priorities
- Prioritise and align corporate priorities and activities
- Align communications and engagement activities
- Align governance

#### October 2018

#### Launch and implementation

- Staff and stakeholder engagement
- Align organisational activities

## June 2018

#### **Board kick off**

- Agree approach
- Agree general principles for vision, core purpose and strategic priorities

#### SLT

- Share emergent thinking - vision and priorities (prioritised)
- Check and challenge
- Further development
- Review any major challenges/changes with Board

#### All EMAS people staff & volunteers

- Share draft proposals
- Check and challenge
- Add more detail/refine

#### Public Board updated 7/8

- Health partner 'survey'
- Commissioner event Jul
- STP mtgs/health partners
- OSCs Jul/Aug
- ◆ Healthwatch Regional July/Aug
- ◆ EMAS Patient Voice group mtg Jul
- F-News articles
- EMAS e-members survey
- MP meetings Jun-Aug
- CFR activities TBC
- Wider s'holder 'survey' Aug e.g. PCC/police/fire
- ◆ AGM activity August
- **Board** Development session 4 September
- ◆ 2 October public Board
- Review governance
- Prioritise activities
- Communications and engagement plan - multistakeholder events and activities

## Key Events and **Activities**

- Board meeting 5/6
- Exec time out 11/6
- Exec time out 25/6
- Board share final mats

- TU mtg 19 Jun and Aug
- Activities by division/EOC/corporate/ other areas to include: Conversation cafes Jul o Bitesize CCs Aug/Sept
- CFRs and vols activities

Colleague voice groups

- All staff 'survey' Aug
- Intranet/Enews Aug/payslips etc

◆ Refresh IBP TBC

## Feedback to: communications@emas.nhs.uk

SLT time out I 28 Jun

◆ Leadership summit TBC

SLT time out II ??