

13 January 2015

Agenda Item: 6

## **REPORT OF THE CHAIRMAN OF JOINT CITY AND COUNTY HEALTH SCRUTINY COMMITTEE**

### **EAST MIDLANDS AMBULANCE SERVICE – NEW STRATEGIES**

#### **Purpose of the Report**

1. To introduce a briefing on the new and wide-ranging strategies to be implemented by the East Midlands Ambulance Service (EMAS).

#### **Information and Advice**

2. The East Midlands Ambulance Service vision is to play a leading role in the provision, facilitation and transformation of clinically effective urgent and emergency care delivered by highly skilled, compassionate staff, proud to work at the heart of their local community.
3. This means it is EMAS' ambition to act as the co-ordinating NHS organisation at the centre of the system; either providing care directly or sign posting or referring patients to the best service to support them in their homes and the community, reducing admission to hospital where appropriate.
4. The proposed future operating model is designed to ensure the most appropriate and effective response to meet the needs of our patients and/or the referring clinicians. In essence, supporting delivery of the right care, with the right resource, in the right place and at the right time.
5. In order to implement this vision, EMAS has developed a number of strategies, as follows: Clinical and Quality Strategy, People, (workforce) strategy, Fleet Services (vehicles) Strategy, Information Management and Technology (IM&T) Strategy, Estates Strategy. A short briefing providing an overview of the strategies is attached as an appendix to this report; following this, comprehensive Trust Board papers on developing the various strategies are attached as further appendices.
6. Senior representatives of EMAS will attend the Joint Health Committee to brief Members and answer questions as necessary.

#### **RECOMMENDATION**

That the Joint City and County Health Scrutiny Committee:

- 1) Receive the briefing and initiate lines of questioning
- 2) Schedule further consideration, as necessary

**Councillor Parry Tsimbiridis**  
**Chairman of Joint City and County Health Scrutiny Committee**

**For any enquiries about this report please contact: Martin Gately – 0115 9772826**

**Background Papers**

Nil

**Electoral Division(s) and Member(s) Affected**

All

## EMAS – New Strategies Overview

### Developing our strategies

Over the last couple of months our key strategies have been brought to our Board meetings for comment or approval. You can access all the paperwork by visiting our website – details of the relevant meeting paper file name and the link to access them are included below.

During January and February, whilst developing our strategies further, we will continue to talk with and listen to our colleagues and key stakeholders.

Updated versions of our developing strategies will be going to our Board meeting on 27 January 2015, with plans to receive final versions at our 31 March 2015 Board.

### Developing our Clinical and Quality Strategy

Draft strategy available at <http://www.emas.nhs.uk/about-us/trust-board/> under meeting date 28 October 2014, and referring to Board paper file name: PB.14.250.1 and PB.14.250.2

Patients are at the centre of all our services and the focus of all our efforts is the desire to deliver high quality, compassionate and effective care.

This strategy will set out our approach to the national clinical priorities: emergency and urgent care, mental health, the frail elderly, long-term conditions, end of life care and public health and prevention. It is central to the delivery of our draft five-year plan, and is interdependent on our Workforce, Fleet, IM&T and Estates Strategies.

In addition to our stakeholder engagement, throughout January and February 2015, our Director and Deputy Director of Nursing and Quality will be visiting frontline clinical colleagues to engage further with them on the development of this key strategy.

### Developing our People (workforce) strategy

This strategy is currently being drafted.

The EMAS workforce is vital to us being able to provide the very best patient care and we plan to invest further in the recruitment and development of colleagues to support our long-term vision.

Our developing People strategy will see us recruit and develop more frontline colleagues including paramedics, technicians and emergency care assistants – all of whom respond to emergency calls out on the road.

When it comes to our Emergency Operations Centre (control), we are recruiting more paramedics and nurses to our Clinical Assessment Team to respond to calls from people who need medical advice or directing to a more appropriate healthcare service.

Our strategy will support us to ensure our colleagues are developed, feel valued and engaged and are supported by peers, line managers and the wider organisation.

### Fleet Services (vehicles) Strategy

Strategy available at <http://www.emas.nhs.uk/about-us/trust-board/> under meeting date 28 October 2014, and referring to Board paper file name: PB.14.251.1 and PB.14.251.2. Fleet Replacement Programme draft Outline Business Case available via same link, under meeting date 16 December 2014 and referring to Board paper file name: PB.14.297.1 and PB.14.297.2)

We provide emergency and urgent treatment and care at the scene of the incident and in our emergency vehicles. Together with the people to provide the care, our fleet is therefore very important. This strategy includes a fleet replacement plan which is being developed and proposes an investment programme to help create an improved fleet size and age profile.

#### Information Management and Technology (IM&T) Strategy

Strategy available at <http://www.emas.nhs.uk/about-us/trust-board/> under meeting date 28 October 2014, and referring to Board paper file name: PB.14.253.1 and PB.14.253.2

We need to ensure colleagues have access to the right information and communication systems, and that our information management and governance processes enable us to fulfil our mission to achieve the highest standards in emergency and clinical care.

Our future plans will have important implications and requirements for our IM&T, and this strategy addresses the issues as well as detailing how the IM&T developments will support the delivery of our objectives.

#### Developing our Estates Strategy

Draft strategy available at <http://www.emas.nhs.uk/about-us/trust-board/> under meeting date 28 October 2014, and referring to Board paper file name: PB.14.252.1 and PB.14.252.2

Being part of the communities we serve is very important to us; however we don't treat patients in Ambulance Stations. We treat patients at the scene of an incident, in our emergency vehicles as we take them to hospital, or over the phone via our Clinical Assessment Team; it's therefore important that the final Estates Strategy supports other key strategies such as Fleet, Clinical & Quality, and Information Management & Technology, to allow us to continue to improve the care we give to our patients.

Importantly, the strategy is being formed while considering several criteria including operational efficiency, staff and public engagement (in addition to the feedback received during 2013), economics (ensuring estates operating costs support future efficiencies and investment is affordable within the overall Capital Plan), and communications.

#### Next steps

There is a lot of information contained in this briefing and I am grateful therefore that you have identified some time when we can come and talk with you to ask questions of your group and respond to any queries you may have as a result of this briefing.

We look forward to seeing you in the New Year. In the meantime, I wish you a very Happy Christmas.

Sue Noyes  
Chief Executive

